

GRADE 8 | LESSON 1
WHAT MAKES A RELATIONSHIP
HEALTHY?

LESSON SUMMARY

LESSON 1: WHAT MAKES A RELATIONSHIP HEALTHY?

- In this lesson, students apply the characteristics of healthy, unhealthy and abusive relationships to evaluate a variety of relationship scenarios, reflect on their own personal boundaries, and practice employing an assertive style to help scenario characters communicate their boundaries clearly to their partners.

LEARNING OBJECTIVES

CORE CONCEPTS

- Compare and contrast the characteristics of healthy and unhealthy relationships. (NSES HR.8.CC.1)

SELF MANAGEMENT AND ANALYZING INFLUENCES

- Explain the criteria for evaluating the health of a relationship. (NSES HR.8.SM.1)
- Analyze the impact of technology and social media on friendships and relationships (NSES HR.8.INF.2)

LEARNING OBJECTIVES (CONT'D)

INTERPERSONAL COMMUNICATION

- Demonstrate effective ways to communicate personal boundaries and show respect for the boundaries of others. (NSES HR.8.IC.2)
- Demonstrate effective skills to negotiate agreements about the use of technology in relationships. (NSES HR.8.IC.3)

ENGAGE: IMPORTANT PEOPLE

- Each student will list some of the most important people in their life
- Each student will come up with 3-4 categories they can use to organize/group the people on their list
- Each student will share the categories they chose with a peer
- Teacher will solicit some responses, noting similarities and differences in the categories students chose
- Teacher will lead a short discussion (see next slide)

ENGAGE: IMPORTANT PEOPLE

Teacher asks for a show of hands:

- How many of you grouped people in your list according to...
 - hair color?
 - age?
 - favorite food?
 - type of relationship?

Teacher leads a short discussion:

- Why are relationships so important to us?
- How much do relationships affect our daily lives?
- Might you expect your list to change over time? Why or why not? In what ways might it change?

HEALTHY VS. UNHEALTHY RELATIONSHIPS

- Students will characterize the relationship shown in the video *Friends Forever?* as healthy or unhealthy and provide evidence (from the Relationship Spectrum) to support their claim.
- Teacher will solicit responses from students in a short discussion.

STUDENT HANDOUT RELATIONSHIP SPECTRUM

Relationships Exist on a Spectrum from [Love is Respect HR HS Educators Toolkit](#) (page 4)

Provides a reference for the characteristics of healthy and unhealthy relationships.

Students will use this as an anchor while they analyze the scenarios in small groups.

RELATIONSHIPS EXIST ON A SPECTRUM

All relationships exist on a spectrum, from healthy to abusive to somewhere in between. Below, we outline behaviors that occur in healthy, unhealthy and abusive relationships.

HEALTHY

A **healthy relationship** means that both you and your partner are:

Communicating: You talk openly about problems, listen to each other and respect each other's opinions.

Respectful: You value each other as you are. You respect each other's emotional, digital and sexual boundaries.

Trusting: You believe what your partner has to say. You do not feel the need to "prove" each other's trustworthiness.

Honest: You are honest with each other, but can still keep some things private.

Equal: You make decisions together and hold each other to the same standards.

Enjoying personal time: You both can enjoy spending time apart, alone or with others. You respect each other's need for time apart.

UNHEALTHY

You may be in an **unhealthy relationship** if one or both partners is:

Not communicating: When problems arise, you fight or you don't discuss them at all.

Disrespectful: One or both partners is not considerate of the other's feelings and/or personal boundaries.

Not trusting: One partner doesn't believe what the other says, or feels entitled to invade their privacy.

Dishonest: One or both partners tells lies.

Trying to take control: One partner feels their desires and choices are more important.

Only spending time with your partner: Your partner's community is the only one you socialize in.

ABUSIVE

Abuse is occurring in a relationship when one partner:

Communicates in a way that is hurtful, threatening, insulting or demeaning.

Disrespects the feelings, thoughts, decisions, opinions or physical safety of the other.

Physically hurts or injures the other partner by hitting, slapping, choking, pushing or shoving.

Blames the other partner for their harmful actions, makes excuses for abusive actions and/or minimizes the abusive behavior.

Controls and isolates the other partner by telling them what to wear, who they can hang out with, where they can go and/or what they can do.

Pressures or forces the other partner to do things they don't want to do; threatens, hurts or blackmails their partner if they resist or say no.

FRIENDS FOREVER?

Friends Forever? Video from Amaze.org (3:09)

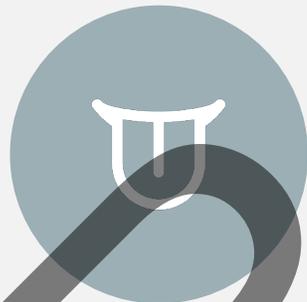


<https://youtu.be/FI-4MqdnPlw>

FAMILY, FRIENDSHIP, ROMANCE

- The characteristics of healthy relationships apply to all types of relationships.
- We will focus on the types of relationships that are most frequently found in the school environment.
- *Add images of families, friends and romances*

COMMUNICATION IS KEY!



BUT WHAT, EXACTLY, ARE
YOU COMMUNICATING?

FIRST, YOU NEED TO KNOW
YOUR BOUNDARIES.

SETTING BOUNDARIES

- Students will start with an active exploration of physical/spatial boundaries, complete a self-assessment on their own boundaries and then watch/discuss a video about setting digital boundaries.
- Resources from [SAFE Austin HS Advisory Lessons](#) (pages 23 – 26)

BOUNDARIES: WALK TOWARDS ME!

From [SAFE Austin HS Advisory Lessons](#) (page 23)

Objectives:

1. Increase awareness of personal boundaries
2. Practice setting and communicating boundaries

Introduction

Facilitator: One thing that separates a healthy relationship from an unhealthy relationship is having healthy boundaries, being able to be close and let people into your life, without giving up your rights, or your physical or emotional safety.

Walk Towards Me! (5 minutes)

Facilitator: Let's start today with an activity. For this activity, please get in pairs, and decide who is "A" and who is "B." "A"s line up against one wall, and "B"s line up against the other across from each other. When I say "Go," "A"s should walk towards "B"s. "B"s, put your hand up and say "stop" when your partner has gotten close enough and you would feel uncomfortable if he or she moved closer. After you say, "Stop", take a moment to notice the distance between you and how you feel. Then trade.

Note to facilitator: Allow time for two rounds of this activity, then ask the group to return to their seats and ask questions to the whole group.

Facilitator: How did you decide when it was time to say, "Stop"? How did you decide? Were you surprised at how different people's boundaries are?

BOUNDARIES QUIZ

From [SAFE Austin HS Advisory Lessons](#) (page 26)

Students will reflect on their own boundaries by completing the quiz.

Teacher will facilitate a short discussion to help students understand the nature of personal boundaries.

Worksheet: Boundaries Quiz

- 1) You're reading a new text message, and your partner asks, "Who is it?" You
A) Tell your partner who it is and what the text is about. Why wouldn't you?
B) Tell your partner it's none of his/her business.
- 2) You and your partner go see a movie. You're not a huge fan, but your partner loves the movie. When another friend asks how the movie was, your partner says, "We both loved it!" You say
A) "Yeah, it was good."
B) "S/he liked it a lot better than I did."
- 3) You have plans with a cousin who's visiting from out of town. Your partner asks if s/he can tag along. You say
A) "Sure, why not – the more, the merrier! I'm sure my cousin would like to meet my partner."
B) "Sorry, I want to spend one-on-one time with my cousin."
- 4) You volunteer at a tutoring center every weekend, and your partner starts to come along, too. You say
A) "That's so sweet – now we can spend more time together while doing something I already love."
B) "Since when are you interested in that? Why don't you find your own hobbies."
- 5) Your partner is always touching you (holding your hand, putting arm around you, etc.) when you're hanging out with other friends. You think
A) That's nice – s/he wants to show the world you two are a couple, and can't keep his or her hands off you!
B) That's uncomfortable – you don't want your partner in your space all the time, especially when you're with other people.
- 6) Your partner asks for your passwords for your phone, e-mail and social media pages. You say
A) "Great idea – we're so close, we should share everything."
B) "Not happening – some things I need to keep personal."
- 7) You're exhausted and half-asleep, but your partner wants you to come with him/her to go hang out with some friends. You say
A) "Okay, I'll go with you."
B) "I'm tired don't want to."

Adapted from



This project is supported by The Consolidated Grant Program to Address Children and Youth Experiencing Domestic and Sexual Assault, Project No. 2014-CY-AX-0020, awarded by the Office on Violence Against Women, U.S. Department of Justice.

WHERE DO YOU DRAW YOUR DIGITAL LINE?

From [SAFE Austin HS Advisory Lessons](#) (page 25)

Students watch video “When does caring become controlling?” ([thatsnotcool.com](#))

Teacher facilitates a short discussion (see slide notes)



<https://youtu.be/hLvcSVgNqpk>

COMMUNICATING BOUNDARIES AND NEGOTIATING AGREEMENTS

- Students will reflect on their natural communication style by completing the “Communication Style Quiz.”
- Teacher will facilitate a short discussion to help students understand the natural communications styles and the type of communication that supports healthy relationships.
- If time class time allows, students will analyze scenarios from “Boundaries and Agreements Practice” in small groups and teacher will facilitate a discussion in class.
- If class time is not sufficient, students will analyze one or more scenarios (teacher discretion) for homework and discussion will occur at the beginning of next class period.

COMMUNICATION STYLE QUIZ

From [SAFE Austin HS Advisory Lessons](#) (pages 20 – 22)

Worksheet: Communication Style Quiz

1. Your partner asks if s/he can copy your math homework since s/he was really busy this week. You don't feel comfortable with this and want your partner to do the work on his/her own. You:

- A. Show the assignment to your partner anyway and hope he/she does most of the work on his/her own.
- B. Tell your partner absolutely not.
- C. Explain to your partner that though you want him/her to do well on the homework, you wouldn't feel comfortable giving him/her your work.

2. You and your partner decide to go to the movies; s/he says s/he'll pay you back. It's been a month and your partner still hasn't paid you back. What do you do?

- A. It's not worth mentioning, you're sure s/he'll pay for something in the future.
- B. Casually remind him/her about the money the next time you two are together and ask him/her to get it to you when he/she can.
- C. Text your partner immediately, saying that he/she owes you and should bring it to you right away. There's no excuse for this.

3. Your friend constantly wants to text and video chat until late at night on weeknights. You have a lot of studying and extra-curricular work to do and really need to go to bed early. How do you deal with this?

- A. Tell your friend that he/she has to stop texting you at night.
- B. Tell your friend your parents took your phone/laptop.
- C. Call your friend and talk about it, saying that you really love talking, but that you really want to focus on school and you need your sleep.

4. You've been assigned a group project in your English class. Your group members divided up the work evenly, but one member has not done her part and is constantly coming up with excuses as to why she hasn't gotten the work done. How do you handle the situation?

- A. Tell her that you feel that her lack of effort is not fair to the rest of the group.
- B. Tell the teacher what is happening. Threaten that you won't give her credit for the project if she doesn't finish everything by the deadline.

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20

21

rk she's been neglecting amongst your other group members. Why
ing her?

and your partner wants you to stay in with him/her. A friend of
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don't want to argue with him/her about it, and you would feel bad
alone.

not to be so boring and threaten that you might meet someone else
with you to the party.
tner about the party and tell him/her that you still plan to go by
/he would rather stay in you understand.

go to the football game, but you need a ride. Your parents can't
artner has a car, but he/she isn't into going to games. You:
ner that s/he needs to take you to the game.
what s/he is up to on that day. Maybe she'll offer to give you a ride.
y big favor and you don't want to ask too much.
that you would really appreciate it if he/she would take you to the
is possible.

our waiter brings you the wrong meal. You:
he brought. There is no point in causing a scene.
a piece of your mind and tell him to bring out your correct order
waiter know that this is not what you ordered.

8. When meeting with a teacher about a test you didn't do so well on, and he cuts you off mid-sentence and keeps talking over you. You:

- A. Tell him off for interrupting you. How can he help you when he isn't listening?
- B. Let it go. He's the expert, anyway.
- C. Finish asking your question if he doesn't answer it after he's finished talking. If it keeps happening, say something like "please let me finish my thought."

9. You are ready to get more serious with your partner and would like to make it "official." How do you make this clear?

- A. Hint that your friend just changed her relationship status on Facebook. Maybe he/she is thinking about it, too.

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HOW TO TALK TO GIRLS, BOYS AND EVERYONE IN BETWEEN

(if time allows)

How to Talk to Girls, Boys and Everyone in Between
from Amaze.org (2:37) about communication
styles and how to have awkward conversations

HOW TO
TALK TO GIRLS,
BOYS AND
EVERYONE
IN BETWEEN



https://youtu.be/9_0IJRaaXkM

BOUNDARIES AND AGREEMENTS PRACTICE

From [SAFE Austin HS Advisory Lessons](#) (pages 29-30)

Homework Assignment: Assertive Communication – 3 Scenarios

Scenario 1: Ash and Sam have been dating for a few months. Ash is home sick, and Sam comes over to check on Ash. Sam posts an unflattering video of Ash sleeping and snoring. Ash feels embarrassed and angry at Sam for posting it.

3. What boundary was compromised?

4. What could Ash say to Sam to communicate the issue and set the boundary for the future?

Scenario 2: Jo and Morgan have been dating for a few months, and Jo leaves for summer break to be a camp counselor at a sleepaway camp. Jo is busy with work, helping campers and making friends with other counselors, and feels irritated with Morgan, who calls every morning and every night and texts throughout the day. One day, Jo leaves the phone behind for a field trip and has over thirty texts from Morgan that night. Jo feels that Morgan has good intentions, but finds the communication excessive.

4. What boundary/boundaries were comprised?

5. What could Jo say to Morgan?

6. Morgan really wants to talk to Jo more than they are currently talking. What could Morgan say to communicate that need assertively?

Scenario 3: Taylor and Jordan have been best friends for years and start dating in tenth grade. As soon as they decided to be a couple, Taylor started being very physical – Taylor is always initiating public displays of affection, touching and kissing Jordan. Whenever they're alone

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together, Taylor starts putting the moves on. Jordan feels surprised and uncomfortable with all the physical attention.

4. What boundary is being violated?

5. How can Jordan communicate assertively about what s/he is feeling? What can Jordan say to start the conversation?

6. Taylor does want the relationship to be more physical. What could Taylor say that's assertive, but not aggressive?

SOURCES FOR COPYRIGHT REVIEW

- <https://www.loveisrespect.org/wp-content/uploads/2016/08/highschool-educators-toolkit.pdf>
- <https://youtu.be/FI-4MqdnPlw>
- https://www.safeaustin.org/wp-content/uploads/2018/10/High-School-Advisory-Lessons_2015.pdf
- <https://youtu.be/hLvcSVgNqpk>
- https://youtu.be/9_0lJRaaXkM

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Pressures or forces the other partner to do things they don't want to do; threatens, hurts or blackmails their partner if they resist or say no.

Expect Respect LESSON 3 (of 4): Setting Boundaries

Introduction:	Activity: Walk Towards Me!	5 minutes
Activity/Topic:	Activity 1: Boundaries Quiz Activity 2: Where Do You Draw Your Digital Line?	5 minutes 15 minutes
Closing:		
Materials:	Worksheet: Boundaries Quiz Video: That's not cool	
Assignment:	Worksheet: Assertive Communication - 3 Scenarios	

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Note to facilitator: Allow time for two rounds of this activity, then ask the group to return to their seats and ask questions to the whole group.

Facilitator: How did you decide when it was time to say, "Stop"? How did you decide? Were you surprised at how different people's boundaries are?

Facilitator: Everyone has different boundaries. Boundaries can be instinctive; sometimes, we just feel like someone has crossed a line, even when we weren't conscious of drawing a line. Boundaries are different with different people and in different settings. For example, if you were asked, "What did you do this weekend?" by a teacher, a parent, a casual acquaintance and a close friend, your answer would probably be different for each person depending on how much information you'd want to share, how close you were and your relationship with that person.

Boundaries can be physical, emotional and sexual, and often protect privacy, personal space and individuality.

You are always entitled to your own space, interests and emotions.

You should never try to change your partner/ friend or violate their boundaries.

Abuse is when someone continues to violate your physical, sexual or emotional boundaries.

Activity 1: Boundaries Quiz

Facilitator: Do you naturally tend to have high boundaries around your privacy, personal space and individuality, or do your boundaries tend to be low? Take this short personal quiz to give you a better idea of where you land. There are no wrong answers.

Note to Facilitator: Allow up to 5 minutes to complete quiz.

Facilitator: The "A" answers indicate a low barrier, while the "B"s indicate a high barrier. There's no right or wrong answers. It's healthy to have a mix of barriers with your partner or friends and for some of those barriers to change over time. Some people are naturally more open about their privacy, feelings and space than others are.

What problems could result from having too few boundaries?

Sample answers: you are always compromising what you want, feel and need to please your partner and avoid conflict. When your barriers are being violated and/or your barriers are too low, you can feel taken advantage of, imposed upon and even abused.

What problems could result from having too many boundaries?

Sample answers: Having too many barriers keeps other people at a distance and compromises intimacy, which can make you or your partner/ friends feel disconnected, lonely and/or misunderstood.

Activity 2: Where Do You Draw Your Digital Line?

Facilitator: Your mobile, IM, and online accounts are all a part of you. Let us talk about where you draw your digital line.

Note to Facilitator: Have the class view the “that’s not cool” video and lead discussion.



Ask the class some or all of the following questions:

- What were some of the things that the boyfriend harassed the girlfriend about?
- What boundary/boundaries were compromised (or violated)?
- The final slide asks, “When does caring become controlling?” At what point do you think the boyfriend’s texts went from caring to controlling?
- When it comes to over-texting, what puts it over the edge - the number of texts or what the texts are saying? Or both?
- Where would you draw the line?
- What do you think the girlfriend in the video should do about this situation?

Explain: “The video that we just watched demonstrates how cell phones can be used to monitor, control, pressure, and overwhelm another person and violate their boundaries. Cell phones, the internet, and on-line sites like FaceBook and MySpace can all be used as tools to bully, threaten, and harass others. For example, they can be used to spread rumors; spy on others; share people’s personal pictures, videos, and information without their consent.”

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Worksheet: Boundaries Quiz

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4. You've been assigned a group project in your English class. Your group members divided up the work evenly, but one member has not done her part and is constantly coming up with excuses as to why she hasn't gotten the work done. How do you handle the situation?

- A. Tell her that you feel that her lack of effort is not fair to the rest of the group.
- B. Tell the teacher what is happening. Threaten that you won't give her credit for the project if she doesn't finish everything by the deadline.

C. Divide up the work she's been neglecting amongst your other group members. Why waste time confronting her?

5. It's a Friday night and your partner wants you to stay in with him/her. A friend of yours is hosting a birthday party, and you were hoping to go out and celebrate. You:

A. Just stay in – you don't want to argue with him/her about it, and you would feel bad leaving your partner alone.

B. Tell your partner not to be so boring and threaten that you might meet someone else if s/he doesn't come with you to the party.

C. Remind your partner about the party and tell him/her that you still plan to go by yourself, but that if s/he would rather stay in you understand.

6. You would like to go to the football game, but you need a ride. Your parents can't take you and your partner has a car, but he/she isn't into going to games. You:

A. Inform your partner that s/he needs to take you to the game.

B. Ask your partner what s/he is up to on that day. Maybe she'll offer to give you a ride. It seems like a pretty big favor and you don't want to ask too much.

C. Tell your partner that you would really appreciate it if he/she would take you to the game and ask if that is possible.

7. At a restaurant, your waiter brings you the wrong meal. You:

A. Just eat the meal he brought. There is no point in causing a scene.

B. Give your waiter a piece of your mind and tell him to bring out your correct order immediately.

C. Politely let your waiter know that this is not what you ordered.

8. When meeting with a teacher about a test you didn't do so well on, and he cuts you off mid-sentence and keeps talking over you. You:

A. Tell him off for interrupting you. How can he help you when he isn't listening?

B. Let it go. He's the expert, anyway.

C. Finish asking your question if he doesn't answer it after he's finished talking. If it keeps happening, say something like "please let me finish my thought."

9. You are ready to get more serious with your partner and would like to make it "official." How do you make this clear?

A. Hint that your friend just changed her relationship status on Facebook. Maybe he/she is thinking about it, too.

B. Ask your partner if being an official couple is something he/she is ready for and be honest about how you are feeling.

C. Give your partner an ultimatum. You've been in a relationship for a long time and if s/he doesn't want to take this step, it's over.

10. Your partner has been acting distant since winter break. You're worried about him/her and want to know what is going on. You:

A. Tell your partner you are worried about him/her and explain the changed behaviors you have been seeing.

B. Decide to confront him/her about it by saying "why have you been so weird lately?"

C. Ask broad questions about his/her family, break, and friends, hoping he/she will make it clear if anything is upsetting him/her.

Points key: 1: A=1, B=3, C=2 2: A=1, B=2, C=3 3: A=3, B=1, C=2 4: A=2, B=3, C=1 5: A=1, B=3, C=2 6: A=3, B=1, C=2 7: A=1, B=3, C=2 8: A=3, B=1, C=2 9: A=1, B=2, C=3 10: A=2, B=3, C=1

If you scored:

10-16 points- You're a passive communicator! You tend to be timid when it comes to confronting others and you often hold things back in order to avoid conflict. In friendships and romantic relationships, you care deeply about the feelings and emotions of others, and you worry about how confrontation will affect these relationships.

17-23 points- You're an assertive communicator! You think about the feelings of your friends and romantic partners and balance your emotions with a desire to solve problems. You seek to be constructive and solve problems.

24-30 points- You're an aggressive communicator! You want to get things done and express what you need. You let others know exactly what you're thinking and assume they'll do the same.

Adapted from:



Homework Assignment: Assertive Communication – 3 Scenarios

Scenario 1: Ash and Sam have been dating for a few months. Ash is home sick, and Sam comes over to check on Ash. Sam posts an unflattering video of Ash sleeping and snoring. Ash feels embarrassed and angry at Sam for posting it.

