

Lesson 7.8

Introduction to Protection Methods

Connecting the Lessons

Builds on *Lesson 7.7: Introduction to Sexually Transmitted Infections*.

Lesson Goals

- Name the pros and cons of the protection methods most commonly used by teens.
- List the key steps in putting on a condom.
- Identify places to obtain condoms and other protection methods.
- Identify resources for information and support.

Preparation & Materials Checklist

- ☐ Obtain at least 1 condom for teacher to demo—more if students will be examining them—and something on which to demo the condom. (Check with class[es] to make sure there are no airborne latex allergies among students.)
- ☐ Obtain lubricant.
- ☐ Obtain samples of the various protection methods for students to see.
- ☐ Review student handouts:
 - Handout 7.8-3: Resources
 - Handout 7.8-4: Protection Methods Homework
 - Protection Methods Chart
- ☐ Copy family letter and family activity.
- ☐ Have:
 - SEL Skills poster
 - Steps to Correct Condom Use cards
 - Condom(s), demo tool, lubricant
 - Anonymous Questions Box
 - Slips of paper for anonymous questions

Terms to Use

- Abstinence ■ Effectiveness rate ■ Lubricant ■ Emergency contraception
- Protection ■ Condom ■ Hormonal method

SEL Skills Addressed

Responsible decision making

Logic Model Determinant(s)

Increase communication with parents and other caring adults.

Increase knowledge of how pregnancy happens.

Increase awareness of delaying sex as the healthiest choice.

Increase positive attitudes toward condoms and/or other protection methods.

Increase knowledge of how STIs are transmitted.

Increase knowledge of correct and consistent use of condoms and other protection methods.

→ *Teacher Note***Inform Students of Topics**

This lesson includes an educator-led condom demonstration. For students who have experienced sexual violence/trauma, this activity may bring up these experiences. Be sure to remind students of their right to self-care, and be sure to follow up with students as needed. It may be helpful to alert the school counselor about topics covered, prior to teaching this lesson.

Activity 7.8-1

5 minutes

Process Family Activity

Process Family Activity from Lesson 7.7

Process Questions

1. Did you do the activity with your parent or other caring adult?
2. Name some feelings you had while doing this activity.
3. Name something you learned or discovered during this conversation.
4. What might you do differently as a result of this conversation with your parent or other caring adult?

Get Real for Parents

Remind students to have their parent/caring adult use the access code to log in to the mobile website.

Activity 7.8-2

10 minutes

Why Use Protection?

Review abstinence as the most effective protection method

Ask students to imagine there are two hockey goalies in a big game. One is wearing a goalie mask, and the other is not. Which player is better protected? Why? What are the possible outcomes for each player? Would a professional goalie ever consider playing without protection?

Ask how this scenario might be related to the idea of becoming sexually active.

Explain that while abstinence is the most effective protection method, offering 100% protection when used correctly, most people become sexually active at some point in their lives. It is important for them to be prepared and know how to protect themselves from STI transmission and unintended pregnancy if and when they become sexually active.

Ask students to recall some of the ways in which STIs can be transmitted, as discussed in the last class. Review how pregnancy can occur.

Review the *Get Real* definition of abstinence with students—choosing not to engage in certain sexual behaviors, including any sexual behaviors that can result in pregnancy or STIs, including HIV. Explain that people may have different ideas about what constitutes abstinence, from no sexual contact of any kind, including kissing, to abstaining only from sexual intercourse, and all points in between. Ask students why abstinence is a

safe and healthy choice for middle school students (*decreases risks of unintended pregnancy, STI transmission, etc.*).

Discuss reasons for using protection

Engage students in small-group discussions to answer the question “Why use protection?” by assigning different groups to brainstorm each of the following questions:

- Why might a person decide to become sexually active?
- What are some of the risks involved with becoming sexually active? (*Unintended pregnancy, STI transmission.*)
- What are some positive outcomes of becoming sexually active when the time is right? (*Pleasure, increased intimacy, ability to take on responsibility.*)

Have each group share the top two ideas they came up with.

State that before becoming sexually active, people can ask themselves some important questions:

- Do I feel ready?
- Can I talk to my partner about having sex?
- Am I comfortable seeing my partner without clothes on?
- Do I have information about and access to methods that can protect me from getting pregnant or getting someone else pregnant?
- Do I know how to protect myself from STIs, including HIV?
- Am I prepared for how I’ll feel if the relationship ends?

