## Relationships and Sexuality, Reproduction and Birth Control, and Sexually Transmitted Infections (STIs)

# Introduction

The modules in this curriculum contain discussion topics, classroom lessons, computer lab activities, worksheets, and projects when applicable.

Activities are based on the Health Belief Model, a public health theory that predicts why people change their behaviors. You may tailor activities to fit your center’s unique population or add additional activities as you see fit.

# Best Practices

In addition to the educational component, this curriculum contains suggestions to promote healthy relationships and harm reduction throughout your center. Sexuality education programs for adolescents and young adults have been shown to be most effective when certain criteria are met (Kirby, 2010). Below are the 10 distinguishing characteristics of effective programs and an explanation of how this curriculum addresses each. Effective programs:

1. **Focus on reducing one or more sexual behaviors that lead to unintended pregnancy or HIV/STIs.** Throughout the curriculum you will find activities to help students use condoms and other forms of birth control consistently and effectively as well as activities to minimize casual sex.
2. **Are based on theoretical approaches that have been demonstrated to be effective in influencing other health-related risk-taking behavior.** This curriculum is based on the proven Health Belief Model.
3. **Give a clear message about sexual activity and condom/birth control use and continually reinforce this message.** This curriculum stresses 1) the importance of using condoms at every sexual encounter, 2) the importance of communicating with a sexual partner about safe sex, 3) the importance of limiting numbers of sexual partners, and 4) the need to reach educational, career, and personal goals before starting a family.
4. **Provide basic, accurate information about the risks of teen sexual activity and the methods of avoiding intercourse or using protection against pregnancy and STIs.** This curriculum provides accurate efficacy and failure rates of birth control methods, communication and condom negotiation skills, and practice in condom application.
5. **Include activities that address social pressures that influence sexual behavior.** The first module of this curriculum includes discussions on sexual decision making, norms, and pressures.
6. **Provide modeling and practice of communication, negotiation, and refusal skills.** The Communicating with Your Partner Discussion and Worksheet (Module 1) and Condom Negotiation activities (Module 3) provide these skills.
7. **Employ a variety of teaching methods designed to involve the participants and personalize the information.** This curriculum contains role play activities, reflections, discussions, games, and worksheets.
8. **Incorporate behavioral goals, teaching methods, and materials that are appropriate to the age, sexual experience, and culture of the students.** All of these modules were designed specifically for Job Corps.
9. **Last a sufficient length of time to complete important activities adequately.** There are more activities in this curriculum than will probably be feasible to complete during CPP. Many activities can be completed in dorms. Be sure to devote adequate time.
10. **Select instructors and/or peers who believe in the program and are knowledgeable about the subject.** It is important that staff members delivering this curriculum enjoy teaching this sometimes difficult subject matter. Peer mentors need to be appropriately trained if your center decides to use them.

# Tips for Implementation

* Sometimes you may want to break male and female students into two groups.
* Use guest speakers that have an interesting story and are relatable to students. Also involve the center’s TEAP specialist to work with issues surrounding drugs and alcohol, and their relationship to sex.
* Enforce messages about safe sex with posters advocating condom use.
* Try to speak the student’s language and keep it real. Try not to judge students and keep an open mind during discussions.
* Help students focus on a positive future and set goals in all areas of their lives.
* Make sure condoms are available in discrete locations. Order brands of condoms that appeal to students.
* Be sensitive to various cultural norms regarding sexual activity. Be aware that in cultures that encourage women to act demure, a little extra female empowerment and condom negotiation training can help keep these young women healthy.

# Importance of Sexuality Education

Contrary to some Americans’ fears, comprehensive sexuality education does not lead to additional adolescent and young adult sexual activity, pregnancy, or STIs. According to the American Congress of Obstetricians and Gynecologists (ACOG), two decades of research have shown that sexuality education increases knowledge about sexual behavioral and its consequences and some programs increase prevention behaviors among adolescents who are sexually active (ACOG, 2011). In plain English, this means that education does not increase how often students will have sex but will help them take less risk if and when they do have sex. The ultimate goal is to reduce STIs, unplanned pregnancy and encourage healthy sexuality.

# Getting Ready

Before educating your students about sexuality, birth control, and STIs, you will need to:

* Brief the class or group on issues of confidentiality and respect. Ensure that everyone understands that discussions do not leave the room and that this should be a safe place to explore questions and differing views.
* Read through the activities. If you do not have time to do all of the activities, pick and choose.
* Go into this with an open mind. Tell students that you will not be judgmental and encourage them to not be judgmental of each other. Encourage sharing but do not require students to reveal personal information. Try not to act surprised when you hear something that you find shocking.

#### Module 1: Relationships and Sexuality

### Background

According to the Centers for Disease Control’s (CDC) Youth Behavior Risk Survey (YBRS), 62.3% of 12th graders have had sexual intercourse. Of all 12th graders, 20.9% had sexual intercourse with four or more partners. This was highest among black male students (39.4%) and lowest among white female students (10.0%) (CDC, 2010 a). By age 23, 90% of young adults have had sex (Mosher, 2005).

The National Campaign to Prevent Teen Pregnancy surveys teen and adult attitudes about teenage sexual activity. In their 2009 survey, they found that 78% of teens age 15-19 agreed with the statement “Most high school-age teens have had sex.” Non-Hispanic Black (93%) and Hispanic (83%) teens are most likely to agree with the statement (Albert, 2010).

