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Best Practices in STD / HIV and Pregnancy Prevention: 2016 Edition

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Best Practices

in STD/HIV and Pregnancy Prevention







2016 Edition

Best Practices in STD/HIV and Pregnancy Prevention

Authors, 2016 edition

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Originally developed by the Maine Department of Education, 2002

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Reviewed and updated in 2005, 2007, 2009, 2011, 2013 and 2015

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ACKNOWLEDGEMENTS

First and foremost, without pioneers—Susan Boyce, Lois Cooper and Joni Foster—creating the first *Best Practices in HIV Prevention Education* in 2002, there would not have been the wonderful foundation for subsequent editions. Many thanks go to them and to all the educators around the state that have implemented *Best Practices*. They ensured that Maine students received comprehensive sexuality education; assisting in the reduction of Maine's teen pregnancy rate and STD and HIV transmissions.

Thank you to the following Maine educators and their students who pilot-tested this edition of the curriculum during the spring of 2015 and gave valuable feedback to the development of the curriculum lessons and activities.

- Stephanie Carter and her health students at Messalonskee High School
- Kristin Tripp and her health students at Searsport High School
- Tori Reynolds and her 8th grade students at Warsaw Middle School

In addition, the following educators attended a two-day *Best Practices* preview training in May 2015, sharing their ideas and giving input on the curriculum contents.

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Erin Dickson Heidi Parker Miranda Wakefield

Elizabeth Koharian Anna Peterson
Daniel Lawrence Beth Prelgovisk

INTRODUCTION

We are excited to present the revised *Best Practices in STD/HIV and Pregnancy Prevention*. Below, are the unique features of this edition of *Best Practices* which:

- Expands the focus to include prevention of teen pregnancy, STDs and HIV.
- Offers an introduction to the developing brain and its impact on sexual decision making.
- Provides updated statistics and medical information, including LARCS (long acting reversible contraceptives).
- Focuses on the importance of abstinence as well as the dual method of protection (birth control along with barrier methods) for preventing STDs/HIV and pregnancy.
- Offers a variety of tools to assess student learning.
- Provides 10 one-hour lessons with a variety of optional or alternative activities, some of which can be assigned as homework.
- Introduces the concept of *pausing* in place of a multi-step decision-making model.

- Recognizes how teens learn by using more student voices, interactive activities and opportunities to discuss ideas and concepts with their peers.
- Positions sexual health in the context of healthy relationships, including both opposite and samesex situations and scenarios.
- Offers a supplemental sexual and reproductive anatomy lesson recommended as a foundation prior to delivering *Best Practices*.
- Provides opportunities for journaling and reflection so that students can personalize the information they learn.
- Includes a companion web page of supplemental tools and resources available for free at www.mainefamilyplanning.org/bestpractices.

This edition of *Best Practices* is based on the belief that a comprehensive approach to sexuality education increases knowledge and skills and changes attitudes and behaviors that reduce the risk for unintended pregnancy and STDs. Comprehensive sexuality education recognizes that sexuality is not just about sex or simply telling young people to "just say no". It encompasses a broad range of topics that are central to who we are as human beings, including human development, relationships, sexual health and sexual behavior.

In addition to providing accurate information, *Best Practices* encourages students to explore their own attitudes, values and beliefs and develop communication skills and the self-respect necessary for positive, healthy sexuality. Students learn to take responsibility for their decisions and behaviors, thereby enhancing their personal competence and well-being. It is the development of these abilities that is particularly important during adolescence, a time of testing and risk taking. In a safe environment students learn, practice and apply their knowledge and skills to make healthy, safe and wise choices.

TARGET AUDIENCE

Best Practices in STD/HIV and Pregnancy Prevention is designed to meet the sexual health education standards for Maine high school students. The contents are appropriate for young people ages 13-18, from 8th grade through high school, both in and out of formal education settings. The curriculum contents address the needs of all young people at risk for STDs, HIV and unintended pregnancy regardless of whether they identify as straight, gay, bisexual, transgender or are still questioning their sexual and gender identity.