Explain that considering these questions is essential to responsible decision making and that today’s class will help provide answers to some of them.

→ Teacher Note

Dispel common myths

Some people think...

- You can’t get pregnant the first time you have sex.
- Pulling out is easy and effective protection.
- Urinating after intercourse will prevent pregnancy because urine flushes out the sperm.
- Taking large quantities of medication or drinking alcohol will protect against pregnancy.

Explain the reasons these things are myths.

→ Teacher Note

These questions can be written on a poster and hung in class as a helpful resource. One of the most common anonymous student questions is about sex readiness, and these questions can help students examine their own values about sex readiness.

Activity 7.8-3

30 minutes

Protection Methods: Condom Use and Hormonal Protection

Explain effectiveness rates

Explain how protection methods are rated by their effectiveness against unintended pregnancy. For example, abstinence is 100% effective if it is

practiced correctly and consistently. A protection method that is 98% effective means that out of 100 people using that method, only 2 got pregnant within a year of use.

Ask what the most commonly used protection methods for teens might be (*external condoms, the pill, other hormonal methods*).

Discuss condoms and brainstorm where to get them

Emphasize that there is only one method that protects against *both* unintended pregnancy *and* STI transmission if a person chooses to become sexually active: the condom. Explain that a condom works by putting a barrier between the two partners' bodies to prevent the transfer of fluids, as well as some skin-to-skin contact. A condom can be used during oral, anal and vaginal intercourse to be effective against STI transmission. There are two kinds of condoms: external and internal.

Ask where condoms are available, and write the answers on the board (*health centers, corner stores, grocery stores, pharmacy, etc.*). Explain that condoms are often available for free at local health centers and that teens do not need a prescription or parent permission to buy external condoms. Internal condoms are available by prescription and for free at some health clinics.

Explain that the external condom has a 98% perfect-use effectiveness rate and a typical-use effectiveness rate of 82%.

Ask students what they think is meant by the term “typical use” and why this is a lower number, meaning less effective. (*Typical use factors in human error, such as incorrect or inconsistent use of the method.*)

Explain that during the next activity, students will learn the correct steps for using an external condom. Using condoms correctly raises the effectiveness rate and lowers the chances the condom will fail.

→ Teacher Note

Effectiveness rates

Two numbers are usually given for a method's effectiveness rate: one for “correct and consistent use” and one for “typical use.” For example, the pill has a 99.5%–99.9% effectiveness rate for correct and consistent use, and a 92% effectiveness rate for typical use.

Typical use reflects human error, such as forgetting some pills, taking the pills with medication that decreases the effectiveness, not renewing the prescription in time, etc.

Effectiveness rates are not random. People can choose to improve effectiveness by using protection methods correctly and consistently.

→ Teacher Note

Types of Condoms

- **Latex:** Prevents pregnancy and STIs.
- **Polyurethane:** Prevents pregnancy and STIs.
- **Animal skin:** Prevents pregnancy only. Does not prevent STIs.

Dental dams A dental dam is a latex square that can be placed over the vulva or anus to help prevent STI transmission during oral sex. A barrier can also be made by cutting a condom so it can be unrolled into a square.

Condom lineup

Hand out the 17 Steps to Correct Condom Use cards to volunteers. Have the other students act as the judges.

Explain that students with cards should come to the front of the room and hold their cards facing out so the class can read them. The students with cards should read all the cards and then try to arrange themselves in the correct order of the steps. Student judges can call out suggestions for the correct order and say when they think the correct order has been achieved.

The order of the cards may vary a bit (e.g., “Penis is erect” might come first) and that’s OK, but be sure the main sequence of use is correct.

Demonstrate condom use

Facilitate a condom demonstration using a condom and either the condom demonstration tool or fingers, and ask students to explain the importance of each step.

Conclude the activity by stressing that when condoms are used correctly by following the steps just covered, the effectiveness rate will be closer to the 98% perfect-use figure. People should always use a new condom every time they have sex.

Pass around condoms for students to see and handle.

Discuss how hormonal methods increase protection

Explain that a way to increase protection is to combine condom use with a hormonal birth control method.

