

GET | REAL

Comprehensive Sex Education That Works



Involving
Parents

Empowering
Youth

Supporting
Teachers

Middle School

SECOND EDITION

Foreword by

Robie H. Harris
Author of *It's Perfectly Normal*

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advancing
health
equity **etr.**

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Planned Parenthood League of Massachusetts

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Foreword

Are you a teacher who may feel a bit nervous about teaching *Get Real* for the first time—or who may be looking forward to teaching it? Are you a parent who may not feel ready to talk with your child about sexual health—or who may be eager to have conversations with your child through *Get Real's* Family Activities? No matter how you feel, you're about to embark on an important journey with young people—a journey that can help them stay physically and emotionally healthy as they go through puberty and adolescence. *Get Real* will provide just what you need to help today's kids and teens acquire accurate information and develop the skills they need to form healthy relationships and make healthy decisions about their sexual health.

One of the questions many parents and teachers ask is, "Do our kids really need to know this information now?" "Yes!" is our answer. That's because, if kids have accurate and up-to-date information along with the support of trusted adults such as parents and teachers, most can make good decisions for themselves about sexual health issues. And since today's kids and teens are constantly surrounded and bombarded by sexual words and images online and through advertisements, social media, videos, movies, television and music, they need the information found in *Get Real*. Sometimes, the media do provide accurate information. Other times, the media provide inaccurate or misleading information that can lead to unhealthy and risky behaviors.

Friends are another major source of information, but what they say may not always be reliable. Our responsibility as parents and teachers is to ensure that our kids and teens have the most up-to-date and accurate information, so they can make healthy decisions—decisions that will reduce their chances of engaging in behaviors they are not yet ready for, of acquiring a sexually transmitted infection (STI) or of becoming parents before they are mature enough to take responsible care of a baby. *Get Real* provides teachers and parents with the latest information about sexual health and relationships, which teachers can share with kids in the classroom and which parents or other caring adults can talk about with kids at home.

One of the reasons *Get Real* works is because it's organized in a developmentally appropriate way. That means the curriculum makes sense to young people because the information is geared to them. This makes it possible for them to incorporate what they learn into their daily lives and relationships. Planned Parenthood League of Massachusetts has been providing high-quality sexual health information and education to young people and adults for over 100 years. That's a long time to be thinking about the very best ways to deliver essential, life-saving information to young people, and to their parents and teachers as well. Planned Parenthood League of Massachusetts has drawn on its vast scientific and medical expertise in developing the *Get Real* curriculum. It has also integrated all of its experience in talking to thousands and thousands of parents, teachers, kids and teens into this curriculum, which combines classroom learning with take-home activities. Most important, *Get Real* supports the role of parents as the primary sexuality educators for their

children. It also supports their role in raising healthy children by helping families talk about their own personal values when discussing sexual health issues.

Researchers who've studied parent-child communication about sex and sexuality found that more than 40% of adolescents had had sexual intercourse before talking to their parents about safer sex, birth control or STIs. So, it's never too soon to start talking! Parents can take advantage of many teaching moments to talk about the subject, such as mention of sex or sexuality on a TV show, a pregnancy in the family, sexuality education classes in school, or a visit to the doctor or nurse around the time of puberty. When caring adults finally start that first conversation, most discover that such talks can be easier than expected. If kids are asking about sexual issues, it's best to give them an answer right away—or as soon as possible if the answer warrants some reflection or investigation. Parents should seize opportunities as they arise, and a child who is asking for information is the best opportunity there is.

The time has come to roll up your sleeves and start talking to your kids, or to the students in your classroom, because it's really important. Young people may react to the information in *Get Real* in different ways. Some will enthusiastically discuss all aspects of the curriculum; some will plug their ears and implore you to stop talking; and some will do both. Whatever their reaction, it's all perfectly normal. Chances are they will be absorbing a great deal of what you're teaching them. And, at the very least, they'll know they have caring adults to whom they can go when they want to learn or get advice about sexuality and relationships.

Robie H. Harris

Children's book author:

It's Perfectly Normal: Changing Bodies, Growing Up, Sex and Sexual Health,
illustrated by Michael Emberley

It's So Amazing!: A Book About Eggs, Sperm, Birth, Babies and Families,
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It's Not the Stork!: A Book About Birth, Babies, Bodies, Families, and Friends,
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Introduction

About the Curriculum

Curriculum Objectives

The *Get Real* middle school curriculum is designed to delay sex and to increase correct and consistent use of protection methods when a person becomes sexually active. *Get Real* views sexuality in the context of relationships and focuses on social and emotional skills as a key component of making responsible and healthy decisions. Additionally, parent engagement through family activities is central to *Get Real*.

As a result of participating in the *Get Real* program, students will be able to:

- Connect self-awareness, self-management, social awareness and relationship skills to responsible decision making.
- Name reasons abstinence is a healthy and safe choice for youth their age.
- Describe consequences of sexual activity and ways to reduce the risk of negative consequences.
- Apply a decision-making model to real-life situations.
- Demonstrate assertive communication and refusal skills for delaying sexual intercourse and avoiding unprotected sexual activity.
- Increase their opportunities for conversations with their parents and other caring adults about personal, family and community beliefs about sexual health.

Premises on Sexual Health

The *Get Real* middle school curriculum consists of 27 sequential lessons taught across the middle school years—9 lessons each in Grades 6, 7 and 8. The following four premises are built into the curriculum:

- Sexual health is an integral part of health education.
- Parents and other caring adults are students' primary sexuality educators.
- Relationship skills are a key element of a comprehensive sexuality education curriculum.
- While abstinence from sex is the most effective way to avoid sexually transmitted infections and unintended pregnancy, adolescents require a comprehensive understanding of sexual health, sexuality and protection methods, which they will need when they become sexually active.

When addressing abstinence with teens, educators must recognize that there is a range of ways in which people might define this term, from no sexual contact at all, to abstaining only from sexual intercourse. *Get Real* adopts the definition from the Sexuality Information and Education Council of the United States (SIECUS), which defines abstinence as

voluntarily choosing not to engage in certain sexual behaviors, including any sexual behaviors that can result in pregnancy or sexually transmitted infections (STIs), including HIV.

Health Standards

Get Real is mapped to the National Health Education Standards (NHES) using the Sexual Health Module of the Health Education Curriculum Analysis Tool (HECAT). Additionally, the curriculum is aligned to the National Sexuality Education Standards (NSES), which also follow the NHES. These standards support best practices for teaching health education and sexuality education in the classroom. These national standards are endorsed and acknowledged by the Centers for Disease Control and Prevention (CDC) and many state level administrations, school districts and boards, as well as many federal funding guidelines. For more information on the program's alignment to these standards go to www.etr.org/get-real or www.getrealeducation.org.

Parent Engagement

The *Get Real* program recognizes parents as the primary sexuality educators of their children. *Get Real* also understands that not all young people have a parent who is accessible, or a parent with whom they can discuss matters of sexual health. Parents, guardians, grandparents and other caring adults in students' lives impart family and community values, attitudes and beliefs, and *Get Real* values their important role. For brevity, these roles are referred to in the curriculum by the phrase "parents and other caring adults." *Get Real* encourages students to talk with a parent or other caring adult about the material covered in class, and every lesson includes Family Activities that encourage dialogue between students and their parents and other caring adults.

Family Activities: *Get Real* for Parents Website and Handouts

Get Real for Parents is a mobile website that provides parents and other caring adults with access to Family Activities corresponding to each of the lessons in *Get Real*. These interactive activities, along with frequently asked parent questions, conversation starters and other resources, are conveniently accessible on a desktop, phone, tablet, laptop or other mobile device. A pilot and formative evaluation by Wellesley Centers for Women of the *Get Real* for Parents website found that frequency of conversations between parents and teens about relationships and sexuality increased from the start to the end of the *Get Real* program. Educators receive a unique code that provides access for parents and other caring adults to the *Get Real* for Parents website.

Family activities can also be accessed as handouts, which are included as a part of the curriculum and student workbooks.

In whichever ways parents and caring adults access the information, they can engage in conversations with their children about relationships, sex and sexuality with full support of the *Get Real* curriculum and materials.

Parents and other caring adults are supported through:

- A mobile website called *Get Real* for Parents, available in English and Spanish.
- Informational letters that explain what's being covered in class and the corresponding Family Activity handouts. These are available in nine languages.
- Strategies and tips for talking with their children about topics covered in class.
- Additional education resources.

Schools implementing *Get Real* are encouraged to host parent orientations to give an overview of the curriculum and to answer any questions parents and other caring adults may have. The Family Activities, via handouts and / or the *Get Real* for Parents website, should be a focus of the meetings, as these will allow families to explore their own values about sex and sexuality, learn developmentally appropriate information, and develop the skills to communicate with their children about sexuality. On www.getrealeducation.org, a Parent Toolkit is available to support educators in their engagement of parents and other caring adults. The resources in the Parent Toolkit thoroughly support teachers in linking families to *Get Real* for Parents, hosting a parent night, answering frequently asked parent questions, and providing additional resources to parents and other caring adults.

Social and Emotional Learning

Get Real is framed with the concept of social and emotional learning, or SEL. The program uses SEL because all consensual sexual activity takes place in the context of relationships. According to the Collaborative for Academic, Social, and Emotional Learning (CASEL):

SEL is a process for helping children and even adults develop the fundamental skills for life effectiveness. SEL teaches the skills we all need to handle ourselves, our relationships, and our work effectively and ethically. These skills include recognizing and managing our emotions, developing caring and concern for others, establishing positive relationships, making responsible decisions, and handling challenging situations constructively and ethically.¹

Get Real incorporates the five SEL skills of self-awareness, self-management, social awareness, relationship skills and responsible decision making as key elements in learning how to negotiate relationships. If young people can negotiate relationships, they can better negotiate sexual relationships. These skills are integrated into the content of the lessons through activities and process questions. Educators are trained in the SEL framework during the *Get Real* Training of the Educator curriculum training.

In *Get Real*, the tenets of SEL are incorporated into activities that lead students to use and develop these skills.

- To apply **self-awareness**, students are asked in each lesson to reflect on their personal attitudes and beliefs about the lesson topic, and to consider how these attitudes and beliefs affect their everyday lives.
- Students gain **self-management** skills as they develop their beliefs and put voice to them, associating beliefs with personal boundaries, guidelines and goals.

¹ See www.casel.org/basics/definition.php.

- The many activities that focus on empathy and giving advice introduce students to **social awareness**, and help them gain the ability to see the different roles they play and understand how their actions affect their relationships and the larger community.
- Because *Get Real* is grounded in the belief that consensual sexual activity occurs in the context of relationships, nearly every lesson includes activities that practice **relationship skills**, including refusal skills, negotiation and communication.
- Students practice **responsible decision making** when they use their knowledge of sexual health topics to make informed decisions in scenario situations. These role-play opportunities and the use of a decision-making model utilized throughout the curriculum help equip students with skills to make healthy decisions about their sexual health in the real world.

Inclusive and Learner-Focused

The *Get Real* program understands that traditional sex education is rarely inclusive of LGBTQ+ young people, and therefore strives to be as inclusive as possible, not just in the gender and sexual identity lesson, but throughout the entire curriculum. *Get Real* was reviewed for LGBTQ+ inclusivity in fall 2017. Changes were made throughout the lessons to make language more intentional, and activities more meaningful and accessible to the lived experiences of young LGBTQ+ people. Several lessons and activities were piloted with LGBTQ+ high school students to ensure the language and approaches felt accessible, affirming, inclusive and learner-focused. Additionally, some changes were informed by a pilot implementation with pregnant and parenting teens in high school during the 2017-2018 school year.

Trauma-Informed Approach

A trauma-informed approach is another critical overlay in comprehensive sexuality education to ensure the information taught is intentional, mindful and accessible to those students who have experienced trauma in their lives. In fall 2017, *Get Real* was reviewed for a trauma-informed approach. Changes were made throughout the lessons to make language more intentional and supportive to students by recognizing the effects trauma can have and how it may present itself in the classroom. Additional guidance was added to sections of the Teacher's Guide to support educators as they navigate the curriculum and the specific needs of the students in their classrooms.