KEY MESSAGES

- Abstinence is the most effective way to prevent STDs and pregnancy.
- Using dual methods—both condoms and birth control—when sexually active as an effective way to prevent both STDs and pregnancy.
- Learning to pause and effectively communicate one's sexual boundaries helps a person make healthy sexual decisions.
- Understanding how to access health services empowers people to be sexually healthy.

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THEORETICAL FRAMEWORK

Best Practices is based primarily on two behavior change theories: Social Cognitive Theory (Bandura, 1986) and the Theory of Planned Behavior (Ajzen, 1991), both of which have been used as a basis for many of the evidence-based STD/HIV and pregnancy prevention programs.

Social Cognitive Theory is grounded in the belief that human behavior is determined by a three-way relationship between cognitive factors (knowledge, expectations and attitudes), environment influences (social norms, access and support in the community) and behavior (the skills, practice and self-efficacy to follow through on a specific behavior). One concept alone cannot affect positive behavioral change, it takes all three.

Theory of Planned Behavior focuses on a person's perception of whether or not they are likely to engage in a certain behavior. It includes their own attitudes about the behavior as well as their perceptions of others' (peers, parents, partner, etc.) approval or disapproval of the behavior. Finally, the person must believe they have the ability, confidence and control to engage in the behavior.

Best Practices includes strategies to:

- 1) promote positive attitudes around both abstinence and using protection to prevent STDs and pregnancy,
- 2) explore social norms and influences on one's decisions and behaviors, and
- 3) build skills and self-efficacy to be sexually healthy.

IS BEST PRACTICES AN EVIDENCE-BASED CURRICULUM?

The original *Best Practices* was a compilation of lessons and activities found in other evidence-based HIV prevention programs. Although it did not undergo a formal, rigorous evaluation, *Best Practices* was reviewed and identified by a team of experts as a Promising Program in 2008, which means that the design, content and methodology adheres to the *Characteristics of Effective Sex and STD/HIV Education Programs* (Kirby, Rolleri and Wilson, 2007).

This edition of *Best Practices in STD/HIV and Pregnancy Prevention* adheres to the same set of characteristics of effective programs and is aligned to both the <u>Maine Learning Results</u> and the <u>National Sexuality Education Standards</u>, authored by the Future of Sex Education (2012). Mapping tools aligning *Best Practices* with both the Maine Learning Results and the National Sexuality Education Standards are available at <u>www.mainefamilyplanning.org/bestpractices</u>.

Best Practices in STD/HIV and Pregnancy Prevention has not yet been rigorously evaluated, so it is not considered an evidence-based program. However, it follows the characteristics of an effective program and was pilot-tested with 8th-10th grade students in several school settings throughout Maine.

PROFICIENCY-BASED EDUCATION

In order to graduate from high school, Maine students must demonstrate mastery of the knowledge and skills that are deemed essential for success in school, higher education, career and adult life. *Best Practices* builds knowledge and skills, lesson by lesson, so that students are able to develop a deeper understanding of sexual health. The *Best Practices* student learning objectives answer the question: What is it that we want students to comprehend and demonstrate in order to show their competence regarding sexually healthy behaviors?

Best Practices also includes both formative and summative assessment tools to measure student learning. At the end of each lesson there are reflection questions educators can use to get real-time feedback on what students are learning at different stages in the curriculum. There is also a Best Practices pre and post survey for students that can provide useful information about what students know prior to the delivery of the curriculum and to assess how well students were able to apply the learned knowledge and skills post curriculum.

Additional assessment tools and rubrics will be updated regularly and made available at www.mainefamilyplanning.org/bestpractices for educators to use, as needed, with their students.