Ask students which hormonal methods they have heard of and list on the board, prompting when necessary. Methods that should be listed include the pill, the patch, the ring, the shot, the implant and the IUD.

Explain that these methods are used by people with a uterus and protect against

→ *Teacher Note*

Lubricants improve condom effectiveness

- **Why?** They prevent rips and tears and can make condom use and intercourse more comfortable for both partners. Most condoms come lubricated, but some couples prefer more lubricant than these provide.
- **Where?** Water-based and silicone-based lubricants can be found next to the condoms at the store.
- **Never use oil-based lubricants** (e.g., baby oil, lotion, shampoo, vegetable oil, cocoa butter, Vaseline) because the oil breaks down the latex and makes the condom ineffective. Use water-based or silicone-based lubricants sold at the store near the condoms.
- **Tip:** Lubricant can be put inside the condom as well as on the outside to increase comfort for the partner wearing the condom.

→ *Teacher Note*

The IUD

The IUD is a small device inserted into the uterus by a doctor. The IUD changes the environment of the uterus so the sperm and the egg cannot meet. Some IUDs also include hormones. Depending on the type of IUD, this method may be used for 3 to 12 years. IUDs do not protect against STIs.

unintended pregnancy only. They do not provide protection against STI transmission. But, when used with a condom, the two together provide highly effective protection against both unintended pregnancy and STI transmission.

Explain that hormonal methods work by using hormones to prevent ovulation. Without an egg present, the person cannot get pregnant. So if a condom were to fail, there wouldn't be an egg present to fertilize. Hormonal methods also thin out the uterine lining and thicken the cervical mucus, which also helps prevent pregnancy.

Ask where a person could get a hormonal method. Explain that these methods must be obtained through a clinic or health care provider. Free, confidential services and prescriptions often are available to teens without parent permission.

If time permits, you may want to go over more specific facts for each of the hormonal methods listed above. Be sure to leave time for the process questions at the end.

Explain emergency contraception

Explain that emergency contraception (EC) (sometimes called the “morning-after pill”) is a method of pregnancy prevention that works after intercourse to prevent pregnancy. It was designed to be used when another method has failed or when nothing was used. Be sure students understand that, if exposure to an STI has occurred, emergency contraception will not prevent an infection.

→ *Teacher Note*

Get the latest info on EC

Access to emergency contraception varies by method. Be sure to review the Protection Methods Chart before the lesson, and go to www.getrealeducation.org for the latest information on any changes to laws or regulations pertaining to emergency contraception.

Describe the different types of emergency contraception:

- Some kinds are a pill, or a series of pills, that are taken after unprotected intercourse.
- The copper IUD also acts as emergency contraception when it is inserted after unprotected intercourse.

In general, emergency contraception can be used up to 5 days after unprotected sex, but it is more effective if taken sooner. The effectiveness rate varies by method.

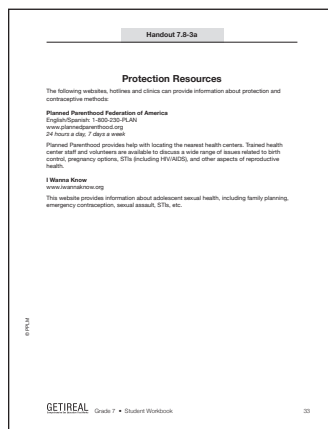
Note that access to emergency contraception varies by method too. As of summer 2014, some pills are available on pharmacy shelves or from a health clinic for anyone of any age to purchase. Other pills are available from a pharmacist or health clinic with certain age restrictions. The copper IUD is only available with an appointment with a clinician.

Conclude and review

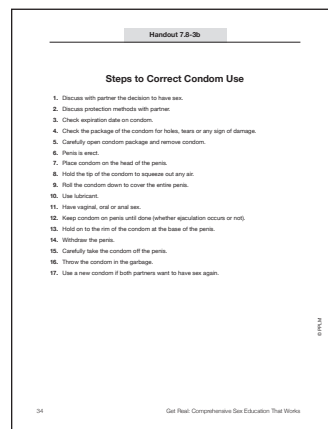
Process Questions

1. Name one new thing you learned during this lesson.
2. What do you think the most effective protection method would be for a teen who has decided to become sexually active? Why? (*Condoms and a hormonal method; good effectiveness rate for both pregnancy and STI prevention.*)
3. What would you tell a sexually active friend who was not using any protection method?