Acknowledgements

The *Get Real* Training Institute wishes to acknowledge Cardea for its review of *Get Real* for LGBTQ+ inclusivity and a trauma-informed approach, as well as the following schools and community organizations for piloting and reviewing some of the lessons and activities: Boston GLASS; Brimmer and May GSA; *Get Real* Teen Council; Match Charter Public School; and educators at Planned Parenthood of the Greater Northwest and the Hawaiian Islands.

Additionally, the *Get Real* Training Institute thanks staff and reviewers involved in the alignment of *Get Real* to the Sexuality Module of the National Health Education Standards, especially Antonella Lisanti, MPH, Harvard T.H. Chan School of Public Health in Social and Behavioral Sciences.

Preparation

Teacher Preparation

Teaching a comprehensive sexuality education program can be challenging, humorous and extremely rewarding. Skilled facilitation is vital for the successful implementation of *Get Real*. It's recommended that *Get Real* is taught by teachers who have a high level of comfort in discussing sexuality with students. *Get Real* educators are strongly encouraged to attend the *Get Real* Training of the Educator curriculum training offered by Planned Parenthood League of Massachusetts or a certified *Get Real* replication partner.

Laws and Policies

It's essential that schools implementing *Get Real* adhere to all state and local laws and policies regarding informed parental consent, opt-out procedures, classroom discussions of parents' beliefs about sex, and mandated reporting.

Support from District and School Administration

Get Real should be implemented with full support from the school and district administrations. To optimize buy-in for this curriculum, follow standard procedures for curriculum implementation in the school district and ensure that the school administration is aware of the curriculum and its content.

Supporting and Preparing Parents and Other Caring Adults

Parents and other caring adults play a critical role in how young people learn about their sexual health. The *Get Real* curriculum is best implemented with the support of parents at the school. It's recommended that teachers hold a parent orientation before the curriculum is delivered in the classroom. The objectives of this meeting should be to familiarize parents with the curriculum, allow them to ask questions, explain the Family Activities and access to the *Get Real* for Parents website, and engage and support parents in their role as the primary sexuality educators of their children.

Confidentiality

Students can expect confidentiality from a teacher only if the teacher has no concerns about student safety. It's a legal requirement for teachers to report suspected abuse and neglect on behalf of certain vulnerable groups, including young people under age 18. It's important for educators to know and understand school policies and state requirements for mandated reporting before beginning to teach *Get Real*. State policies on mandated reporting can be found at: www.childwelfare.gov/systemwide/laws_policies/state/

How To Use This Curriculum

The *Get Real* Approach and Educator Training and Support

The *Get Real* Approach is the teaching philosophy and heartbeat of *Get Real*. The tenets of the *Get Real* Approach enable educators to meet students where they are; use intentional and inclusive language; present medically accurate, age-appropriate facts versus personal values; engage parents and other caring adults as the primary sexuality educators of their own children; and present the information in a way that respects the rights and abilities of each student. The *Get Real* Approach to teaching comprehensive sexuality education is part of what makes *Get Real* unique.

The *Get Real* program trains educators to implement the curriculum using the *Get Real* Approach, ensuring that they develop the necessary knowledge and skills to become competent and comfortable teaching comprehensive sexuality education to students. Educators who complete the *Get Real* Training of the Educator are eligible for continuing education credits. A *Get Real* Training of the Trainer is also available for communities seeking sustainability of comprehensive sexuality education over many years.

The Teacher's Guide was created to provide educators with additional facts to know, ways to address potential challenges, strategies for engaging students and useful resources. Ongoing support through an online community, updated materials and additional resources are also available.

Implementation Guidelines

The *Get Real* middle school curriculum is designed to be implemented with 9 sequential classes per year for 3 years while students are in the sixth, seventh and eighth grades, and the lessons are designed to be age appropriate for these particular grades. While schools should use their judgment and discretion about what will serve their students best, altering the lesson sequence, changing the lessons, or omitting lessons or activities may affect the behavior-change outcomes around which the curriculum is designed.

Each *Get Real* lesson is designed to be taught in 45–55 minutes. If classes are generally taught during longer blocks, the lessons can be expanded through prolonged discussion or review of anonymous questions. However, it will be difficult to implement the classes in less than 45 minutes each without substantial changes to the lessons. If necessary, two lessons may be taught in a 90-minute block.

In order to best facilitate group work and discussion, the optimal class size for teaching *Get Real* is 18–25 students.

Family Activity Implementation

In order to establish parents as the primary sexuality educators of their children, it's important to encourage completion of the activities through the *Get Real* for Parents website and/or send home the Family Activities to be completed with the corresponding lessons. Methods of delivery for Family Activities can vary depending on the systems in place at each school. Examples of delivery methods include home mailings at the start of the school

year, sending the *Get Real* for Parents website access code and/or handouts of the Family Activities home with students each week, posting the handouts on a school website, or emailing the website access code and/or handouts directly to parents.

It's important to acknowledge that it may be uncomfortable for students and parents to talk about sex and sexuality. Teachers can model how to approach a parent or other caring adult about completing the Family Activities, and it may be helpful to remind students that their parents have been informed about the activities. Students will identify caring adults in their lives in the first lesson of each grade. These may include parents, mentors, other family members, religious leaders, coaches and teachers. Students who are concerned about asking a parent to participate may be able to complete the Family Activities with another caring adult.

Parents should be encouraged to participate in the *Get Real* Family Activities (via the *Get Real* for Parents website or handouts) at the parent orientation sessions, and they can be reminded of the importance of these activities through any outgoing mailings, emails or newsletters from the school. The Parent Letters that accompany each Family Activity handout explain the topic of the lesson, provide more information, and offer tips on how to talk to their children about the topic. Note that some states may have laws regarding classroom discussions of parents' beliefs about sex. Teachers should research these and adapt how the Family Activities are processed in order to be in compliance with state laws.

Although implementation of the Family Activities is essential and completion is to be expected, it should not be a required component of the class or student grades. Due to the sensitive nature of the material, as well as a student's comfort and safety in approaching a parent or caring adult about this material, students should not be penalized for not completing the Family Activities. Teachers can encourage participation by offering incentives to the class that turns in the most homework. If the *Get Real* class meets only once a week, a Family Activity box or folder placed in the classroom can help keep students from losing or forgetting the assignments. To limit loss of handouts, encourage students to give the *Get Real* for Parents website access code to their parent or caring adult, so completion of the Family Activities can be done online from the convenience of a phone, tablet or other mobile device.

Setting and Resources Required

Get Real lessons should be taught in a classroom setting, either in school or out of school, with a dry-erase board or blackboard and room to post student work. All other materials required are listed on the first page of each lesson.

Classroom Materials

An Activity Kit accompanies the *Get Real* curriculum. The kit includes scenario cards, wall signs and posters. A protection methods kit is also included. These materials can assist in faster and easier preparation and presentation of the lessons, and can support various learning needs.

Role-Plays

Role-plays allow cognitive and behavioral rehearsal and help develop communication skills. Using role-plays in *Get Real* enables students to practice communicating in sensitive situations, such as standing up to peer pressure or decision making about sexual behaviors. Some middle school students will not identify with the characters in role-play scenarios that deal with sexual activity. To reduce discomfort with these scenarios, teachers can tell students that the characters are older teens or young adults who need advice in order to make decisions. While keeping the goal of the role-plays intact, teachers can feel free to change details such as names or locations to make the scenarios more appealing and culturally relevant to the students. Changing names is also important to avoid embarrassing a student who may have the same name as a character in a scenario.

In order for the role-plays to improve self-efficacy of refusal skills, students must demonstrate their responses. Simply observing a role-play is not enough to change self-efficacy. Having students practice with a partner is a good way to ensure that everyone has a chance to demonstrate the skills being covered in the lesson. Some students are excited to participate in role-plays, while others are not. It's important that students who don't feel comfortable performing in front of the class have the option to practice with a partner, even if they do not act it out for the class. Students can also be given the option to create a role-play script and then act as director of the scene for their classmates to act out.

Creating a comfortable space is necessary to engage students in role-plays. Depending on the students' developmental and social needs, teachers can modify the role-play situations or the way in which the role-plays are rehearsed in class. One option is to develop realistic assertive responses for the scenarios before class, and then model these responses before students begin the role-play activity, or use them to prompt students who draw a blank during the role-play practice.

Modeling a role-play first in front of the class helps give students a clearer sense of what to do. However, teachers must avoid putting themselves in a compromising situation in acting out a scenario with a student. Avoid modeling scenarios that feature dating relationships or threatening behaviors, or model these scenarios only with an adult classroom aide rather than a student volunteer. Coach students to act out assertive responses to pressure or problem behaviors, not the problem behavior itself.

It's essential to allow students time to process the role-plays and think about what components they could apply in real life. Whenever students are practicing role-plays, the teacher should circulate through the classroom to help process the situations with pairs or small groups and to keep students on task. It is good classroom management to establish the teacher as the master director of the role-plays who can freeze the action at any time and change out student actors when needed. The Assessment section below offers a simple tool for assessing student performance during role-plays.

Assessment

It's important to be able to gauge student learning throughout *Get Real*. There are a number of different formal and informal assessments built in to the curriculum.

- **Process questions** are included after many activities. These are intended to extend learning and assess student understanding through discussion. If students have difficulty answering the process questions, it may indicate that they do not fully comprehend the material. It's important that students not only recall facts and figures, but be able to apply the information and skills they are learning to their own lives. Process questions offer a chance to extend the information learned in class to broader scenarios or discussions.
- **Class participation** is another tool that can be used to assess student comprehension. However, keep in mind that many students may feel shy or reluctant to participate in a sexuality education class. Consider participation beyond speaking up in front of the whole class. Students may also be assessed on their participation in small-group or partner activities, or in written work. Participation assessment should also reward students who stay on task without distraction.
- **Student handouts** throughout the lessons offer a way to evaluate student work and assess their learning and application of knowledge and skills. These handouts, as well as the family activities for each lesson, are found in the Student Workbook.
- **Final assessments** can be used to assess overall learning in *Get Real*. Suggestions for final creative project options and a test question bank are provided at each grade level.
- **Role-plays** allow for cognitive and behavioral rehearsal of communication and refusal skills during difficult situations. The following simple checklist may be used to assess student performance in role-plays. Teachers are encouraged to share these criteria with students so they understand how they will be evaluated in the performance of the various role-plays.

Skill	3 = Demonstrates Excellence	2 = Shows Good Work at Times	1 = Needs Improvement
Stays focused and on task while practicing role-plays with partner			
Creates responses that are plausible and constructive			
Applies knowledge from the lesson			
Shows efficacy in assertive communication and refusal techniques			

Logic Model

Get Real is grounded in Bronfenbrenner's socio-ecological model (1979) and employs elements of the Theory of Planned Behavior (Aizen, 1991, 2006). A social emotional learning approach is incorporated throughout the curriculum. *Get Real* is based on a behavior/determinant/intervention (BDI) logic model. The health goal of the curriculum is to promote positive sexual health behaviors and beliefs among students who have participated in the *Get Real* middle school comprehensive sexuality education curriculum, resulting in a delay of sexual initiation, a reduction of unintended pregnancies, and higher use of protection methods.

The behaviors targeted are as follows:

- Delay initiation of sex.
- Increase correct and consistent use of condoms and/or other protection methods.

Each behavior has corresponding determinants (risk and protective factors that affect the behavior). Lessons in *Get Real* are mapped to these determinants, which are listed on the first page of each lesson.

It should be noted that if lessons are altered or activities are omitted, some lessons may no longer address a particular determinant, which may alter the intended behavior-change outcomes.