# **Activity: Sexual Decision Making**

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| **Overview** | Young people are faced with an array of choices about sex. This lesson will help students make decisions about sex. |
| **Learning Objectives** | Students will be able to:   * Articulate their thoughts regarding what is an “appropriate” amount of time to wait to have sex with a new partner. * Describe their sexual decision-making process. * Identify the costs and benefits of a current sexual behavior. * Plan a strategy to change a potentially harmful sexual behavior. |
| **Materials** | *Decision Making* worksheet |
| **Getting Ready** | Before educating your students about sexual decision making, you will need to:   * Check your own judgment about choices. Try to remain objective. * Print copies of the *Decision Making* worksheet |
| **Introduction and Pre-Activity**  **Discussion** | Discuss the following statement with the students:  People choose not to have sex at various times throughout their lives because they do not feel ready, they do not want to get hurt, they do not want to get pregnant or an STI, or it is against their values to have sex with someone too early or before marriage. Whenever you choose to have sex, it is your decision, and your responsibility to clearly communicate that with your partner. These discussions work best *before you are in the heat of the moment*.  Reminder: Try to let students lead the discussion. You may have a range of views. Prompt for benefits of waiting AND reasons to not wait. Prompts may include:   * Why would someone choose to have sex early in a relationship? * What are the benefits of waiting until a relationship is more established to have sex? * If someone decides to wait to have sex before they are in a situation, why might they decide to have sex in the heat of the moment? * What are the cons to changing your mind about sex in the heat of the moment? * How might drugs or alcohol effect you decision to have sex? * What about pressure from peers or partners? |
| **Activity: Decision Making Worksheet** | This worksheet is designed to help students think through their behaviors and begin to move towards changing riskier behaviors. It is written to be generic. Encourage students to think about a sexual behavior they think is unhealthy. If they do not feel that they have an unhealthy sexual behavior, they may use another health behavior such as overeating or smoking.  Hand out the *Decision Making* worksheet to each student and discuss the information at the top of the page and the example grid. Have students fill in their grids and answer the questions that follow. |
| **Post-Activity Discussion** | Due to the sensitive nature of these questions, briefing out is at the discretion of the instructor. Students may choose to share their work with the group or keep it private. |

##### Worksheet: Decision Making

We make decisions for a variety of reasons. Every decision has benefits and costs. Some decisions are more difficult than others. Some decisions are also more important than others. A lot of times, people adopt unhealthy behaviors because they are fun or enjoyable. People will overeat, avoid exercise, smoke, do drugs, or have unprotected sex even though they know it’s not good for them.

Whether you change a behavior or not is up to you. No one else can change a behavior for you.

For this activity, you will think about something you do that you know isn’t good for you. Then fill out the grid with the costs and benefits of changing and not changing. Here’s what your grid might look like:

**Example Behavior:** Don’t use condoms all of the time

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| --- | --- | --- |
|  | **Changing** | **Not Changing** |
| Benefits of…  (How does this make my life better?) | * Prevent pregnancy * Prevent HIV * Stop worrying all the time * If I don’t have a kid right now, I’ll be able to finish Job Corps and get a better job | * Feels good * Easier not to argue about using condoms * Don’t have to stop when I’m in the moment |
| Costs of…  (How does this make my life worse?) | * The guy/girl I’m with might think I’m calling him/her dirty if I talk about using a condom * Sex is better without a condom | * Pregnancy * STI/HIV * Have to leave Job Corps |

**My behavior:**

|  |  |  |
| --- | --- | --- |
|  | **Changing** | **Not Changing** |
| Benefits of…  (How does this make my life better?) |  |  |
| Costs of…  (How does this make my life worse?) |  |  |

##### Decision-Making Reflection

1. Which box was easiest to complete? Why do you think it was easiest?
2. Do you think the costs are worth it? Why or why not?
3. What is stopping you from changing your behavior?
4. What could you do to break down some of those obstacles?

# **Activity**: Communicating With Your Partner

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| **Overview** | Partner communication is an important aspect of effective sexuality education curricula (Kirby, 2010). There are some general rules that improve communication with a partner, whether the issue is whether to have sex or where to go for dinner. |
| **Learning Objectives** | Students will be able to:   * List techniques to improve communication with their partners. * Demonstrate communication skills. |
| **Materials** | *Communicating with Your Partner* worksheet |
| **Getting Ready** | Before educating your students about communication skills, you will need to:   * Print copies of the *Communicating with Your Partner* worksheet |
| **Introduction and Pre-Activity**  **Discussion** | Discuss the following tips for effective communication with your students:   * Stay focused on the present issue. Avoid bringing up issues that happened in the past. * Listen to what the other person is saying. Instead of planning on what you are going to say next, try to understand your partner. * Use “I” statements. Instead of blaming your partner, tell him or her how it affected you. For example, “I feel so frustrated when we talk about sex.” * Say what you mean. If you aren’t ready to have sex say, “I want you to know that I care about you, but I am not ready to have sex with you yet.” * Take responsibility for any mistakes. * Try to come to an understanding. In relationships, both partners need to compromise. Know where you are willing to compromise and where you should stay strong.   These tips are also included on the *Communicating with Your Partner* worksheet. |
| **Activity: Communication Role Play and Worksheet** | Have students break into pairs and hand out the *Communicating with Your Partner* worksheet (double sided). Each partner should assume the role of partner one or partner two and have a discussion about the issue as outlined on the first page of the worksheet. Give students 10 minutes to role play. Have them complete the reflection questions on the reverse side together and then discuss as a group if there is time. They can also play both sides of the role play, if time allows, to practice negotiating each side. |
| **Post-Activity Discussion** | Bring students back together as a group and discuss the reflection questions on the *Communicating with Your Partner* worksheet. |

##### Worksheet: Communicating with Your Partner

Discuss the situation using the tips your instructor provided. It doesn’t matter if the partners are male or female.

**Situation:** This couple has been dating for six weeks. They have not had sex. Partner #1 has brought it up several times, but partner #2 wants to wait for 90 days and then revisit the conversation.

**Partner #1** is tired of waiting and wants to have sex now. Partner #1 doesn’t understand why partner #2 feels the need to wait to have sex. Their relationship is going well. They have a lot of fun together and sex seems like a normal next step.

**Partner #2** has had sex early on in relationships in the past and has hooked up with random partners. Partner #2 wants to take it slow because he/she really likes partner #1 and doesn’t want to ruin their new relationship. He/she also has a young child and has decided to be more cautious with decisions to have sex with a new partner. Partner #2 is feeling a lot of pressure, but does not want to cave into it.

Partner #1 is upset that partner #2 has had sex with others early in relationships but now does not want to do so. Partner #1 thinks this means Partner #2 is not serious about Partner #1.