Ask students to look through **Handouts 7.8-3a, 7.8-3b** and the **Protection Methods Chart** in the Student Workbook. Explain that the chart includes important information on all types of protection methods, and that the Steps to Correct Condom Use can be found on the back of the Protection Resources handout.



Handout 7.8-3a
Student Workbook
page 33



Handout 7.8-3b
Student Workbook
page 34

Method	Effectiveness (Pregnancy)	Effectiveness (STI)	Availability
Condom (male)	98%	98%	Widely available
Condom (female)	95%	95%	Widely available
Diaphragm	92%	92%	Widely available
Cervical cap	91%	91%	Widely available
Vaginal sponge	89%	89%	Widely available
Pharmaceutical	99%	99%	Widely available
Injection	99%	99%	Widely available
Implant	99%	99%	Widely available
Barrier	99%	99%	Widely available
Other	99%	99%	Widely available

Chart
Student Workbook
pages 35–36

Activity 7.8-4

Homework

Ask students to turn to **Handout 7.8-4** in the Student Workbook. Review and have them complete it for homework. (*See the Teacher's Guide for additional talking points when reviewing the homework after students have completed it.*)

Handout 7.8-4

Protection Methods Homework

Instructions: Circle True or False (T or F) for each of the following statements. If the answer is False, rewrite or correct the statement to make it true.

1. T F Hormonal methods reduce the risk of unintended pregnancy by preventing ovulation.
2. T F Urinating after vaginal intercourse prevents pregnancy because it flushes out the sperm.
3. T F If someone chooses to become sexually active, condoms are the only method that protects against both unintended pregnancy and STI transmission.
4. T F It's OK to use oil-based lubricants with condoms.
5. T F Condoms can be purchased at corner stores, grocery stores and drug stores. They are often given out for free at health centers and school-based clinics.
6. T F IUDs can be bought at a pharmacy.
7. T F Emergency contraception (EC) is sometimes called the "morning-after pill."
8. T F A person cannot get pregnant before they get their first period.
9. T F If a condom breaks, it's most likely because it was not put on correctly.

Handout 7.8-4
Student Workbook page 37

Activity 7.8-5

Anonymous Questions Box

Review anonymous questions

Address student questions from the Anonymous Questions Box. Give students a new question prompt to answer if they don't have one about the class material, and remind students to place their anonymous questions in the box as they leave the classroom.

Activity 7.8-6

Family Activity

Explain family activity

Review the Family Activity for this lesson.

Get Real for Parents

Remind students to have their parent/caring adult use the access code to log in to the mobile website.

Family Activity 7.8

The Best Protection

Over a lifetime, most people choose to be sexually active at some point. When a person starts being sexually active, it's very important to be protected from unwanted pregnancy and sexually transmitted infection (STI).

The best protection method is the one a person feels safe and comfortable using consistently and correctly every time. That method could be abstinence or postponement. It could be a barrier or hormonal method. There are many things to think about when choosing a protection method—people have to choose what will work most effectively for them.

Instructions: First, the student and parent or other caring adult should brainstorm together the qualities of an "ideal" protection method and how it would work. List some of its advantages (e.g., is invisible, affordable, etc.). Use your imagination and work together to create the next great product on the market.

Next, list all the protection methods you both can think of that are currently available. Feel free to refer to the Protection Methods Chart. Compare and contrast how they measure up against the "ideal protection method" that you brainstormed.

Discuss:

1. What might stop someone from using a protection method?
2. How would you explain to someone why a protection method is important?
3. Name three resources in your community where someone can get protection methods.

Tip for Friends

The goal of this activity is to provide conversation between you and your parent/caring adult in their time. It provides a great chance to share what you learned about protection methods, and share your feelings and ideas.

Note: If it's embarrassing to discuss these topics with your parent/caring adult, you can write your thoughts down and share them with your friend. Write your thoughts down and share them with your friend. Write your thoughts down and share them with your friend.

30

Family Activity 7.8

Student Workbook page 39

References**Protection methods information and statistics:**

Trussell, J., Contraceptive efficacy, *Contraceptive Technology*, edited by R.A. Hatcher, J. Trussell, A.L. Nelson, W. Cates, D. Kowal, and M. Policar, 20th ed., New York: Ardent Media, 2011.