For
Teacher Review
Only

Get Real: Comprehensive Sex Education That Works Logic Model Snapshot

Get Real/ Intervention Lessons Designed to Change Risk & Protective Factors	Risk & Protective Factors (Determinants) Affecting Sexual Behaviors Addressed in <i>Get Real</i>	Behaviors Directly Affecting Get Real's Health Goal	Get Real's Health Goal
<p>Grade 6 Lessons</p> <p>6.1: Creating the Classroom Climate Activities 6.1-1 – 6.1-5</p> <p>6.2: Communication and Refusal Skills Activities 6.2-1 – 6.2-5</p> <p>6.3: Relationships and Boundaries Activities 6.3-1 – 6.3-8</p> <p>6.4: Anatomy and Reproduction: The Penis and Related Parts Activities 6.4-1 – 6.4-5</p> <p>6.5: Anatomy and Reproduction: The Vagina and Related Parts Activities 6.5-1 – 6.5-6</p> <p>6.6: Puberty Activities 6.6-1 – 6.6-4</p> <p>6.7: Abstinence Activities 6.7-1 – 6.7-4</p> <p>6.8: Decision Making and Values Activities 6.8-1 – 6.8-6</p> <p>6.9: Grade 6 Conclusion and Review Activities 6.9-1 – 6.9-7</p> <p>Grade 7 Lessons</p> <p>7.1: Creating the Classroom Climate Activities 7.1-1 – 7.1-6</p> <p>7.2: Media Literacy and Sexuality Activities 7.2-1 – 7.2-4</p> <p>7.3: Gender and Sexual Identity Activities 7.3-1 – 7.3-5</p> <p>7.4: Creating a Safe School Environment Activities 7.4-1 – 7.4-6</p> <p>7.5: Deciding About Sexual Behavior Activities 7.5-1 – 7.5-5</p> <p>7.6: Defining and Maintaining Abstinence Activities 7.6-1 – 7.6-6</p> <p>7.7: Introduction to Sexually Transmitted Infections Activities 7.7-1 – 7.7-6</p> <p>7.8: Introduction to Protection Methods Activities 7.8-1 – 7.8-4</p> <p>7.9: Grade 7 Conclusion and Review Activities 7.9-1 – 7.9-5</p> <p>Grade 8 Lessons</p> <p>8.1: Creating the Classroom Climate Activities 8.1-1 – 8.1-5</p> <p>8.2: Healthy and Unhealthy Relationships Activities 8.2-1 – 8.2-5</p> <p>8.3: Addressing Obstacles to Abstinence Activities 8.3-1 – 8.3-5</p> <p>8.4: Comprehensive Protection Methods Activities 8.4-1 – 8.4-7</p> <p>8.5: STI/HIV Transmission Activities 8.5-1 – 8.5-5</p> <p>8.6: Living with HIV Activities 8.6-1 – 8.6-5</p> <p>8.7: Refusal Skills Activities 8.7-1 – 8.7-4</p> <p>8.8: Goals and Decision Making Activities 8.8-1 – 8.8-4</p> <p>8.9: Get Real Capstone Project Activities 8.9-1 – 8.9-4</p>	<p>↑ ↑ ↑ ↑ ↑</p> <p>KNOWLEDGE of:</p> <ul style="list-style-type: none"> • Increase awareness of delaying sex as the healthiest choice • Increase knowledge of how pregnancy happens • Increase knowledge of how STIs are transmitted • Increase knowledge of how drugs and alcohol can affect decision making around sexual behavior • Increase awareness of consequences when condoms and/or other protection methods are not used • Increase knowledge of correct and consistent use of condoms and other protection methods • Increase knowledge of resources for community or reproductive health information and services <p>PERCEPTION OF RISK of:</p> <ul style="list-style-type: none"> • Increase perceived risk in having an older partner • Increase perceived risk of STIs <p>VALUES AND ATTITUDES towards:</p> <ul style="list-style-type: none"> • Increase positive attitudes toward condoms and/or other protection methods • Address values around abstinence and sex • Address attitudes about abstinence and sex <p>PERCEPTION OF PEER NORMS about:</p> <ul style="list-style-type: none"> • Address perceptions of peer norms regarding sexual behavior <p>SKILLS to:</p> <ul style="list-style-type: none"> • Increase self-efficacy of SEL skills to delay and /or refuse sex • Promote SEL skills to increase use of condoms and/or other protection methods • Increase self-efficacy to demand the use of condoms and/or other protection methods <p>PARENT-CHILD COMMUNICATION about:</p> <ul style="list-style-type: none"> • Increase communication with parents and other caring adults <p>INTENTIONS to:</p> <ul style="list-style-type: none"> • Address future goal setting 	<p>↑ ↑ ↑ ↑ ↑</p> <p>Delay initiation of sex</p> <p>Increase correct and consistent use of condoms and/or other methods of protection</p>	<p>Reduce incidence of unintended pregnancy</p>

Development of *Get Real* and Research Results

An Evidence-Based Program

In February 2015, *Get Real* was added to the U.S. Department of Health and Human Services (HHS) list of evidence-based programs. Inclusion on this list requires meeting stringent criteria for effectiveness.

Piloting and Formative Evaluation

Get Real was piloted in five Massachusetts schools over a 3-year period. During pilot testing, the curriculum was taught by trained Planned Parenthood educators. Experiences and observations gathered while teaching the curriculum contributed greatly to curriculum revisions. The final year of pilot testing culminated in a formative evaluation conducted by Wellesley Centers for Women (WCW), a scholarly research institution affiliated with Wellesley College. The formative evaluation, carried out with 500 sixth, seventh, and eighth graders, showed promising results, even though the students had only been exposed to 1 year of the 3-year curriculum.

The formative evaluation's results included the following findings:

- Students' belief in their ability to talk about abstinence increased after exposure to *Get Real* lessons. This finding suggests that the abstinence focus of the curriculum was effectively transmitted to the students.
- After exposure to *Get Real*, students who believed they could talk to a dating partner about abstinence were less likely to report having had sex, suggesting that increased trust in one's ability to talk about abstinence is associated with not being sexually active.
- Students who believed their peers had not had sex were less likely to have had sex themselves. Conversely, students who believed their peers were sexually active were more likely to report being sexually active. Both of these trends suggest that perceived peer norms about sex have an important role in adolescents' own sexual activity.
- Students identified their parents and teachers as the most important and most trusted sources of information on sex before they took the *Get Real* class. After exposure to *Get Real*, teachers' and parents' importance as sources of information increased significantly. None of the other sources of information, such as peers, the internet, video games, or even books, were rated as highly as these two sources before or after exposure to *Get Real*.

Impact Evaluation Design

In 2008, Wellesley Centers for Women began the process of conducting a longitudinal impact evaluation to study the effectiveness of *Get Real*. This evaluation was a scientifically rigorous study featuring 24 middle schools in the greater Boston area. Half of the schools were randomly assigned to have *Get Real* taught by a trained educator to a cohort of students for 3 years, and half continued with their usual sex education programs. A total of 2,453 students participated in the evaluation. Of the participating schools, 22 were located in an urban area, 13 were traditional public schools, 9 were public charter schools, and 2 were private middle schools. The sample was 52% female and 48% male, and 33% were of

Hispanic or Latino ethnicity. With respect to race, 53% were Black/ African American, 28% White, 6% Asian/ Pacific Islander, 2% Native American and 11% biracial/ multiracial.

During the evaluation, students completed surveys that measured knowledge, attitudes, and sexual behavior. Surveys were given at the beginning of sixth grade before beginning the program, and follow-up surveys were conducted in seventh, eighth and ninth grades. Researchers also conducted focus groups with students, and interviewed parents about parent-child communication relating to relationships and sexuality.

Impact Evaluation Results

The ultimate aim of the evaluation was to establish whether *Get Real* had any impact on students' first vaginal sex. The sixth–eighth grade analyses showed that there was a significant difference between students attending the treatment schools compared to those in the comparison schools, with students in treatment schools reporting lower levels of sexual activity. The research findings show that *Get Real* works to delay sex among students who received the program, empowers parents to help their children delay sex, reinforces family communication and improves communication skills for healthy relationships.

In terms of delaying sex:

- There was a significant effect for both boys and girls, with 16% fewer boys and 15% fewer girls who received *Get Real* having had sex by the end of 8th grade compared to boys and girls who had sex education “as usual” in comparison schools.
- For boys, family involvement showed an additional effect, with boys who completed Family Activities in sixth grade being less likely to report having had sex in eighth grade than boys who did not complete these activities.

In addition to delaying sex, the research study found that *Get Real* also:

- Reinforced family communication through family activities and empowered parents to help their children delay sex.
- Improved communication skills for healthy relationships. Both boys and girls who received *Get Real* identified that they were more prepared to assert themselves and communicate in a relationship, including saying ‘no’ to sex.

Get Real for Parents Website

In order to increase parents' access to the Family Activities in *Get Real*, the *Get Real* for Parents mobile website was created. *Get Real* for Parents was designed to further engage, support and provide guidance to parents and other caring adults as they have conversations about sex, relationships and sexual health with their children. The website is conveniently accessible via any mobile device including a phone, tablet or laptop. A student's parent or caring adult can log into the website using a code provided by the child's teacher, set up an account based on the child's grade, and access a dashboard with interactive Family Activities that follow the scope and sequence of the lessons in a *Get Real* classroom. *Get Real* for Parents also offers other resources, answers to frequently asked

questions, and conversation starters to support parents in their ongoing communication with their children.

Piloting and Formative Evaluation

Working with Wellesley Centers for Women (WCW), *Get Real* for Parents was piloted in a Spanish-speaking school in Massachusetts, with 25 students receiving *Get Real*. WCW led a teen focus group and conducted parent interviews to assess comfort and usefulness of the website. During the 2016–2017 school year, eight *Get Real* schools or out-of-school programs in Colorado, Massachusetts and Virginia participated in the formative evaluation.

One hundred sixty three parents or caring adults participated in the evaluation. Parents received website access codes from their child's *Get Real* educator, consented to participation for themselves and their child, and set up an account based on the grade of their child. Parents and teens took pre- and post-surveys, and parents engaged in phone interviews. Survey and interview questions assessed frequency of talk about sexuality and relationships, parent comfort, activity usefulness, and use of online tools as a way to support communication on these topics.

The formative evaluation showed promising results and included the following findings:

- Both parents and teens reported an increase in frequency of talk about relationships and sexuality from the start to the end of the *Get Real* program, using the activities in *Get Real* for Parents.
- For boys, frequency of talk was reported at a higher rate than girls, mirroring *Get Real*'s impact evaluation research, and highlighting the importance of gender in understanding family communication.
- Activities helped teens and parents bring up new conversations and questions.
- Parents appreciated the encouragement to talk with their teens even if they were uncomfortable.

Schools that can implement the program as intended are likely to reap significant benefits from exposing their students to a relationship-skills-based comprehensive sexuality education program with a Family Activities component.

Related Publications

Charmaraman, L., & McKamey, C. (2011). Urban early adolescent narratives on sexuality: Accidental and intentional influences of family, peers, and the media. *Sexuality Research and Social Policy*, 8(4), 253-266.

Erkut, S., Grossman, J. M., Frye, A. A., Ceder, I., Charmaraman, L., & Tracy, A. J. (2013). Can sex education delay early sexual debut? *Journal of Early Adolescence*, 33, 479-494.

Grossman, J. G., Frye, A., Charmaraman, L., & Erkut, S. (2013). Family homework and school-based sex education: Delaying early adolescents' sexual behavior. *Journal of School Health*, 83(11), 810-817.

Grossman, J. M., Tracy, A. J., Charmaraman, L., Ceder, I., & Erkut, S. (2014). Protective effects of middle school comprehensive sex education with family involvement. *Journal of School Health*, 84(11), 739-747.

For
Teacher Review
Only

For Teacher Review Only

Grade 6

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Lesson 6.1

Creating the Classroom Climate

Connecting the Lessons

Students will apply skills learned to all sixth-grade lessons.

Lesson Goals

- Create group rights and responsibilities.
- Communicate with peers about sexuality.
- Identify an adult with whom the student can talk about sexuality.

Preparation & Materials Checklist

- ☐ Review SEL skills.
- ☐ Review meanings of “sex” and “sexuality.”
- ☐ Create Class Rights and Responsibilities poster.
- ☐ Review student handouts:
 - Handout 6.1-2: SEL Skills
 - Handout 6.1-3: Find Someone Who...
 - Handout 6.1-4: Resources
- ☐ Copy family letter and family activity.
- ☐ Have:
 - SEL Skills poster
 - Anonymous Questions Box
 - Slips of paper for anonymous questions

Terms to Use

- Sexuality
- Sexual behavior
- Caring adult

SEL Skills Addressed

Self-awareness, self-management, social awareness, relationship skills, responsible decision making

Logic Model Determinant(s)

Increase communication with parents and other caring adults.

→ Teacher Note

Be sure to include “confidentiality” in the list of Rights and Responsibilities and to explain your role as a trusted adult and mandated reporter. See the Teacher’s Guide pages for additional resources.

Activity 6.1-1

10 minutes

Introduction and Class Rights and Responsibilities

Establish classroom expectations and group rights and responsibilities

Welcome students to the *Get Real* comprehensive sexuality education classes. State your goals for the class.