3. What boundary was compromised?

4. What could Ash say to Sam to communicate the issue and set the boundary for the future?

Scenario 2: Jo and Morgan have been dating for a few months, and Jo leaves for summer break to be a camp counselor at a sleepaway camp. Jo is busy with work, helping campers and making friends with other counselors, and feels irritated with Morgan, who calls every morning and every night and texts throughout the day. One day, Jo leaves the phone behind for a field trip and has over thirty texts from Morgan that night. Jo feels that Morgan has good intentions, but finds the communication excessive.

4. What boundary/boundaries were comprised?

5. What could Jo say to Morgan?

6. Morgan really wants to talk to Jo more than they are currently talking. What could Morgan say to communicate that need assertively?

Scenario 3: Taylor and Jordan have been best friends for years and start dating in tenth grade. As soon as they decided to be a couple, Taylor started being very physical – Taylor is always initiating public displays of affection, touching and kissing Jordan. Whenever they're alone

together, Taylor starts putting the moves on. Jordan feels surprised and uncomfortable with all the physical attention.

4. What boundary is being violated?

5. How can Jordan communicate assertively about what s/he is feeling? What can Jordan say to start the conversation?

6. Taylor does want the relationship to be more physical. What could Taylor say that's assertive, but not aggressive?

DRAFT

GRADE 8 | LESSON 10
MANAGING THE CONSEQUENCES
OF SEXUAL ACTIVITY

Last Updated

9/16/19 10:42 AM

LESSON SUMMARY

LESSON 10: MANAGING THE CONSEQUENCES OF SEXUAL ACTIVITY

- In this lesson, students will learn about strategies for managing the most prominent physical consequences of sexual activity – pregnancy and sexually transmitted diseases/infections. Students will learn the signs and symptoms of pregnancy and STDs, how to find local STD testing and treatment resources and what prenatal practices can contribute to a healthy pregnancy. Students will learn where to go for medically-accurate sources of pregnancy-related information and support, including pregnancy options, safe surrender policies and prenatal care.

LEARNING OBJECTIVES

CORE CONCEPTS

- Describe the signs and symptoms of a pregnancy. (NSES PR.8.CC.5)
- Describe the signs, symptoms and potential impacts* of STDs, including HIV. (NSES SH.8.CC.3)
- Identify prenatal practices that can contribute to a healthy pregnancy. (NSES PR.8.CC.6)
- Define emergency contraception and its use. (NSES PR.8.CC.4)

ACCESSING INFORMATION

- Identify medically- accurate sources of pregnancy-related information and support including pregnancy options, safe surrender policies and prenatal care. (NSES PR.8.AI.3)
- Identify local STD and HIV testing and treatment resources. (NSES SH.8.AI.2)

* Potential impacts of STDs, including HIV, are addressed in Lesson 6

TASK OVERVIEW

- In small groups, students will create an informational product for their peers.
- Teacher will introduce the task, review the required components and inform students of the materials available to create their product. Materials will vary depending on teacher discretion and campus resources.
- Teacher will ensure students understand the timeline for completing their product and the checkpoints the teacher will be using to ensure they are successful within the time given. These checkpoints are teacher discretion, but teacher materials will include suggestions for the teacher to structure students' work.

TASK OVERVIEW

YOUR TASK

- Create a product intended for a peer audience that...
 - Defines emergency contraception and its use.
 - Describes the signs and symptoms of a pregnancy.
 - Describes the signs and symptoms of STDs, including HIV.
 - Identifies prenatal practices that can contribute to a healthy pregnancy.

COMPONENTS

- Utilize information from at least 2 of the “recommended” sources provided.
- Identify at least 2 new credible and accurate sources.
- Your choice of format. Examples include video, brochure, poster, skit, etc.

RECOMMENDED SOURCES

- Amaze.org <https://amaze.org/>
- Centers for Disease Control *Teen Pregnancy: For Teens* site <https://www.cdc.gov/teenpregnancy/teens/index.htm>
- HealthyChildren.org *Dating & Sex* <https://www.healthychildren.org/English/ages-stages/teen/dating-sex/Pages/default.aspx>
- Nemours *Teens Health: Sexual Health* <https://kidshealth.org/en/teens/sexual-health/?WT.ac=t-nay-sexual-health>

SOURCES (DRAFT BIBLIOGRAPHY)

- No sources were used to structure this lesson plan. Informational “recommended sources” will be provided to students, but their use of those sources will vary.

GRADE 8 | LESSON 2
MAINTAINING HEALTHY RELATIONSHIPS

DRAFT

LESSON OVERVIEW

LESSON 2: MAINTAINING HEALTHY RELATIONSHIPS

- In this lesson, students examine the factors that can make healthy relationships difficult to maintain, including communication difficulties, self-concept/body image, romance, technology, and power differences, and then analyze what characteristics indicate a relationship has moved from healthy to unhealthy or unhealthy to abusive. Students use AISD policies and other resources to determine when situations may constitute bullying, sexual harassment, sexual abuse, sexual assault, incest, rape and/or dating violence.

LEARNING OBJECTIVES

CORE CONCEPTS

- Describe the potential impacts of power differences such as age, status or position within relationships. (NSES HR.8.CC.2)
- Analyze the similarities and differences between friendships and romantic relationships. (NSES HR.8.CC.3)
- Describe situations and behaviors that constitute bullying, sexual harassment, sexual abuse, sexual assault, incest, rape and dating violence. (NSES PS.8.CC.1)

ANALYZING INFLUENCES

- Analyze the impact of technology and social media on friendships and relationships (NSES HR.8.INF.2)
- Analyze how friends, family, media, society and culture can influence self- concept and body image. (NSES PD.8.INF.1)

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LEARNING OBJECTIVES (CONT'D)

INTERPERSONAL COMMUNICATIONS

- Demonstrate effective ways to communicate personal boundaries and show respect for the boundaries of others. (NSES HR.8.IC.2)

DRAFT

BOUNDARIES AND AGREEMENTS PRACTICE

From [SAFE Austin HS Advisory Lessons](#) (pages 29-30)

Review scenarios from previous lesson, as needed.

Review concepts from previous lesson:

We all have boundaries.

Respect in a relationship includes respect for the other person's boundaries.

Honesty and assertive communication are key to healthy relationships.

Homework Assignment: Assertive Communication – 3 Scenarios

Scenario 1: Ash and Sam have been dating for a few months. Ash is home sick, and Sam comes over to check on Ash. Sam posts an unflattering video of Ash sleeping and snoring. Ash feels embarrassed and angry at Sam for posting it.

3. What boundary was compromised?

4. What could Ash say to Sam to communicate the issue and set the boundary for the future?

Scenario 2: Jo and Morgan have been dating for a few months, and Jo leaves for summer break to be a camp counselor at a sleepaway camp. Jo is busy with work, helping campers and making friends with other counselors, and feels irritated with Morgan, who calls every morning and every night and texts throughout the day. One day, Jo leaves the phone behind for a field trip and has over thirty texts from Morgan that night. Jo feels that Morgan has good intentions, but finds the communication excessive.

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together, Taylor starts putting the moves on. Jordan feels surprised and uncomfortable with all the physical attention.

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5. How can Jordan communicate assertively about what s/he is feeling? What can Jordan say to start the conversation?

6. Taylor does want the relationship to be more physical. What could Taylor say that's assertive, but not aggressive?

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STUDENT HANDOUT RELATIONSHIP SPECTRUM

Relationships Exist on a Spectrum from [Love is Respect HR HS Educators Toolkit](#) (page 4)

Introduced during the previous lesson.

Provides a reference for the characteristics of healthy and unhealthy relationships.

Students will use this as a reference for the characteristics of unhealthy and abusive relationships.

RELATIONSHIPS EXIST ON A SPECTRUM

All relationships exist on a spectrum, from healthy to abusive to somewhere in between. Below, we outline behaviors that occur in healthy, unhealthy and abusive relationships.

HEALTHY	UNHEALTHY	ABUSIVE
<p>A healthy relationship means that both you and your partner are:</p> <p>Communicating: You talk openly about problems, listen to each other and respect each other's opinions.</p> <p>Respectful: You value each other as you are. You respect each other's emotional, digital and sexual boundaries.</p> <p>Trusting: You believe what your partner has to say. You do not feel the need to "prove" each other's trustworthiness.</p> <p>Honest: You are honest with each other, but can still keep some things private.</p> <p>Equal: You make decisions together and hold each other to the same standards.</p> <p>Enjoying personal time: You both can enjoy spending time apart, alone or with others. You respect each other's need for time apart.</p>	<p>You may be in an unhealthy relationship if one or both partners is:</p> <p>Not communicating: When problems arise, you fight or you don't discuss them at all.</p> <p>Disrespectful: One or both partners is not considerate of the other's feelings and/or personal boundaries.</p> <p>Not trusting: One partner doesn't believe what the other says, or feels entitled to invade their privacy.</p> <p>Dishonest: One or both partners tells lies.</p> <p>Trying to take control: One partner feels their desires and choices are more important.</p> <p>Only spending time with your partner: Your partner's community is the only one you socialize in.</p>	<p>Abuse is occurring in a relationship when one partner:</p> <p>Communicates in a way that is hurtful, threatening, insulting or demeaning.</p> <p>Disrespects the feelings, thoughts, decisions, opinions or physical safety of the other.</p> <p>Physically hurts or injures the other partner by hitting, slapping, choking, pushing or shoving.</p> <p>Blames the other partner for their harmful actions, makes excuses for abusive actions and/or minimizes the abusive behavior.</p> <p>Controls and isolates the other partner by telling them what to wear, who they can hang out with, where they can go and/or what they can do.</p> <p>Pressures or forces the other partner to do things they don't want to do; threatens, hurts or blackmails their partner if they resist or say no.</p>

MAINTAINING HEALTHY RELATIONSHIPS TAKES WORK!

Reference: *Relationship Spectrum* handout

Prompt: Which behavior required for healthy relationships do you think is the most challenging and why?

Method: Think – Pair – Share

DRAFT

WHICH CHARACTERISTIC OF HEALTHY RELATIONSHIPS DO YOU THINK IS THE MOST CHALLENGING AND WHY?

Respect

Communication

Trust

Equality

Independence

Honesty

RELATIONSHIPS EXIST ON A SPECTRUM

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Healthy Relationship Educators Toolkit

CHALLENGE #1 – LIFE IS AWKWARD

- Students watch the trailer for the film *Eighth Grade*, a story about an 8th grade video blogger during her last week of middle school.
- Students are prompted to consider the messages that Kayla receives from her surroundings that might influence her self-concept and body image.
- Teacher facilitates a discussion about some of the awkward moments shown in the video and some of the factors that made communication difficult.

DRAFT

EIGHTH GRADE FILM TRAILER

About: Eighth Grade is a 2018 American comedy-drama film written and directed by Bo Burnham (in his feature directorial debut). The coming-of-age story follows the life and struggles of an eighth-grader, played by Elsie Fisher, during her last week of classes before graduating to high school. She struggles with social anxiety but produces vlogs giving life advice. (Wikipedia)



https://youtu.be/y8lFgF_ljPw

DISCUSSION

- Did this portrayal of an 8th grader feel authentic to you? Why or why not?
- What kinds of issues came up for Kayla?
- What words might you use to describe how Kayla feels about herself?
- What kinds of relationships were highlighted?
- What feedback did she get from her peers?
- What feedback did she get from adults?
- What forms of media did you see? What role did they play?
- What were some of the messages that Kayla was sending to the world in her video blog?
- How did vlog Kayla compare to real-life Kayla? How well did she take her own advice?
- What are some reasons the exchange about charging phones might have been so awkward for Kayla?

INTERVIEW AND Q & A W/BO BURNHAM AND ELSIE FISHER

(If time allows)

Teacher can show one of these clips.

Elsie Fisher had just finished 8th grade
when she starred in this movie.



<https://youtu.be/yK5ED2qvZw8>



<https://youtu.be/mP9BQgEF9jQ>

CHALLENGE #2 – ATTRACTION IS PHYSIOLOGICAL

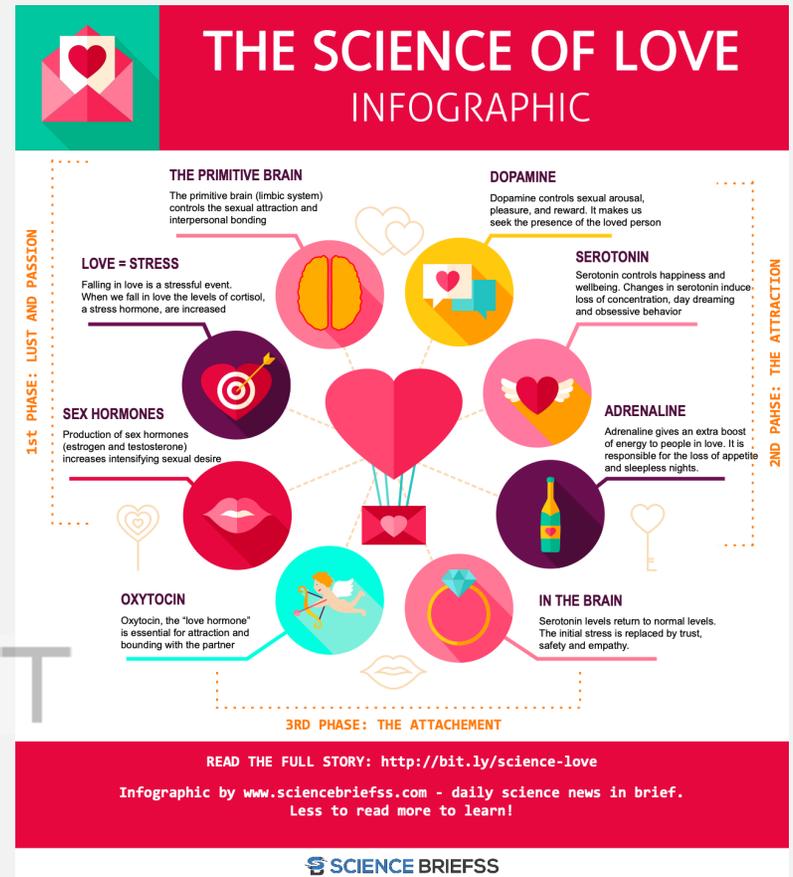
- Students will examine an infographic called “The Science of Love” that shows the physiological changes associated with romantic love.
- Teacher will use questioning to help students makes sense of the graphic and to compare romantic relationships to friendships.

DRAFT

THE SCIENCE OF LOVE INFOGRAPHIC

“[The Science of Love Infographic](#)” from Science Briefs, featured in the article [The science of love: a scientific overview of what happens in our brain when we are in love](#)

DRAFT



WORKING THROUGH THE AWKWARDNESS AND HORMONES

- Students will reflect on how healthy relationship behaviors can help them work through awkwardness and hormones.
- Students will watch the video “First Kiss and Showing Affection” from Amaze.org to look for evidence of healthy relationship behaviors and strategies for dealing with awkwardness and hormones.

DRAFT

WHICH HEALTHY BEHAVIORS ARE MOST IMPORTANT FOR WORKING THROUGH THE AWKWARDNESS AND HORMONES?

Respect

Communication

Trust

Equality

Independence

Honesty

RELATIONSHIPS EXIST ON A SPECTRUM

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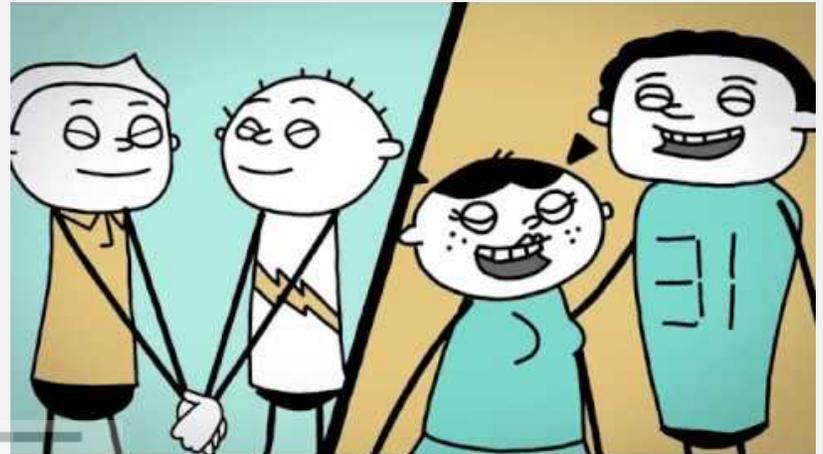
Healthy Relationship Educators Toolkit

FIRST KISS AND SHOWING AFFECTION

First Kiss and Showing Affection video from Amaze.org

Overview:

- Before you decide you're ready for that first kiss or even a hug, consider whether you trust and feel safe with this person.
- If you trust and feel comfortable with the person you want to show affection, things may be awkward at first, but you'll talk and eventually figure out what feels right together.



<https://youtu.be/VDaFzW-fNLc>

CHALLENGE #3 – POWER DYNAMICS

Students will reflect on the definition of power in social settings, brainstorm examples of power differentials in the school setting, and discuss the ways that power influences behaviors in relationships.

Resources:

- Relationships Exist on a Spectrum from [Love is Respect HR HS Educators Toolkit](#) (page 4)
- A variety of images showing images of potential power differentials

DEFINITIONS OF *POWER*

From the [Merriam-Webster Dictionary](#)

Power (noun)

1 : the ability or right to control people or things

2 : possession of control, authority, or influence over others

3 : the ability to act or produce an effect

DRAFT

IMAGES SHOWING POWER DIFFERENTIALS

- Students will study a variety of images and discuss what power differences might exist among the people shown. Examples are shown to the right.
- The conversation will include differences of...
 - Age
 - Status
 - Position
- Students will brainstorm examples of power differentials in a school setting.



WHICH CHARACTERISTICS OF HEALTHY RELATIONSHIPS MIGHT BE CHALLENGED BY POWER DIFFERENCES IN RELATIONSHIPS?

Respect

Communication

Trust

Equality

Independence

Honesty

RELATIONSHIPS EXIST ON A SPECTRUM

All relationships exist on a spectrum, from healthy to abusive to somewhere in between. Below, we outline behaviors that occur in healthy, unhealthy and abusive relationships.

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Healthy Relationship Educators Toolkit

FROM UNHEALTHY TO ABUSIVE

- Individually and/or in small groups, students will reflect (see prompts at right) on the nature of bullying, where bullying falls in the Relationship Spectrum and what role power differences play in bullying.
- Then, students will watch the *Why I Bully You* video. After the video, the teacher will lead a short discussion around the Discussion Prompts to the right.

Discussion Prompts:

- What are some behaviors that might be considered “bullying”?
- Is bullying simply unhealthy or is it abusive? (reference: Relationship Spectrum handout)
- What are some ways that bullying and power are related?

WHY I BULLY YOU

PSA created by American television host
Shaun Robinson (3:23)

[More information about this PSA](#)



<https://youtu.be/8mmlu5IZmvE>

DRAFT

AISD DEFINITION OF BULLYING

From AISD's [Respect for All](#) website.

The conduct is considered bullying if it exploits an **imbalance of power** between the student perpetrator and the student target through written or verbal expression or physical conduct; and **interferes** with a student's education or substantially **disrupts** the operation of a school.

DRAFT

WHAT CONSTITUTES SEXUAL HARASSMENT?

- Students will review what counts as “sexual” harassment using the AISD definition of harassment from AISD Board Policy FFH(local).
- Students will discuss how teasing and flirting differ from bullying and sexual harassment using the “Flirting or Harassment?” graphic from SAFE Austin MS Advisory Lessons.
- Students will review the AISD procedures for reporting bullying and harassment.

DRAFT

AISD DEFINITION OF HARASSMENT

From AISD Board Policy [FFH\(local\)](#).

Prohibited harassment of a student is defined as physical, verbal, or nonverbal conduct based on the student's race, color, religion, sex, gender, gender identity, gender expression, sexual orientation, national origin, disability, age, immigration status, or any other basis prohibited by law that is so severe, persistent, or pervasive that the conduct:

1. Affects a student's ability to participate in or benefit from an educational program or activity, or creates an intimidating, threatening, hostile, or offensive educational environment;
2. Has the purpose or effect of substantially or unreasonably interfering with the student's academic performance; or
3. Otherwise adversely affects the student's educational opportunities.

DRAFT

AISD DEFINITION OF DATING VIOLENCE

From AISD's [Respect for All](#) website.

The AISD definition of harassment includes “dating violence.”

Dating violence occurs when a person in a current or past dating relationship uses physical, sexual, verbal, or emotional abuse to harm, threaten, intimidate, or control the other person in the relationship. Dating violence also occurs when a person commits these acts against a person in a marriage or dating relationship with the individual who is or was once in a marriage or dating relationship with the person committing the offense.

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Introduction: “Flirting or Harassment?” (Adapted from *Expect Respect Youth Leadership curriculum*)

Directions:

Ask students to respond to the following questions. (Record student responses on board or flip chart.)

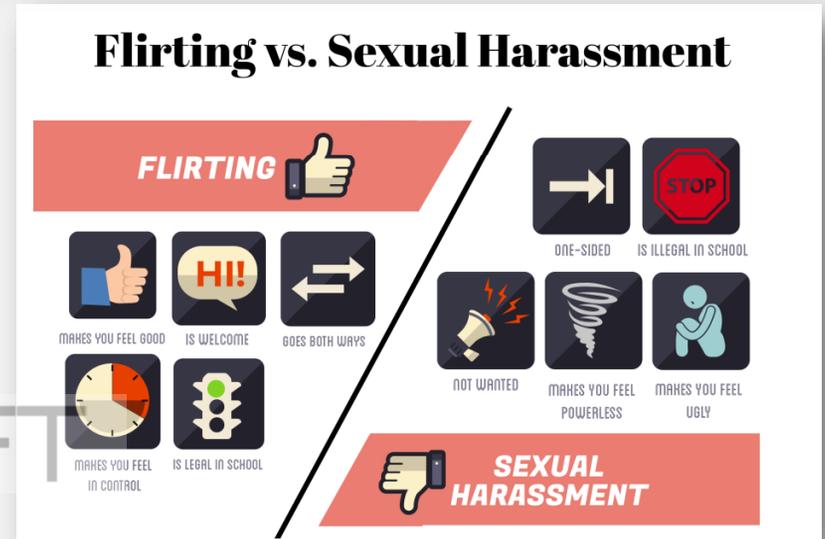
1. What are examples of common flirting that you see or experience at school?
2. When does flirting become sexual harassment?