**Tips:**

* Stay focused on the present issue. Avoid bringing up issues that happened in the past.
* Listen to what the other person is saying. Instead of planning on what you are going to say next, try to understand your partner.
* Use “I” statements. Instead of blaming your partner, tell him or her how it affected you. For example, “I feel so frustrated when we talk about sex.”
* Say what you mean. If you aren’t ready to have sex say, “I want you to know that I care about you, but I am not ready to have sex with you yet.”
* Take responsibility for any mistakes.
* Try to come to an understanding. In relationships, both partners need to compromise. Know where you are willing to compromise and where you should stay strong.

Decide who will play each role then complete the reflection questions on the reverse side.

**Reflection questions:**

1. How did the discussion go? What aspects felt comfortable? Were there any areas where you got stuck?
2. How did the tips help you throughout the discussion?
3. How can you use these tips in the future?

# **Activity**: Attitudes about Sex, Sexuality, and Gender

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| **Overview** | People’s attitudes and values concerning sex come from a variety of different sources, including friends, family, religion, and the media. Examining personal values and beliefs allows students to better understand why they make decisions and helps with future decision making (Alberta Health Services, 2011).  Annually, the Centers for Disease Control and Prevention (CDC) survey youth through the Youth Risk Behavior Surveillance System (YRBSS). According to data from 2001-2009, approximately 93.0% of high school age students identified themselves as heterosexual, 1.3% identified as gay or lesbian, 3.7% identified as bisexual and 2.5% were unsure (CDC, 2011 a). Many lesbian, gay, bisexual, and transgender (LGBT) young people experience bullying and violence. LGBT young people are at an increased risk of suicide (CDC, 2011 b). |
| **Learning Objectives** | Students will be able to:   * Articulate their feelings about various sexuality topics. * Discuss myths surrounding sexuality. * List traits that are important in a potential partner. * Describe why generalities and stereotypes about gender and sexual orientation are often hurtful and inappropriate. |
| **Activity 1: Attitudes about Sex and Sexuality** | Students will have the opportunity to identify and discuss their attitudes about sex and sexuality. |
| **Materials** | * Red, green, and yellow dot stickers * Printouts of Sexual Attitudes Discussion Statements * Tape |
| **Getting Ready** | Before educating your students about sexual attitudes, you will need to:   * Purchase dot stickers * Print statements and hang them around the room |
| **Introduction and Pre-Activity**  **Discussion** | Share with students:  We all have different attitudes about sex. Using dot stickers, rate your attitude about the statement on the paper. You have red, yellow, and green dots. Put a dot on the **back** of the statement depending how you feel about the statement.  **Green** = I agree with the statement  **Red** = I disagree with the statement  **Yellow** = I am not sure or it depends on the situation |
| **Post-Activity Discussion** | After students are finished placing their dots on the statements, reveal the backs of the sheets of paper one by one and have discussion after each. Ask students to share why they voted each way. Be careful to remain nonjudgmental when students share their attitudes. You will want to encourage some points of view when students share them, including:   * “It’s okay to have sex without a condom sometimes, as long as you use one most of the time.” Encourage the point of view that it only takes one unprotected encounter to get pregnant or an STI. Condoms should be used correctly during every sexual encounter. * “If you ask someone to wear a condom, you are questioning whether they are clean or not.” Encourage the point of view that you cannot tell whether someone has a disease by looking at them. The student needs to prioritize protecting him or herself instead of worrying about a partner’s ego. * “A parent should let their 16- or 17-year old spend the night with a girlfriend or boyfriend in their bedroom.” Bring up the point that there are cultural differences. A study found that 9 out of 10 American parents replied no, but 9 out of 10 Dutch parents replied yes (Schalet, 2010). In cultures where parents routinely allow their teens to have sleepovers, normally parents know the teen’s boy/girlfriend well and teens are well educated about birth control. * “It’s perfectly normal to be gay, lesbian, straight, transgender, or bisexual.” Foster an environment of acceptance and inclusion. * “It doesn’t matter if you use a condom. You will get pregnant or get a disease if that’s what’s meant to be.” Stress that condoms are 97% reliable when used correctly every time.   Activity adapted from the Alberta Health Services: Teaching Sexual Health curriculum. |
| **Activity 2: Gender Roles and Relationships** | Over the past 20-30 years, gender roles have changed significantly. This activity gives students the opportunity to discuss their views on gender roles and to hear others’ opinions. |
| **Materials** | * Gender Roles PowerPoint |
| **Getting Ready** | Before educating your students about communication skills, you will need to:   * Review Gender Roles PowerPoint |
| **Introduction and Pre-Activity**  **Discussion** | Using the Gender Roles PowerPoint:   * Define gender role for students. * Ask students to brainstorm some typically male and typically female gender roles. Show the samples on the PowerPoint. * Ask, “Do you think you fit into these gender stereotypes? Why or why not?” * Review the “What’s wrong with stereotypes?” slide. Ask students to come up with some other issues with stereotypes.   Take the class through this list of traits and have them vote on whether the trait is important in 1) a good female partner, and 2) a good male partner. Using the Gender Roles and Relationships PowerPoint, ask students to rate: Is it very important that a wife/female partner, then husband/male partner:   * Puts family before anything else? * Provides a good income? * Is good at household chores? * Is well educated? * Is a good parent? * Is a good sexual partner? |
| **Post-Activity Discussion** | Show the results from the Time/Pew Research poll (in PowerPoint). Encourage students to discuss why each of these traits is important or not. Discuss how most people feel that these traits are equally important for men and women (except “Provides a good income”). |