Ask students what they expect to learn in this class, and add to their responses. Explain that *Get Real* is about more than discussing sexual behavior.

Introduce Class Rights and Responsibilities and label a large piece of paper with the heading “Rights and Responsibilities.” Ask students:

- What rights do you need in order to engage in a class focused on sexuality and sexual health?
- What rights or responsibilities can we add to support one another in feeling safe discussing these important topics?
- What can we all do to make this class successful?

Prompt students as needed and add responses to the list.

Have students sign the list, or give a thumbs up/verbal agreement to the Group Rights and Responsibilities. Post the list for future reference.

Icebreaker game (optional)

If this class is new to you, lead a brief icebreaker to get to know the students. Go around the room and ask students to say their first names and one thing they feel comfortable sharing about themselves that starts with the same letter as their first name (e.g., a favorite color, sport, or hobby; how many people are in their families).

→ Teacher Note

Important rights and responsibilities to include

- Be enthusiastic
- Feel positive about your sexuality
- Feel how you feel
- Pass
- Self-care
- Be heard
- Express your opinions
- Ask questions
- Be respected
- Not have assumptions made about you
- Privacy
- Confidentiality

Activity 6.1-2

10 minutes

Introduction to Social and Emotional Learning

Explain key points of SEL

To go along with the Rights and Responsibilities list, introduce Social and Emotional Learning (SEL) skills that students will focus on this year.

Explain that SEL is a process for helping people develop the fundamental skills for life effectiveness.

SEL teaches the skills we all need to handle ourselves, our relationships, and our decisions. Display SEL Skills poster and ask students to turn to **Handout 6.1-2** in the Student Workbook. Give definitions and elicit examples from students. Students should use these examples to create a sketch for each SEL skill on Handout 6.1-2. To assist the students, you may provide example sketches on the SEL poster.

- **Self-awareness:** Getting to know and trust yourself. This includes recognizing your feelings and values, gaining self-confidence, and being aware of what makes you individual and unique.
- **Self-management:** Expressing feelings in healthy ways, keeping track of progress toward goals.
- **Social awareness:** Understanding others and being able to “put yourself in another person’s shoes.” It also includes recognizing individual and group differences and similarities; finding and using family, school and community resources; and understanding the difference between fiction and reality.
- **Relationship skills:** Building healthy relationships, resisting social pressure, dealing with conflict, seeking help when needed.
- **Responsible decision making:** How to think through pros and cons of choices and how your actions may affect others; making healthy decisions, keeping yourself healthy and safe, and respecting yourself and others.

Process Questions

1. What pictures did you draw to represent each of the skills? Why did you choose those pictures?
2. Why are these skills so important for relationships?

Activity 6.1-3

10 minutes

Find Someone Who...

Encourage students to interact and begin talking about sexuality

Ask students to turn to **Handout 6.1-3** in the Student Workbook. Students should go around the room asking other class members the yes-or-no questions on the sheet in any

→ Teacher Note

Self-Management, Rights & Responsibilities

Refer to the Rights and Responsibilities list and talk about how self-management will help students stick to the list even when it is difficult (self-control, impulse control).

Handout 6.1-2
Student Workbook
pages 1-2

→ Teacher Note

Slang

Explain that students can use slang if they don't know the medically appropriate term, but they are expected to learn and use medically appropriate terms as the class progresses.

order. When they find a “yes,” they should write that person’s initials on the line provided. Tell the students the goal is to ask these questions verbally and to get to know as many people as possible (no more than two answers from the same person). A discussion will follow when they finish. (*Refer to the Teacher’s Guide for this lesson for additional talking points.*)

Process Questions

1. Name a feeling you had while participating in this activity. Why do you think you felt that way?
2. Which questions were easy to ask? Which were more difficult?
3. Which questions were difficult to get a “yes” for? Why?
4. Why did we do this activity? (*Explain the reasons: to communicate and get to know each other, but mostly to have students talk about sexuality and begin to become more comfortable with the topic; self-awareness.*)

Key Points for Discussion

- When might it be hard to stand up for personal values or beliefs? Emphasize that everyone has things (personality traits, style choices, values) that make them unique. Ask students to think of a situation in which one of these things was questioned. Would it be harder to stand up for personal values then? Why?
- The lying question: Why might someone lie to a friend? What does it feel like to tell a lie or to be lied to? What effect can lying have on a friendship? What can we do to make people more comfortable being honest?
- What about the question asking for slang words for “elbow”? Why is it difficult to find slang for “elbow”? What if the question were to find someone who knew a slang word for the body part “breast”? Would that be easier and if so, why? What does that say about our society’s comfort level around sex/sexuality/body parts?
- What is the difference between sex and sexuality? Elicit a definition of “sex” from the students (*assigned sex or sexual behaviors*) and explain that sex is one part of sexuality. Emphasize that sexuality is not one defined thing but a combination of many aspects, including values, relationships, self-expression, and romantic or sexual feelings. Stress that sex is one part of sexuality and that throughout the *Get Real* classes, students will be looking into all that makes up sexuality, including puberty, body functions and feelings.

Handout 6.1-3

Name _____

Find Someone Who...

Instructions: Find someone in the room to answer “yes” to each item listed below. When someone answers “yes” to an item, have that person initial the blank provided. Do not ask more than two questions of one person.

Are you someone who...

knows how long a pregnancy is? _____

has trouble saying no to friends? _____

knows at least three slang words for “elbow”? _____

knows the difference between sex and sexuality? _____

can talk about sexuality openly with parents or guardians? _____

feels comfortable standing up for your personal beliefs and values? _____

has told a lie to a friend? _____

GETREAL Grade 6 • Student Workbook 3

Handout 6.1-3
Student Workbook page 3

Activity 6.1-4

5 minutes

Caring Adults Brainstorm

Students identify trusted adults

The Find Someone Who... handout mentioned discussing sexuality with parents or guardians. Tell students that this class may bring up a lot of thoughts and questions. Encourage them to share their feelings about this class and sexuality with adults who care about them and with whom they feel comfortable discussing sex and sexuality.

Ask students to turn to **Handout 6.1-4** in the Student Workbook. Ask them what makes an adult trustworthy and list their answers on the board. Have each student take a minute to write down the names of three adults on their resources sheet that they can go to with questions or concerns about sexuality. This may be a parent, relative, teacher, coach, youth group leader, or other person in their lives.

Explain that in addition to the caring adults they have listed, there are other resources available to help them address their questions.

Handout 6.1-4

Resources

Caring Adults Three caring adults I can talk to about sexuality are...

1. _____

2. _____

3. _____

Books

It's Perfectly Normal, by Robie H. Harris, illustrated by Michael Emberley, Latest edition 2014. (Recommended for 10- to 15-year-olds; available in Spanish.)

What's Happening to My Body? Book for Girls: A Growing Up Guide for Parents and Daughters, by Lynda Madison and Anna Madison. Latest edition 2009. (Recommended for 9- to 15-year-olds.)

What's Happening to My Body? Book for Boys: A Growing Up Guide for Parents and Sons, by Lynda Madison and Anna Madison. Latest edition 2009. (Recommended for 9- to 15-year-olds.)

Website and Phone Resources

Planned Parenthood Federation of America
English/Spanish: 1-800-230-7526
www.p Parenthood.org
24 hours a day, 7 days a week

Planned Parenthood provides help with locating the nearest health centers. Trained health center staff and counselors are available to discuss a wide range of issues related to birth control, emergency options, STIs (including HIV/AIDS), and other aspects of reproductive health.

LSBT National Help Center
Toll-Free National Helpline: 1-888-845-4354
Toll-Free Youth Helpline: 1-800-548-7543
Mon-Fri, 4 p.m.-midnight, Sat. noon-8 p.m. EST
www.lgbtnationalhelpcenter.org
help@lgbtline.org

This helpline offers telephone and email peer counseling, as well as factual information and local resources for cities and towns across the United States.

I Weave Know
www.iweaveknow.org

This website provides information about adolescent sexual health, including family planning, emergency contraception, sexual assault, STIs, etc.

(continued)

GETREAL Grade 6 • Student Workbook 5

Handout 6.1-4

Student Workbook
pages 5-6

Activity 6.1-5

Anonymous Questions Box

Introduce Anonymous Questions Box

Explain the Anonymous Questions Box. The teacher will hand out small pieces of paper at the beginning or end of class. Explain that students may write any questions they have about the topics covered in class or about sexuality in general on those pieces of paper. They should not put their names on their questions for anonymity, and their questions will be put into a box that will be available during all sessions. The questions will be answered as frequently as the teacher determines. The teacher will also pose another question to the class (e.g., "What is your favorite video game?"), which students should answer if they do not have a class-related question. Everyone should write something on a slip of paper and place it in the box in order to preserve the anonymous nature of the activity.

Activity 6.1-6

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 6.1

When You Were in Middle School

Instructions: Student and parent or other caring adult should work on this activity together.

Students, ask your parent or other caring adult to think about when they were in middle school. Then ask them the following questions. If they answer "yes" to a question, ask them to sign their initials on the line. Ask them the follow-up questions in italics to get more information. If you need, you may ask other parents or other caring adults in order to get as many lines related as possible. Feel free to share knowledge from class today with your parents or other caring adults.

When you were in middle school, were you someone who...

- Know the difference between sex and sexuality? _____
- Do you know the difference now? _____
- Was taught slang words for private body parts? _____
- Why do you think people use slang words? _____
- Was ever teased by someone you cared about? _____
- Why did they do it? How did it feel? _____
- Had a trusted adult to talk to about sexuality? _____
- Why might it help to have a trusted adult to talk to? _____

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Parent or Other Caring Adult Signature _____ Student Signature _____

GETREAL Grade 6 • Student Workbook 7

Family Activity 6.1

Student Workbook page 7

References

Information on SEL:

Collaborative for Academic, Social, and Emotional Learning: www.casel.org

For
Teacher Review
Only

GET|REAL

Comprehensive Sex Education That Works

Dear Parent or Other Caring Adult,

As you know, your child is attending a program called *Get Real: Comprehensive Sex Education That Works* in health class. The program gives young people the facts, in an age-appropriate way, on a range of sexual health and relationship topics. *Get Real* is based on Social and Emotional Learning (SEL). It teaches students five skills that lead to healthy behavior.

Self-awareness, or getting to know and trust yourself.

Self-management and self-control to express feelings in healthy ways.

Social awareness, or being able to put yourself in “another person’s shoes.”

Relationship skills to build healthy relationships, deal with conflict, and seek help when needed.

Responsible decision making, such as how to think through pros and cons of choices and how your actions may affect others.

Get Real supports parents and other trusted caregivers as the primary sexuality educators of their children. The teen years and changes of puberty can bring lots of questions and concerns, for both parents and their kids. For many reasons, it can be hard to talk with children about sex. But results of a national survey show that parents have the most influence on their children’s decisions about sex. A recent study from the National Campaign to Prevent Teen Pregnancy (currently publishing as Power to Decide) found that 87% of U.S. teens said it would be easier to put off having sex if they were able to talk more openly about sex with their parents. But 37% said they had never had a talk with their parents on this topic.

Students in the *Get Real* program will bring home Family Activities for each class. These offer a way for parents and kids to start conversations and share information. Please complete the homework with your student, sign, and return the sheet to class. Students who can’t do the homework with a parent can work with a guardian or other trusted adult.

These Family Activities give parents a way to explore their own values about sex and sexuality. They’ll help you provide facts and information your child can understand, and build skills for having ongoing talks about this important topic. Good information and other resources can also be found on the Planned Parenthood League of Massachusetts parent education website. Just visit www.pplm.org/education and click on “Parent Education.”

Good communication between parents and children helps families share their values and enables young people to make healthier, safer and wiser decisions about sex. The themes below can help with your ongoing talks. Remember, it’s your right and responsibility to share your values and the facts about sex with your child!

(continued)

Continued

Themes for Parents to Think About

Rights and Responsibilities

- As a parent, you have the right and responsibility to be your child's primary sexuality educator.
- Children *will* get information about sex from the culture around them.
- Taking action to teach your children about sexuality gives you the best chance of having a positive effect on their choices and experiences.
- Children have a right to get information from their parents. They also have a responsibility to understand that their choices about sexuality can have risks.