FLIRTING OR HARASSMENT?

From [SAFE Austin MS Advisory Lessons](#) (p. 20)

Supporting resource: [Ending Harassment: 3 Advisory Lessons for High School Students](#) (page 11)

Teacher will solicit student responses before showing the “Flirting vs. Sexual Harassment” slide.



AISD REPORTING PROCEDURES

From AISD's [Respect for All](#) website.

Your Right to File a Complaint

The policy of Austin ISD is that all students be free from bullying and sexual harassment, including violence in students' relationships. All charges of bullying, sexual harassment, and dating violence are to be taken seriously by students, faculty, staff and administration members and parents. The district will make every reasonable effort to handle and respond to every charge and complaint filed by students and employees in a fair, thorough, and just manner. Every reasonable effort will be made to protect the due process rights of all targets and all alleged offenders.

Austin ISD
227901

STUDENT WELFARE
FREEDOM FROM DISCRIMINATION, HARASSMENT, AND RETALIATION

FFH
(EXHIBIT)

AUSTIN INDEPENDENT SCHOOL DISTRICT
STUDENT COMPLAINT FORM
BULLYING, SEXUAL HARASSMENT, DATING VIOLENCE

Name: _____ Student ID: _____

Grade: _____ Date: _____ Time: _____ School: _____

Please answer the following questions about the most serious incident:

- List the name of the student(s) accused of bullying, sexual harassment, or dating violence: _____
- Relationship between you and the accused student: _____
- Describe the incident: _____

- Where and when did it happen? _____
- Were there any witnesses? yes no If yes, who? _____
- Is this the first incident? yes no If no, how many times has it happened before? _____
- Other information, including previous incidents or threats: _____

- Student or parent declines to complete this form: _____ Initial and date.

I certify that all statements made in the complaint are true and complete. Any intentional misstatement of fact will subject me to appropriate discipline. I authorize school officials to

DRAFT

SEXUAL ABUSE, SEXUAL ASSAULT, RAPE, INCEST

- Students will discuss the characteristics of acts of sexual abuse and violence.
- Students will discuss steps they can take if they or someone they know needs help.

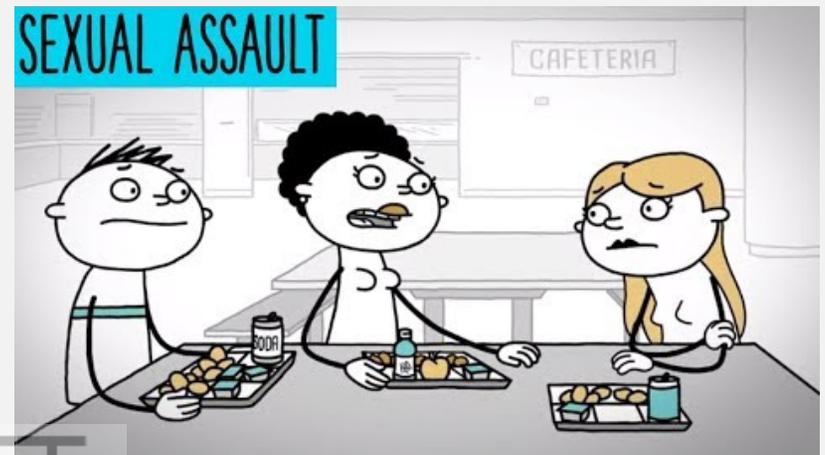
DRAFT

WHAT IS SEXUAL ASSAULT?

From Amaze.org

More information for youth, parents and educators at

<https://amaze.org/video/personal-safety-sexual-assault/>



<https://youtu.be/w8gslq85Xsc>

SEXUAL ABUSE
SEXUAL ASSAULT
RAPE
INCEST

- Definitions vary.
- All are criminal acts in the state of Texas, especially if they involve a person under the age of 18.
- All involve unwanted sexual contact.

DRAFT

SEXUAL ASSAULT EXPLAINED

From the Texas Association Against Sexual Assault (TAASA) webpage, [Understanding Sexual Assault](#).

SEXUAL ASSAULT EXPLAINED

Sexual assault is any forced, coerced, unwanted sexual contact.

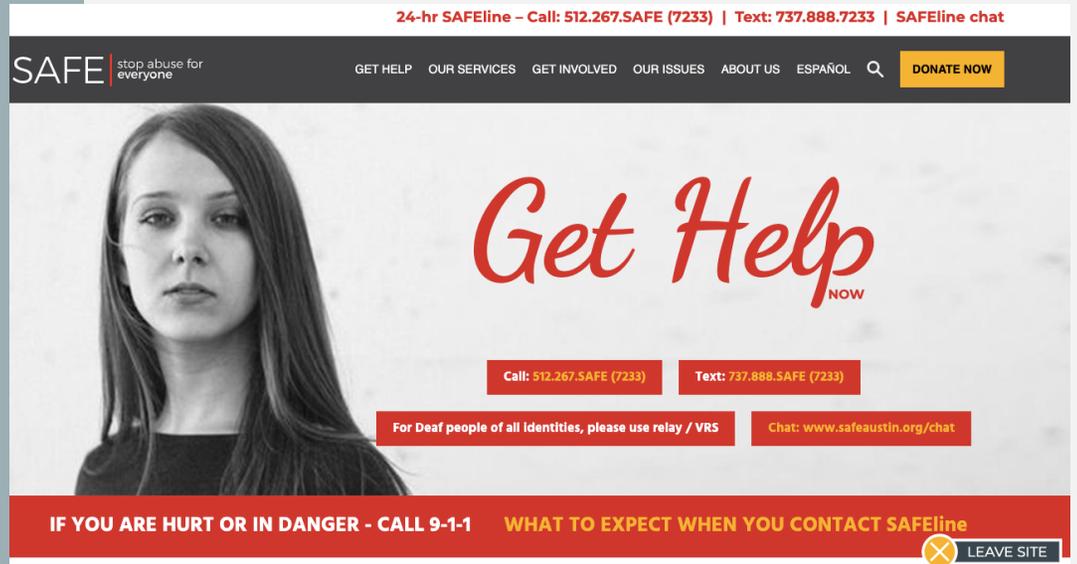
While there are specific legal definitions of rape and sexual assault in the Texas Penal Code, sexual violence is best understood as a broader continuum of unwanted non-mutual sexual activities that range from subtle to extremely violent¹. Sexual assault can include, but is not limited to, rape, sexual threats and intimidation, incest, sexual assault by intimate partners, child sexual abuse, human sexual trafficking, sexual harassment, street harassment and other forms of unwelcome, coerced or non-consensual activity. The terms *sexual abuse* are also often used to describe the wide range of activities that constitute sexual assault.¹

¹ "About Sexual Violence." *California Coalition Against Sexual Assault*. N.p., n.d. Web.

DRAFT

THE SAFE ALLIANCE

The teacher will show the [SAFE Alliance of Austin website](#), highlighting the ways to contact SAFE and what services they can offer.



The screenshot shows the homepage of the SAFE Alliance of Austin. At the top, there is a navigation bar with the SAFE logo (stop abuse for everyone) and links for GET HELP, OUR SERVICES, GET INVOLVED, OUR ISSUES, ABOUT US, ESPAÑOL, and a search icon. A yellow button labeled "DONATE NOW" is also present. Below the navigation bar is a large banner featuring a black and white photograph of a young woman with long dark hair. To the right of the photo, the text "Get Help" is written in a large, red, cursive font, with "NOW" in a smaller, red, sans-serif font below it. Below this text are two red buttons: "Call: 512.267.SAFE (7233)" and "Text: 737.888.SAFE (7233)". Below these buttons is a red bar with the text "For Deaf people of all identities, please use relay / VRS" and a red button labeled "Chat: www.safeaustin.org/chat". At the bottom of the page, there is a red banner with the text "IF YOU ARE HURT OR IN DANGER - CALL 9-1-1" and "WHAT TO EXPECT WHEN YOU CONTACT SAFEline". A small yellow button with a red 'X' icon and the text "LEAVE SITE" is located in the bottom right corner of the banner.

DRAFT

REFLECTION

- Students will reflect individually about...
 - The challenges to healthy relationships and summarize what behaviors and actions can help them move beyond those challenges.
 - What differentiates teasing or flirting behaviors from bullying and harassment and how assertive communication skills can be used to address problematic behaviors.
 - What characteristics can help them decide if something might qualify as sexual abuse, sexual assault, incest or rape.
 - What steps they can take if they or someone they know needs help.

SOURCES (DRAFT BIBLIOGRAPHY)

- [SAFE Austin HS Advisory Lessons](#)
- [Love is Respect HR HS Educators Toolkit](#)
- [https://en.wikipedia.org/wiki/Eighth_Grade_\(film\)](https://en.wikipedia.org/wiki/Eighth_Grade_(film))
- https://youtu.be/y8IFgF_ljPw
- <https://youtu.be/yK5ED2qvZw8>
- <https://youtu.be/mP9BQgEF9jQ>
- [The Science of Love Infographic](#)
- [The science of love: a scientific overview of what happens in our brain when we are in love](#)
- <https://youtu.be/VDaFzW-fNLc>
- <https://www.merriam-webster.com/dictionary/power>
- https://commons.wikimedia.org/wiki/File:Recognition_dance.jpg

SOURCES – CONT'D (DRAFT BIBLIOGRAPHY)

- [https://commons.wikimedia.org/wiki/File:Mr_Groh_with_teenage_class_London_Centre_UK_\(15321274686\).jpg](https://commons.wikimedia.org/wiki/File:Mr_Groh_with_teenage_class_London_Centre_UK_(15321274686).jpg)
- https://commons.wikimedia.org/wiki/File:Jaden_Mason-Gray.jpg
- <https://youtu.be/KQZ9hDDz704>
- <https://youtu.be/8mmlu5lZmvE>
- AISD's [Respect for All](#) website
- AISD Board Policy [FFH\(local\)](#)
- [SAFE Austin MS Advisory Lessons](#)
- [Ending Harassment: 3 Advisory Lessons for High School Students](#)
- Texas Association Against Sexual Assault (TAASA) webpage, [Understanding Sexual Assault](#)
- [SAFE Alliance of Austin website](#) (screenshots to show the services provided)

Homework Assignment: Assertive Communication – 3 Scenarios

Scenario 1: Ash and Sam have been dating for a few months. Ash is home sick, and Sam comes over to check on Ash. Sam posts an unflattering video of Ash sleeping and snoring. Ash feels embarrassed and angry at Sam for posting it.

3. What boundary was compromised?

4. What could Ash say to Sam to communicate the issue and set the boundary for the future?

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Scenario 2: Jo and Morgan have been dating for a few months, and Jo leaves for summer break to be a camp counselor at a sleepaway camp. Jo is busy with work, helping campers and making friends with other counselors, and feels irritated with Morgan, who calls every morning and every night and texts throughout the day. One day, Jo leaves the phone behind for a field trip and has over thirty texts from Morgan that night. Jo feels that Morgan has good intentions, but finds the communication excessive.

4. What boundary/boundaries were comprised?

5. What could Jo say to Morgan?

6. Morgan really wants to talk to Jo more than they are currently talking. What could Morgan say to communicate that need assertively?

Scenario 3: Taylor and Jordan have been best friends for years and start dating in tenth grade. As soon as they decided to be a couple, Taylor started being very physical – Taylor is always initiating public displays of affection, touching and kissing Jordan. Whenever they're alone

together, Taylor starts putting the moves on. Jordan feels surprised and uncomfortable with all the physical attention.

4. What boundary is being violated?

5. How can Jordan communicate assertively about what s/he is feeling? What can Jordan say to start the conversation?

6. Taylor does want the relationship to be more physical. What could Taylor say that's assertive, but not aggressive?

DRAFT

RELATIONSHIPS EXIST ON A SPECTRUM

All relationships exist on a spectrum, from healthy to abusive to somewhere in between. Below, we outline behaviors that occur in healthy, unhealthy and abusive relationships.

HEALTHY

A **healthy relationship** means that both you and your partner are:

Communicating: You talk openly about problems, listen to each other and respect each other's opinions.

Respectful: You value each other as you are. You respect each other's emotional, digital and sexual boundaries.

Trusting: You believe what your partner has to say. You do not feel the need to "prove" each other's trustworthiness.

Honest: You are honest with each other, but can still keep some things private.

Equal: You make decisions together and hold each other to the same standards.

Enjoying personal time: You both can enjoy spending time apart, alone or with others. You respect each other's need for time apart.

UNHEALTHY

You may be in an **unhealthy relationship** if one or both partners is:

Not communicating: When problems arise, you fight or you don't discuss them at all.

Disrespectful: One or both partners is not considerate of the other's feelings and/or personal boundaries.

Not trusting: One partner doesn't believe what the other says, or feels entitled to invade their privacy.

Dishonest: One or both partners tells lies.

Trying to take control: One partner feels their desires and choices are more important.

Only spending time with your partner: Your partner's community is the only one you socialize in.

ABUSIVE

Abuse is occurring in a relationship when one partner:

Communicates in a way that is hurtful, threatening, insulting or demeaning.

Disrespects the feelings, thoughts, decisions, opinions or physical safety of the other.

Physically hurts or injures the other partner by hitting, slapping, choking, pushing or shoving.

Blames the other partner for their harmful actions, makes excuses for abusive actions and/or minimizes the abusive behavior.

Controls and isolates the other partner by telling them what to wear, who they can hang out with, where they can go and/or what they can do.

Pressures or forces the other partner to do things they don't want to do; threatens, hurts or blackmails their partner if they resist or say no.



THE SCIENCE OF LOVE

INFOGRAPHIC

1st PHASE: LUST AND PASSION

2ND PHASE: THE ATTRACTION

THE PRIMITIVE BRAIN

The primitive brain (limbic system) controls the sexual attraction and interpersonal bonding

DOPAMINE

Dopamine controls sexual arousal, pleasure, and reward. It makes us seek the presence of the loved person

SEROTONIN

Serotonin controls happiness and wellbeing. Changes in serotonin induce loss of concentration, day dreaming and obsessive behavior

ADRENALINE

Adrenaline gives an extra boost of energy to people in love. It is responsible for the loss of appetite and sleepless nights.

IN THE BRAIN

Serotonin levels return to normal levels. The initial stress is replaced by trust, safety and empathy.

3RD PHASE: THE ATTACHEMENT

LOVE = STRESS

Falling in love is a stressful event. When we fall in love the levels of cortisol, a stress hormone, are increased

SEX HORMONES

Production of sex hormones (estrogen and testosterone) increases intensifying sexual desire

OXYTOCIN

Oxytocin, the "love hormone" is essential for attraction and bonding with the partner

DRAFT

READ THE FULL STORY: <http://bit.ly/science-love>

Infographic by www.sciencebriefss.com - daily science news in brief.
Less to read more to learn!

Introduction: “Flirting or Harassment?” (Adapted from *Expect Respect Youth Leadership curriculum*)

Directions:

Ask students to respond to the following questions. (Record student responses on board or flip chart.)

1. What are examples of common flirting that you see or experience at school?
2. When does flirting become sexual harassment?

Flirting	Sexual Harassment
<ul style="list-style-type: none">▪ Flirting is welcome attention.	<ul style="list-style-type: none">▪ Sexual harassment is not wanted.
<ul style="list-style-type: none">▪ Flirting goes both ways.	<ul style="list-style-type: none">▪ Sexual harassment is one-sided.
<ul style="list-style-type: none">▪ Flirting makes you feel in control	<ul style="list-style-type: none">▪ Sexual harassment makes you feel put down or ugly.
<ul style="list-style-type: none">▪ Flirting makes you feel good about yourself.	<ul style="list-style-type: none">▪ Sexual harassment makes you feel powerless.
<ul style="list-style-type: none">▪ Flirting is legal in school. <p>(National Center for Victims of Crime, 2006, Youth Reaching Youth Victims, www.ncvc.org)</p>	<ul style="list-style-type: none">▪ Sexual harassment is a violation of school rules.

Activity/Topic: Defining Sexual Harassment

Directions:

1. Read the following definition to whole group:

“Sexual harassment is unwanted and unwelcome sexual behavior which interferes with your right to get an education or to participate in school activities. In school, sexual harassment may result from words or conduct of sexual in nature that offend, stigmatize, demean, frighten or threaten you because of your sex. Therefore, sexual harassment is prohibited by AISD, state and federal law. Sexual harassment is determined by the target.”

2. Ask students to answer these three questions:

- a. What is sexual harassment?

Answer: Sexual harassment is unwanted and unwelcome sexual behavior.

- b. Who determines if it is flirting or sexual harassment?

Answer: Target or victim.

- c. If sexual harassment is illegal in schools, how come it goes on?

Answer: Will vary.

- a. What do students do that allows sexual harassment to continue? What do adults do that allow it to continue

Flirting vs. Sexual Harassment

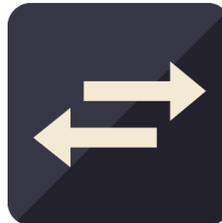
FLIRTING



MAKES YOU FEEL GOOD



IS WELCOME



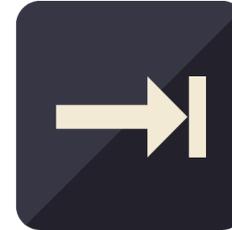
GOES BOTH WAYS



MAKES YOU FEEL
IN CONTROL



IS LEGAL IN SCHOOL



ONE-SIDED



IS ILLEGAL IN SCHOOL



NOT WANTED



MAKES YOU FEEL
POWERLESS



MAKES YOU FEEL
UGLY



**SEXUAL
HARASSMENT**

DRAFT

AUSTIN INDEPENDENT SCHOOL DISTRICT
STUDENT COMPLAINT FORM
BULLYING, SEXUAL HARASSMENT, DATING VIOLENCE

Name: _____ Student ID: _____

Grade: _____ Date: _____ Time: _____ School: _____

Please answer the following questions about the most serious incident:

- List the name of the student(s) accused of bullying, sexual harassment, or dating violence: _____
- Relationship between you and the accused student: _____
- Describe the incident: _____

- Where and when did it happen? _____
- Were there any witnesses? yes no If yes, who? _____
- Is this the first incident? yes no If no, how many times has it happened before?

- Other information, including previous incidents or threats: _____

- Student or parent declines to complete this form: _____ Initial and date.

I certify that all statements made in the complaint are true and complete. Any intentional misstatement of fact will subject me to appropriate discipline. I authorize school officials to disclose the information I provide only as necessary in pursuing the investigation.

Signature of student: _____ Date: _____

Signature of school official receiving complaint: _____ Date: _____

Signature of school official conducting follow-up: _____ Date: _____

Notes of actions taken: _____

Additional information from student or staff

Date	Documentation/Follow-up	Signature of Student/Staff

24-hr SAFeline – Call: 512.267.SAFE (7233) | Text: 737.888.7233 | SAFeline chat

SAFE | stop abuse for everyone

[GET HELP](#) [OUR SERVICES](#) [GET INVOLVED](#) [OUR ISSUES](#) [ABOUT US](#) [ESPAÑOL](#) [🔍](#)

[DONATE NOW](#)



Get Help

NOW

[Call: 512.267.SAFE \(7233\)](#)

[Text: 737.888.SAFE \(7233\)](#)

[For Deaf people of all identities, please use relay / VRS](#)

[Chat: \[www.safeaustin.org/chat\]\(http://www.safeaustin.org/chat\)](#)

IF YOU ARE HURT OR IN DANGER - CALL 9-1-1

WHAT TO EXPECT WHEN YOU CONTACT SAFeline

IF YOU ARE HURT OR IN DANGER - CALL 9-1-1

WHAT TO EXPECT WHEN YOU CONTACT SAFELine



**Worried about the safety of a
child?**

LEARN MORE



**Feel that you've experienced
sexual assault, abuse or
exploitation?**

LEARN MORE



**Concerned about how you're
being treated in your
relationship?**

LEARN MORE

What To Expect When You Contact SAFeline

The decision to reach out is the first step in seeking help with sexual or domestic violence, child abuse, human trafficking, or parenting support. The call is completely free of charge, and you can provide as much, or as little, information about yourself as you like — you can even call anonymously. When you reach out, our SAFeline advocates can:

- Offer a safe space where you can talk about your concerns with someone who cares and won't judge
- Assist you in determining if you or a loved one is being abused verbally, emotionally or physically
- Help you build a safety plan so you can find ways to be safe and prepared to leave if/when the time is right
- Make referrals for shelter, either with SAFE or another agency if we are full
- Provide family and friends with the resources they need to support the survivor
- Give you access to support services so you can begin to heal from the trauma of rape, sexual abuse, domestic violence, child abuse, or human trafficking
- Provide information about and connection to all SAFE services and local resources

SAFeline crisis intervention specialists are trained to handle calls from survivors, families, and allies who need support with situations of sexual abuse, sexual harassment, domestic violence, child abuse, and human trafficking. Our specialists can also provide tips on healthy relationships and parenting.

SAFeline features a relay/VRS for the Deaf, Hard of Hearing, and DeafBlind community, advocates speak Spanish, and our staff can use interpretation services to respond to callers who speak other languages.

**Due to the number of contacts we receive, we have been experiencing occasional dropped or misdirected calls. If that occurs, we ask that you please call or text or chat our SAFeline again. We are here to help and are grateful for your patience.*

Walk-In Support at SAFE

Not safe to call/chat?

SAFEline advocates are available to provide up to 30 minutes of face-to-face support at 1515 Grove Blvd, Building A, during walk-in hours from 8 a.m.–4 p.m. Monday through Friday. For more information, call 512-267-7233 or visit www.safeaustin.org/chat.

What you should know before visiting us:

What we can offer

- Crisis intervention and emotional support
- Safety planning
- Resource referrals and information to SAFE and other community resources
- Address Confidentiality Program paperwork
- Information about laws related to lease termination for survivors of sexual and domestic violence

What we can't offer

- Immediate shelter
- Financial assistance
- Case Management
- A counseling session
- Basic need items (food, clothing, etc)
- Bus pass or taxi voucher
- Legal Advice

What to expect

Walk-in support is available on a first come, first serve basis and may be a wait time based on staff availability to provide these services.