Steps to Correct Condom Use

Discuss with partner the decision to have sex	Penis is erect
Discuss protection methods with partner	Place condom on the head of the penis
Check expiration date on condom	Hold the tip of the condom to squeeze out any air
Check the package of the condom for holes, tears, or any sign of damage	Roll the condom down to cover the entire penis
Carefully open condom package and remove condom	Use lubricant

Continued

Have vaginal, oral or anal sex	Carefully take the condom off the penis
Keep condom on penis until done (whether ejaculation occurs or not)	Throw the condom in the garbage
Hold on to the rim of the condom at the base of the penis	Use a new condom if both partners want to have sex again
Withdraw the penis	




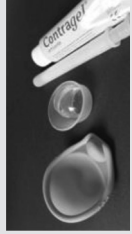



Protection Methods Chart

	Type of Method	Method Description	How Well Does it Work?*	Where can you get the method?	Benefits (Pros)	Possible Side Effects (Cons) (not all are listed)
Delaying Sex/ Abstinence		To not have sex or to delay having sex until a later date.	100% if used consistently	Don't have to go anywhere to get this method.	Does not require prescription. Free. Protects against HIV and STIs.	None.
External Condom		Covers the penis with a thin layer of latex or polyurethane that acts as a barrier between partners. Cannot be reused. Can be used with all other methods.	82-98%*	Drugstores, health centers, school nurses and supermarkets.	Can buy at many stores. Free at many health centers. Can help prevent early ejaculation. Protects against HIV and many STIs.	Can break or slip off. May irritate someone with a latex allergy.
Internal Condom		Made of Nitrile (latex-free material). Inserted into the vagina or anus. Acts as a barrier between partners. Cannot be reused. Can be used with all other methods.	79-95%*	Prescribed by health care provider, covered by most insurances.	Good for people with latex allergy. Protects against HIV and other STIs.	May slip out of place during vaginal or anal intercourse. May be difficult to insert.
Copper IUD (intrauterine device)		The Copper IUD is a small plastic and copper device that is inserted into the uterus. The IUD changes the environment of the uterus so that sperm and egg cannot meet. The IUD may be left in place for 12 years. Can also be used as emergency contraception.	99.2-99.8%*	A health care provider must prescribe, insert, and remove.	No medicine to remember. Lasts a long time.	May increase cramping and cause heavier and longer periods. Does NOT protect against HIV or STIs.
Progestin IUD (intrauterine device)		The hormonal IUD is a small plastic device that is inserted into the uterus. It contains Progestin. The IUD changes the environment of the uterus so that sperm and egg cannot meet. The IUD is effective for up to 4-6 years depending on the brand.†	99.2-99.8%*	A health care provider must prescribe, insert, and remove.	No medicine to remember. May improve period cramps and bleeding. Lasts a long time.	May cause breakthrough bleeding. Does NOT protect against HIV or STIs. May cause irregular bleeding.
The Implant		The implant is a matchstick-sized plastic rod that is put under the skin of the arm. It contains Progestin, which prevents ovulation and thickens cervical mucus which prevents sperm from reaching an egg. The implant is effective for up to 4 years.	99.9%*	A health care provider must prescribe, insert, and remove.	No medicine to remember. Lasts a long time.	After 1 year of use, many have no period. Does NOT protect against HIV or STIs.
The Shot		The shot is an injection that contains the hormone Progestin, which prevents the release of an egg and thickens cervical mucus. The shot must be injected every 3 months.	91-99.9%*	A health care provider must prescribe and inject.	Private. No daily, monthly, or weekly medicine to remember.	May cause spotting, no period, or weight gain. Side effects may last up to 6 months after stopping shots. Does NOT protect against HIV or STIs.
The Pill		The pill contains hormones (Progestin and often Estrogen) that prevent the release of an egg and thicken cervical mucus. The pill must be taken at the same time each day.	91-99.7%*	A health care provider must prescribe.	Some pills may make periods more regular and less painful.	May cause spotting for the first 1-2 months. Does NOT protect against HIV or STIs.