HOW TO USE THIS CURRICULUM

The 2016 edition of *Best Practices in STD/HIV and Pregnancy Prevention* consists of ten, 60-minute lessons that contain interactive activities using a variety of teaching methods, such as individual and small group work, facilitated brainstorms and discussions, debriefs and reflections, video and online tools, presentations and mini-lectures, quizzes and worksheets, role-playing, skill-building activities and the use of technology.

Each lesson begins with a title page that outlines the **Purpose and Student Learning Objectives** covered in respective lesson. In the **Lesson Summary**, the activities are listed in a grid indicating the amount of time needed to complete each activity and a check list of materials and preparation required prior to delivering the lesson.

Student worksheets, handouts, facilitator keys, scenarios, activity cards and diagrams are included with each activity and are designed to be easy and inexpensive to use and reproduce. All videos referenced are available on the internet for free and should be reviewed before showing them in class. Most lessons require a whiteboard or newsprint paper and markers.

Certain activities in the curriculum can be either done in class or assigned as homework to save class time. These activities are indicated with a backpack icon and include viewing online videos or websites, completing certain reflection activities and researching specific topics. If assigning activities as homework, be sure to set aside time during the following class period to review, debrief or have students present what they learned.

Presentations and graphics covering *Sexual Anatomy* and *How a Pregnancy Happens* are available at www.mainefamilyplanning.org/bestpractices. This is where facilitators can also find additional resources including Tips for How to Answer Students Questions, a sample parents letter introducing the program, and lesson plans for topics not fully addressed in the *Best Practices* lessons, such as teen dating relationships, gender identity and sexual orientation.

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Each activity includes a teacher script in bold. This sample dialogue includes the key messages that reflect an inclusive, non-judgmental tone as well as medically accurate information. As you become more familiar and comfortable with the content, we encourage you to find your own voice in delivering these key messages.

Facilitator questions posed to students during brainstorms or as debriefing activities include prompts or suggested follow-up comments. These prompts will help spark conversation and engage students in a quiet class while also reinforcing the key messages and positive attitudes and intentions.

FACILITATOR NOTE

Facilitator notes appear throughout the curriculum where background information may be needed or when special facilitation instructions would be helpful.

If confronted with a question to which you don't know the answer, you and your students may visit www.maineteenhealth.org or http://www.cdc.gov/std/ to find out medically accurate information that is delivered in a factual and objective manner.

In addition, relevant data on Maine teen sexual behaviors can be found on the Maine Integrated Youth Health Survey website, https://data.mainepublichealth.gov/miyhs/.

TRAINING

Whether you've been teaching sexual health for 20 years or are just beginning, education and training will help you stay current with new information and resources and provide an opportunity to share ideas and experiences with other educators. Periodic training opportunities on *Best Practices* and related topics will be offered by Maine Family Planning and the Maine Department of Education to further facilitator knowledge, comfort level and skills in delivering sexual health education. For more information, contact education@mainefamilyplanning.org or visit www.mainefamilyplanning.org/bestpractices.

FEEDBACK ABOUT BEST PRACTICES

Facilitators of *Best Practices* are encouraged to offer feedback, give suggestions or ask questions about the curriculum by contacting education@mainefamilyplanning.org.

It is our hope that this curriculum will be offered to as many young people as possible and that *Best Practices* can be modified and improved over time with the experience and insights we receive directly from youth and adults working with youth. *Best Practices* will be updated as new medical and other pertinent information becomes available, ensuring that the curriculum stays relevant and continues to help young people stay sexually healthy.

Look for curriculum updates at www.mainefamilyplanning.org/bestpractices.

LESSON SUMMARY

BEST PRACTICES IN STD/HIV AND PREGNANCY PREVENTION

Lesson 1- Talking about Sexual Health

The first lesson sets the stage for building a safe, trusting environment for students to learn about sexual health. After an icebreaker and setting group agreements, the students define sexual terms and play an interactive trivia game that introduces them to the topics addressed in the program. The lesson concludes with an introduction to the anonymous question box.