Values

- Think about your own beliefs and values, so you can clearly share them with your child.
- Look at where your beliefs and values come from. Which are universal? (For example, all children have a right to be safe.) Which are more individual? (For example, people differ in their beliefs about when it's OK for young people to become sexually active.)
- Honest communication between parents and children is key.
- It's OK for parents and children to disagree about values. Examining values can be a powerful, positive influence on a child's developing sexuality.

Feelings and Self-Esteem

- Explore your own feelings around sexuality. Share some of these with your child. Encourage your child to share feelings too.
- Practice how to listen closely. Don't judge or criticize. This will build trust and help your child feel comfortable coming to you with questions or concerns.
- Help your children feel good about who they are. This will build healthy self-esteem and lead to good decisions.

Facts and Knowledge

- Find the resources you need to give your child clear and accurate information about sexuality.
- If you don't know the answer to a question, say so. Promise to get back to your child with the answer. Or look for it together.
- Connect. Keep talking in an ongoing, open way.

When You Were In Middle School

Instructions: Student and parent or other caring adult should work on this activity together.

Students, ask your parent or other caring adult to think about when they were in middle school, then ask them the following questions. If they answer “yes” to a question, ask them to sign their initials on the line. Ask them the follow-up questions in italics to get more information. If you want, you may ask other parents or other caring adults in order to get as many lines initialed as possible. Feel free to share knowledge from class today with your parents or other caring adults.

When you were in middle school, were you someone who...

knew the difference between sex and sexuality? _____

Do you know the difference now?

was taught slang words for private body parts? _____

Why do you think people use slang words?

was ever lied to by someone you cared about? _____

Why did they lie? How did it feel?

had a trusted adult to talk to about sexuality? _____

Why might it help to have a trusted adult to talk to?

→ *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

For Teacher Review Only

Lesson 6.2

Communication and Refusal Skills

Connecting the Lessons

Connects to *Lesson 6.3: Relationships and Boundaries* and *Lesson 6.8: Decision Making and Values*.

Lesson Goals

- Demonstrate use of skills for effective communication.
- Name reasons why assertive communication is important.
- Demonstrate refusal skills in role-play.

Preparation & Materials Checklist

- ☐ Be familiar with assertive, aggressive and passive communication styles.
- ☐ Practice examples of nonverbal communication.
- ☐ Pre-read assertive response scenarios and, if necessary, make adjustments for class population.
- ☐ Review student handouts:
 - Handout 6.2-2: Communication Skills
- ☐ Copy family letter and family activity.
- ☐ Have:
 - Assertive Communication scenario cards
 - Anonymous Questions Box
 - Slips of paper for anonymous questions

Terms to Use

- Active listener
- Nonverbal communication
- Assertive communication
- Passive communication
- Aggressive communication
- Refusal

SEL Skills Addressed

Self-awareness, self-management, social awareness, relationship skills

Logic Model Determinant(s)

Increase communication with parents and other caring adults.
Increase self-efficacy of SEL skills to delay and/or refuse sex.

→ Teacher Note

In discussing assertive communication, be sure to model examples of passive communication and aggressive communication to show assertive communication as a positive contrast. For students who have difficulty standing up for themselves, be sure to discuss the benefits of assertive communication and show the connection between clear communication and healthy relationships.

Activity 6.2-1

5 minutes

Process Family Activity

Process Family Activity from Lesson 6.1

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 6.2-2

20 minutes

Communication Skills

Introduce keys to effective communication; explain and practice active listening

Explain that today's class will deal with communication. Ask students why clear communication is important and what can happen if people don't communicate clearly.

Define effective communication for students as follows. Two things are important for active communication: (1) being an active listener, and (2) being able to get your message across.

Ask a student to share a story about a weekend activity. Demonstrate poor listening skills, then ask students what you did wrong as the listener.

After hearing their responses, ask students to turn to **Handout 6.2-2** in the Student Workbook and review the Active Listening Checklist.

Process Questions

1. How can active listening lead to effective communication?
2. How can active listening reduce misunderstandings?
3. How does active listening connect to social awareness?

Explain nonverbal communication; practice skills for getting your message across

Introduce the Assertive Communication Checklist in the Communication Skills handout. Go through the steps in the handout. Demonstrate steps and give students time to practice each part.

Handout 6.2-2
Student Workbook page 9

Ask for examples of ways in which people communicate messages without speaking (choice of clothing, eye contact, body language, etc.).

Have a few students come in front of the class to communicate a message quickly based on body language (bored in class, happy, sharing a secret, etc.). Other students should guess what the message is, then show their own version of the feelings from their seats.

Process Questions

1. In what ways can nonverbal communication get your message across?
2. In what ways can nonverbal communication reduce misunderstandings?
3. Why can it get confusing to understand someone's meaning over social media or text? (*Can't see the person, can misunderstand tone.*)

Activity 6.2-3

20 minutes

Assertive Communication Scenarios

Consider assertive communication scenarios

Ask students how they might feel if someone didn't understand them (i.e., if their message did not get across).

Introduce assertive communication: the ability to express positive and negative ideas and feelings in an open, honest, and direct way. Also introduce passive and aggressive communication. (*See the Teacher's Guide for talking points.*) Elicit examples of each of these styles from students.

Ask students why assertive communication is the most effective of these styles of communication. (*It's the only style that gets a person what they want/need, without ignoring/hurting the feelings of someone else.*) Ask students to read the Assertive Communication Checklist in the Communication Skills handout.

Practice assertive communication skills

Pick a few of the assertive response scenarios. Play the role of the "problem person" and have students react to you. Remind students to use the Assertive Communication Checklist to communicate effectively.

Then give students the remaining scenarios and ask them to work through two or three with a partner.

→ Teacher Note

Engaging Students

If students are struggling to offer examples of passive, assertive and aggressive communication, use one of the Assertive Communication Scenarios and model all three styles for them.

Process Questions

1. How did it feel to practice assertive communication?
2. Ask students to raise their hands if they practiced saying “no” during any of the scenarios. What was challenging about saying “no”? What was challenging about hearing “no”?
3. Why is it important to respect a partner’s “no,” even if it’s difficult to hear?
4. Why are refusal skills an important part of assertive communication?

Emphasize for students that assertive communication is being taught as a skill because it is a healthy and responsible way for people to communicate. Sometimes assertive communication requires that a person may need to compromise or accept another person’s “no.” Respecting other people is an important part of social awareness.

→ Teacher Note

Refusal Skills

When reviewing the Assertive Communication Checklist, emphasize that saying “no,” or using refusal skills, is an important part of assertive communication. Sometimes getting what you want requires naming what you don’t want. Respecting a partner’s “no” is an equally important part of assertive communication and consent.

Activity 6.2-4

Anonymous Questions Box

Review anonymous questions

Address student questions from the Anonymous Questions Box. Give students a new question prompt they can 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 6.2-5

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 6.2

Role Reversal

Instructions: Read the scenario below. Then, use role reversal so the parent gets a chance to be the kid in the situation!

Parents, pretend you are the “kid” in this situation. Communicate with your child, who will play your “parent.” Try to get what you want using either passive, aggressive or assertive communication skills. The “parent” will respond. Try it three different times using each of the three methods.

Tip for Friends: The goal of this activity is to practice communication between Get Real students and caring adults in their lives. It provides a safe chance to receive parental consent in class, receive resources for emotional difficulties, and give you being and doing.

All your friends are going to see the big new movie. You really want to go too. You have it all planned. You can get a ride with your neighbor and you have enough of your own money to get in. But here's the problem: it's a late show that will be over much later than you're usually allowed to stay out. You don't know if your parents will let you go. They feel strongly about your being home at a certain time. What could you do?

Continue your discussion using the following questions as guidelines:

- How did it feel to reverse roles?
- Which method was the easiest/most difficult?
- What are the pros and cons for each kind of response?
- Which communication method worked the best for each person to get what was wanted in a respectful way?

Parent/Other Caring Adult Signature _____ Student Signature _____

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Get Real: Comprehensive Sex Education That Works

Family Activity 6.2

Student Workbook page 10

Assertive Communication

1. A friend has asked to borrow something you care about, but she never returned the last thing you loaned her.

2. A friend comes over to tell you something that is really important to him, but you are in the middle of studying for an important test.

3. The person you are dating wants you to stay a little longer, but if you don't leave now, you'll be late for something important.

4. Some friends of yours tell you they want to shoplift something, and they need your help to avoid getting caught.

5. A person you have met before starts spreading rumors about your best friend.

6. A friend asks you to go out, but you don't like this person romantically.

7. Your teacher says you are missing a homework assignment that you know you turned in.

8. Your parents say they don't like one of your friends, but that person is really important to you.

For Teacher Review Only

GET|REAL

Comprehensive Sex Education That Works

Dear Parent or Other Caring Adult,

This week in *Get Real* class, we explored communication skills. Ask your child what it means to be an “active listener” and to describe the steps for effectively communicating a message to another person.

You can use the handout your child received in class as a guideline during your conversations and while doing the family activity. This handout outlines the skills learned and practiced in class.

It’s important for young people (and adults) to learn how to communicate in ways that can reduce misunderstanding, build positive interactions with others, and clearly express what they mean. These skills help people be good friends and are useful in all relationships.

Some ways to communicate are more effective than others. Here are three different ways people might communicate.

Two ineffective methods:

- **Passive communication** involves giving in and saying “yes” when you aren’t sure, feel confused, or really don’t want to do something. It means not asking for what you want in order to feel liked, be nice or avoid hurting another person’s feelings.

Results: You don’t get what you want. You can feel used, manipulated or as if people are stepping on you.

- **Aggressive communication** involves trying to get your own way by showing the anger, frustration, or fear you feel in response to a situation or something someone says. It involves reacting strongly, for example, by name-calling, without thinking about how it might hurt or insult another person. Sometimes it leads to getting into a fight.

Results: You may get the outcome you wanted, but at the cost of hurting the other person’s feelings. You may also get outcomes you didn’t want (violence, rejection).

An effective method that builds healthy and supportive relationships:

- **Assertive communication** is giving people an honest answer about things you want and don’t want. It involves making sure you are speaking up for yourself and your feelings. It includes asking for time to think when you feel confused and aren’t sure what you want. It also means not hurting or using other people and not letting yourself be used.

Results: You often get what you want. You build self-respect and respect for others.

Role Reversal

Instructions: Read the scenario below. Then, use role reversal so the parent gets a chance to be the kid in the situation!

Parents, pretend you are the “kid” in this situation. Communicate with your child, who will play your “parent.” Try to get what you want using either passive, aggressive or assertive communication skills. The “parent” will respond. Try it three different times using each of the three methods.

All your friends are going to see the big new movie. You really want to go too. You have it all planned. You can get a ride with your neighbor, and you have enough of your own money to get in. But here’s the problem: it’s a late show that will be over much later than you’re usually allowed to stay out. You don’t know if your parents will let you go. They feel strongly about your being home at a certain time. What could you do?

→ 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.

Continue your discussion using the following questions as guidelines:

- How did it feel to reverse roles?
- Which method was the easiest/most difficult?
- What are the pros and cons for each kind of response?
- Which communication method worked the best for each person to get what was wanted in a respectful way?

Parent or Other Caring Adult Signature

Student Signature

Lesson 6.3

Relationships and Boundaries

Connecting the Lessons

Builds on *Lesson 6.2: Communication and Refusal Skills*; connects to *Lesson 6.7: Abstinence* and *Lesson 6.8: Decision Making and Values*.

Lesson Goals

- Identify characteristics of a healthy relationship.
- Establish personal boundaries and identify consequences of crossing others' boundaries.
- Rehearse responses to inappropriate behavior.

Preparation & Materials Checklist

- ☐ Review talking points on consent.
- ☐ Review statistics on older men dating younger women.
- ☐ Review student handouts:
 - Handout 6.3-2: Circles of Relationships
 - Handout 6.3-7: Peer Pressure Homework
- ☐ Copy family letter and family activity.
- ☐ Have:
 - Personal Space and Peer Pressure scenario cards
 - Anonymous Questions Box
 - Slips of paper for anonymous questions

Terms to Use

- Peer pressure
- Personal space
- Consent/permission
- Healthy relationship/unhealthy relationship
- Refusal
- Boundaries

SEL Skills Addressed

Self-awareness, social awareness, relationship skills

Logic Model Determinant(s)

Increase communication with parents and other caring adults.
Increase self-efficacy of SEL skills to delay and/or refuse sex.
Increase perceived risk in having an older partner.