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| **Activity 3: Gender Identity, Gender Expression, and Transgender** | * “Gender identity” refers to an individual’s internal sense of being male, female, or something else. Since gender identity is internal, one’s gender identity is not necessarily visible to others. * “Gender expression” refers to how a person represents or expresses one’s gender identity to others, often through behavior, clothing, hairstyles, voice, and/or body characteristics. * “Transgender” refers to people whose gender identity, expression, or behavior is different from that typically associated with their assigned sex at birth. Transgender is a broad term and an acceptable descriptive term for non-transgender people to use. “Trans” is shorthand for “transgender.” (Note: “Transgender” is correctly used as an adjective, not a noun; thus “transgender people” is appropriate, but “transgenders” is often viewed as disrespectful.)   Job Corps protects the rights of all students, including transgender students. |
| **Materials** | Handout:*Equal Access to the Job Corps Program for Transgender Applicants and Students* |
| **Getting Ready** | * Print handouts * Familiarize yourself with PI 14-31: Ensuring Equal Access for Transgender Applicants and Students to the Job Corps Program |
| **Introduction and Pre-Activity**  **Discussion** | * Remind students that this is a sensitive topic and that all people want to be treated with respect * Ask students what they have heard about transgender people on TV or online * Ask if anyone knows a transgender person. Ask them to share what they have learned through that relationship. |
| **Activity #1** | * Pass out *Equal Access to the Job Corps Program for Transgender Applicants and Students* handout * Review the definitions and facts on the handout * Discuss Job Corps’ responsibility to provide equal access to all students * Discuss appropriate communication (i.e., using the pronouns that correspond with a person’s gender identity) |
| **Activity #2 (optional)** | * View Laverne Cox’s “It Got Better” video, located at: <https://www.youtube.com/watch?v=1MfxtM9N3fw> * Pose the following questions:   + Can you think of a time in your life when you weren’t accepted? How did it feel? What do you think it is like for a transgender person when their family does not accept them?   + You heard Laverne Cox say that she felt like she was a girl, and was attracted to boys. What’s the difference between gender identity and sexual orientation?   + What are some things that helped Laverne Cox get where she is today?   + How can you support a transgender student on center?   + Why do you think someone would consider death over people finding out they are transgender? What would you say to help someone who talks about suicide? |
| **Post-Activity Discussion** | Wrap up the discussion with a reminder that everyone wants to be treated with respect. Encourage students to continue learning more and talking about gender, gender identity, and gender expression. |

##### Sexual Attitudes Discussion Statements

Print each of these statements on a separate sheet of paper in a large font. Add other statements if needed.

**Statements:**

“It’s okay to have sex without a condom sometimes, as long as you use one most of the time.”

“It’s healthy to have friends with benefits (somebody to hook up with) if you don’t have a serious girlfriend or boyfriend.”

“If you ask someone to wear a condom, you are questioning whether they are clean or not.”

“A parent should let their 16- or 17-year old spend the night with a girlfriend or boyfriend in their bedroom.”

“You should only have sex with somebody if you are in a relationship with them.”

“It’s perfectly normal to be gay, lesbian, straight, or bisexual.”

“Most teenagers and young adults hook up whether or not they’re dating someone.”

“A lot of people make sex a bigger deal than it is.”

“People should take into account teachings from their religion when making decisions about sex.”

“A lot of people who have sex in their teens regret having sex too early.”

“It doesn’t matter if you use a condom. You will get pregnant or get a disease if that’s what’s meant to be.”

# **Activity**: Friends with Benefits

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| **Overview** | Of sexually active young people, 61% have had sexual intercourse outside of a committed relationship (i.e., casual sex) (Manning, 2006). Casual sex is more prevalent in young adults with less than a high school education when compared with those with a high school degree. Males are more likely to have casual sex than females (Lyons, 2009).  Many young adults who engage in casual sex do not consistently use a condom which puts them at high risk for unplanned pregnancy and STIs, including HIV. Many adolescents and young adults will also have “casual” and “main” partners at the same time (Lescano, 2006).  It is important to use terminology that students understand. Many students use the term “Friends with Benefits” or “Hook Up.” Be careful to avoid lecturing on this topic. Telling students to avoid casual sex probably will not change students’ behavior. Instead, help them come to the conclusion that this behavior is risky on their own. |
| **Learning Objectives** | Students will be able to:   * Describe the drawbacks of casual sex |
| **Materials** | * Chalkboard/whiteboard/flip chart * Copies of *Friends with Benefits* worksheet |
| **Getting Ready** | Before educating your students about casual sex, you will need to:   * Print copies of the *Friends with Benefits* worksheet |
| **Introduction and Pre-Activity**  **Discussion** | This discussion topic is designed to help Job Corps students begin to process the potential negative ramifications of having sex with casual and multiple partners.   * Start this discussion with an assurance of confidentiality. “Whatever is said in this room stays in this room.” * Ask students to share a story about a friend who had casual sex. You can start by sharing a story about someone you know if students do not feel immediately comfortable sharing. Some stories will come out about unplanned pregnancy and STIs. Some stories might involve the fact that one person often becomes more attached than the other. * After students share, develop a list of pros and cons of having casual sex. Make the lists on a chalkboard/whiteboard/flip chart. Lead the discussion to ensure that the negative list is longer than the positive list. It will probably look something like this:  |  |  | | --- | --- | | **Pros** | **Cons** | | * It’s fun/feels good | * Pregnancy * STIs * One person wants a relationship/becomes more involved * Awkward afterwards * Gossip * Ruin a friendship, future girlfriend/boyfriend jealous of your past relationship with your friend “If it happened before, it can happen again.” * It’s temporary/you might miss an opportunity with someone who you’re better suited for * Might regret it * The other person might be seeing someone else and there might be drama | |
| **Activity: Friends with Benefits Worksheet** | Distribute the *Friends with Benefits* worksheet. Give students 10-15 minutes to complete it. |
| **Post-Activity Discussion** | Have students break into small groups to discuss their answers. Bring the group together to discuss their experience with the worksheet. Make sure to emphasize:   * Safe sex * Communication skills * Avoiding situations that can lead to bad choices |

##### Worksheet: Friends with Benefits

Think about the discussion in class. Answer these questions with that in mind.

1. Which personal story made you think about the risks of hooking up?
2. List the pros and cons of having “Friends with Benefits.” (Use the ones from class and add any others.)

|  |  |
| --- | --- |
| **Pros** | **Cons** |
|  |  |

1. For you personally, do you think that having a “Friend with Benefits” is worth it? Why or why not?
2. Think about how you will handle the following situation.

*You are at a party with friends. You’ve been talking with a really cute guy/girl all night. You end up kissing. Your new friend asks you to come back to his/her place. You know that he/she is expecting to have sex*.

What would you say to him/her?

1. How about this situation?

*You decide to tell your new friend that you think you should go home. He/she says, “Don’t you like me? I thought we were getting along.” You say that you just want to go home and suggest hanging out next weekend. He/she says, “Come on, let’s just hang out tonight. I really like you.”*

How would you handle this situation?