Lesson 2- Achieving Your Goals

Students begin the lesson by reflecting on their future goals and discussing the various messages they receive around sex. Through an optional activity (using either a mini-lecture or video), students learn how the developing brain may impact sexual risk taking and decision making. They then take the information they have learned and apply it to the scenario Maria and Joe's Dilemma, completing a reflection in which they apply the lesson to their own lives.

Lesson 3- Effective Communication

This lesson builds communication skills in order to stick with one's personal boundaries. After identifying the characteristics of passive, aggressive and assertive communication styles, students listen to three versions of a role play and discuss which one was most effective at communicating sexual boundaries with a partner. Finally, students work in pairs to write responses to pressure lines that may challenge their boundaries.

Lesson 4- Sexually Transmitted Diseases

Students participate in an activity that demonstrates how easily an STD can spread and how abstinence and barrier methods, like condoms and dental dams, can lower the risk of transmission. By watching a video and taking a quiz, students clarify STD myths and facts and in small groups they research and report out on common STD facts. Using reliable sources, students compare signs and symptoms; whether the STDs are viral, bacterial or parasitic; list ways to prevent STDs; and identify testing and treatment information and resources.

Lesson 5- What's the Risk?

Through a role-play story, students explore their responsibility for communicating about and preventing STDs and the importance of getting regular testing. Students identify and categorize the sexual behaviors and attitudes that put a person at risk for STDs along a risk continuum. Finally, students reflect on how an STD may impact their own lives and identify local resources available for testing and treatment.

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Lesson 6—Barriers

This lesson builds comfort and skills in the proper use of male and female condoms and dental dams. Students learn the proper steps to correct condom use as well as how to make a dental dam out of a male condom. After analyzing reasons why people may not use condoms, students identify strategies to make barrier methods easier to use. Finally, students practice effective communication skills as they respond to common condom use refusals.

Lesson 7—Pregnancy Prevention

Students examine their attitudes and perceptions of responsibility in using contraception. Students review the process of fertilization and conception in order to understand how a pregnancy happens. They then research and report out on the range and variety of birth control methods commonly used by teens, including abstinence and withdrawal. Finally, students learn about accessing confidential, low-cost family planning services.

Lesson 8—Impacts of STDs & Pregnancy

Students watch *Two Seconds*, a movie written and directed by Maine teens depicting three inter-related scenarios about teen pregnancy, STD transmission and an abusive relationship. Students analyze the impact of these situations on the film's characters and reflect on what the characters may have done differently. Likewise, students identify sources for help if they find themselves in similar situations. Finally, students compare the positive and negative impact of parenting on relationships, education and career, social life and finances.

Lesson 9—Healthy Relationships

This lesson follows up on the abusive relationship story from *Two Seconds*. Students compare healthy versus unhealthy characteristics of relationships. They then define and analyze relationship characteristics in their own relationships, defining for themselves what they want in a partner.

Lesson 10—Making a Plan

Students identify red flags in various scenarios that may lead to unprotected sex and offer strategies to get out of risky situations. They then review how the brain may influence their decision making and how pausing can help a person make healthy decisions. Applying what they have learned from *Best Practices*, students offer advice to fictional characters about making healthy sexual decisions. Finally, each student personalizes strategies they will use to stick to their boundaries by writing a letter or an email to their future self.

Best Practices in STD/HIV and Pregnancy Prevention

CURRICULUM CONTENTS

Credits and Introduction

Lessons

- 1. Talking about Sexual Health
- 2. Achieving your Goals
- 3. Effective Communication
- 4. Sexually Transmitted Diseases
- 5. What's the Risk?
- 6. Barriers
- 7. Pregnancy Prevention
- 8. Impacts of STDs & Pregnancy
- 9. Healthy Relationships
- 10. Making a Plan

Supplemental: Sexual Anatomy Review

Additional *Best Practices* materials can be found at www.mainefamilyplanning.org/bestpractices