→ Teacher Note

Consent and Self-Care

This lesson discusses qualities of healthy and unhealthy relationships, boundaries and consent. These topics may bring up a number of feelings and experiences for students. It's important to remind students of their right to self-care, and to check in with any student who is disengaged or seems upset about the topic. It can be helpful to alert the school counselor about the topic of discussion ahead of this lesson.

Activity 6.3-1

5 minutes

Process Family Activity

Process Family Activity from Lesson 6.2

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 6.3-2

10 minutes

Circles of Relationships

Establish that everyone has different relationships with varying degrees of closeness

Introduce the topic of healthy relationships and explain that people have many kinds of relationships in their lives. Ask students to name different relationships that people may have (close friends, family, distant family, coworkers, etc.).

Explain that some relationships may be close while others are more distant. Ask students to turn to **Handout 6.3-2** in the Student Workbook and have them fill in the circles according to how close the people from each category are to them.

For example, some family members may be in your closest circle of people, while other family members may be in your third or fourth circle.

Process Questions

1. What did you think of this activity?
2. Why are relationships so important to us?
3. Can people who are in your closest circle move to a circle that is farther away from you? Can a person who is in one of your outer circles move in to a circle that is closer to you? Why or why not?

→ *Teacher Note***Activity Tip**

To avoid hurt feelings, encourage students to write in terms of the categories on the sheet (e.g., “teammates”), rather than specific names of friends.

Handout 6.3-2

Circles of Relationships

Instructions:

1. Write your name in the center circle.
2. Write the names of people closest to you in the next largest circle.
3. Write names of people who are not as close as those in your closest circle in the next circle.
4. Write names of people who are not as close as those in your third circle in the outer circle.

Types of Relationships

Family: parent, grandparent, aunt, uncle, cousin, brother, sister, niece, nephew, etc.	Friends: best friend, teammate, classmate, group member, etc.	Remotely: boyfriend, girlfriend, partner, person you date sometimes, etc.
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GETREAL Grade 6 • Student Workbook 11

Handout 6.3-2**Student Workbook page 11**

Activity 6.3-3

5 minutes

Examining and Respecting Personal Space**Examine personal sense of physical boundaries**

The Circles of Relationships represents how close our relationships are emotionally. Explain to students that there is also an amount of physical or personal space that people feel comfortable with in relationships. Elicit a definition of “personal space” from students. Explain that everyone has a different concept of what personal space means.

Demonstrate this distance visually by stretching out your arms and moving them in a circular (hula-hoop) motion.

Have the students stand up and move their arms according to their personal space limits. Ask students to demonstrate these limits for each level of circle on their Circles of Relationships handout. Tell them to observe other people as well.

Process Questions

1. Did everyone have the same amount of personal space?
2. How might the amount of personal space that you have be different in different situations (e.g., standing in line for lunch vs. walking through a mall)?
3. How might your personal space be different for different people in your life?
4. How does this relate to the Circles of Relationships handout? Are people in some circles allowed to be physically closer than people in other circles?
5. Why is self-awareness of your personal space important? (*safety, comfort, respect, etc.*)

Discuss respecting personal space

Explain that it is important both to protect one’s own personal space and to be aware of other people’s personal space. This is a way for people to be respectful of one another.

Ask: “How can you tell when you’ve invaded someone else’s personal space?” (*Some possibilities: facial expressions, body language, tone of voice, what the person says, etc.*) Ask students if they’ve ever had someone invade their personal space. Prompt: “How did that feel?”

Explain that some people may not realize they’ve invaded your personal space, or they may ignore your signals that you don’t want them in your personal space. Why is it important for you to be aware of other people’s personal space and respect it?

Process Questions

1. What would you do if you saw a friend invading someone's personal space? How can you talk to your friends about their actions and their comments?
2. What does it mean if someone respects you? Does it mean they can cross into your personal space without your permission? Does it mean you can cross into their personal space?

Activity 6.3-4

10 minutes

Healthy Vs. Unhealthy Relationship Brainstorm

Discuss qualities of healthy and unhealthy relationships

Explain that there are many different kinds of relationships, and it's important for relationships to be healthy.

Tell students that, in order to focus the discussion, this part of the class will deal with romantic relationships. Explain that students who haven't been in a romantic relationship can think about a healthy romantic relationship they've witnessed. Have students work in groups of two or three to brainstorm a list of healthy qualities they believe are important in romantic relationships. Ask student pairs to share with the class, and create a list on the board of the qualities they name. Prompt students to list "equality of power" within a romantic relationship.

After brainstorming healthy qualities in romantic relationships, explain to students that when the opposites of these qualities exist, a relationship may become unhealthy. For example, the opposite of honesty is dishonesty, which can be a quality of an unhealthy relationship. Write a list on the board of unhealthy qualities and ask students to add any they feel are missing.

Process Questions

1. What qualities are most important to you in a relationship?
2. What qualities would you consider the top-two most healthy? What would be the two most unhealthy qualities? Why?
3. Are the qualities you look for in a friendship the same as the ones you would look for in a romantic relationship? Why or why not? How might they be the same or different?
4. What does it mean if the qualities that are important to you are different from the ones that are important to your friends?

Activity 6.3-5

5 minutes

Dating Older Partners**Introduce consent**

Introduce the concept of consent: getting a person's permission to engage in an activity. Explain that consent is important in everything from teasing to sexual behavior.

- Any sexual behavior (talking, kissing, touching, sex) should be *mutually consensual*. Both people must agree to participate.
- Consent is an active process. People can't give consent if they are drunk, drugged or asleep.
- "No" means no. If a person has not clearly said "yes" to something, then the response should be considered a "no."
- People can change their minds and stop consenting at any time.
- Consent is about doing something because you want to, not because you feel pressured or manipulated.

Introduce some risks of dating older partners

Ask students to think about the concept of equality of power. How can age and maturity have an impact on this idea? Would a 10-year age gap between people who were dating make a difference if one partner were 50 and the other 40? What if one partner were 25 and the other 15?

Elicit from students why a difference in age might be unhealthy (power, control, loss of balance in relationship, etc.). Add these reasons to the lists on the board.

Ask students:

- What are some possible risks for the younger partner? (*Feeling pressured for sexual activity; jealous of other partner's freedom; feelings of inequality; could get into trouble with parents.*)
- What are some possible risks for the older partner? (*Frustrated with age difference; could get into trouble, including legal trouble.*)

Inform students that romantic relationships with people who are significantly older are much more likely to be sexual than when people date someone close to their own age. Research also shows that girls who are in

→ *Teacher Note***Facts**

- Drinking age in the U.S.: 21
- Voting age in the U.S.: 18
- Age of sexual consent in the U.S.: varies by state

→ *Teacher Note***Get Real's Definition of Sexual Consent**

Consent means "giving permission." *Get Real* defines sexual consent as requiring a sober "yes" from all partners, free from intimidation or pressure. Consent is an ongoing process, and a "yes" to something once doesn't mean a "yes" to something always.

→ *Teacher Note***Facts**

- Early sexual activity has been linked to an increased risk of teen pregnancy and STIs.
- 81% of sexually experienced youth ages 12–14 wish they had waited longer to have sex.

(from *Power to Decide: The Campaign to Prevent Unplanned Pregnancy*)

relationships with boys who are three or more years older are at higher risk for pregnancy and STIs. Ask students why dating someone older would put these girls at higher risk. Ask students why dating someone older might put any person, regardless of their gender, at higher risk.

Tell students there are laws about the age of sexual consent. These laws are designed to keep young people safe. (*See the Teacher's Guide for information about how to access your state laws regarding age of consent.*)

Process Questions

1. What relationship skills might be affected by a big age difference?
2. Why is it important to know about the age of sexual consent?

Activity 6.3-6

10 minutes

Boundaries and Peer Pressure Scenarios

Discuss boundaries and peer pressure

Introduce the idea of personal boundaries. Boundaries are the limits people set for how close or distant a person will be to them. Boundaries can be physical (such as personal space) and/or emotional.

Inform students that consent and boundaries apply to both physical space (touching someone, standing too close, etc.) and to social/emotional things such as peer pressure.

Ask students what “peer pressure” means. Is it always obvious, clear-cut pressure? Another kind of pressure can happen when, because of what people have seen or heard, they feel as if everyone else is doing something, such as drinking or having sex. That feeling can be a form of pressure, and it’s often much harder to recognize and deal with. Self-awareness and social awareness are especially important in recognizing this kind of peer pressure. Ask students when these feelings might occur and how they would deal with them.

Introduce scenarios for personal space and peer pressure. Students will write scripts for these scenarios but will not act them out. Distribute different scenarios to each student, and ask each student to reflect on two scenarios. After students have had time to think, ask for volunteers to give their responses to each scenario.

Process Questions

1. How do these situations relate to the idea of boundaries?
2. How can clear communication help in these scenarios?
3. How do boundaries connect to social awareness and relationship skills?
4. If something like these scenarios happened, whom could you talk to about it?

Activity 6.3-7

Homework

Ask students to turn to **Handout 6.3-7** in the Student Workbook. Review and have them complete it for homework.

Handout 6.3-7
Student Workbook page 13

Activity 6.3-8

Anonymous Questions Box

Review anonymous questions

Address student questions from the Anonymous Questions Box. Give students a new question prompt they can 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 6.3-9

Family Activity

Explain family activity

Review the Family Activity for this lesson.

Family Activity 6.3
Student Workbook page 14

Get Real for Parents

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

References**Circles of Relationships handout:**

Adapted from *Life Planning Education* by Advocates for Youth, Washington, D.C., www.advocatesforyouth.org. Circles of Sexuality created by Dennis M. Dailey, Professor Emeritus, University of Kansas, based on the initial work of Harvey Gochros.

Statistics on older partners:

From Albert, B., Brown, S., and Flanigan, C., eds. *14 & Younger: The Sexual Behavior of Young Adolescents (Summary)*. Washington, D.C.: National Campaign to Prevent Teen Pregnancy, 2003.

Personal Space and Peer Pressure

1. A person at school is always hugging you and everyone else in the hallway. You don't want to be hugged by this person.

2. Someone you are dating has asked you to come over while there are no adults at home.

3. A friend compliments your clothes and touches them in a way that makes you uncomfortable.

4. Someone makes a sexually inappropriate joke about someone else around you.

5. Someone you are dating wants to go further than the limit you've set for yourself around sexual behavior.

6. Someone writes you a sexually inappropriate note, text or email.

7. Someone older than you by more than three years has asked you to go on a date.

GET|REAL

Comprehensive Sex Education That Works

Dear Parent or Other Caring Adult,

Some of the topics talked about in *Get Real* class this week were respecting personal space, setting boundaries, and how to deal with peer pressure.

“Personal space” is defined as the amount of space or distance around your physical body that you feel comfortable having between yourself and other people. Young people and adults have the right to choose whom they will allow in their personal space. It’s important to pay attention to and respect other people’s nonverbal and verbal communication about how they feel about having others in their personal space.

Students also talked about the concept of consent, or getting someone’s permission before doing something with or to that person. Consent matters in everything from teasing to sexual behavior. Although most adolescents your child’s age are not sexually active, including discussion of sexual behaviors when talking about consent helps them be prepared for pressure in the future. Be clear and specific when talking about consent with your child.

Here are some points you may want to include:

- “No” means no. If a person has not clearly said “yes” to something, the response should be considered a “no.”
- People can change their minds and stop consenting at any time.
- Consent is about doing something because you want to, not because you feel pressured or manipulated.
- Any sexual behavior (talking, kissing, touching, sexual intercourse) should be mutually consensual. Both people must agree to the activity.
- Consent is an active process. People can’t give consent if they are drunk, drugged or asleep.

TV Time!

Instructions: Set aside a time to watch a television show that focuses on the interaction between members of a family or a close group of friends. This might be a show the student currently enjoys or a “classic” from the parent’s or other caring adult’s past. (*Note:* You could also watch a movie, if time allows.) As you watch, look for examples of what you think are healthy or unhealthy relationships. Use the statements below to talk more about what you observed.

1. Share an example of a healthy relationship between characters on the show.
2. Share an example of an unhealthy relationship between characters on the show.
3. Did anything happen on the show as a result of being in an unhealthy relationship? How was this situation resolved?
4. Did the characters treat each other with respect? If so, how could you tell? If not, what made the communication seem disrespectful?
5. Was there a character who had qualities you would look for in a friendship? In a dating relationship? If yes, what were these qualities and why are they important to you?