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Be Safe

One of the ways that SAFEline advocates can support you is by helping to create a safety plan, which helps you think of strategies for keeping safe.



Documents

If you take notes or get a brochure, keep those things private. Think about asking a friend or relative to keep them for you.



Identification

Make or get copies of important papers to keep safe: IDs, birth certificates, legal documents, etc.



Quick Escape Button

Click the "Leave site" button. Any time you use this website and need fast privacy, clicking the "quick escape" button will take you to the Google website.



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Smartphones

Use your smart phone carefully by disabling or not using any program that may allow people to find you (i.e., GPS, Wi-Fi, and even social media). You could even consider getting a second, pre-paid phone to use while you are safety planning.

Don't forget how easy it is for someone to pick up your phone and hit re-dial, look at the call log or even track down a detailed phone bill.



Computers

Use a safe computer (i.e., a computer at the library or of a friend, one where you know no monitoring software is installed), so that no one can look over your shoulder, or even get into your computer and see what websites you visit or read your email, even if you delete your browser history and delete files.

GRADE 8
EVERYONE HAS THE RIGHT TO SAFETY

LESSON SUMMARY

LESSON 3: EVERYONE HAS THE RIGHT TO SAFETY

- In this lesson, students first reflect on the ways self-concept is influenced by the messages from friends, family, media, society and culture, and then they tighten their lens to examine how external influences shape their attitudes about gender. With the recognition that adolescence is a time of significant change for most people, students are asked to reflect on how a developing self-concept and discomfort in difference can sometimes manifest in damaging behaviors. Students study and explain the rights that every human being has for to personal safety.

LEARNING OBJECTIVES

CORE CONCEPTS

- Discuss the impacts of bullying, sexual harassment, sexual abuse, sexual assault, incest, rape and dating violence and why they are wrong. (NSES PS.8.CC.2)
- Explain that no one has the right to touch anyone else in a sexual manner if they do not want to be touched. (NSES PS.8.CC.3)
- Explain why a person who has been raped or sexually assaulted is not at fault. (NSES PS.8.CC.4)

LEARNING OBJECTIVES

ANALYZING INFLUENCES

- Analyze how friends, family, media, society and culture can influence self- concept and body image. (NSES PD.8.INF.1)
- Analyze external influences that have an impact on one's attitudes about gender, sexual orientation and gender identity. (NSES ID.8.INF.1)

ACCESSING INFORMATION

- Access accurate information about gender identity, gender expression and sexual orientation. (NSES ID.8.AI.1)

WHAT INFLUENCES SELF-CONCEPT?

- Students will watch a short video about self-concept.
- Reflecting on the definition of self-concept, they will come up with a short description of who they are, as if they were being interviewed like the children in the video.
- Students will share their self-concept description with a partner. Together, the partners will analyze which of these influences are being expressed in their descriptions: friends, family, media, society, culture.

SELF CONCEPT

Source unknown



<https://youtu.be/AZdsCdx04to>

DEFINITIONS

- Media - the communication outlets or tools used to store and deliver information or data. The term refers to components of the mass media communications industry, such as print media, publishing, the news media, photography, cinema, broadcasting, and advertising. ([Wikipedia](#))
- Society - a very large group of people held together over time through formalized relationships. Relationships can be economic, legal, political, or some combination of these.
- Culture - the knowledge, beliefs and practices of a group of people.
- <https://press.rebus.community/mscy/back-matter/glossary/>

DEFINITION OF SELF-CONCEPT

From VeryWellMind.com's webpage *What is Self-Concept?*

<https://www.verywellmind.com/what-is-self-concept-2795865>

At its most basic, self-concept is a collection of beliefs one holds about oneself and the responses of others. It embodies the answer to the question "**Who am I?**"

- The **individual self** consists of attributes and personality traits that differentiate us from other individuals. Examples include introversion or extroversion.
- The **relational self** is defined by our relationships with significant others. Examples include siblings, friends, and spouses.
- The **collective self** reflects our membership in social groups. Examples include British, Republican, African-American, or gay.

WHAT INFLUENCES ONE'S ATTITUDES ABOUT GENDER, SEXUAL ORIENTATION AND GENDER IDENTITY? – PART I

- Students will analyze how children explain why women are paid less than men by watching a video.
- After the video, the teacher will ask students to summarize some of the answers they heard and discuss whether they agree or disagree with the answers students give.
- The teacher will then ask students to reflect on how students might have come to these conclusions. What might be the source of their understanding? What role might friends, family, media, society and culture have played?
- Students will review sources that provide accurate information about gender identity, gender expression and sexual orientation.

DEFINITION OF SOCIALIZATION

From Introduction to Sociology, 1st Canadian
Edition – [Chapter 5: Socialization](#)

Socialization is how we learn the norms and beliefs of our society. From our earliest family and play experiences, we are made aware of societal values and expectations.

Socialization helps people learn to function successfully in their social worlds. How does the process of socialization occur? How do we learn to use the objects of our society's material culture? How do we come to adopt the beliefs, values, and norms that represent its nonmaterial culture? This learning takes place through interaction with various agents of socialization, like peer groups and families, plus both formal and informal social institutions.

KIDS EXPLAIN WHY WOMEN
ARE PAID LESS THAN MEN

Jimmy Kimmel Live

<https://youtu.be/SIOnniy08AY>



<https://youtu.be/SIOnniy08AY>

WHAT INFLUENCES ONE'S ATTITUDES ABOUT GENDER, SEXUAL ORIENTATION AND GENDER IDENTITY? – PART 2

- Students watch a TED Talk by 12-year-old Audrey Mason-Hyde and reflect on these two questions:
 - How do other people's ideas of gender impact Audrey's life?
 - How do Audrey's ideas about gender impact her own self-concept and body image?
- After the video, the teacher will facilitate a discussion on the questions shown above and these additional questions:
 - Do you think that society treats "boys" and "girls" differently? If no, why do you think some people perceive such messages? If yes, do you think this is right?

TOILETS, BOWTIES, GENDER AND ME

TEDx Adelaide

10:34

Overview: Why is it so important for us to know someone else's gender? Is there a way to be less reliant on gender in our interactions with people? And what does this mean when it comes to the clothes we wear, or even which toilet we choose to use?



<https://youtu.be/NCLoNwVJA-0>

ACCURATE INFORMATION

- “Gender Identity and Development in Children” (Healthychildren.org – American Academy of Pediatrics) <https://www.healthychildren.org/English/ages-stages/gradeschool/Pages/Gender-Identity-and-Gender-Confusion-In-Children.aspx>
- “Sexual Orientation & Homosexuality” (American Psychological Association) <https://www.apa.org/topics/lgbt/orientation>
- “Transgender People, Gender Identity and Gender Expression” (American Psychological Association) <https://www.apa.org/topics/lgbt/transgender>
- “Gender Identity” (Caring For Kids - Canadian Paediatric Society) <https://www.caringforkids.cps.ca/handouts/gender-identity>

IMPACTS AND RIGHTS

- Teachers will lead a conversation about the seriousness of the outcomes of bullying, harassment and sexual violence.

THE IMPACT OF BULLYING

From the American Society for the Positive Care of Children webpage "[The Impact of Bullying](#)"

BULLYING

Impact of Bullying - Bullied



- Injuries
- Fear
- Embarrassment
- Low self-esteem
- Depression & anxiety
- Risk of suicide

Impact of Bullying - Bystanders



- Tobacco & smoking
- Alcohol or drug use
- Mental health problems
- Depression & anxiety
- Miss or skip school

Physical Impact of Bullying



- Headaches
- Muscle pain
- Digestive upset
- Weight change
- Altered immune function
- Possible link with heart disease

Impact of Bullying - Bullier



- Drug & alcohol abuse
- Aggressive & destructive behavior
- Drop out of school
- Early & risky sexual activity
- Criminal & traffic convictions
- Intimate Partner Violence (IPV)



americanspcc.org
The Nation's Voice for Children
*Hawkins, D. L., Pepler, D., & Craig, W. M. (2001)
*Courtesy of Lisa Morris
*U.S. DOJ & stopbullying.gov

THE IMPACT OF SEXUAL VIOLENCE

The consequences of sexual violence, from the Centers for Disease Control website "[Sexual Violence – Fast Facts](#)."

What are the consequences?

The consequences of sexual violence are physical, like bruising and genital injuries, and psychological, such as depression, anxiety and suicidal thoughts.

The consequences may also be chronic. Victims may suffer from post-traumatic stress disorder, experience re-occurring gynecological, gastrointestinal, cardiovascular and sexual health problems.

Sexual violence is also linked to negative health behaviors. For example, victims are more likely to smoke, abuse alcohol, use drugs, and engage in risky sexual activity.

The trauma resulting from sexual violence can have an impact on a survivor's employment in terms of time off from work, diminished performance, job loss, or being unable to work. These disrupt earning power and have a long-term effect on the economic well-being of survivors and their families. Readjustment after victimization can be challenging: victims may have difficulty in their personal relationships, in returning to work or school, and in regaining a sense of normalcy.

In addition, sexual violence is connected to other forms of violence. For example, girls who have been sexually abused are more likely to experience other forms of violence and additional sexual violence, and be a victim of intimate partner violence in adulthood.¹ Perpetrating bullying in early middle school is associated with sexual harassment perpetration in adolescence.

MY RIGHTS AND THE RIGHTS OF OTHERS

- Students will reflect on their learning by responding to several questions about their own rights, the rights of others and who is in control, responsible and at fault in bullying and harassments situations.

ASSESSMENT QUESTIONS

- Do you have a right to feel safe and be free from harm inflicted by others? Why or why not?
- Do others have a right to feel safe and be free from harm inflicted by you? Why or why not?
- Do you have a right to decide if and when to be touched in a sexual manner? Why or why not?
- Do others have a right to decide if and when they will be touched in a sexual manner by you? Why or why not?
- In a situation that constitutes bullying, sexual harassment or sexual violence, who is in control? Who is “responsible”? Who is “at fault”?

SOURCES (DRAFT BIBLIOGRAPHY)

- <https://youtu.be/AZdsCdx04to>
- [Wikipedia](#) definition of "media"
- <https://press.rebus.community/mscy/back-matter/glossary/>
- Introduction to Sociology, 1st Canadian Edition – [Chapter 5: Socialization](#)
- <https://www.verywellmind.com/what-is-self-concept-2795865>
- <https://youtu.be/SIOnniy08AY>
- <https://youtu.be/NCLoNwVJA-0>
- American Society for the Positive Care of Children webpage "[The Impact of Bullying](#)"
- Centers for Disease Control website "[Sexual Violence – Fast Facts.](#)"

BULLYING

Impact of Bullying - Bullied



- Injuries
- Fear
- Embarrassment
- Low self-esteem
- Depression & anxiety
- Risk of suicide

Impact of Bullying - Bystanders



- Tobacco & smoking
- Alcohol or drug use
- Mental health problems
- Depression & anxiety
- Miss or skip school

Physical Impact of Bullying



- Headaches
- Muscle pain
- Digestive upset
- Weight change
- Altered immune function
- Possible link with heart disease

Impact of Bullying - Bullier



- Drug & alcohol abuse
- Aggressive & destructive behavior
- Drop out of school
- Early & risky sexual activity
- Criminal & traffic convictions
- Intimate Partner Violence (IPV)

**GRADE 8
POWER IN COMMUNITY – BUILDING A
SAFE SPACE FOR US ALL**

Last Updated

9/16/19 5:59 AM

LESSON SUMMARY

LESSON 4: POWER IN COMMUNITY – BUILDING A SAFE SPACE FOR US ALL

- In this lesson, students will use their learning from the previous lessons to advocate for safe environments and respectful treatment of everyone in the school community. Students will identify behaviors they observe in their own life that infringe on the rights of others and apply a decision-making model to develop a plan of action steps to safely, legally and respectfully promote dignity and respect for all people.

LEARNING OBJECTIVES

DECISION-MAKING

- Apply a decision- making model to various sexual health decisions. (NSES PR.8.DM.1) << REMOVE? They're not making decisions about sexual health here...but we could practice it for future lessons.

ADVOCACY

- Advocate for safe environments that encourage dignified and respectful treatment of everyone. (NSES PS.8.ADV.1)
- Develop a plan to promote dignity and respect for all people in the school community. (NSES ID.8.ADV.1)

LEARNING OBJECTIVES

INTERPERSONAL COMMUNICATION

- Demonstrate ways to communicate with trusted adults about bullying, harassment, abuse or assault. (NSES PS.8.IC.1)

GOAL-SETTING AND SELF MANAGEMENT

- Describe strategies to use social media safely, legally and respectfully. (NSES HR.8.SM.2)
- Develop a plan to stay safe when using social media (NSES HR.8.GS.1)

LESSON 3 REVIEW

- Teacher will present some of the statements students included in their responses to the “Assessment Questions” from Lesson 3 (anonymously).
- Teacher will use questioning to review main points from Lesson 3:
 - The impacts of bullying and sexual violence are serious, long-lasting and impact both physical and mental/emotional health.
 - No one has the right to touch anyone else in a sexual manner if they do not want to be touched.
 - A person who is the victim of bullying, sexual harassment or sexual violence is not at fault.

ASSESSMENT QUESTIONS FROM LESSON 3

- Do you have a right to feel safe and be free from harm inflicted by others? Why or why not?
- Do others have a right to feel safe and be free from harm inflicted by you? Why or why not?
- Do you have a right to decide if and when to be touched in a sexual manner? Why or why not?
- Do others have a right to decide if and when they will be touched in a sexual manner by you? Why or why not?
- In a situation that constitutes bullying, sexual harassment or sexual violence, who is in control? Who is “responsible”? Who is “at fault”?

OVERVIEW OF THE TASK

- Teacher will preview today's task so that students understand why they're going to learn about ways to be an ally and to respond to bullying and harassment.

HOW TO BE AN ALLY

- Teacher will tell students that today they are going to reflect on ways they can be an ally to someone who may be experiencing bullying, harassment, abuse or assault.
- Students will watch *How to Be an Ally* video from Evelyn from the Internets (an Austin-based “digital storyteller”) to hear about one person’s view of what it means to be an ally and what actions can be helpful to someone experiencing discrimination. While they watch, students will take notes on the approaches that Evelyn suggests and their own ideas about situations in which that action might be helpful.

HOW TO BE AN ALLY

From YouTube [#CreatorsForChange](#) video by Evelyn from the Internets

(8:20)

[Evelyn](#) is a humor writer + digital storyteller from Austin, Texas.



<https://youtu.be/hjhQTQ-EOyl>

HOW TO RESPOND TO BULLYING, HARASSMENT

- Students will watch the video *What is Bullying?* from Amaze.org.
- While they watch, they will use a T-chart to keep track of the strategies that are suggested to deal with bullying or harassment in person and online.
- In small groups, students will compare their lists and come up with a summary for how to safely address bullying / harassment in either situation (in person or online).

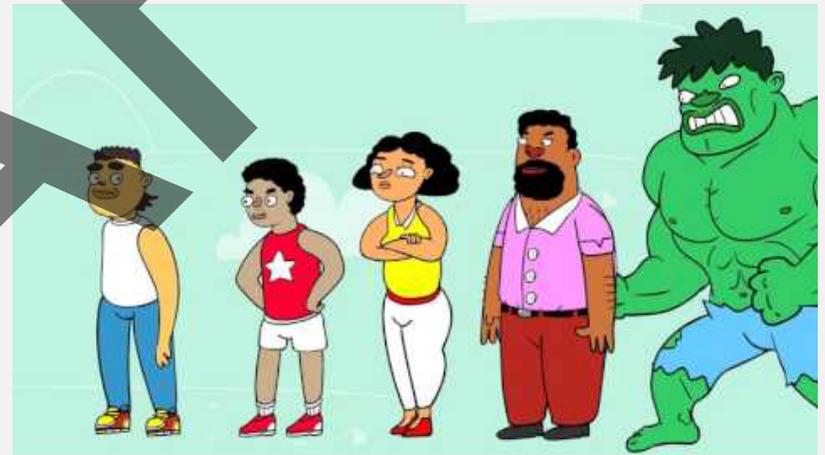
In Person	Online

WHAT IS BULLYING?

From Amaze.org (2:28)

More resources for youth, parents and educators at

<https://amaze.org/video/what-is-bullying/>



<https://youtu.be/KQZ9hDDz704>

BRAINSTORMING SITUATIONS

- In small groups, students will discuss situations they have observed that might constitute bullying, harassment, abuse or assault. Before they begin, the teacher will remind them to speak in general terms and maintain the confidentiality of the people involved in the situations.
- Each group will decide on one situation to use for their task.

MAKING A DIFFICULT DECISION WORKSHEET

- The teacher will introduce the “Making a Difficult Decision Worksheet.” The teacher will explain that they will use this worksheet to brainstorm what might be done to address the situation they identified, and that both of these options need to be included in their “Alternatives”:
 - Communicating with a trusted adult about the situation
 - Using social media to advocate for dignified and respectful treatment of everyone

MAKING A DIFFICULT DECISION WORKSHEET

From ETR Associates' Resource Center for Adolescent Pregnancy Prevention

<http://recapp.etr.org/recapp/documents/freebies/MkgDecisionWrk200211.pdf>

If use of this document is approved, the document will be modified to include an additional prompt:

7. My plan to ensure my own safety and the safety of others is:

4. My values that are relevant to this decision are:

5. Other people affected by my decision are:

6. Based on all of the above, the best alternative for me is:

Worksheet

Making a Difficult Decision Worksheet

Goal: Make a difficult decision by considering the alternatives; choose an alternative that is right for you.

1. Here's the problem:

2. Here are my alternatives to address the problem:

Alternative #1:	Alternative #2:
Alternative #3:	Alternative #4:

3. Each alternative has positive and negative consequences. Here are the ones I know about or think are likely.

	Positive Consequences (short & long-term)	Negative Consequences (short & long-term)
#1		
#2		
#3		
#4		

WORK TIME

- The teacher will circulate to assist each group as they complete the “Making a Difficult Decision Worksheet.”

SOURCES (DRAFT BIBLIOGRAPHY)

- <https://youtu.be/hjhQTO-EOyl>
- <https://youtu.be/KQZ9hDDz704>
- ETR Associates' Resource Center for Adolescent Pregnancy Prevention
<http://recapp.etr.org/recapp/documents/freebies/MkgDecisionWrk200211.pdf>

Making a Difficult Decision Worksheet

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#1		
#2		
#3		
#4		

4. My values that are relevant to this decision are:

5. Other people affected by my decision are:

6. Based on all of the above, the best alternative for me is:

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GRADE 8 | LESSON 5
DEFINING SEXUALITY & SEXUAL HEALTH

DRAFT

LESSON SUMMARY

LESSON 5: SEXUALITY AND SEXUAL HEALTH

- In this lesson, students will reflect on the concept of human sexuality by examining the messages they receive from friends, family, media, society and culture about sexual behavior and how these messages influence their own attitudes. Students will learn about sexual health as a lifelong goal that is much more than simply sexual behavior or activity.

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LEARNING OBJECTIVES

CORE CONCEPTS

- Describe male and female sexual and reproductive systems including body parts and their functions. (NSES AP.8.CC.1)

ANALYZING INFLUENCES & ACCESSING INFORMATION

- Examine how ~~alcohol and other substances~~,* friends, family, media, society and culture influence decisions about engaging in sexual behaviors. (NSES PR.8.INF.1)
- Identify accurate and credible sources of information about sexual health. (NSES AP.8.AI.1)

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* Alcohol and other substances are addressed in Lesson 7

FIGURING OUT WHO YOU ARE

- Teacher will choose one of the following videos to show to start a conversation about adolescence as a time of discovery and change.
 - *Puberty and Finding Out Who You Are* ([Amaze.org](https://www.amaze.org))
 - *Figuring Out Who You Are* ([Amaze.org](https://www.amaze.org))

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PUBERTY AND FINDING OUT WHO YOU ARE

From Amaze.org

More information for youth, parents and
educators at <https://amaze.org/video/puberty-finding-out-who-you-are/>



<https://youtu.be/4mxhzcskL3A>

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FIGURING OUT WHO YOU ARE

From Amaze.org

More information for youth, parents and educators at <https://amaze.org/video/figuring-out-who-you-are/>



<https://youtu.be/3w-grQfptqg>

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WHAT IS SEXUALITY AND SEXUAL HEALTH?

- Teacher will use the World Health Organization's working definitions of *sexuality* and *sexual health* help students understand that "sexuality" is much broader than the act of "sex" and that "sexual health" is a lifelong goal that encompasses many aspects.

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WORLD HEALTH ORGANIZATION (WHO) WORKING DEFINITIONS OF SEXUALITY AND SEXUAL HEALTH

From World Health Organization webpage
[Defining sexual health](#)

Sexual health

According to the current working definition, sexual health is:

“...a state of physical, emotional, mental and social well-being in relation to sexuality; it is not merely the absence of disease, dysfunction or infirmity. Sexual health requires a positive and respectful approach to sexuality and sexual relationships, as well as the possibility of having pleasurable and safe sexual experiences, free of coercion, discrimination and violence. For sexual health to be attained and maintained, the sexual rights of all persons must be respected, protected and fulfilled.” (WHO, 2006a)

Sexuality

Sexual health cannot be defined, understood or made operational without a broad consideration of sexuality, which underlies important behaviours and outcomes related to sexual health. The working definition of sexuality is:

“...a central aspect of being human throughout life encompasses sex, gender identities and roles, sexual orientation, eroticism, pleasure, intimacy and reproduction. Sexuality is experienced and expressed in thoughts, fantasies, desires, beliefs, attitudes, values, behaviours, practices, roles and relationships. While sexuality can include all of these dimensions, not all of them are always experienced or expressed. Sexuality is influenced by the interaction of biological, psychological, social, economic, political, cultural, legal, historical, religious and spiritual factors.” (WHO, 2006a)

REFLECTING ON HUMAN SEXUALITY

- [SFUSD Lesson 3: Human Sexuality - Human Sexuality Person \(pp. 2 - 5\)](#)
- In small groups, students reflect on the messages they get from friends, family, media, society and culture around human sexuality.
- The teacher will then facilitate a short discussion that prompts students to reflect on the activity and how all of these message impact may impact the decisions they make about their own sexuality.