If you decide that the benefits to having “friends with benefits” outweigh the risks or are unsure of how you would handle the situation above, answer:

1. How will you protect yourself from STIs/HIV and pregnancy?
2. What if your friend doesn’t want to use a condom? What would you say?
3. What conversations will you have with your friend to make sure that neither of you get hurt because one of you gets more involved in the relationship?
4. How will you avoid the drama that sometimes comes with hooking up?

# Activity: Sex and the Law

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| **Overview** | There are many state laws in place in regards to engaging in sexual activity 1) when a person is infected with HIV, and 2) when one partner is a minor and the other partner has reached 18 years old.  Information on state criminal statutes on HIV transmission is available from the American Civil Liberties Union (ACLU) at <https://www.aclu.org/lgbt-rights_hiv-aids/state-criminal-statutes-hiv-transmission>.  Information on statutory rape laws is available for the Department of Health and Human Services (HHS) at: <http://aspe.hhs.gov/hsp/08/sr/statelaws/summary.shtml> |
| **Learning Objectives** | Students will be able to:   * Describe applicable laws in the state where their center is located, and their home state, if applicable * Discuss ethical issues regarding spreading HIV, regardless of the law |
| **Materials** | Computer with internet access and projector |
| **Getting Ready** | Familiarize yourself with the laws for your state. |
| **Introduction** | Introduce students to the laws regarding HIV transmission and statutory rape, using the websites listed in the overview, for the state in which the center is located. Review the definitions provided on the HHS website. Ask students their home states and share the laws for those states as well. |
| **Discussion** | Pose the following questions about HIV transmission:   * What do you think of the HIV transmission law for this state? Are the laws too lenient? Too strict? * Some states do not have any laws about HIV transmission. Do you think they should pass laws to protect people? * Do you think that keeping positive HIV status from a sexual partner should be a crime? If so, should it be a misdemeanor or a felony? What should the punishment be? * Should people with HIV be allowed to have sex? * If you had a friend who was HIV positive, what advice would you give them about talking with a potential sexual partner?   Pose the following questions about statutory rape:   * What do you think of the laws about statutory rape in this state? Are the laws too lenient? Too strict? |

#### Module 2: Reproduction and Birth Control

### Background

Adolescent pregnancy significantly effects education. Only half of teen mothers receive a high school diploma by age 22 (Perper, 2010). Lower levels of education carry over to the next generation as well. The children of teenage mothers are more likely to drop out of school, have more health problems, become teenage parents themselves, and face unemployment (Hoffman, 2008).

# **Activity**: Are You Ready to be a Parent?

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| **Overview** | The activities in this section will help students explore the potential negative repercussions of having children at a young age. |
| **Learning Objectives** | Students will be able to:   * Discuss the ramifications of having a child in the near future. * Assess readiness for parenthood. * Articulate goals and how having a child in the near future would change those goals. |
| **Activity #1: MTV’s Teen Mom** | Among those teens who have watched MTV’s *16 and Pregnant,* 82% think the show helps teens better understand the challenges of teen pregnancy and parenthood and how to avoid it (Albert, 2010). |
| **Materials** | * Episode of MTV’s Teen Mom on internet or television |
| **Getting Ready** | Preview the episode ad review the discussion questions. |
| **Introduction and Pre-Activity**  **Discussion** | Introduce the show to students. Let them know that you will be discussing the show after watching it. |
| **Activity** | Watch an episode of MTV’s Teen Mom with students. Full episodes are available at: <http://www.mtv.com/shows/teen_mom/season_1/series.jhtml> and the show is available on MTV. |
| **Post-Activity Discussion** | Discussion questions:   * Do you think this show accurately depicts what it’s like to be a young parent? Why or why not? * How would you have handled a situation in the episode? (Describe a specific situation in the episode if one stands out.) * Is anyone here a parent? How did your life change after you had a child? * For those of you who aren’t parents, do you think that you’re ready to become a parent? * How would being a parent change your life? |
| **Activity #2: Are You Ready to be a Parent? Computer Activity** | It’s perfectly normal for students to feel like they want a family before they are emotionally or financially prepared to support one. Parenthood is a big step and some students need a little help balancing their desires to have a child with their future goals. |
| **Materials** | * Computer with internet access |
| **Getting Ready** | Preview the quiz online. |
| **Introduction and Pre-Activity**  **Discussion** | Introduce the concept that having children at an early age often causes young people to delay life goals. Introduce the quiz. |
| **Activity** | Have students complete the quiz at: <http://www.babyzone.com/preconception/family_planning/quiz/parenthood-readiness/> |
| **Post-Activity Discussion** | Have students break into small groups and discuss their results. |
| **Activity #3: Write a Letter to Your Future Self** | Goal setting is an effective method to help young people delay parenthood (Sheeder, 2009). Through goal setting, young adults, especially females, often find a disconnect between their education, career, and personal goals and their desire to have a child or to have unprotected sex. It is important that a goal setting activity helps students see that having a child before finishing education would alter their goals. |
| **Materials** | * Three worksheets described in this activity |
| **Getting Ready** | Review activity. |
| **Activity** | Have students spend 10 minutes writing a letter to themselves three years in the future. In this letter, they completed Job Corps and have not had children (or any more children). Ask them to follow the directions on the *Write a Letter to Your Future Self* *Worksheet (Part 1)*.  Ask them to *Write a Letter to Your Future Self* *Worksheet (Part 2)*. In this letter, ask them to pretend that they find out that they are pregnant (if female) or got someone pregnant (if male). They should follow the instructors on this worksheet.  Then have students complete the reflection questions on *Write a Letter to Your Future Self* *Worksheet (Part 3)*. |
| **Post-Activity Discussion** | Ask students to share what they wrote in the letter if they are comfortable doing so. Do not pressure students to share if they do not want to. |

##### Worksheet: Write a Letter to Your Future Self (Part 1)

Write a letter to yourself three years in the future. Pretend that you have successfully completed Job Corps and do not have any children between now and then. In the letter, make sure you talk about what you want to have accomplished in your 1) education, 2) career, and 3) personal life.