→ *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

Lesson 6.4

Anatomy and Reproduction: The Penis and Related Parts

Connecting the Lessons

Planning ahead: Students will apply information learned to Lesson 6.6: *Puberty* and Lesson 6.7: *Abstinence*.

Lesson Goals

- Identify key parts of the anatomy.
- Discuss the connection between anatomy and reproduction.
- Explain how pregnancy occurs.

Preparation & Materials Checklist

- ☐ Review the information about the penis and related anatomy in the Teacher's Guide pages.
- ☐ Review the prompt questions in the Teacher's Guide to ask your students during this lesson.
- ☐ Review student handouts:
 - Handout 6.4-2: The Penis and Related Parts
- ☐ Copy family letter, family activity and answer key.
- ☐ Have:
 - Poster of The Penis and Related Parts
 - Anonymous Questions Box
 - Slips of paper for anonymous questions
 - (Optional) Condoms (Check with class[es] to make sure there are no airborne latex allergies among students.)

Terms to Use

- Reproduction
- Vaginal intercourse
- Fertilization
- Sperm
- Egg
- Pregnancy
- Hormone
- Sexually Transmitted Infections (STIs)
- Condoms

SEL Skills Addressed

Self-awareness, social awareness

Logic Model Determinant(s)

Increase communication with parents and other caring adults.
Increase knowledge of how STIs are transmitted.
Increase knowledge of how pregnancy happens.
Increase knowledge of correct and consistent use of condoms and other protection methods.
Increase awareness of consequences when condoms and/or other protection methods are not used.

→ *Teacher Note*

Ideally this lesson will be a dialogue with students as you cover the information. The questions in the Teacher's Guide pages can help encourage student participation. This lesson can help correct student misconceptions about the penis and related anatomy, how the parts work, and how pregnancy and STIs can occur.

It is important to use gender-neutral language when discussing sexual and reproductive anatomy and physiology. Some students may identify as transgender or non-binary, and gendered language may make these students feel excluded from the lesson. Remember, not all who identify as female have a vagina, and not all who identify as male have a penis, and that some youth, regardless of what body parts they have, do not identify as male or female. Using gender-neutral language helps all youth understand how to take care of their bodies and their sexual and reproductive health, and prevent unintended pregnancy and STIs.

There's a lot of information for students to retain in this lesson, and much of it is presented in a way that will appeal to auditory/verbal learners. Referring to the poster of the reproductive system will help visual learners. Creating a graphic organizer on the board that lists the sequence of the lesson will also help visual learners retain the information in each section.

Activity 6.4-1

5 minutes

Process Family Activity

Process Family Activity from Lesson 6.3

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 6.4-2

15 minutes

The Penis, Related Parts and What They Do

Assess student knowledge

Explain that the next two lessons will focus on the human reproductive systems. Ask students what other body systems they can think of (e.g., circulatory system). Ask them to give examples of some body parts that make up these systems (e.g., heart, arteries). Explain that anatomy is the structure of human bodies, while reproduction is making more of something. For humans, *reproduction* refers to making more humans.

Explain that there are two different types of human reproductive systems, and that today's lesson will focus on the penis and related parts and the role they play in reproduction. Tell students you want to see how many of

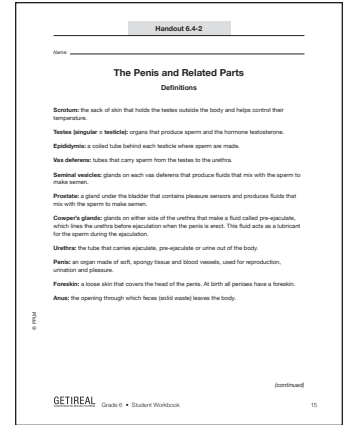
→ *Teacher Note*

Normalizing Body Differences

People's bodies come in all shapes and sizes, including the sexual body parts, such as penises and breasts. Our society puts a lot of pressure on people to look a certain way, but it's important to know that people's bodies function in the same way even if they look different from each other.

the parts they already know, using an anatomy diagram like one they may have seen in science class. Ask students to turn to **Handout 6.4-2** in the Student Workbook. Give them 3 minutes to try to label the diagrams on their own.

Show students the penis and related parts poster. Tell them you are going to explain the parts and what they do, and that they should follow along and make any additional notes on their own diagrams. Explain that this information is an important part of learning to be healthy and understanding how pregnancy occurs.



Handout 6.4-2
Student Workbook
pages 15–16

Explain basic functions of the parts

- **Scrotum:** a skin sack that holds the testes outside the body and helps control their temperature.
- **Testes (singular = testicle):** organs that produce sperm and the hormone testosterone.
- **Epididymis:** a coiled tube behind each testicle where sperm mature and develop the ability to swim.
- **Vas deferens:** tubes that carry sperm from the testes to the urethra.
- **Seminal vesicles:** glands on each vas deferens that produce fluids that mix with the sperm to make semen.
- **Prostate:** a gland under the bladder that contains pleasure sensors and produces fluids that mix with sperm to make semen.
- **Cowper's glands:** glands on either side of the urethra that make a fluid called pre-ejaculate that lines the urethra before ejaculation when the penis is erect. This fluid acts as a lubricant for the sperm during the ejaculation.
- **Urethra:** the tube that can carry ejaculate, pre-ejaculate or urine out of the body.
- **Penis:** an organ made of soft, spongy tissue and blood vessels, used for reproduction, urination and pleasure. When the penis becomes erect, or "hard," its tissues fill with blood. This is called an erection.
- **Foreskin:** a loose skin that covers the head of the penis. At birth, all penises have a foreskin, though some people are circumcised.
Explain circumcision (the removal of the foreskin).
- **Anus:** the opening through which feces (solid waste) leaves the body.

→ Teacher Note

Engaging Students

Refer to the Teacher's Guide pages for additional talking points and questions that can help engage students during your discussion of the penis and related parts and ensure you cover important material in a student-centered manner.

Even though it isn't on this poster, remind students that the most important part of both reproductive systems is the brain. The brain controls all the parts of a person's anatomy, regardless of whether they are awake or asleep.

Process Questions

1. What was one fact we just discussed that surprised you?
2. Why are some people more comfortable discussing some body parts than others?
3. How do you think pressure to have a person's body look or be a certain way might feel for that person?
4. Why is it important to get questions about reproductive organs answered?

Activity 6.4-3

20 minutes

Linking Parts with Reproduction

Introduce pregnancy basics

Explain that the two different human reproductive systems each make special cells—sperm and egg (or ovum). The testes produce sperm. The ovaries produce eggs. When a sperm and egg come together, we say that fertilization has occurred. This is the first step necessary for a pregnancy to happen.

Since a pregnancy develops in the uterus, there has to be a way for the sperm to get to a waiting egg. Many of the organs we just discussed, such as the testicles and vas deferens, are involved in helping the sperm make their way to an egg. It usually takes an erection, vaginal intercourse and ejaculation to get sperm close enough to an egg for fertilization to happen.

Use the following terms and questions from the Teacher's Guide to explain how the reproductive organs and processes just described work with the vagina, eggs and uterus to create a pregnancy.

- **Erection:** when blood fills the small blood vessels of the penis's spongy tissue, making the penis hard.

Explain that erections are caused when a message of "arousal," or a good feeling, is sent to the penis from the brain, which then causes additional blood flow to the penis. Erections are a normal part of having a penis, and it's normal for erections to happen spontaneously, especially during puberty.

- **Vaginal intercourse:** when a penis enters a vagina. This contact will allow the sperm released during ejaculation to travel into the other partner's reproductive organs (the vagina, uterus and fallopian tubes) to possibly join with an egg.

Review that the number of times intercourse needs to happen for reproduction to occur can be just once.

- **Ejaculation:** the process of sperm and supportive fluids (semen) leaving the penis.

Be sure to explain that wet dreams (ejaculation during sleep) are a normal part of puberty. Relate this point to the brain being the most important part of the reproductive anatomy. Even when people are asleep, their brains are still working.

- **Pre-ejaculate:** fluid that appears before an ejaculation takes place to get the urethra ready for the passage of sperm. Pre-ejaculate happens each time the penis gets erect, whether the person notices it or not. Pre-ejaculate can contain up to 20,000 sperm and can transmit STIs. An ejaculation contains 300 million to 500 million sperm. It only takes one to cause a pregnancy.

Discuss vaginal intercourse and possible health risks

Explain the possible health risks of unprotected vaginal intercourse:

- Pregnancy
- Sexually transmitted infections (STIs)

Explain that STIs are infections or diseases typically transmitted, or spread, through sexual behaviors. STIs are passed through fluid, including ejaculate, pre-ejaculate, vaginal fluid, rectal fluid and blood. Some STIs have visible symptoms, and some do not. Some can cause serious damage to the body if they aren't treated with medicine. Let students know they will learn more about STIs later in *Get Real*.

Discuss the role of condoms

Using the information provided in the box, explain the role of condoms in preventing these health risks. Emphasize that the most effective way for sixth graders to prevent STIs and pregnancy is *not* to have vaginal intercourse.

Condoms are an effective choice for protecting against both pregnancy and possible STI transmission if a person is having sexual intercourse. Explain the terms “protected sex” and “unprotected sex.” Ask students what can happen without condom use (pregnancy, STI transmission).

→ Teacher Note

How Condoms Work

Condoms work to prevent pregnancy by covering the penis. This creates a barrier that stops the sperm and semen from entering the partner's body. With a condom, the ejaculation is caught in the tip of the condom, which prevents the possibility of a sperm reaching an egg and creating a pregnancy. And, if either sexual partner has an STI, the condom also prevents the bacteria or virus from being transmitted from one person to the other.

For a condom to be used properly, it needs to be put on after the penis is erect but before contact with the sexual partner. After ejaculation, the base of the condom should be held around the penis as it is withdrawn, to ensure that none of the semen or sperm leaks out. Condoms should be used only once. They should not be carried around in a pocket or wallet, because heat can weaken the condom over time.

Ask students where people their age can get condoms.

If appropriate, and as time permits, you may choose to show the students a condom and describe how it should be used. (*Additional talking points on condoms and a condom demonstration can be found in the Teacher's Guide for Lessons 7.8 and 8.4.*)

Wrap-up

The penis and related parts are designed to help sperm cells enter the vagina and potentially join with an egg (ovum), which is the first step necessary for pregnancy to happen.

There are a number of possible health risks involved if a person chooses to have unprotected vaginal intercourse, such as getting an STI or becoming pregnant without wanting to. The most effective ways for sixth graders to avoid STIs and unintended pregnancy are to choose not to have sex (abstinence) or to postpone sex until they are older. You will have the opportunity to discuss this more during a future *Get Real* lesson.

Process Questions

1. Why is it so important to understand how the reproductive body organs work?
2. What are some feelings a person might have about starting to have wet dreams?
3. What could happen if a couple decided not to use condoms and to have unprotected vaginal intercourse just one time?
4. What might make it difficult for a sixth grader to choose *not* to have vaginal intercourse? (*Peer pressure, lack of self-confidence, unclear personal goals.*)

Activity 6.4-4

5 minutes

“What Am I?” Game

Assess student knowledge

In this game, offer students a short description of the penis and related reproductive body parts and their functions and make them guess the answer. (You can give prizes if you want.) For example, “I am the tubes that carry sperm from the testes to the urethra;” “I am made up of spongy tissue filled with blood vessels;” or “I am the number of sperm in an ejaculation.” This game assesses student knowledge and can be a great way to reinforce important facts and ideas from the lesson.

Activity 6.4-5

Anonymous Questions Box

Review anonymous questions

Address student questions from the Anonymous Questions Box. Give students a new question prompt they can 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 6.4-6

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 6.4

Word Connect: The Penis and Related Parts

Instructions: Draw a line between the reproductive anatomy word on the left and the correct definition of the word on the right.

Foreskin	Organs that produce sperm and the hormone testosterone
Scrotum	The tube that carries sperm, pre-ejaculate and urine out of the body
Testes	Tubes that carry sperm from the testes to the urethra
Urethra	The sack of skin that holds the testes outside the body and helps control their temperature
Penis	The loose skin that covers the head of the penis at birth

Bonus: Write down an additional fact you remember about three of these body parts.