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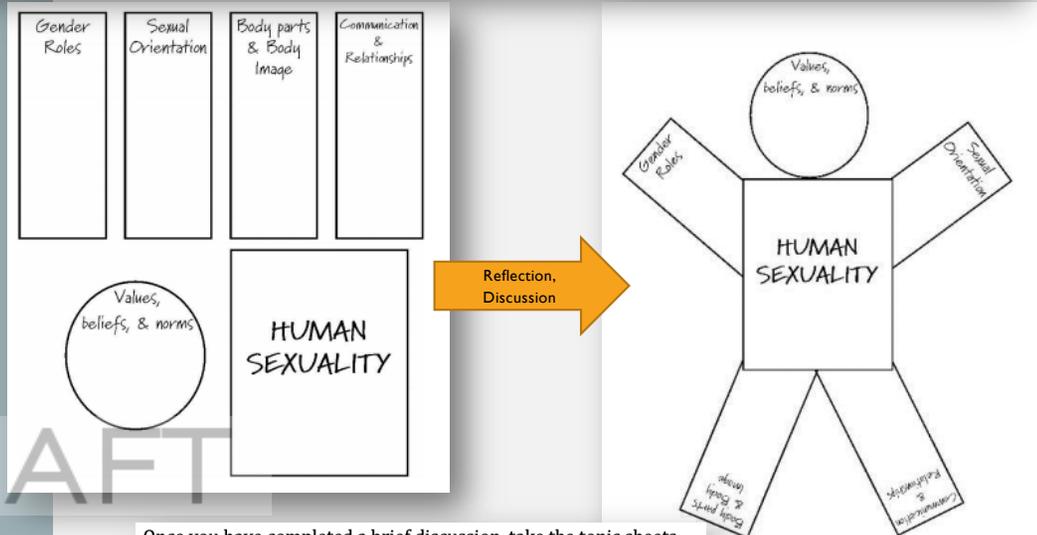
HUMAN SEXUALITY PERSON ACTIVITY

From [SFUSD Lesson 3: Human Sexuality - Human Sexuality Person \(pp. 2 - 5\)](#)

In this activity, students will explore the messages and information they receive from the world around them on topics related to sexuality.

Suggested Script:

We are going to do an activity that allows you to think about the messages you have received about sex and sexuality from the world around you. These messages may be from family, friends, school, media, tv, religion, or your community or culture. You will be put into small groups and each group will receive a topic to think about and brainstorm ideas onto the poster. There are no "right" or "wrong" answers in this activity. All ideas should be written on the paper. After a few minutes we will rotate the posters so your group can work on a new topic. At the end, we will discuss all of the ideas and messages you wrote on the posters.



Once you have completed a brief discussion, take the topic sheets and tape them together in the front of the room. The pieces should be taped together so that they form a person. Place the "Human Sexuality" sheet in the middle as the "body" of the person. It will look like this:

When all the categories are put together, they form a person: This is a representation of who we are as individuals. Debrief the activity with the students.

KNOW YOUR BODY

- “A good first step in taking charge of your sexual health is to know your body and know how it works.” ([ASHA IWannaKnow.org](https://www.asha.org/sexual-health/sexual-health-101))
- Students will label the diagrams and complete a card sort based on the descriptions provided by the “[Know Your Body](https://www.asha.org/sexual-health/sexual-health-101)” page of the American Sexual Health Association’s website for teens, *IWannaKnow.org*.

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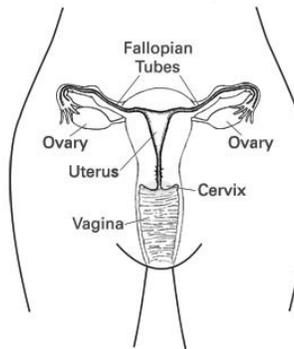
KNOW YOUR BODY

From the "[Know Your Body](#)" page of the American Sexual Health Association's website for teens, [IWannaKnow.org](#).

The diagrams and the descriptions will be used for labeling and a card sort.

Female anatomy

The female reproductive system is a series of orifices (openings) for intake and output through tubes and passages. The interior part of the system performs the most important functions, and the exterior acts as a cover to protect the delicate interior organs.



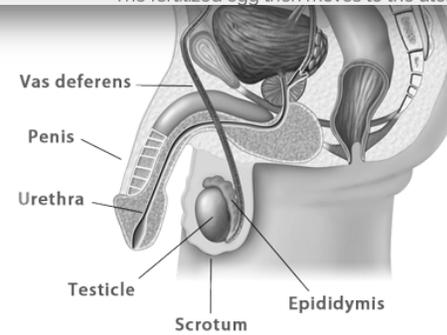
Ovaries

The ovaries are small, oval-shaped glands that are located on either side of the uterus (womb). The ovaries produce eggs and hormones.

Fallopian tubes

Narrow tubes that are attached to the upper part of the uterus and serve as tunnels for the ova (egg cells) to travel from the ovaries to the uterus. Conception, the fertilization of an egg by a sperm, normally occurs in the fallopian tubes. The fertilized egg then moves to the uterus.

important to understand how



Penis

The penis is the most visible part of the male sexual anatomy. It is made up of two parts, the shaft and the glans (also called the head). When a male reaches sexual climax, he ejaculates a thick fluid (semen) through the urethral opening at the tip of the penis into the

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ACCESSING ACCURATE & CREDIBLE SOURCES OF INFORMATION

The teacher will provide students time to browse the websites provided and then facilitate a short discussion about why these sites were chosen.

- American Sexual Health Association
IWannaKnow.org, "Sexual Health"
<http://www.iwannaknow.org/teens/sexualhealth.html>
- Centers for Disease Control and Prevention
Sexual Health
<https://www.cdc.gov/sexualhealth/Default.html>
- Nemours Children's Health System
KidsHealth.org,
<https://kidshealth.org/en/teens/about.html>

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REFLECTION

- Students will reconsider some of the messages about human sexuality that were brought up as part of the “Human Sexuality Person Activity” to complete these prompts individually:
 - One message that I agree with is... because...
 - One message that I disagree with is... because...
 - One message that I am not sure about is... because...

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DRAFT BIBLIOGRAPHY

- <https://youtu.be/4mxhzcskL3A>
- <https://youtu.be/3w-grQfptqg>
- World Health Organization webpage [Defining sexual health](#)
- [SFUSD Lesson 3: Human Sexuality - Human Sexuality Person \(pp. 2 - 5\)](#)
- [ASHA IWannaKnow.org](#)

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Lesson 3: Human Sexuality

BEFORE THE CLASS

For this lesson, you will need to prepare the large pieces of paper for the Human Sexuality Person activity. Instructions for materials preparation are in the Human Sexuality Person activity notes.

DO NOW

5 minutes

Materials

- Every student needs a notebook, journal, or paper and a pen
- Flipchart or whiteboard and markers

Activity

Write on board and have students complete the following task.

Write down 5 places you receive information about sex.

If there is time, have a few students share their responses.

HUMAN SEXUALITY PERSON

20 minutes

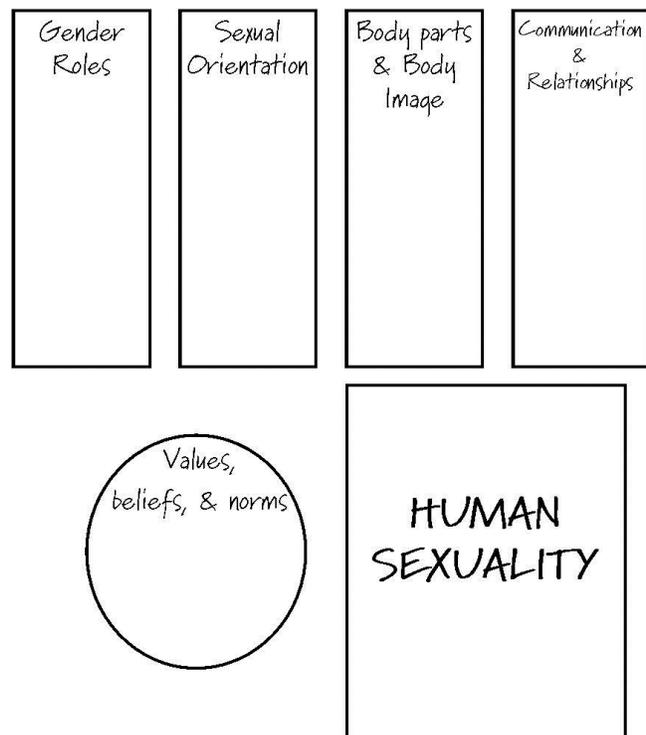
Materials

- 5 Human Sexuality Topic Sheets and one large Human Sexuality sheet (instructions below)
- Markers

Activity

Materials preparation instructions: Materials will need to be prepped before this activity. Cut two pieces of flip chart paper in half to make 4 pieces (or cut 4 rectangles out of butcher paper – all about the same size). Cut one circular shape out of flip chart/butcher paper. There will be 5 cut pieces total.

On the top of each piece write one of the topic categories (Communication & Relationships; Body Parts & Body Image; Gender Roles; Sexual Orientation; Values, Beliefs & Norms). On another full piece of flip chart paper (or cut a large rectangular piece of butcher paper) write “Human Sexuality” in large letters in the middle. Materials will look like this:



In this activity, students will explore the messages and information they receive from the world around them on topics related to sexuality.

Break the students up into 5 groups. Distribute one of the Human Sexuality Topic Sheets (Communication & Relationships; Body Parts & Body Image; Gender Roles; Sexual Orientation; Values, Beliefs & Norms) to each group. Give the group about 2-5 minutes to brainstorm their ideas on the sheet and then rotate the topics sheets to a new group. Let the students know that there are no “right” or “wrong” answers for this activity. Instruct the group to engage in free word association- they should write down what they have learned about the particular topic and what comes to mind when they see the category.

Suggested Script:

We are going to do an activity that allows you to think about the messages you have received about sex and sexuality from the world around you. These messages may be from family, friends, school, media, tv, religion, or your community or culture. You will be put into small groups and each group will receive a topic to think about and brainstorm ideas onto the poster. There are no “right” or “wrong” answers in this activity. All ideas should be written on the paper. After a few minutes we will rotate the posters so your group can work on a new topic. At the end, we will discuss all of the ideas and messages you wrote on the posters.

Using the definitions below, explain each category to the group, so that students understand each category. Once the activity begins, if groups are stuck, use the questions below to encourage conversation on the topic:

Values, Beliefs, and Norms: roles, values and ideas we learn from society, our culture and our families. It can be helpful to ask students to focus on the sexual values they have learned in this category. Helpful questions to consider:

- What did you parent(s)/caregiver(s) teach you about sex? What did they not teach you about sex?
- What beliefs about sex, dating, and relationships does your family have?
- What have you learned from the media about sex?

Sexual Orientation: who we are attracted to and the values that we learn about attraction and identity. You are asking students to brainstorm their ideas about this category, not to write their own sexual orientations on the sheet of paper. Helpful questions to consider:

- What sexual orientations have you heard of? What have you heard about these?
- How are people of different orientations portrayed in media (music, movies, tv)?
- Are there different rules or laws for people depending on their sexual orientation? What are those rules/laws? Why do you think these exist?

Gender Roles: are culturally accepted and expected behaviors associated with gender (man/woman/transgender/gender queer). These expectations can often be stereotypical. Gender roles are constructed and the stereotypes can often be harmful to people. Helpful questions to consider:

- What do we learn about gender? How do we learn about gender?

- Are there different roles for men and women? What are they? What do you think about them?

Communication & Relationships: There are many different types of relationships and ways that people communicate with people they are in relationships with.

- What types of relationships are healthy?
- What type of communication does a person need to be in a healthy relationship?
- How do people start relationships? How do people end relationships? Are these healthy or unhealthy ways of starting/ending relationships?
- What kind qualities make a “good” partner?

Body Image and Body Parts: there are many parts of the human body and we have even more words to describe these different parts of the body.

- What different ideas do we have about body parts?
- How do we feel about our bodies?
- How does our image of our bodies affect us?
- According to TV, movies, and music what types of bodies or what body parts are valued or considered beautiful/desirable?

When all groups have finished, read aloud some of the comments from each category or have students present each topic sheet. If there are questions or misconceptions written in the categories make sure to address them.

Teacher Tip:

As the students are working, walk around the room and offer assistance to each group. Encourage each member of the group to share their ideas. Make sure all students' ideas are honored in the group. The group does not have to agree on everything that is written on the paper. It's important to remind students that while everyone has the right to their own beliefs, they should be respectful in how they communicate those beliefs.

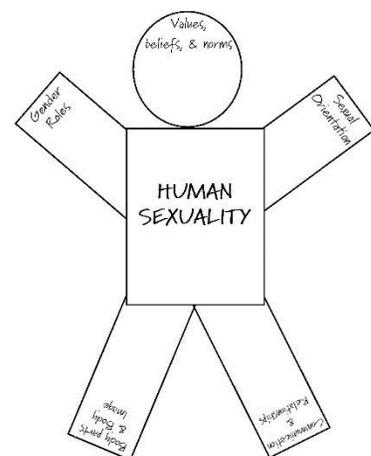
Once you have reviewed each poster, briefly discuss the activity with the class. Here are some possible discussion questions:

- What were some things you felt during this exercise?
- Why do you suppose we did this exercise?
- What do all of these categories have in common?

Once you have completed a brief discussion, take the topic sheets and tape them together in the front of the room. The pieces should be taped together so that they form a person. Place the “Human Sexuality” sheet in the middle as the “body” of the person. It will look like this:

When all the categories are put together, they form a person: This is a representation of who we are as individuals. Debrief the activity with the students. Ask students a few discussion questions:

- What do you see now that the pieces are all together?



- How can all of these messages about sex, bodies, gender, orientation, relationships, and values affect teens?
- Is this something that you all think about often? Or not at all? Why?

Close the activity by reminding students that each person's sexuality is unique and different. Reinforce the importance of being aware of and examining the messages students receive about sex and how those messages can influence decision making.

Suggested Script:

Each of you today brought your own values and ideas to this activity. Each of your experiences helped shape who you are today. Our individuality is a lot like our sexuality. Each person has a different perception, connection, and understanding of their own sexuality. Many people think sex and sexuality are only related to body parts, sexual behaviors, and fantasies. But, our sexuality is so much more than that. These other categories play a huge role in forming our sexuality. When we are able to think about our feelings in relation to these different categories we can begin to understand ourselves more.

It's important to understand our values and beliefs about being sexual and how they relate to who we are today. The sexual decisions we make in life are not only connected to if we are attracted to someone or not, but are also related to the different values we hold, what we have learned from our families and our cultures, how we feel about our bodies, and more. By looking at the "big picture" of sexuality we can begin to explore all of our ideas around these topics. We will continue to talk about sexuality over the course of these (insert whatever time frame you will be with this class) and that's why we are beginning here, so that you all can begin to think about your own sexuality, and how that relates to who you are and what you know today.

VALUES & BELIEFS**15 minutes****Materials**

- Index cards (one for each student)
- Agree, Disagree, & Pass Signs

Activity

For this activity students reflect on their beliefs about sexuality and seek to understand the beliefs held by their classmates. Post the "agree" sign on one side of the room and the "disagree" sign on the other. In the middle of the room post the "pass" sign.

Pass out one index card to each student. Let students know that this is an anonymous activity so they should not write their name on the card. Have students number the rows on the card 1-5.

Read the following statements out loud and have students write an "A" for agree, a "D" for disagree, or a "P" for pass.

1. Youth under 18 are too young to have sex.
2. You can tell if someone wants to have sex by their body language.
3. I believe in love at first sight.
4. It's healthy for partners to talk about planning marriage and children together after dating for 2 months.
5. Middle school youth are too young to know if they are gay or lesbian.

ABOUT US	LINKS	FOR PARENTS	FOR EDUCATORS	PUBLICATIONS	GET ANSWERS
DONATE					

I WANNA KNOW



SEXUAL HEALTH	STDs/STIS	RELATIONSHIPS	LGBTQ	PREGNANCY & PARENTHOOD
MYTHS AND FACTS				

Search this website ...

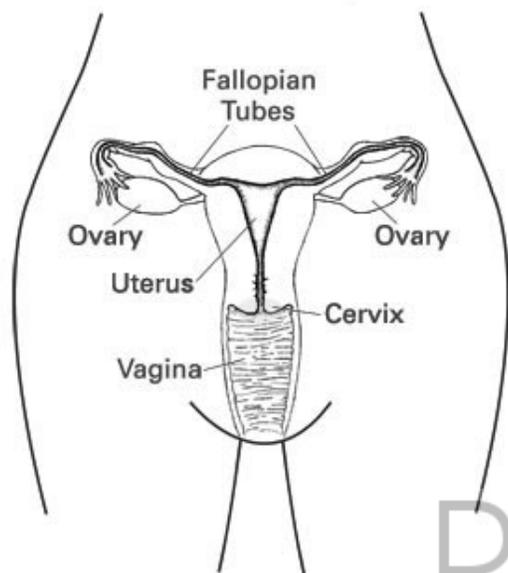
Know your body



A good first step in taking charge of your sexual health is to know your body and know how it works.

Female anatomy

The female reproductive system is a series of orifices (openings) for intake and output through tubes and passages. The interior part of the system performs the most important functions, and the exterior acts as a cover to protect the delicate interior organs.



Ovaries

The ovaries are small, oval-shaped glands that are located on either side of the uterus (womb). The ovaries produce eggs and hormones.

Fallopian tubes

Narrow tubes that are attached to the upper part of the uterus and serve as tunnels for the ova (egg cells) to travel from the ovaries to the uterus. Conception, the fertilization of an egg by a sperm, normally occurs in the fallopian tubes. The fertilized egg then moves to the uterus,

where it implants to the uterine wall.

Uterus

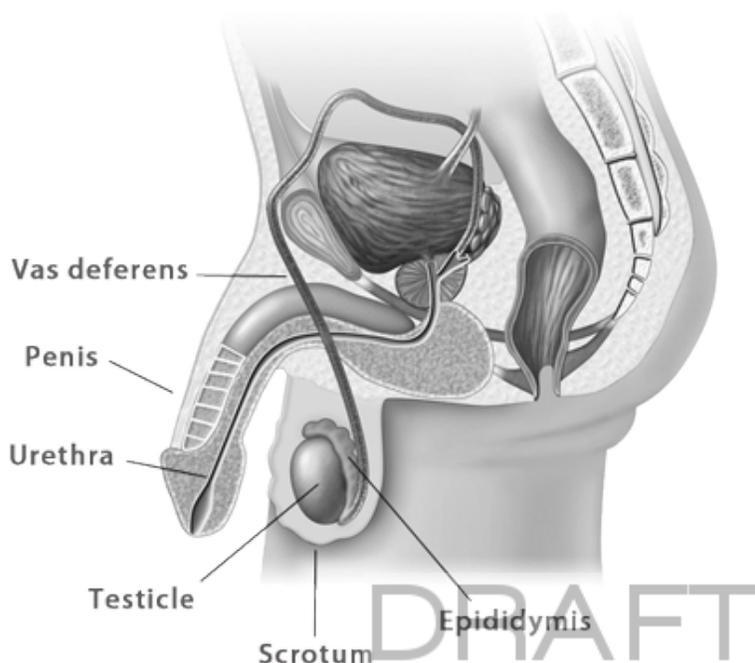
The uterus is a hollow, pear-shaped organ that is the home to a developing fetus. The uterus is divided into two parts: **the cervix**, which is the lower part that opens into the vagina, and the main body of the uterus, called the corpus. The corpus can easily expand to hold a developing baby.

Vagina

The is a canal that joins the cervix (the lower part of the uterus) to the outside of the body. Its exterior opening enables sperm to enter the system to reach an egg. If an egg is not fertilized, menstruation results and the blood is carried out of the body through the vagina. It also provides a way for a baby to exit the body. That's why it's sometimes referred to as the birth canal.

Male anatomy

Although most of the male reproductive organs are external, it's important to understand how all your sex organs—external and internal—work together.



Penis

The penis is the most visible part of the male sexual anatomy. It is made up of two parts, the shaft and the glans (also called the head). When a male reaches sexual climax, he ejaculates a thick fluid (**semen**) through the urethral opening at the tip of the penis into the vagina. The semen carries sperm cells through the vaginal canal to the uterus where the sperm seek out the female egg for fertilization. Also, when a man urinates, the flow leaves his body through the urethral opening.

Urethra

A duct, or tube, that transports fluids from the inside of the body to the outside. In both men and women, the urethra is connected to the bladder and is used to pass urine out of the body. In males, however, the urethra is also connected to the "accessory glands," which produce semen, and to the vas deferens, the duct that brings the sperm from the epididymis.

Testicles

The testicles are located below the penis and begin producing male sex cells called sperm and testosterone, the male sex hormone after puberty.

Scrotum

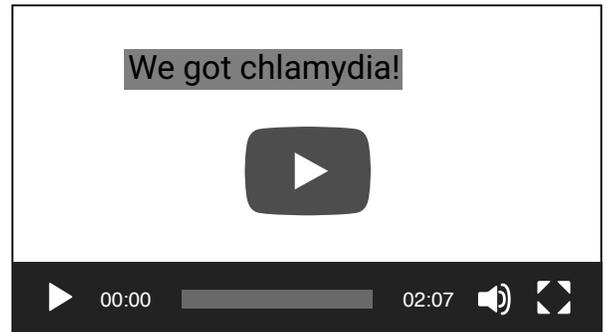
A pouch of skin called the scrotum covers the testicles. The scrotum and the muscles surrounding it can pull the testicles toward the body when they are too cold and relax away from the body when the testicles are too warm. This is important because sperm needs to be maintained at an appropriate temperature to be able to fertilize female eggs. The scrotum also holds the epididymis.

Epididymis and vas deferens

The epididymis stores the sperm after the testicles produce them, and the vas deferens transports the sperm from the epididymis to the urethra.