Planned Parenthood League of Massachusetts Education and Training (www.pplm.org). Please call PPLM's Sexual Health Counseling and Referral Hotline for additional information and the most up-to-date prices: (877) 686-5772 option #3 *2012 Planned Parenthood Federation of America, Inc. "Your Contraceptive Choices" Birth Control Series. †Brand names vary. Consult health care provider with any questions or concerns.

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Protection Methods Chart Continued

	Type of Method	Method Description	How Well Does it Work?*	Where can you get the method?	Benefits (Pros)	Possible Side Effects (Cons) (not all are listed)
The Patch		The patch sticks to the skin, and contains Progestin and Estrogen that are absorbed through the skin. These prevent the release of an egg and thicken cervical mucus. A new patch is applied once a week for three weeks, followed by a patch-free fourth week.	91-99.7%*	A health care provider must prescribe.	Can make periods more regular and less painful. No pill to take daily.	Can irritate skin under the patch. May cause spotting the first 1-2 months. Does NOT protect against HIV or STIs.
The Ring		The ring is a small vinyl acetate ring that is inserted into the vagina. The ring contains Progestin and Estrogen, which prevent the release of an egg and thicken cervical mucus. The ring is inserted for three weeks, and then removed for one ring-free fourth week.	91-99.7%*	A health care provider must prescribe.	Can make periods more regular and less painful. No pill to take daily.	Can increase vaginal discharge. May cause spotting the first 1-2 months of use. Does NOT protect against HIV or STIs.
Emergency Contraception (EC)		Emergency contraception pills are designed to prevent pregnancy after unprotected vaginal intercourse. EC can prevent the release of an egg and thicken cervical mucus. The copper IUD is 99% effective as EC if placed within 5 days of unprotected sex.	Plan B®, generic brands: 75-89% if taken within 3 days after unprotected sex† ella®: 85% up to 5 days after unprotected sex†	Plan B®, generic brands: All ages, no prescription required. ella®: Requires prescription from health care provider.	Available at pharmacies, health centers, or health care providers.	May cause stomach upset or nausea. Next period may come early or late. May cause spotting. Does NOT protect against HIV or STIs.
Diaphragm and Cervical Cap		The diaphragm and cervical cap are barrier methods that cover the cervix to prevent the sperm from reaching an egg. These must be used with a spermicide. Diaphragm and cervical cap must be inserted with each intercourse.	Diaphragm: 81-94%* Cervical cap: 79.5- 90.5%*	A health care provider must prescribe and size the diaphragm and cervical cap.	Can last several years. Costs very little to use.	Can be difficult to use. May cause irritation if allergic to latex, silicone, or spermicide. Does NOT reduce the risk of HIV. May reduce the risk of some infections.
Spermicide (cream, gel, sponge, foam, inserts, film)		Spermicides are inserted into the vagina before intercourse. Spermicides kill sperm. Spermicide must be inserted before each intercourse.	71-85%* May raise the risk of getting HIV.	Drugstores, doctor's offices, health centers and supermarkets.	Can buy at many stores. Comes in many forms. Can be put in as part of foreplay.	May irritate the skin of the vagina, penis, or anus. Can be messy. May raise the risk of HIV/STIs.
Dental Dam		The dental dam is a thin layer of latex, plastic, or polyurethane that acts as a barrier between partners when placed over the vulva (outside of vagina) or anus during oral sex. Can also use a condom cut in half. A new dental dam must be used each time.	This device is used for oral sex only. Protects against HIV and other STIs.	Drugstores, doctor's offices, health centers and condom shops.	Protects against HIV and other STIs.	May irritate someone with a latex allergy. Dental dam may slip out of place if not held around the area receiving oral sex.
Permanent Birth Control: Laparoscopic Tubal Ligation, Vasectomy		Permanent birth control is a procedure performed by a doctor that is intended to prevent the sperm from joining the egg by blocking either the fallopian tubes (carry an egg) or the vas deferens (carry the sperm).	Two of the most common types are Laparoscopic Tubal Ligation & Vasectomy: 99.5-99.9%* Talk to a health care provider about other options.	A health care provider must prescribe and perform these procedures.	Private. No medicine to remember.	Mild bleeding or infection may occur right after the operation, reaction to anesthetic, reversibility cannot be guaranteed. Does NOT protect against HIV or STIs.