##### Worksheet: Write a Letter to Your Future Self (Part 2)

Now, write a letter to yourself three years in the future. In this letter, pretend that you find out that you’re pregnant (if female) or you got somebody pregnant (if male) in the next month. In the letter, again make sure you talk about what you want to have accomplished in your 1) education, 2) career, and 3) personal life.

##### Worksheet: Write a Letter to Your Future Self (Part 3)

**Reflection**

1. How was the second letter different from the first?
2. Which future was easier to write about? Why do you think that was the case?
3. Which future do you like better? Why?
4. If you preferred the future where you waited longer than three years to have children, what steps will you take to make sure that future comes true?
5. If you are considering having children in the immediate future, how do you think that will affect your life 10 or 15 years from now?

# Activity**: Which Birth Control Method is Right for You?**

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| --- | --- |
| **Overview** | Over the decade, several new birth control methods have been released. When trying to prevent pregnancy, couples have many options. During this discussion, students should start thinking about the options available to them and their priorities for choosing an option. |
| **Learning Objectives** | After this lesson, students will be able to:   * List available birth control methods. * Prioritize characteristics of birth control methods. * Articulate how to access birth control on center. |
| **Activity # 1: Available Birth Control Methods** | During the activity students will learn about available birth control methods. |
| **Materials** | * Chalkboard/whiteboard/flipchart |
| **Getting Ready** | Print copies of worksheets. |
| **Introduction and Pre-Activity**  **Discussion** | Have students list the birth control options. Write them on the classroom’s whiteboard/chalkboard or a flip chart. Add any methods that students didn’t mention. The list should include:   * Abstinence * IUD * Sterilization/vasectomy * Implant * Birth control pill * Birth control patch * Shot (Depo-Provera) * Vaginal Ring * Diaphragm * Female condom * Male condom * Withdrawal/pulling out * Emergency contraception/”Morning After Pill” * Rhythm * Spermicide   Put a star next to each method that is available at the Health and Wellness Center. |
| **Activity** | List the reasons why people choose a birth control method. Start by listing:   * Effectiveness * Convenience * Cost * STI prevention   Have students list additional reasons. Other reasons may be: no doctor’s visit required, no side effects/does not contain hormones, lessens menstrual cramps, private/not detectable (partner doesn’t know about it), no pre-sex preparation required, or works immediately. |
| **Post-Activity Discussion** | After all of the reasons are up on the board, have students write down the reasons on a piece of paper and rank the reasons by importance, with one being the most important. Ask any student who wants to share their ranking and the rationale behind it to do so. |
| **Activity # 2: Choosing a Birth Control Method** | This activity is designed to help students decide which method of birth control is right for them. |
| **Materials** | * Computer with Internet connection for students * Copies of worksheets |
| **Getting Ready** | Review website. Print copies of worksheets. |
| **Introduction and Pre-Activity**  **Discussion** | It is recommended that students complete Activity 1:Available Birth Control Methods before completing this activity. |
| **Activity** | Have students apply the discussion by visiting: <http://www.arhp.org/methodmatch>. They should then complete the *Which Birth Control Method is Right for You?* Worksheet*.* |
| **Post-Activity Discussion** | Allow students to discuss this activity in small groups. Encourage students to make an appointment at the Health and Wellness Center to discuss birth control choices. |

##### Worksheet: Which Birth Control Method is Right for You?

**Directions:**

1. Log onto the Method Match activity at <http://www.arhp.org/methodmatch>.
2. Use the “Narrow Results” checkbox on the left side of the screen. Use your top priorities in choosing a birth control method from class and the others listed on the screen, narrow down the birth control options.
3. After you narrow down the results, click the plus sign (+) in the bottom right corner of your top three or four choices. The choices will appear in the “Selected Methods” box on the right side of the screen.
4. At the bottom the “Selected Methods” box, click “Compare.”

**Answer the following questions about this activity:**

1. **What are your top three choices?**
2. **Of these choices, which one or two do you think are best for you. Why?**
3. **Did you have to give up any of your priorities to find a choice? Which did you give up?**

1. **If you do not already have access to this method of birth control, how are you going to get access?**
2. **How confident are you that you will use this method correctly? (That means using a condom or other barrier every time you have sex or taking birth control pills as prescribed.)(circle one)**

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| --- | --- | --- | --- |
| **Not confident** | **Somewhat confident** | **Confident** | **Very confident** |

The Health and Wellness Center staff members are available to help you decide which option is right for you. Stop in during open hours to make an appointment to talk with a nurse or doctor. Bring this paper with you to your appointment.

#### Module 3: Sexually Transmitted Infections (STIs)

### The Facts about STIs and HIV

### Background

Adolescents and young adults account for a large proportion of STI infections in the United States. Chlamydia infection rates for this group have steadily increased. Young women, age 15-19 years old have the highest rate of Chlamydia when compared with any other group (CDC, 2010 b). During PY 2011, 67,004 Chlamydia tests[[1]](#footnote-1) were performed with 6,103 positive results for an overall rate of 9.1 percent. Females had a slightly higher overall rate of positive test results than males (10.6 percent for females, 7.9 percent for males).

Chlamydia is known as a "silent" disease because the majority of infected women and about half of infected men have no symptoms. If untreated, Chlamydia infections can progress to serious reproductive and other health problems, and, like the symptoms, the damage caused can be "silent" (CDC, 2011 c).

During PY 2011, 56,884 HIV tests were performed. Of these tests, the majority (96.9 percent) occurred on entry; 3.1 percent were performed after entry (prior indeterminate test; STI, other medical indicators, pregnancy). Of the total tests performed, 0.3 percent (176 positive results) were positive for HIV. Males accounted for the majority of positive HIV tests. Of the 33,161 males tested, 133 tested positive for a rate of 401 per 100,000 male students. Of the 23,720 females who were tested, 43 tested positive for a rate of 181 per 100,000 female students.

The CDC estimates that 30 per 100,000 adolescents ages 15-19 are living with HIV/AIDS. Among young adults ages 20-24, the HIV rate is estimated to be 110 per 100,000 (Gavin, 2009). Job Corps’ HIV rate (307 per 100,000) is almost three times the national rate when compared to young adults ages 20-24 (OR=2.8) and ten times the national rate when compared to 15-19 year old adolescents (OR=10.3). Nearly 75 percent of Job Corps students are between the ages of 16-19.