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WE GOT CHLAMYDIA!



- > [Overview](#)
- > [Know your body](#)
- > [Puberty](#)
- > [Self image](#)
- > [Your healthcare provider](#)
- > [Sexual health glossary](#)

GRADE 8 | LESSON 6
UNDERSTANDING THE CONSEQUENCES
OF SEXUAL ACTIVITY

DRAFT

LESSON SUMMARY

LESSON 6: UNDERSTANDING THE CONSEQUENCES OF SEXUAL ACTIVITY

- In this lesson, students will explore the most prominent physical consequences of sexual activity – pregnancy and sexually transmitted diseases/infections.

Students will learn about how pregnancy occurs, how sexually transmitted

diseases are and are not transmitted, and the potential health impacts of STDs.

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LEARNING OBJECTIVES

CORE CONCEPTS

- Define sexual intercourse and its relationship to human reproduction. (NSES PR.8.CC.1)
- Define STDs, including HIV, and how they are and are not transmitted. (NSES SH.8.CC.1)
- Describe the ~~signs, symptoms and~~* potential impacts of STDs, including HIV. (NSES SH.8.CC.3)

ACCESSING INFORMATION

- Identify medically- accurate information about STDs, including HIV. (NSES SH.8.AI.1)

* Signs and symptoms of STDs, including HIV, are addressed in Lesson 9

INFORMATION IS POWER

- Students will participate in a simulation to demonstrate the power of information to produce improved outcomes using the “Poker Chips Activity.”

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POKER CHIPS ACTIVITY

From Florida Department of Education
College and Career Planning Educator's Toolkit
– [Module D: Goal Setting & Decision-Making](#)

<http://www.fldoe.org/core/fileparse.php/7531/urll/informed-decision-making.pdf>

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Module D: Lesson Plan 12: Goal Setting and Decision-Making
Topic: Informed Decision-Making
Standard(s): Students will: 3.0 Identify and demonstrate processes for making short and long term goals. 4.0 Demonstrate employability skills such as working in a group, problem-solving and organizational skills, and the importance of entrepreneurship.
Length: Two class periods
Objective: The student will recognize the importance of seeking information before making a decision.
Materials: <ul style="list-style-type: none">▪ Red, white and blue poker chips▪ Clear plastic bag▪ Chart paper and markers▪ Decision-Making Scenarios Sheet▪ Handout – <i>Decision-Making Points to Remember</i>
Description of Activity: <p>A. Poker Chip Activity</p> <ul style="list-style-type: none">▪ Show student a clear plastic bag filled with red, blue, and white poker chips.▪ Ask for two volunteers to participate in the demonstration.▪ Explain the rules:<ul style="list-style-type: none">▪ Participant may use only one hand. (Bag will be held open for student)▪ In 60 seconds the student will take out as many poker chips as possible.▪ After the first participant completes his/her turn, change the information slightly.▪ "I forgot to mention that the white chips are worth \$10; the red \$50; and blue \$100."▪ After participant number two completes his/her turn, sort and add chips. Record on board.▪ Have students multiply their total in dollars.▪ Participant number two will have the largest amount in dollars, however not necessarily the largest number of chips. Discuss how a little knowledge about a decision can alter how one approaches a situation and how it can improve the outcome. Relate to career goals.

CONSEQUENCE #1 – PREGNANCY

- Students will individually complete a pre-assessment activity based on the transcript of the video *Birth Control 101: Pregnancy*.
- Students will watch the video *Birth Control 101: Pregnancy* to check their answers.
- The teacher will facilitate a short discussion ensuring students ended up with the correct answers and to emphasize that "sex" in this context means penis-in-vagina sexual intercourse and that the only 100% sure way to avoid pregnancy is to refrain from penis-in-vagina sex.

BIRTH CONTROL 101: PREGNANCY (VIDEO TRANSCRIPT)

Birth Control 101: Pregnancy (1:00) video from StayTeen.org (<https://stayteen.org/videos/birth-control-101-pregnancy>)

The transcript will be used to make a pre-assessment in which students fill in blanks using a word bank.

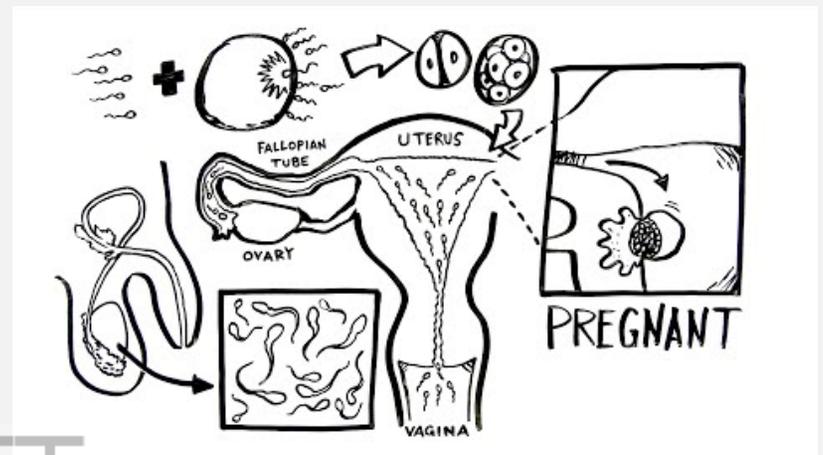
Pregnancy begins with sperm and an egg. Millions of microscopic sperm cells are formed in the testicles and mix with fluids to make semen. Every month, one egg is released from the ovaries and travels through the fallopian tubes. If semen gets into the vagina during sex, the sperm swim up the cervix into the uterus and then into the fallopian tubes.

Sperm can survive six days, and it only takes one cell to get someone pregnant. If the sperm reaches and fertilizes an egg, the egg then divides into more cells as it moves towards the uterus. If these cells attach to the wall of the uterus, the person becomes pregnant.

Not interested in getting pregnant? It's simple! Option 1 – Don't have sex. This is the only 100% certain way to avoid pregnancy. Option 2 – If you are having sex, use birth control. Condoms, the pill, an IUD – whatever – to reduce your chances. There are a ton of really great options, so pick one that is right for your body and lifestyle. Learn more at StayTeen.org.

BIRTH CONTROL 101: PREGNANCY (VIDEO)

Birth Control 101: Pregnancy (1:00) video from StayTeen.org (<https://stayteen.org/videos/birth-control-101-pregnancy>)



<https://youtu.be/yqu7ZsOt4Ek>

CONSEQUENCE #2 – SEXUALLY TRANSMITTED DISEASES (STDs)

- Students will complete a pre-assessment activity based on the transcript from the video *What are STDs?* from Amaze.org and the information from the “STI Discussion” slides.
- Students will use the video *What are STDs?* and the teacher’s presentation of the “STI Discussion” slides to check their answers.
- The teacher will facilitate a short discussion ensuring students ended up with the correct answers and to emphasize that...
 - STDs can be spread by many forms of intimate contact, not just sexual intercourse.
 - STDs may not show symptoms but can still be spread and cause health problems if not addressed.
 - Young people bear a greater burden of new STD cases each year.

WHAT ARE STDs? (VIDEO TRANSCRIPT)

From Amaze.org (2:17)

More information for youth, parents and educators at <https://amaze.org/video/what-are-stds-factcheck/>

Video transcript will be used to create a pre-assessment.

Sexually transmitted diseases (or STDs) are diseases, infections or illnesses that can be spread from a person with an STD to another through sexual contact. That includes genital-to-genital contact, which is contact with penises, scrotums, vulvas or vaginas, to any kind of sex – oral, anal or vaginal sex.

Some STDs are fairly common, so there's nothing to be embarrassed about if you ever get one. Some STDs do not cause any symptoms, so many people who have an STD don't know it and might spread it. For those who do have symptoms, they may experience soreness or swelling around the genitals; bumps sores or rashes on the genitals; itching, burning or pain while urinating; and girls may get a vaginal discharge that is different from normal.

If you have any of these symptoms, or if you've had unprotected sex, it's important to get tested for STDs. STD tests differ. Some are blood tests, some test urine, and still others use a swab of saliva or a discharge. Even if you use protection, it's a good idea to get tested for STDs at least once a year. You can get an STD test from your healthcare provider or at a family planning or STD clinic.

Some STDs can be cured, while others cannot. But, their symptoms can be managed with medication. Some STDs, if left untreated, can cause serious health problems later in life. So remember, once a person becomes sexually active, it is important to use condoms and other latex barriers and to get tested for STDs regularly.

WHAT ARE STDS? (VIDEO)

From Amaze.org (2:17)

More information for youth, parents and educators at <https://amaze.org/video/what-are-stds-factcheck/>



<https://youtu.be/7Sbgg8icODY>

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STI DISCUSSION

DEFINITION, EXAMPLES, TRANSMISSION

From SFUSD Be Real. Be Ready. Lesson 18 – Sexually Transmitted Infections (STIs).

[Lesson Plan](#) (p. 3)

[Presentation*](#) (slides 3 – 6)

*The NSES refer to “sexually transmitted diseases” (STDs) instead of “...infections” (STIs). If this resource is approved for use, STI will be replaced with STD to better align with the standards.

What are some examples of STIs?

VIRUS	BACTERIA	PARASITE	Can be Sexually Associated
HIV	Chlamydia	Pubic Lice	UTI*
Herpes	Gonorrhea	Scabies	BV
Hepatitis	Syphilis	Trich	Yeast Infection*
HPV			

How are STIs spread?

VIRUS	BACTERIA	PARASITE
HIV	Chlamydia	Pubic Lice
Herpes	Gonorrhea	Scabies
Hepatitis	Syphilis	Trich

Skin to Skin?

How are STIs spread?

VIRUS	BACTERIA	PARASITE
HIV	Chlamydia	Pubic Lice
Herpes	Gonorrhea	Scabies
Hepatitis	Syphilis	Trich
HPV		

Fluid to Fluid?

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STD STATISTICS

From the "Adolescents and Young Adults" webpage at the Centers for Disease Control and Prevention's *Sexually Transmitted Diseases* website.

<https://www.cdc.gov/std/products/youth-sti-infographic.pdf>

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SEXUALLY TRANSMITTED INFECTIONS AMONG YOUNG AMERICANS

Youth bear disproportionate share of STIs

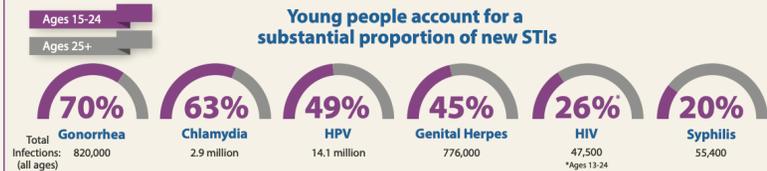
Americans ages 15-24 make up just **27%** of the sexually active population
But account for **50%** of the **20M** new STIs in the U.S. each year



Consequences are particularly severe for young women



Young people account for a substantial proportion of new STIs



Many do not know they're infected because STIs often have no symptoms



Data are cases among youth ages 15-24

Unique factors place youth at risk

- Insufficient Screening**: Many young women don't receive the chlamydia screening CDC recommends
- Confidentiality Concerns**: Many are reluctant to disclose risk behaviors to doctors
- Biology**: Young women's bodies are biologically more susceptible to STIs
- Lack of Access to Healthcare**: Youth often lack insurance or transportation needed to access prevention services
- Multiple Sex Partners**: Many young people have multiple partners, which increases STI risk

Young people can protect themselves

- GET TESTED**
- REDUCE RISK BEHAVIORS**
- GET VACCINATED AGAINST HPV**

References

- CDC. National Survey of Family Growth, 2006-2010 dataset. Available at http://www.cdc.gov/nchs/nfsg/nfsg_2006_2010_puf.htm
- CDC. Estimated HIV incidence among adults and adolescents in the United States, 2007-2010. HIV Surveillance Supplemental Report 2012;17No. 4. <http://www.cdc.gov/hiv/topics/surveillance/resources/reports/reports/supplemental>. Published December 2012.
- CDC. Sexually Transmitted Disease Surveillance 2011. Atlanta: U.S. Department of Health and Human Services; 2012.
- Satterwhite CL, et al. Sexually transmitted infections among U.S. women and men: Prevalence and incidence estimates, 2008. Sex Transm Dis 2013; 40(3): pp. 187-193.
- Tao G, et al. Self-reported chlamydia testing rates of sexually active women aged 15-25 years in the United States, 2006-2008. Sex Transm Dis 2012; 90(8): pp. 605-607.



STI DISCUSSION POTENTIAL IMPACTS

From SFUSD Be Real. Be Ready. Lesson 18 – Sexually Transmitted Infections (STIs).

[Lesson Plan](#) (p. 3)

[Presentation](#)* (slides 7 & 8)

*The NSES refer to “sexually transmitted diseases” (STDs) instead of “...infections” (STIs). If this resource is approved for use, STI will be replaced with STD to better align with the standards.

What are some symptoms (signs) of STIs?

- Burning while urinating (peeing)
- Itching
- Redness
- Bleeding
- Sores/bumps
- Pain or discomfort
- Abnormal discharge
- Fever

What are some symptoms (signs) of STIs?

- Burning while urinating (peeing)
- Itching
- Redness
- Bleeding
- Sores/bumps
- Pain or discomfort
- Abnormal discharge from penis
- Fever or flu-like symptoms

The most common symptom that happens when a person gets an STI is no symptom.

What could happen if someone had an STI, but didn't know it?

- Can unknowingly pass it to someone else.
- Could be causing harm/problems internally – even though there are no external symptoms – or more serious medical concerns if left untreated.
- Having one STI puts people at higher risk for contracting (getting) other STIs if they come in contact with them.
- Could cause fertility issues (make it more difficult to start a pregnancy) in the future.

POTENTIAL IMPACTS OF STDs, INCLUDING HIV

- Students will complete a pre-assessment activity based on the transcript from the video *What is HIV?* from Amaze.org and the information from the “HIV Statistics” infographic from the CDC.
- Students will use the video *What is HIV?* and the teacher’s presentation of the “HIV Statistics” infographic to check their answers.
- The teacher will facilitate a short discussion ensuring students ended up with the correct answers and to emphasize that...
 - HIV is transmitted through bodily fluids, including through sexual intercourse and sharing needles.
 - HIV impacts your immune system and can lead to a disease called AIDS.
 - HIV cannot currently be cured, but it can be managed with proper treatment.

WHAT IS HIV? (VIDEO TRANSCRIPT)

What is HIV? Video (3:29) from Amaze.org

More information for youth, parents and educators at <https://amaze.org/video/what-is-hiv/>.

Video transcript will be used to make a pre-assessment.

HIV stands for Human Immunodeficiency Virus. It is the virus that can lead to the development of the disease, AIDS. HIV attacks the body's immune system. Untreated, HIV reduces the number of T cells in the body.

T cells are what help your body fight disease, and HIV can destroy so many of them that the body become vulnerable. Infections and other kinds of illnesses can take advantage of a very weak immune system.

True or False? First statement: You can tell by looking at someone whether they have HIV. Answer: False. The only way to know if a person has HIV is to get an HIV test. Second statement: You can get HIV through casual contact for being near someone with HIV. Answer: False. HIV can only be spread through bodily fluids. It can be transmitted through sex, by sharing a drug needle, or being breastfed by someone who has HIV. If a pregnant woman is living with HIV and doesn't get the proper treatment before giving birth, her baby could be born with HIV. You cannot get HIV from sharing a glass, hugging, or sharing a bathroom with someone who has HIV.

Last statement: This produce can prevent a person from getting HIV: Condoms, Birth Control Pills, a medicine called PrEP. Answer: When you have sex, condoms can help provide protection. And for people at high risk for HIV, a doctor can now prescribe a medication called PrEP that can be taken to lower their risk. Remember, once you begin to have sex, it's important that both you and your partner get tested for sexually transmitted diseases and HIV on a regular basis.

WHAT IS HIV? (VIDEO)

What is HIV? Video (3:29) from Amaze.org

More information for youth, parents and educators at <https://amaze.org/video/what-is-hiv/>.



https://youtu.be/YxfOu_aTzH8

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HIV IMPACT

From the "[About HIV/AIDS](#)" webpage at the Centers for Disease Control and Prevention's *HIV Basics* website.

No effective cure currently exists, but with proper medical care, HIV can be controlled. The medicine used to treat HIV is called antiretroviral therapy or ART. If people with HIV take ART as prescribed, their viral load (amount of HIV in their blood) can become undetectable. If it stays undetectable, they can live long, healthy lives and have effectively no risk of transmitting HIV to an HIV-negative partner through sex. Before the introduction of ART in the mid-1990s, people with HIV could progress to AIDS in just a few years. Today, someone diagnosed with HIV and treated before the disease is far advanced can live nearly as long as someone who does not have HIV.

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HIV STATISTICS

(If time allows)

From the "[HIV and Youth](#)" webpage at the Centers for Disease Control and Prevention's HIV website.

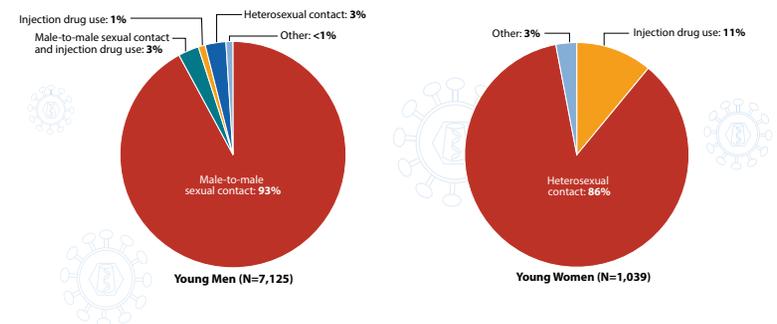
<https://www.cdc.gov/hiv/pdf/group/age/youth/cdc-hiv-youth.pdf>

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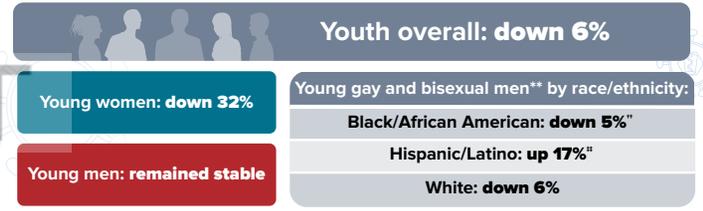
HIV and Youth

OF THE 38,739 NEW HIV DIAGNOSES IN THE US AND DEPENDENT AREAS* IN 2017, **8,164 (21%) WERE AMONG YOUTH AGED 13 TO 24.**[†]

New HIV Diagnoses Among Youth by Transmission Category and Sex in the US and Dependent Areas, 2017



From 2010 to 2016, HIV diagnoses decreased 6% among youth overall.[‡] But trends varied for different groups of youth.



* American Samoa, Guam, the Northern Mariana Islands, Puerto Rico, the Republic of Palau, and the US Virgin Islands.
[†] Unless otherwise noted, persons aged 13 to 24 are referred to as youth or young in this fact sheet.
[‡] In 50 states and District of Columbia.
[§] Includes infections attributed to male-to-male sexual contact and injection drug use (men who reported both risk factors).
[¶] Black refers to people having origins in any of the black racial groups of Africa, including immigrants from the Caribbean, and South and Latin America.
^{¶¶} African American is a term often used for Americans of African descent with ancestry in North America. Individuals may self-identify as either, both, or choose another identity altogether.
^{¶¶¶} Hispanics/Latinos can be of any race.



ACCESSING ACCURATE & CREDIBLE SOURCES OF INFORMATION

The teacher will provide students time to browse the websites provided and then facilitate a short discussion about why these sites were chosen.

- Centers for Disease Control and Prevention “CDC Fact Sheet: Information for Teens and Young Adults: Staying Healthy and Preventing STDs”
<https://www.cdc.gov/std/life-stages-populations/stdfact-teens.htm>
- American Sexual Health Association *STDs / STIs*
<http://www.iwannaknow.org/teens/sti.html>
- City of Austin Public Health Department *Sexual Health Clinic*,
<http://www.austintexas.gov/sexualhealthclinic>

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3-2-1 REFLECTION

- Individually, students will complete a reflection on the lesson using a 3-2-1 format.
 - Three (3) facts I learned today...
 - Two (2) things I think are important to share with others...
 - One (1) question I still have...

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SOURCES (DRAFT BIBLIOGRAPHY)

- Florida Department of Education College and Career Planning Educator's Toolkit – [Module D: Goal Setting & Decision-Making](#)
- *Birth Control 101: Pregnancy* (1:00) video from StayTeen.org (<https://stayteen.org/videos/birth-control-101-pregnancy>)
- <https://youtu.be/7Sbgg8icODY>
- SFUSD Be Real. Be Ready. Lesson 18 – Sexually Transmitted Infections (STIs).
 - [Lesson Plan](#)
 - [Presentation](#)
- <https://www.cdc.gov/std/products/youth-sti-infographic.pdf>
- https://youtu.be/YxfOu_aTzH8
- [About HIV/AIDS](#)
- <https://www.cdc.gov/hiv/pdf/group/age/youth/cdc-hiv-youth.pdf>

Module D: Lesson Plan 12: Goal Setting and Decision-Making

Topic: Informed Decision-Making

Standard(s): Students will:

- 3.0 Identify and demonstrate processes for making short and long term goals.
- 4.0 Demonstrate employability skills such as working in a group, problem-solving and organizational skills, and the importance of entrepreneurship.

Length: Two class periods

Objective: The student will recognize the importance of seeking information before making a decision.

Materials:

- Red, white and blue poker chips
- Clear plastic bag
- Chart paper and markers
- Decision-Making Scenarios Sheet
- Handout – *Decision-Making Points to Remember*

Description of Activity:

A. Poker Chip Activity

- Show student a clear plastic bag filled with red, blue, and white poker chips.
- Ask for two volunteers to participate in the demonstration.
- Explain the rules:
 - Participant may use only one hand. (Bag will be held open for student)
 - In 60 seconds the student will take out as many poker chips as possible.
 - After the first participant completes his/her turn, change the information slightly.
 - “I forgot to mention that the white chips are worth \$10; the red \$50; and blue \$100.”
- After participant number two completes his/her turn, sort and add chips. Record on board.
- Have students multiply their total in dollars.
- Participant number two will have the largest amount in dollars, however not necessarily the largest number of chips. Discuss how a little knowledge about a decision can alter how one approaches a situation and how it can improve the outcome. Relate to career goals.