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Updated 07/2018

Protection Methods Homework

1. **True** Hormonal methods reduce the risk of unintended pregnancy by preventing ovulation.
2. **False** Urinating after vaginal intercourse prevents pregnancy because it flushes out the sperm.
Urinating after vaginal intercourse does not prevent pregnancy because the urethra and vagina are different openings in the vulva.
3. **True** If someone chooses to become sexually active, condoms are the only method that protects against both unintended pregnancy and STI transmission.
4. **False** It's OK to use oil-based lubricants with condoms.
It is not OK. The oil breaks down the latex and makes the condom ineffective.
5. **True** Condoms can be purchased at corner stores, grocery stores and drug stores. They are often given out for free at health centers and school-based clinics.
6. **False** IUDs can be bought at a pharmacy.
IUDs can be inserted only by a medical professional at a doctor's office or clinic.
7. **True** Emergency contraception (EC) is sometimes called the "morning-after pill."
8. **False** A person cannot get pregnant before they get their first period.
A person can get pregnant before they get their first period because ovulation happens before menstruation.
9. **True** If a condom breaks, it's most likely because it was not put on correctly.

GET|REAL

Comprehensive Sex Education That Works

Dear Parent or Other Caring Adult,

Today in *Get Real* class, students learned about the protection methods available to help prevent pregnancy and sexually transmitted infections (STIs) for people who choose to be sexually active. Children are naturally curious about their bodies and how they work. During puberty, they want and need the facts about menstruation, wet dreams, other body changes, sex and reproduction. They want to know about sexual and social relationships. They need to know about STIs, birth control methods, and the potential risks of sexual activity.

At this age many kids worry a lot about whether they are “normal.” Concerns about body shapes, such as penis or breast size, may begin to arise. It’s important to reassure them that no two people are the same, and it’s very normal to be different. Preteens often want to “fit in” with their peers, yet, at the same time adults want to help them to think for themselves and not get carried away by the crowd.

Below are some real questions middle school students asked through the Anonymous Questions Box used in the *Get Real* classes. You can visit websites listed on the Parent Resources list sent home earlier, or use a book, such as *It’s Perfectly Normal*, by Robie Harris, to help you answer these and other questions. Practice how you might answer, sharing both the facts and your values, if your child asks you any of these questions.

Anatomy and Physiology

- What is the average size of a penis?
- When does someone first start having their periods? Why do they have a period?

Contraceptives

- When you have sex, do you have to use more than one condom?
- Do condoms always protect people from getting a disease?

Pregnancy

- How old was the youngest person to get pregnant?
- If you smoke when you’re pregnant, what will happen to the baby?

Sexual Behavior

- Is sex fun?
- Even if you think you are ready, how do you know you really like someone enough to have sex?
- Is oral sex healthy if there are no diseases involved?
- Can you have sex with people younger than you?

Gender and Sexual Identity

- How do gay people have sex?
- Why are people transgender?
- If it’s OK for girls to wear pants, why can’t boys wear skirts?

The Best Protection

Over a lifetime, most people choose to be sexually active at some point. When a person does start having sex it's very important to be protected from unintended pregnancy and sexually transmitted infection (STI).

The best protection method is the one a person feels safe and comfortable using consistently and correctly every time. That method could be abstinence or postponement. It could be a barrier or hormonal method. There are many things to think about when choosing a protection method—people have to choose what will work most effectively for them.

Instructions: First, the student and parent or other caring adult should brainstorm together the qualities of an “ideal” protection method and how it would work. List some of its advantages (e.g., is invisible, affordable, etc.). Use your imagination and work together to create the next great product on the market!

Next, list all the protection methods you both can think of that are currently available. Feel free to refer to the Protection Methods Chart. Compare and contrast how they measure up against the “ideal protection method” that you brainstormed.

Discuss:

1. What might stop someone from using a protection method?
2. How would you explain to someone why a protection method is important?
3. Name three resources in your community where someone can get protection methods.

→ *Tips for Parents*

The goal of this activity is to promote conversations between *Get Real* students and caring adults in their lives. It provides a great chance to review material covered in class, research resources for additional information, and share your feelings and values.

Note: If it's embarrassing to discuss these issues with one another, you can decide to:

- Say so—and do the exercise anyway.
- Skip parts of it.
- Write down your answers and then read each other's answers.
- Laugh, giggle, blush, and go right on talking.

Parent or Other Caring Adult Signature

Student Signature