# Activity: All You Ever Wanted to Know about Sexually Transmitted Infections (STIs)

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| **Overview** | These activities will help students learn factual information about STIs and correctly assess their risk. |
| **Learning Objectives** | After this lesson, students will be able to:   * Discuss factual information about STIs and HIV. * List effective condom negotiation skills. * Describe the benefits of using condoms. |
| **Activity # 1: Safe Choices Jeopardy** | “STI and HIV Jeopardy” was designed to help your students learn the basics about sexually transmitted infections, HIV, and prevention. |
| **Materials** | * Jeopardy game (link) * Prize for students (optional) |
| **Getting Ready** | It is recommended that you print the presentation out and familiarize yourself with the correct answers prior to playing the game. In the notes section of the PowerPoint, you will find information about the correct answers to share with your students. |
| **Introduction and Pre-Activity**  **Discussion** | Introduce students to the rule of Jeopardy. |
| **Activity** | To play, you can break students into three teams or allow each student to play individually. Start by selecting the first dollar amount. Click on the dollar amount to reveal the question. The student who raises his or her hand first has the opportunity to answer the question. For every question a student or team answers correctly, they receive the corresponding number of points. For every question answered incorrectly, the student or team loses the corresponding number of points. Different students should have the opportunity to answer the question until a student gets the answer correct or no additional students volunteer to answer the question. When a student provides a correct answer (or an answer you deem to be “close enough,” click the question mark in the lower right hand corner of the screen to reveal all possible correct answers. After the answers are revealed and discussed, click the house icon to return to the game board. Dollar amounts that have already been chosen will change color. The student who answers the question correctly picks the next dollar amount. The team or individual with the most points after all questions are answered wins the game. |
| **Activity # 2: It Can Happen to Me** | This activity uses a video to help student assess their risk for contracting a STI. |
| **Materials** | * Computer with Internet connection, speakers, and projector OR *Safe in the City* DVD with TV/DVD player |
| **Getting Ready** | Preview the *Safe in the City* video. |
| **Introduction and Pre-Activity**  **Discussion** | Introduce the video. |
| **Activity** | Have students watch the Safe in the City Video at <http://www.stdcentral.org/SitC/about/>. This video is available for download (note: it can take a few minutes to buffer) or as a DVD. Posters are also available on this website to advertise the video. Alternatively, this video can be shown in the waiting room in the Health and Wellness center. |
| **Post-Activity Discussion** | Ask the following questions for discussion:   * How do you think the experience of getting an STI changed the characters feelings about using condoms? * Do you think any of these scenarios could happen to you? Why or why not? * Teresa is successful in convincing Luis to use a condom. What did she do to convince him? * Both Jasmine and Cristina stay with their boyfriends after the STI scares. Do you think this is realistic? Would you stay with someone in a similar situation? |

# Activity: Using a Condom Correctly

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| **Overview** | Condoms only prevent against HIV/AIDS if they are used correctly every time. Research has shown that if a condom breaks or a person has a negative experience with condom use, the person is less likely to use a condom in the future (Lindemann, 2005). |
| **Learning Objectives** | After this lesson, students will be able to:   * Demonstrate proper use of a condom |
| **Materials** | * Condoms * Banana or condom training model available for purchase <http://www.a3bs.com/Condom-Training-Models-W19101,p_1208_346_52_4170.html> |
| **Getting Ready** | Practice condom application skills. |
| **Introduction and Pre-Activity**  **Discussion** | First introduce the topic. |
| **Activity** | Demonstrate how to correctly put on a condom using a banana or a condom training model. Instructions for condom application are:   1. Without using teeth or fingernails, open condom package by tearing along edge 2. Place condom right-side out on tip of penis 3. Pinch tip of condom with two fingers 4. Roll condom down the penis until reaching the base 5. After intercourse, hold condom at base of penis and remove the penis from the partner 6. Pinch top of condom so that ejaculate is in the tip 7. Holding the condom at the tip and base, carefully slide the condom off the penis (Lindemann, 2005) |
| **Alternative and Additional Activities** | * Have students preview the “How to Use a Condom” portion of the *Safe in the City* video at <http://www.stdcentral.org/SitC/about/index.php#preview>. * Have students take turns applying the condom to the banana or condom training model. If there are enough models, students should break into small groups and explain what they are doing. Encourage students to give each other feedback. * Repeat the above activity with the lights out or students blindfolded to simulate a dark room. * In groups, test different brands of condoms. Provide students with different brands of condoms that reflect options available at the Health and Wellness Center. Have students test the different brands of condoms to evaluate any differences. * Write “Myth or Fact? A lot of guys are too big to wear a condom” on the board/chart. Have students see how far they can stretch a latex condom by blowing it up or putting it over their forearm. Discuss the question on the board. |