Lesson 18: STIs

DO NOW ACTIVITY**5 minutes****Materials**

- Every student needs a notebook, journal, or paper and a pen
- PowerPoint slides #1 – 2, or flipchart or whiteboard and markers

Activity

Project the PowerPoint or write on board and have students complete the following question.

What are some ways that STIs can be passed from one person to another?

If there is time, ask a few students to share their responses.

STI DISCUSSION**10 minutes****Materials**

- PowerPoint slides #3 – 8
- PowerPoint slide notes

Activity

Let students know that you will be reviewing information about STIs. The PowerPoint slides contain notes to assist you in presenting this material. Please refer to the notes in the slides for more information about the topics presented.

Suggested Script:

Today we will be learning about STIs. I want to remind you to be respectful as we talk about STIs today. Sometimes people think STIs don't affect teens but actually 2014 CDC data reports 1 in 4 sexually active females has an STI and 50% of people will get an STI by the time they are 25 years old. Today we will talk about STIs, what they are, how they are transmitted, and how they can be prevented.

RISK SPECTRUM**10 minutes****Materials**

- Activity Cards
- High Risk, Low Risk, & No Risk signs
- Tape
- Teacher Key: Risk Spectrum

Activity

In this activity students will learn about which activities have a higher risk for STI transmission, which activities have a lower risk for STI transmission, and which activities have no risk for STI transmission. Put the three signs on the board/wall under the order of high, low, and no risk to

What does STI stand for?

Sexually

Transmitted

Infection

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What are some examples of STIs?

VIRUS	BACTERIA	PARASITE	Can be Sexually Associated
HIV	Chlamydia	Pubic Lice	UTI*
Herpes	Gonorrhea	Scabies	BV
Hepatitis	Syphilis	Trich	Yeast Infection*
HPV			Scabies, Pubic Lice

What are some examples of STIs?

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HPV		Curable!	Scabies, Pubic Lice

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Hepatitis	Syphilis	Trich	Yeast Infection*
HPV			Scabies, Pubic Lice

Vaccine!

Curable!

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How are STIs spread?

VIRUS	BACTERIA	PARASITE
HIV	Chlamydia	Pubic Lice
Herpes	Gonorrhoea	Scabies
Hepatitis	Syphilis	Trich
HPV		

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How are STIs spread?

VIRUS	BACTERIA	PARASITE
HIV	Chlamydia	Pubic Lice
Herpes	Gonorrhoea	Scabies
Hepatitis	Syphilis	Trich
HPV		

Skin to Skin?

How are STIs spread?

VIRUS	BACTERIA	PARASITE
HIV	Chlamydia	Pubic Lice
Herpes	Gonorrhoea	Scabies
Hepatitis	Syphilis	Trich
HPV		

Skin to Skin?

How are STIs spread?

VIRUS	BACTERIA	PARASITE
HIV	Chlamydia	Pubic Lice
Herpes	Gonorrhoea	Scabies
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HPV		

DRAFT

How are STIs spread?

VIRUS	BACTERIA	PARASITE
HIV	Chlamydia	Pubic Lice
Herpes	Gonorrhoea	Scabies
Hepatitis	Syphilis	Trich
HPV		

Fluid
to
Fluid?



How are STIs spread?

VIRUS	BACTERIA	PARASITE
HIV	Chlamydia	Pubic Lice
Herpes	Gonorrhoea	Scabies
Hepatitis	Syphilis	Trich
HPV		

Fluid
to
Fluid?

What are some symptoms (signs) of STIs?

- Burning while urinating (peeing)
- Itching
- Redness
- Bleeding
- Sores/bumps
- Pain or discomfort
- Abnormal discharge from penis or vagina
- Fever or flu-like symptoms

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The most common symptom that happens when a person gets an STI is no symptom.

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What could happen if someone had an STI, but didn't know it?

- Can unknowingly pass it to someone else.
- Could be causing harm/problems internally – even though there are no external symptoms – or more serious medical concerns if left untreated.
- Having one STI puts people at higher risk for contracting (getting) other STIs if they come in contact with them.
- Could cause fertility issues (make it more difficult to start a pregnancy) in the future.

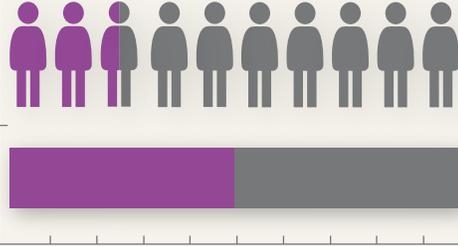
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SEXUALLY TRANSMITTED INFECTIONS AMONG YOUNG AMERICANS

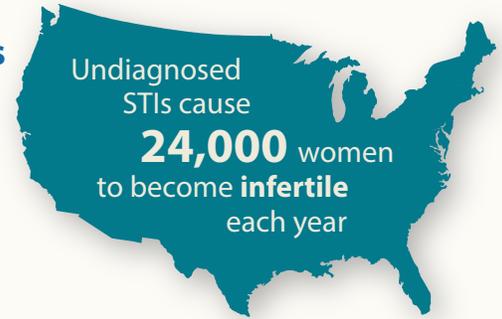
Youth bear disproportionate share of STIs

Americans ages 15-24 make up just **27%** of the sexually active population

But account for **50%** of the **20M** new **STIs** in the U.S. each year



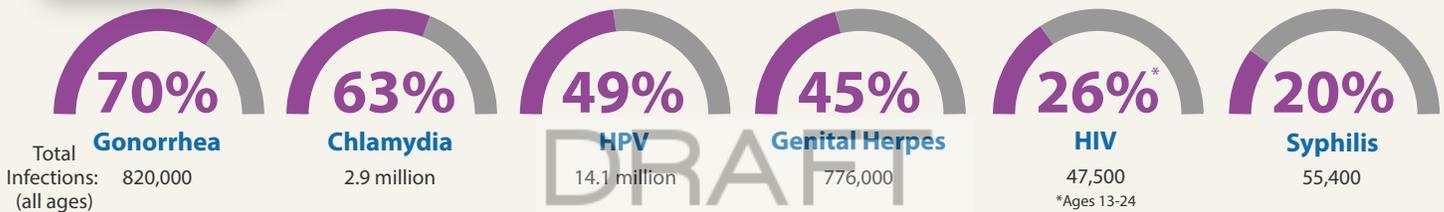
Consequences are particularly severe for young women



Ages 15-24

Ages 25+

Young people account for a substantial proportion of new STIs



Many do not know they're infected because STIs often have no symptoms

Data are cases among youth ages 15-24



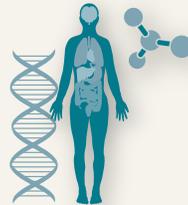
Unique factors place youth at risk



Insufficient Screening
Many young women don't receive the chlamydia screening CDC recommends



Confidentiality Concerns
Many are reluctant to disclose risk behaviors to doctors



Biology
Young women's bodies are biologically more susceptible to STIs



Lack of Access to Healthcare
Youth often lack insurance or transportation needed to access prevention services



Multiple Sex Partners
Many young people have multiple partners, which increases STI risk

Young people can protect themselves

GET TESTED

REDUCE RISK BEHAVIORS

GET VACCINATED AGAINST HPV

References

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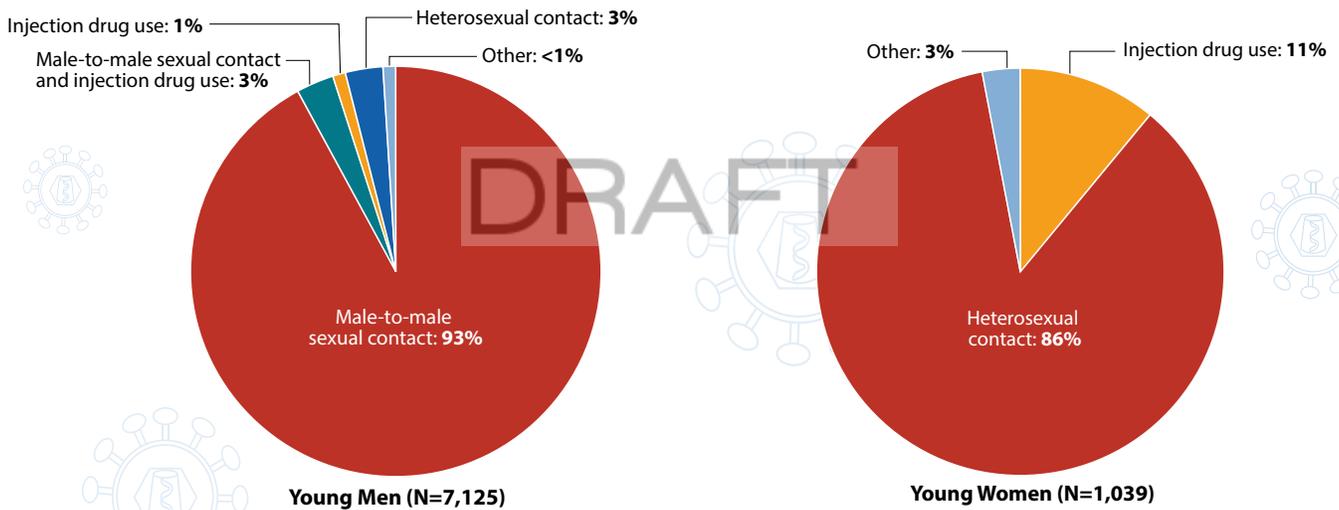


U.S. Department of Health and Human Services
Centers for Disease Control and Prevention

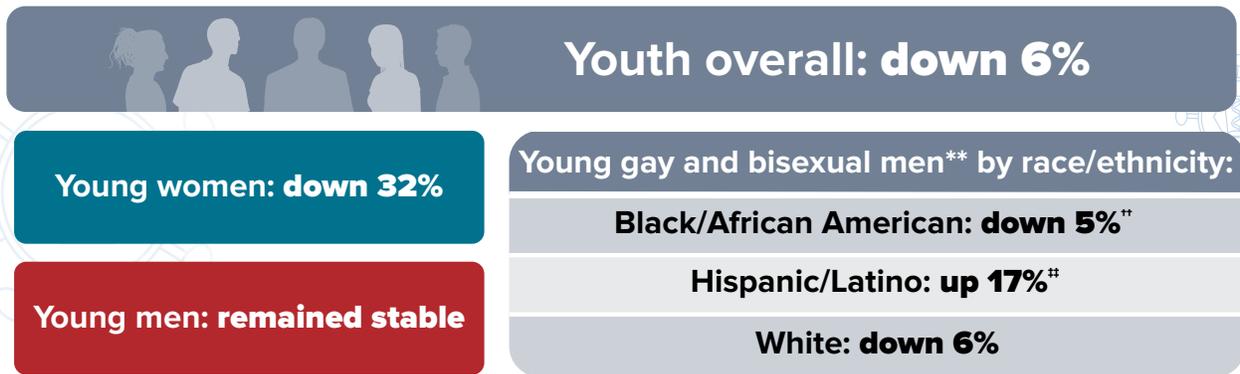
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^{††} Black refers to people having origins in any of the black racial groups of Africa, including immigrants from the Caribbean, and South and Latin America. African American is a term often used for Americans of African descent with ancestry in North America. Individuals may self-identify as either, both, or choose another identity altogether.
^{‡‡} Hispanics/Latinos can be of any race.



Around 1.1 million people are living with HIV in the US.[‡] People with HIV need to know their HIV status so they can take medicine to treat HIV. Taking HIV medicine as prescribed can make the level of virus in their body very low (called viral suppression) or even undetectable.



A person with HIV who gets and stays virally suppressed or undetectable can stay healthy and has effectively no risk of transmitting HIV to HIV-negative partners through sex.

What places some young people at higher risk?

- Many students are not getting the sexual health education they need, and sex education is not starting early enough.
- Certain health-related behaviors put youth at higher risk for HIV, including low HIV testing rates, substance use, low rates of condom use, and multiple sex partners. Research has also shown that young gay and bisexual men who have sex with older partners are at a greater risk for HIV infection.
- Youth aged 20 to 24, especially youth of color, have some of the highest STD rates. Having another STD can significantly increase a person's chance of getting or transmitting HIV.
- Young people may be uninsured or on their parent's insurance making it difficult to access or use medicines to prevent or treat HIV due to cost, perceived stigma, and privacy concerns.
- Stigma, fear, homophobia, isolation, and lack of support may also place many youth at higher risk for HIV.

How is CDC making a difference?

- Collecting and analyzing data and monitoring HIV trends among youth.
- Conducting prevention research and providing guidance to those working in HIV prevention.
- Supporting health departments, education agencies, and community organizations by funding HIV prevention work for youth and providing technical assistance.
- Promoting testing, prevention, and treatment through campaigns like *Let's Stop HIV Together* (formerly *Act Against AIDS*).

Visit www.cdc.gov/hiv and www.cdc.gov/healthyouth for more information about CDC's HIV prevention activities among youth.

Reduce Your Risk



Not having sex



Using condoms



Not sharing syringes



Taking medicine to prevent or treat HIV



HIV IS A VIRUS THAT ATTACKS THE BODY'S IMMUNE SYSTEM.

It is usually spread by anal or vaginal sex or sharing syringes with a person who has HIV. The only way to know you have HIV is to be tested. Everyone aged 13-64 should be tested at least once, and people at high risk should be tested at least once a year. Ask your doctor, or visit gettested.cdc.gov to find a testing site. Without treatment, HIV can make a person very sick or may even cause death. If you have HIV, start treatment as soon as possible to stay healthy and help protect your partners.

AT THE END OF 2016,
AN ESTIMATED
50,900
YOUTH
HAD HIV.[‡]

ONLY 56%
KNEW THEY HAD THE VIRUS.

FOR EVERY 100 YOUTH WITH HIV IN 2015:[‡]



For More Information

Call 1-800-CDC-INFO (232-4636)
Visit www.cdc.gov/hiv

GRADE 8 | LESSON 7
STRATEGIES TO AVOID & REDUCE THE
RISKS OF SEXUAL ACTIVITY

DRAFT

LESSON SUMMARY

LESSON 7: STRATEGIES TO AVOID & REDUCE THE RISKS OF SEXUAL ACTIVITY

- In this lesson, students will learn about strategies that can help them avoid and reduce the risks associated with sexual activity. They will learn that abstinence is the only way to avoid pregnancy and the best way to reduce their risk of STDs. In addition to abstinence, students will study the health benefits, risks and effectiveness rates of various methods of contraception, including condoms, and analyze the impact of alcohol and other drugs on safer sexual decision-making and sexual behaviors.

LEARNING OBJECTIVES

CORE CONCEPTS

- Define sexual abstinence as it relates to pregnancy prevention. (NSES PR.8.CC.2)
- Explain the health benefits, risks and effectiveness rates of various methods of contraception, including abstinence and condoms. (NSES PR.8.CC.3)
- Compare and contrast behaviors, including abstinence, to determine the potential risk of STD/HIV transmission from each. (NSES SH.8.CC.2)

ACCESSING INFORMATION

- Identify medically- accurate resources about pregnancy prevention and reproductive health care. (NSES PR.8.AI.1)
- Identify medically- accurate information about emergency contraception. (NSES PR.8.AI.2)

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LEARNING OBJECTIVES

SELF MANAGEMENT

- Describe the steps to using a condom correctly. PR.8.SM.1 (SH.8.SM.1)

ANALYZING INFLUENCES

- Examine how alcohol and other substances, ~~friends, family, media, society and culture~~* influence decisions about engaging in sexual behaviors. (NSES PR.8.INF.1)
- Analyze the impact of alcohol and other drugs on safer sexual decision- making and sexual behaviors. (NSES SH.8.INF.1)

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* Friends, family, media, society and culture are addressed in Lesson 5

WHAT DOES ABSTINENCE REALLY MEAN?

- Teacher will review key points from Lesson 6.
- Teacher will prompt students to show their understanding by responding to these prompts:
 - What behavior can result pregnancy? (be specific)
 - What behaviors can result in STD transmission? (be specific)
- Teacher will emphasize that the term “abstinence” can mean different things to different people, but there are very specific actions that must be avoided to prevent pregnancy and STDs.

WHAT DOES ABSTINENCE REALLY MEAN?

CONSEQUENCE

- Pregnancy
- STDs

ABSTINENCE MEANS...

- No penis-in-vagina sex
- No exchange of bodily fluids*
- No skin-to-skin contact involving genitals, anus and/or mouth

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BEHAVIORS THAT IMPACT YOUR RISK OF STDs

- Students will watch the Amaze.com video *STD Prevention Beyond Condoms* and take note of the behaviors that impact the risk of STDs. These can be actions that will increase or decrease the risk of contracting or spreading a sexually transmitted disease.
- The video emphasizes that the only way to remove the risk of STDs is complete abstinence from sex and sexual behaviors, and that there are lots of reasons why someone would choose abstinence at this age. Some of the other risk factors in the video include the number of partners, the strength of communication with those partners, STD testing and the use of contraception.
- After the video, the teacher will prompt the students to share the behaviors they listed and discuss the relative impact each behavior has on the transmission of STDs and then summarize takeaways using the images from the CDC STD “Social Media Toolkit.”

STD PREVENTION BEYOND CONDOMS

*STD Prevention Beyond Condoms from
Amaze.org*



DRAFT

<https://youtu.be/4IcFmDTABJY>

IMAGES FROM CDC STD SOCIAL MEDIA TOOLKIT

From the "[Social Media Toolkit](#)" for the Centers for Disease Control and Prevention's *Sexually Transmitted Disease Surveillance 2017* website

LEFT UNTREATED, STDS CAN CAUSE:



INCREASED RISK OF GIVING
OR GETTING HIV



LONG-TERM
PELVIC/ABDOMINAL PAIN



INABILITY TO GET PREGNANT OR
PREGNANCY COMPLICATIONS

HELP INTERRUPT THE STEADY CLIMB IN STDS WITH THESE THREE STEPS:

TALK

Talk openly about STDs with your partners & healthcare providers.

TEST

Get tested. It's the only way to know if you have an STD.

TREAT

If you have an STD, work with your provider to get the right medicine.



PROTECTION DEPENDS ON PROPER USAGE

In small groups, students will put these steps in order.

1. Talk with your partner about the decision to have sex and the different protection options.
2. Check the expiration date on the condom package and look for any holes, tears or signs of damage. If the condom is expired or damaged, get a new condom.
3. Carefully open the package and remove the condom.
4. Wait for the penis to become erect. Then, place the condom on the head of the penis and hold the tip of the condom to squeeze out any air.
5. Use lubricant. The most common way a condom can break is by the friction caused during sex.
6. Keep the condom on the penis until you're done having sex, whether or not ejaculation occurs.
7. Hold onto the rim of the condom at the base of the penis. Then, withdraw the penis.
8. Carefully remove the condom and throw it in the garbage.

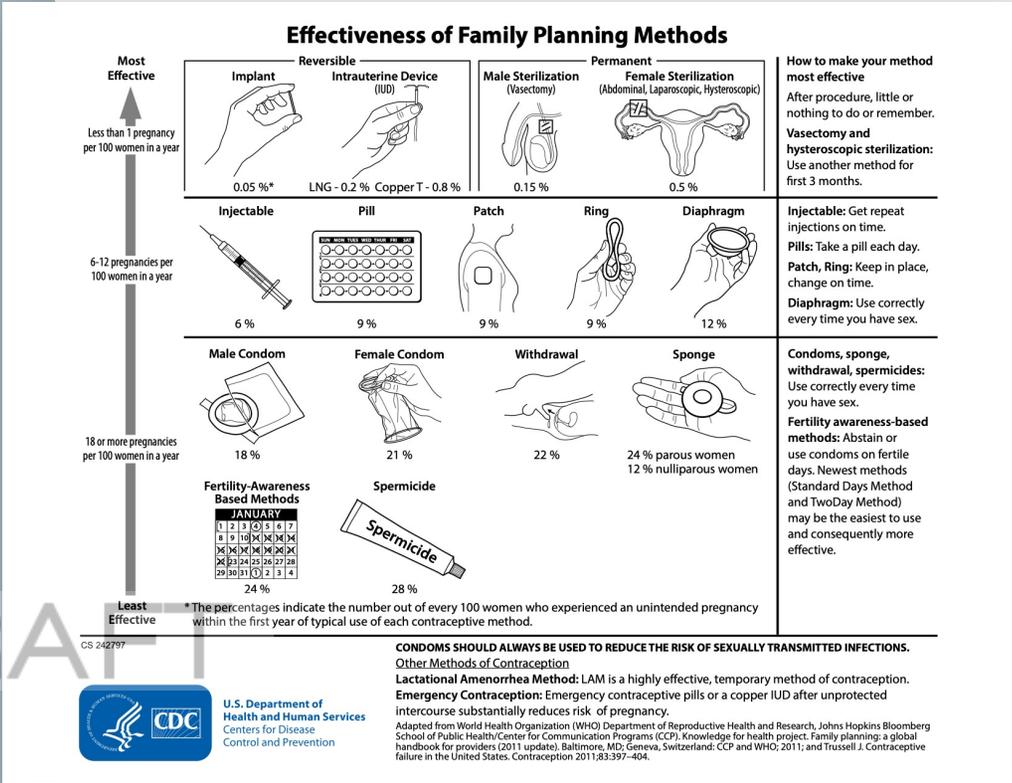
OPTIONS AND EFFECTIVENESS

- In small groups, students will analyze the CDC “Effectiveness of Family Planning Methods” handout using prompts to help them understand the information it is providing.
- The teacher will facilitate a short discussion after the activity to ensure that students’ responses were accurate and to make the following points:
 - These rates are based on “typical use.” Failure rates would likely be even higher for new users.
 - Condoms should always be used to reduce the risk of sexually transmitted diseases.

EFFECTIVENESS OF FAMILY PLANNING METHODS

From the Centers for Disease Control and Prevention

https://www.cdc.gov/reproductivehealth/contraception/unintendedpregnancy/pdf/Contraceptive_methods_508.pdf



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U.S. Department of Health and Human Services
Centers for Disease Control and Prevention

THE INFLUENCE OF ALCOHOL AND OTHER DRUGS

- Teacher will use the “Brain Impairment Graphic” to facilitate a conversation about how the use of alcohol and drugs might impact a person’s likelihood of pregnancy and STDs.
- If time allows, teacher can show the video *The Teen Brain: Under Construction* before the discussion to emphasize how the teen brain is already predisposed to risk-taking.

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THE TEEN BRAIN: UNDER CONSTRUCTION

(If time allows)

From Seeker.com

<https://www.seeker.com/the-teen-brain-under-construction-1792414389.html>



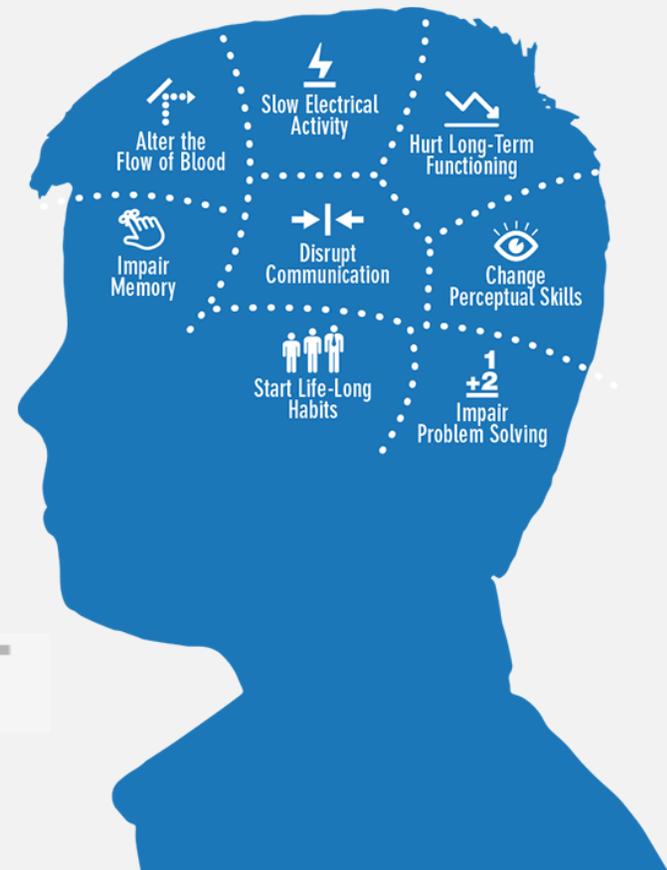
<https://youtu.be/f9Ya0mHslgM>

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BRAIN IMPAIRMENT GRAPHIC

From the Colorado Department of Human Services *Speak Now Colorado* webpage
“[Alcohol, Drugs, and Brain Development](#)”

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PAPER TWITTER

- Students will create a “did you know” Twitter-type message to summarize one piece of learning from today’s lesson. They will include a thought-provoking fact and choose a ”more information” resource to link to in their tweet.

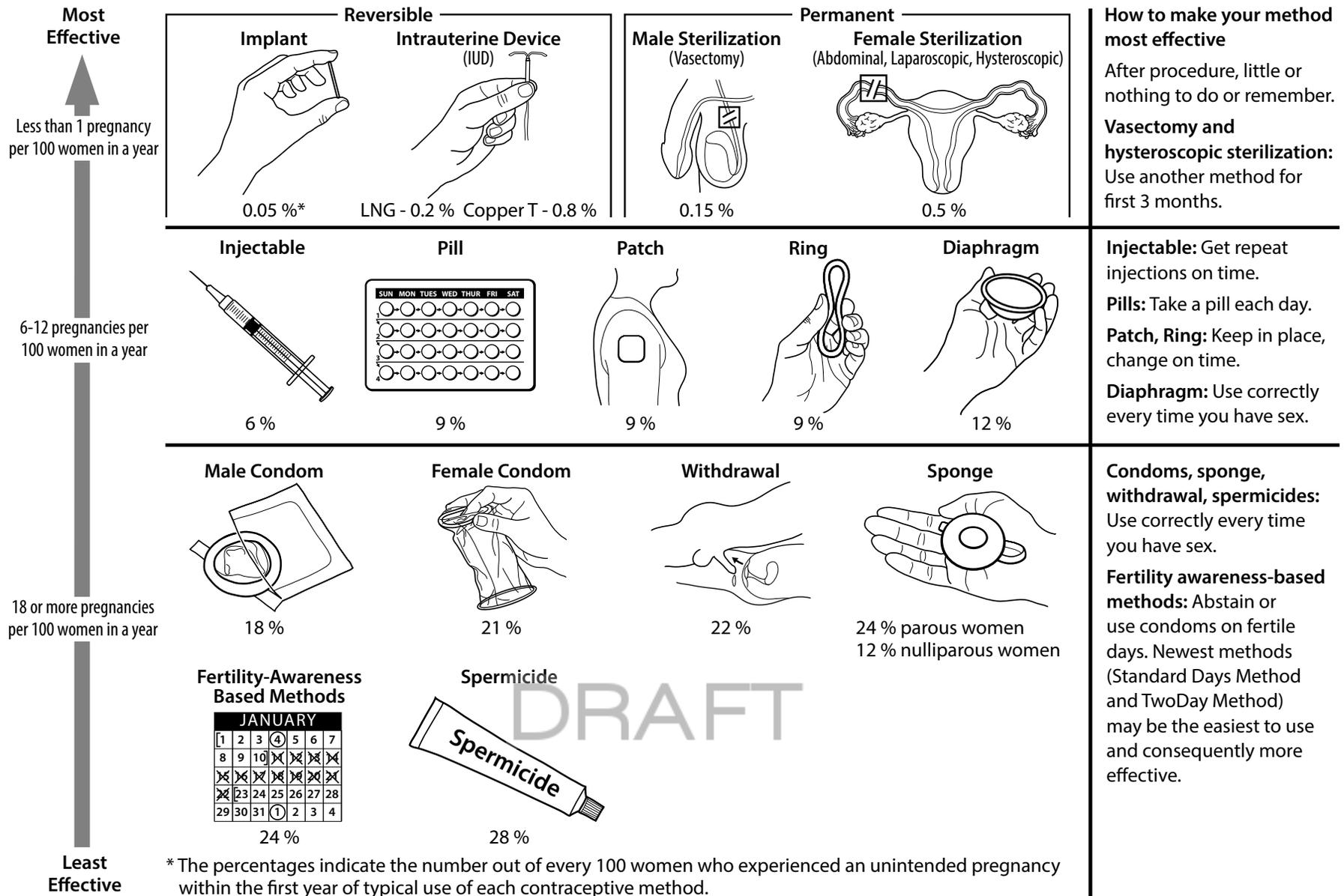
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RESOURCES (DRAFT BIBLIOGRAPHY)

- <https://youtu.be/4IcFmDTABJY>
- [Social Media Toolkit](#)
- https://www.cdc.gov/reproductivehealth/contraception/unintendedpregnancy/pdf/Contraceptive_methods_508.pdf
- [Alcohol, Drugs, and Brain Development](#)

DRAFT

Effectiveness of Family Planning Methods



How to make your method most effective

After procedure, little or nothing to do or remember.

Vasectomy and hysteroscopic sterilization: Use another method for first 3 months.

Injectable: Get repeat injections on time.

Pills: Take a pill each day.

Patch, Ring: Keep in place, change on time.

Diaphragm: Use correctly every time you have sex.

Condoms, sponge, withdrawal, spermicides: Use correctly every time you have sex.

Fertility awareness-based methods: Abstain or use condoms on fertile days. Newest methods (Standard Days Method and TwoDay Method) may be the easiest to use and consequently more effective.

CS 242797

CONDOMS SHOULD ALWAYS BE USED TO REDUCE THE RISK OF SEXUALLY TRANSMITTED INFECTIONS.

Other Methods of Contraception

Lactational Amenorrhea Method: LAM is a highly effective, temporary method of contraception.

Emergency Contraception: Emergency contraceptive pills or a copper IUD after unprotected intercourse substantially reduces risk of pregnancy.

Adapted from World Health Organization (WHO) Department of Reproductive Health and Research, Johns Hopkins Bloomberg School of Public Health/Center for Communication Programs (CCP). Knowledge for health project. Family planning: a global handbook for providers (2011 update). Baltimore, MD; Geneva, Switzerland: CCP and WHO; 2011; and Trussell J. Contraceptive failure in the United States. *Contraception* 2011;83:397-404.



U.S. Department of Health and Human Services
Centers for Disease Control and Prevention

GRADE 8 | LESSONS 8 & 9
SKILLS TO AVOID AND REDUCE THE
RISKS OF SEXUAL ACTIVITY

Last Updated

9/16/19 10:06 AM

LESSON SUMMARY

LESSONS 8 & 9: SKILLS TO AVOID & REDUCE THE RISKS OF SEXUAL ACTIVITY

- In this series of lessons, students will underscore the importance of healthy relationships and intentional decision-making by applying a decision-making model to real-life sexual health decisions. They will practice communicating and negotiating in ways that will allow them to ensure their behaviors align with their values around sexual behaviors, including the use of abstinence and other forms of contraception, and develop a personal plan to eliminate or reduce their risk for STDs.

LEARNING OBJECTIVES

INTERPERSONAL COMMUNICATION

- Demonstrate the use of effective communication skills to support one's decision to abstain from sexual behaviors. (NSES PR.8.IC.1)
- Demonstrate the use of effective communication and negotiation skills about the use of contraception including abstinence and condoms. (NSES PR.8.IC.2)
- Demonstrate the use of effective communication skills to reduce or eliminate risk for STDs, including HIV. (NSES SH.8.IC.1)

DECISION-MAKING

- Apply a decision-making model to various sexual health decisions. (NSES PR.8.DM.1)

LEARNING OBJECTIVES

GOAL-SETTING

- Develop a plan to eliminate or reduce risk for STDs, including HIV. (NSES SH.8.GS.1)

SELF MANAGEMENT

- Describe the steps to using a condom correctly. (NSES SH.8.SM.1)

WE ALL MAKE DECISIONS

- Students will reflect on this prompt and then share their answer with a partner:
 - Think of a big decision you have had to make. What steps did you go through to help you make your decision?

WAYS TO MAKE DECISIONS

- Teacher will preview today's task: develop your own plan to eliminate or reduce your risk for STDs.
- Students will view the *Making Tough Decisions* by Kid President. While they watch, they will take notes on different ways to make decisions.
- After the video, the teacher will solicit responses from students about the ways to make decisions presented in the video.

MAKING TOUGH DECISIONS WITH KID PRESIDENT

Posted by Soul Pancake

More about Kid President here

<http://www.kidpresident.com/whoweare.html>



<https://youtu.be/gdsCUEXLE-Y>

TASK AND PROCESS OVERVIEW

- Teacher will discuss the components of the task and use the “Overview of Decision-Making Worksheet” graphic to show the process that students will be using to develop their plan.
- Teacher will showcase each step of the plan and discuss what timeline students will have to complete their plan. This part will be at teacher discretion, but teacher instructions will provide support for teachers to scaffold the process to ensure student success.

PLAN TO ELIMINATE OR REDUCE YOUR PERSONAL RISK OF STDs

YOUR TASK

- Develop your own plan to eliminate or reduce your risk for STDs

COMPONENTS

Your plan must include the **knowledge** and the **skills** you will need to help ensure that your behavior aligns with your beliefs and values, particularly around...

- Abstinence*
- Contraception

* Students will be reminded that abstinence can happen at different times throughout one's life and for different reasons that may change over time.

OVERVIEW OF DECISION- MAKING WORKSHEET

Part of the *Conversations for Clarity* worksheet created by the Decision Education Foundation and featured on their webpage "[Conversations for Clarity](#)".

A decision is a choice that leads to action



Frame: The decision situation you are working through.



Values: What you want or don't want in the outcome.



Alternatives: Different ways you can address the situation.



Information: What you need to know and what is uncertain.



Reasoning: Identifying the alternative that best fits your values.



Commitment: Following through on your decision.

A good decision makes sense and feels right

For more information go to:
www.decisioneducation.org

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DECISION-MAKING WORKSHEET: STEP 1 – GET STARTED

Part of the *Conversations for Clarity* worksheet created by the Decision Education Foundation and featured on their webpage "[Conversations for Clarity](#)".

Conversations *for* CLARITY

What do I want to achieve:

Why is that challenging?

Step 1

GET STARTED

Starting is easy. Two broad questions launch the conversation:

- What do I want to achieve?
- Why is that challenging?

Capture initial thoughts about the purpose of the decision and what makes it hard. Then use these thoughts as building blocks to better understand the frame and values involved.

DECISION-MAKING WORKSHEET: STEP 2 – DETERMINE

Part of the *Conversations for Clarity* worksheet created by the Decision Education Foundation and featured on their webpage "[Conversations for Clarity](#)".

Conversations for CLARITY

What do I want to achieve:

Why is that challenging?

Frame the Situation (1)

What decisions do I face?

-
-
-

Who else is involved?

-
-
-

Is there a deadline?

-

Values: (2)

What is at stake?

-
-
-

What do I want?

-
-
-

What do I want to avoid?

-
-
-

Identify and label any trade-offs between these values.

DECISION EDUCATION FOUNDATION
Better Decisions. Better Lives.

Step ② DETERMINE

To access the information from the front of the form, open up the pamphlet and fold back. This helps to keep attention on these elements first. Capture further details of what the decision maker wants and doesn't want (values) as well as clarify the decisions and individuals involved (frame).

DECISION-MAKING WORKSHEET: STEP 3 – EXPAND

Part of the *Conversations for Clarity* worksheet created by the Decision Education Foundation and featured on their webpage "[Conversations for Clarity](#)".

Step 3 EXPAND

Once the frame and values have a solid start, folding out reveals the sections for capturing creative alternatives and useful information.

Work between the different elements in a way that supports a natural conversation. Start to brainstorm possible actions based on the alternatives that are already apparent and stretching to unseen solutions. Capture information that exists or is needed and how reliable that information may be.

A tool in the alternatives section prompts exploring and can be filled in with values that might be acting as constraints.

- For example, what would you do if time, or money, or some other consideration would not hold you back?

Alternatives

What options do I see?

What doesn't frustrate me about _____
What else might I do?

How could I approach this creatively?

Information

What do I need to know?

Who should I talk to?

What am I unsure about?

How trustworthy are my sources?

Frame the Situation

What decisions do I face?

Who else is involved?

Is there a deadline?

Values:

What is at stake?

What do I want?

What do I want to avoid?

Alternatives

What options do I see?

What doesn't frustrate me about _____
What else might I do?

How could I approach this creatively?

Information

What do I need to know?

Who should I talk to?

What am I unsure about?

How trustworthy are my sources?

Frame the Situation

What decisions do I face?

Who else is involved?

Is there a deadline?

Values:

What is at stake?

What do I want?

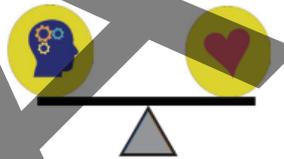
What do I want to avoid?

DECISION-MAKING WORKSHEET: STEP 5 – TEST

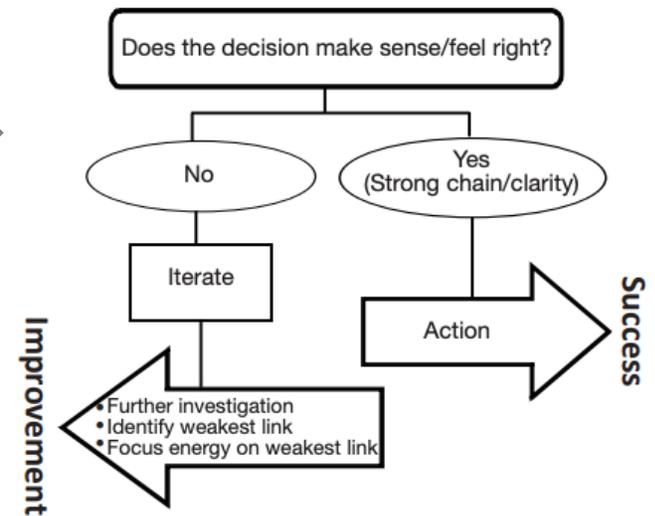
Part of the *Conversations for Clarity* worksheet created by the Decision Education Foundation and featured on their webpage "[Conversations for Clarity](#)".

Step 5 TEST

Test for decision fitness and decision traps.



Test for clarity to move forward based on the strength of the links and the balance of head and heart.



SOURCES (DRAFT BIBLIOGRAPHY)

- <https://youtu.be/gdsCUExLE-Y>
- *Conversations for Clarity* worksheet and instructions created by the Decision Education Foundation and featured on their webpage “[Conversations for Clarity](#)”.

Am I ready to commit?

Your decision is only as strong as the weakest link.
Test the strength of your decision

Rate the Chain:

100% is the point at which additional effort is not worth it.



Focus on improving the weak links.

Yes No Am I fit to decide?

Yes No Am I ready to decide?

Commitments:

I am going to:

Specific Next Steps:

Date:

<input type="checkbox"/>	
<input type="checkbox"/>	
<input type="checkbox"/>	

A decision is a choice that leads to action



Frame: The decision situation you are working through.



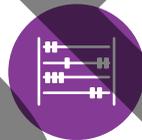
Values: What you want or don't want in the outcome.



Alternatives: Different ways you can address the situation.



Information: What you need to know and what is uncertain.



Reasoning: Identifying the alternative that best fits your values.



Commitment: Following through on your decision.

A good decision makes sense and feels right

For more information go to:
www.decisioneducation.org

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Conversations for CLARITY

What do I want to achieve:

Why is that challenging?

Alternatives



What options do I see?

-
-
-
-
-
-



If I didn't have to worry about _____, what else could I do?

How could I approach this creatively?

-
-
-
-
-
-

Information



What do I need to know?

-
-
-
-
-

Who should I talk to?

-
-
-

What am I unsure about?

-
-
-

How trustworthy are my sources?

-
-
-

Frame the Situation



What decisions do I face?

-
-
-

Who else is involved?

-
-

Is there a deadline?

-

Values:



What is at stake?

-
-

What do I want?

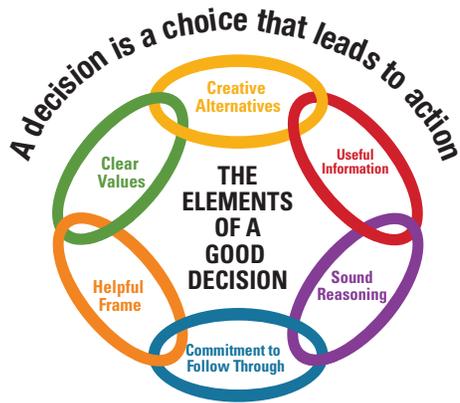
-
-

What do I want to avoid?

-
-



Identify and label any trade-offs between these values.



Frame: The decision situation you are working through.



Values: What you want or don't want in the outcome.



Alternatives: Different ways you can address the situation.



Information: What you need to know and what is uncertain.



Reasoning: Identifying the alternative that best fits your values.



Commitment: Following through on your decisions.

A good decision makes sense and feels right

For more information go to:

www.decisioneducation.org

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Conversations for CLARITY

- Instructional Kit -

A Proven Framework for
Making Better Decisions

- Instructions ●
- Completed Example ●
- 5 Conversations for Clarity ●

Conversations for Clarity provides a structured conversation where responses are captured to make progress toward a decision.



DECISION SITUATION

CLARIFY

ACTION

This guide can help individuals make better decisions. This may include:

- A young person working with an educator
- A team engaging an important issue
- An individual collecting their thoughts before making a decision

INSTRUCTIONS:

Step 1 GET STARTED

Starting is easy. Two broad questions launch the conversation:

- What do I want to achieve?
- Why is that challenging?

Capture initial thoughts about the purpose of the decision and what makes it hard. Then use these thoughts as building blocks to better understand the frame and values involved.



Step 2 DETERMINE

To access the information from the front of the form, open up the pamphlet and fold back. This helps to keep attention on these elements first. Capture further details of what the decision maker wants and doesn't want (values) as well as clarify the decisions and individuals involved (frame).



Step 3 EXPAND

Once the frame and values have a solid start, folding out reveals the sections for capturing creative alternatives and useful information.

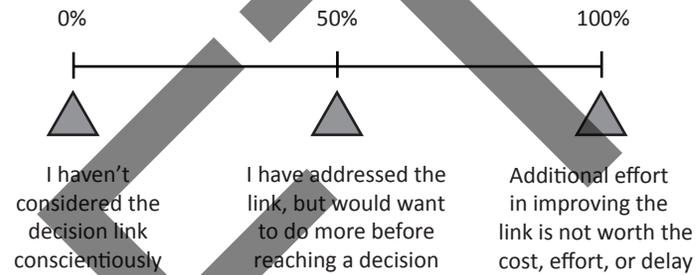
Work between the different elements in a way that supports a natural conversation. Start to brainstorm possible actions based on the alternatives that are already apparent and stretching to unseen solutions. Capture information that exists or is needed and how reliable that information may be.

A tool in the alternatives section prompts exploring and can be filled in with values that might be acting as constraints.

- For example, what would you do if time, or money, or some other consideration would not hold you back?

Step 4 EVALUATE

Once done, fold in the right side to reveal the commitment to follow through. The links in the chain are laid out so that they can be rated, using a scale from 0% - 100%.



Further information regarding each of the elements of the decision chain can be found at:

www.decisioneducation.org/fundamentals

Step 5 TEST

Test for decision fitness and decision traps.



Test for clarity to move forward based on the strength of the links and the balance of head and heart.

Does the decision make sense/feel right?

No

Yes
(Strong chain/clarity)

Iterate

Action

Improvement

Success

- Further investigation
- Identify weakest link
- Focus energy on weakest link

Step 6 PLAN & FOLLOW THROUGH

Capture next steps and follow through.

Don't be surprised if the Conversations for Clarity opens up other choices. Life presents us with a flow of many interconnected decisions.

Share your experiences, comments or suggestions:
www.decisioneducation.org/conversationsforclarity