# Activity: Condom Negotiation

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| **Overview** | The majority of young adults want to use condoms to protect themselves. One study found that 60% of Latino youth surveyed wanted to protect themselves with condoms. Young men who want to use condoms are more likely to actually use condoms, when compared with young women (Tschann, 2010).  If one partner wants to use a condom and the other partner does not, the couple engages in condom negotiation. Young adults who engage in condom negotiation are more likely to use condoms (i.e., the partner who wants to use a condom often wins out) (Perrino, 2006). Commonly used strategies in condom negotiation in young adults include:   * Communicating risk information (i.e., risk of STIs and pregnancy) * Directly requesting condom use * Withholding sex until the partner agrees to use a condom * Nonverbal introduction of condoms * Emotional coercion (threatening negative consequences) (Tschann, 2010)   The most successful strategies are communicating risk information, directly requesting condom use, direct statements (e.g., threatening to withhold sex), and direct non-verbal statements (e.g., opening a condom in front of a partner) (Tschann, 2010 & Lam, 2004).  Females and males often have different concerns about condom negotiation. Young women are sometimes afraid of jeopardizing a relationship by asking for condom use (Tschann, 2010). |
| **Learning Objectives** | After this lesson, students will be able to:   * Negotiate condom usage |
| **Materials** | * Chalkboard/whiteboard |
| **Getting Ready** | Review role play activities. |
| **Introduction and Pre-Activity**  **Discussion** | * Start by discussing the benefits of condom use. Ask the class to list the benefits and write them on the board or flip chart. * Leaving the information on the benefits on the board/chart, ask them for reasons why a couple would choose not to use a condom. * Give them the following scenario: *A couple is dating and plans to have sex for the first time. The female partner wants to use a condom and the male partner does not (swap sexes if working with a group of young men).* Ask: What could he/she do or say to convince the other person to use a condom? Write all answers on the board/chart. Add any others from the background information. |
| **Activity** | **Role play #1:** Start this activity with a non-threatening negotiation topic. Have the students break into pairs and share the following scenario: *Participant A is buying an item (insert purse, bike, car, etc.) off Craig’s List. This item is listed for $100. Participant A decides that he/she wants to get this item for a cheaper price and is prepared to walk away if the seller doesn’t go down to $70. Participant B is the seller and doesn’t want to go below $100, but really wants to sell the merchandise.*  Have the students role play the negotiation with one as participant A and the other as participant B. Have the students either come to an agreement on the price of the item or walk away from the deal.  Bring the group back together and ask students:   * What was the outcome of the negotiation? * Did either the buyer or the seller say anything that helped the negotiation? What did he or she say? * How was this similar or different to negotiating using a condom?   **Role play #2:** Have students work with the same partners and act out the scenario from the brainstorming activity: *A couple is dating and plans to have sex for the first time. The female partner wants to use a condom and the male partner does not (swap sexes if working with a group of young men).* Have one student act as the male and the other as the female. Ask them to try to use some of the strategies that they came up with during the discussion. |
| **Post-Activity Discussion** | Bring the students back together. Ask:   * How many of you ended up deciding to use a condom? * How many of you walked away from the situation? * How many of you decided to have sex without a condom? * Who was more persuasive? What did that person say? * What did you learn during this activity? * How could you use this activity in your real life? |

# Activity: HIV Facts and Myths

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| **Overview** | This activity will help students differentiate between facts and myths surrounding HIV. |
| **Learning Objectives** | After this lesson, students will be able to:   * Classify facts and myths about HIV. |
| **Materials** | * Three small slips of paper for each student * Large sheets of paper with “Agree”, “Disagree”, or “Undecided” across the topic, with columns drawn between each. * Tape for each group of students |
| **Getting Ready** | Review fact sheets on HIV on the CDC’s website at: <http://www.cdc.gov/hiv/resources/factsheets/index.htm>. |
| **Introduction and Pre-Activity**  **Discussion** | * Hand each student three slips of paper. Have them write one thing that they’ve heard about HIV on each sheet of paper. Students do not have to agree with the statement. |
| **Activity** | * Have students get into groups, put the slips of paper face down and mix them up. * Have students flip each piece of paper over one at a time and work as a group to put them in a column. |
| **Post-Activity Discussion** | Ask:   * A group to volunteer to list the statements in the “Agree” and “Disagree” columns. * Ask the rest of the class if they agree with the “Agree” and “Disagree” statements. * Discuss any statements for which there is not a consensus. * Go through the statements in the “Undecided” column. * Repeat with other groups. |

# Activity Checklist

| **Construct** | **Example Application** | **Activities** | **Complete?** |
| --- | --- | --- | --- |
| Students need to feel that they are **susceptible** to the consequences. | If students engage in risky behaviors, they are at risk for unplanned pregnancy, HIV, and other STIS. | Module 1/Topic 3: Attitudes about Sex and Sexuality Discussion #1  Module 1/Topic 4: Friends With Benefits: Let’s Talk About Casual Sex  Module 2/Topic 1: Are You Ready to be a Parent?  Module 3/Topic 1: The Facts about STIs and HIV  Module 3/Topic 4: HIV Facts and Myths |  |
| Students need to feel that these consequences are **serious**. | If a student has a child before they are finished with their education and gainfully employed, he or she may experience lifelong financial consequences. | Module 1/Topic 4: Friends With Benefits: Let’s Talk About Casual Sex  Module 3/Topic 1: The Facts about STIs and HIV  Module 3/Topic 4: HIV Facts and Myths  Module 3/Topic 1: The Facts about STIs and HIV  Module 3/Topic 4: HIV Facts and Myths |  |
| Students need to feel that they can surmount the **barriers** to making a healthy choice. | Condoms should be accessible. Students should be able to negotiate condom use. | Module 1/Topic 1: Sexual Decision Making Discussion and Worksheet  Module 1/Topic 2 Communicating With Your Partner  Module 1/Topic 5: Sex Drugs and Alcohol  Module 2/Topic 2: Which Birth Control Method is Right for You?  Module 2/Topic 3: Contraception Failure  Module 3/Topic 3: Condom Negotiation |  |
| Students need to believe that there is a **benefit** to making the choice. | Students should feel that condoms are effective in protecting against unplanned pregnancy and STIs. | Module 1/Topic 1: Sexual Decision Making Discussion and Worksheet  Module 2/Topic 1: Are You Ready to be a Parent?  Module 2/Topic 2: Which Birth Control Method is Right for You? |  |
| Students need **cues to action** to make healthy choices. | Educational sessions should repeat. Posters can serve as reminders in the Health and Wellness Center and in dormitories. | No activity. Hang posters around center and ensure condom availability in discrete, convenient locations. |  |
| Students need **self-efficacy** (belief that they are capable in performing the behavior) | Students may practice condom negotiation and application skills until they feel confident that they will be able to apply these skills. | Module 1/Topic 1: Sexual Decision Making Discussion and Worksheet  Module 1/Topic 2 Communicating With Your Partner  Module 1/Topic 4: Friends With Benefits: Let’s Talk About Casual Sex  Module 1/Topic 5: Sex Drugs and Alcohol  Module 2/Topic 2: Which Birth Control Method is Right for You?  Module 3/Topic 1: The Facts about STIs and HIV  Module 3/Topic 2: Using a Condom Correctly  Module 3/Topic 3: Condom Negotiation |  |

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1. Some students are tested multiple times for Chlamydia (i.e., symptomatic or a test for reinfection); therefore, overall prevalence rates are calculated based on the total number of tests, not individual students. [↑](#footnote-ref-1)