Tip for Parents

The goal of this activity is to provide conversations between you (the parent/caring adult) and your child. It provides a safe space to learn, explore, and ask questions. It also provides resources for additional information, and your own feelings and ideas.

If it's embarrassing to discuss these topics with your children, you can discuss it with your partner or a trusted adult. Write down your answers and then read them out loud to your child. Laugh, giggle, blush, and go right on talking.

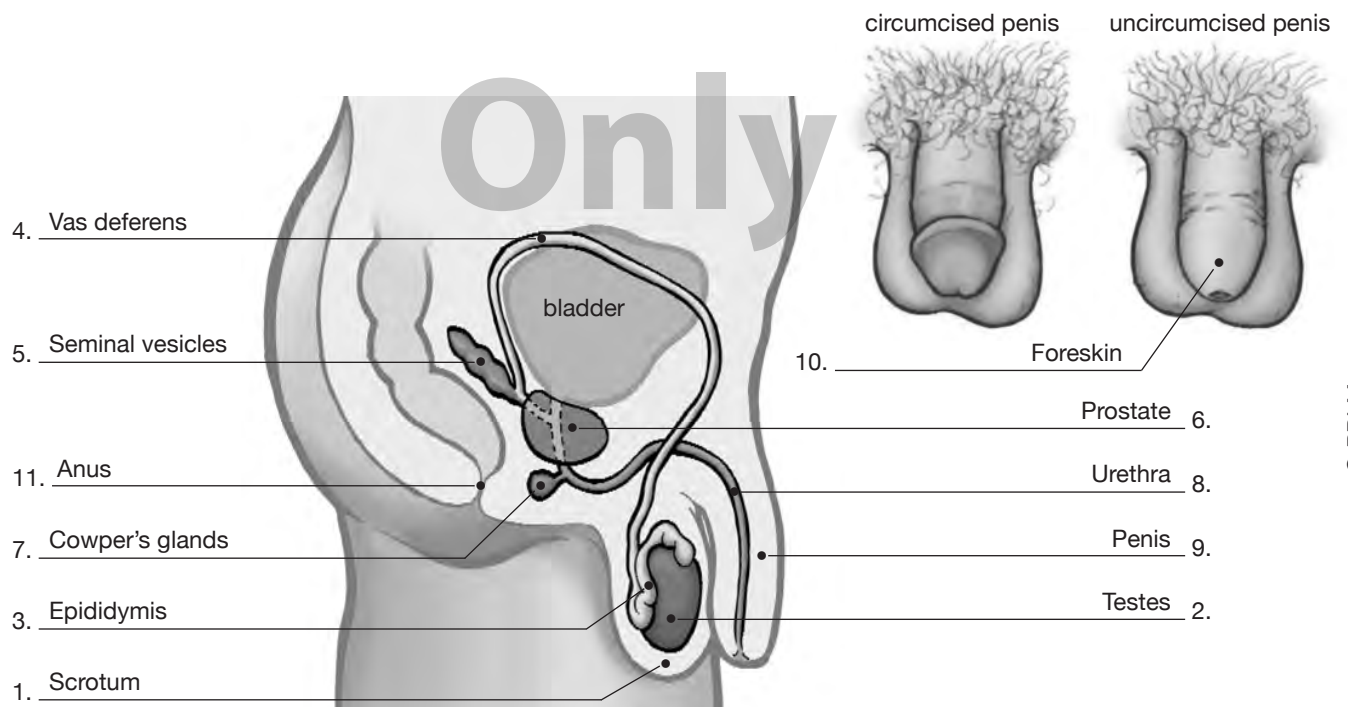
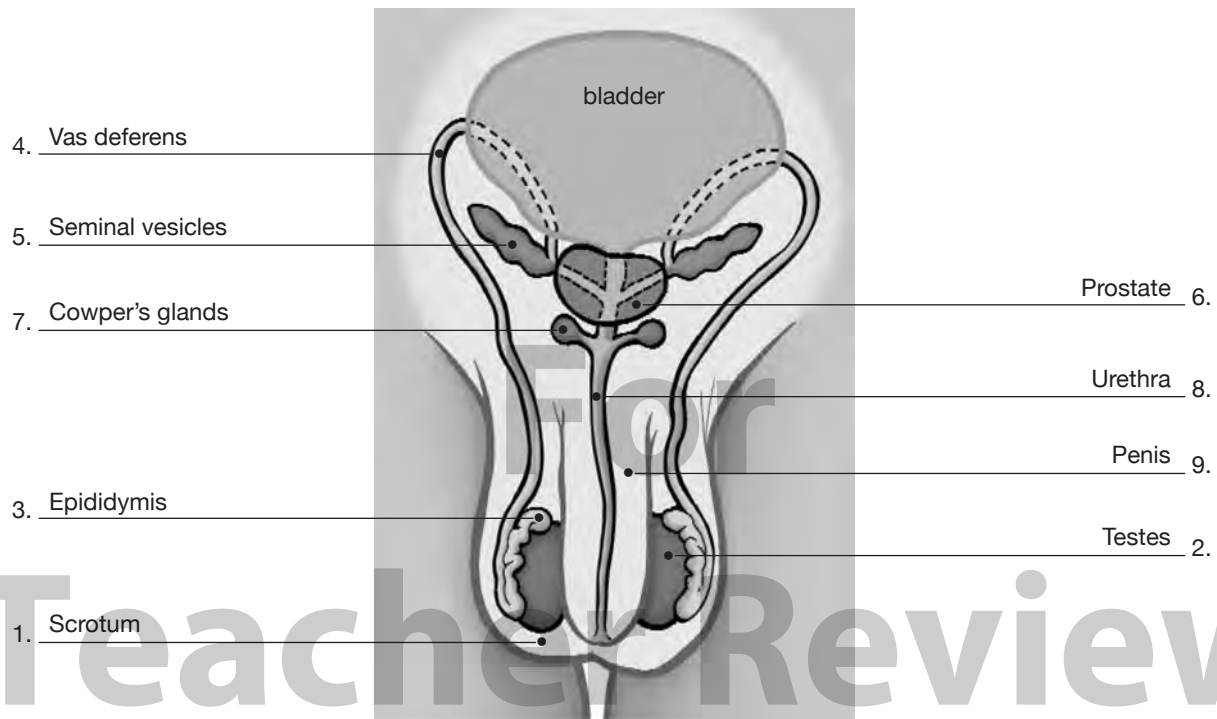
Parent or Other Caring Adult Signature _____ Student Signature _____

GETREAL
SEXUAL EDUCATION Grade 6 • Student Workbook 17

Family Activity 6.4**Student Workbook page 17**

Teacher Review Only

The Penis and Related Parts



These drawings are an example of sexual/reproductive parts. People's bodies come in all different shapes, sizes and colors. For more information, contact Planned Parenthood at 1-800-258-4448 or visit our website www.getrealeducation.org. Images © 2010 Planned Parenthood League of Massachusetts

GET|REAL

Comprehensive Sex Education That Works

Dear Parent or Other Caring Adult,

This week's Family Assignment focuses on reproductive anatomy, specifically the penis and related parts. Most of this information might be a review for you, but don't be surprised if your child can teach you something new about the human body!

When you talk about sexuality, it's important to understand the language used. Sometimes parents and other adults may use terms for body parts and functions that can confuse or mislead children. If children don't learn the correct terms, they may not have the respectful language to discuss sexual facts and feelings with parents, teachers, health care providers, or eventual future partners. Knowing the facts allows adolescents to make healthier, safer, well-informed decisions related to sexuality.

Try to use "accurate" language when discussing sex and sexuality with your child. This includes using the medical or biological words for parts and functions, such as *penis*, *vagina*, *urine*, and *semen*. Parents sometimes punish children for using sexual slang without making sure that the children understand why these words are offensive. So, if your child uses a slang word, a helpful response might be, "There are many silly-sounding words (sometimes called "dirty" words) about sex and bodies—words like 'boobs' and 'balls.' Some people think it's fun or OK to use these words, but others can feel embarrassed or uncomfortable when they hear them. It's important to respect other people's feelings about slang and 'dirty' words or jokes, whatever those feelings may be."

The Parent Buzz is a bimonthly newsletter that contains helpful strategies for communicating with kids about sex and sexuality. It's a great resource for information, and offers tips for parents around talking with their children, current information about sexuality issues and trends, links to useful websites, and descriptions of adolescents' developmental stages.

To receive *The Parent Buzz*, please visit www.pplm.org/parenteducation to sign up. If you decide *The Parent Buzz* isn't for you after reading one issue, simply click on the opt-out box in the newsletter.

Word Connect: The Penis and Related Parts

Instructions: Draw a line between the reproductive anatomy word on the left and the correct definition of the word on the right.

Foreskin	Organs that produce sperm and the hormone testosterone
Scrotum	The tube that carries ejaculate, pre-ejaculate and urine out of the body
Testes	Tubes that carry sperm from the testes to the urethra
Urethra	The sack of skin that holds the testes outside the body and helps control their temperature
Vas deferens	The loose skin that covers the head of the penis at birth

Bonus: Write down an additional fact you remember about three of these body parts.

→ *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:

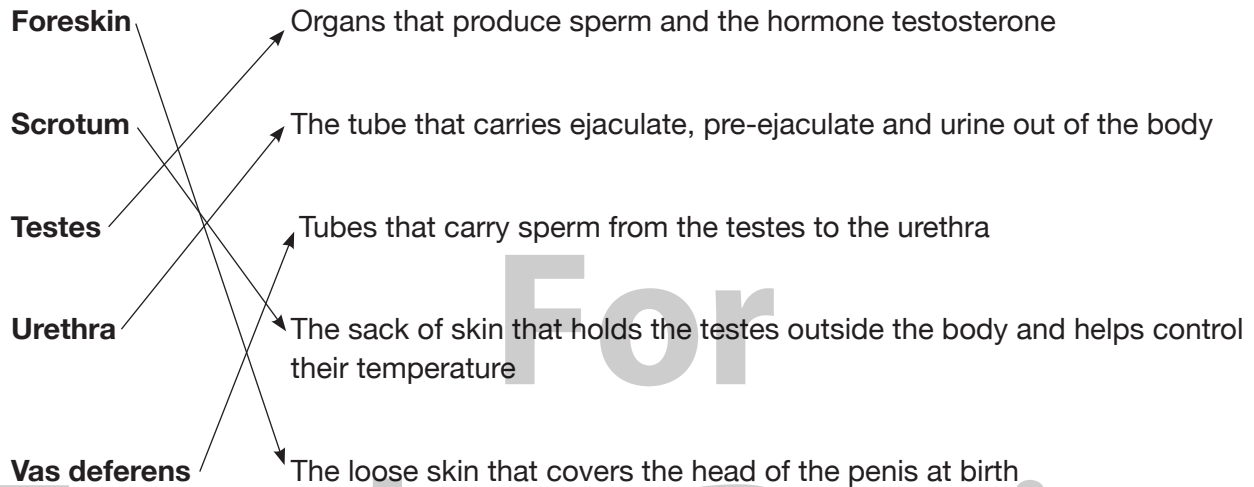
- Say so—and do the exercise anyway.
- Skip parts of it.
- Write down your answers and then read each other's answers.
- Laugh, giggle, blush, and go right on talking.

Parent or Other Caring Adult Signature

Student Signature

Word Connect: The Penis and Related Parts

Instructions: Draw a line between the reproductive anatomy word on the left and the correct definition of the word on the right.



Bonus: Write down an additional fact you remember about three of these body parts.

→ 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

For Teacher Review Only

Lesson 6.5

Anatomy and Reproduction: The Vagina and Related Parts

Connecting the Lessons

Builds on *Lesson 6.4: Anatomy and Reproduction: The Penis and Related Parts*. *Planning ahead:* Students will apply information learned to *Lesson 6.6: Puberty* and *Lesson 6.7: Abstinence*.

Lesson Goals

- Identify key parts of the anatomy.
- Define menstrual cycle.
- Explain the link between menstrual cycle and reproduction.

Preparation & Materials Checklist

- ☐ Review the information about the vagina and related anatomy in the Teacher's Guide pages.
- ☐ Review the prompt questions in the Teacher's Guide to ask your students during this lesson.
- ☐ Review student handouts:
 - Handout 6.5-2: The Vagina and Related Parts
 - Handout 6.5-5: "What Am I?" Homework
- ☐ Copy family letter, family activity and answer key.
- ☐ Have:
 - Poster of The Vagina and Related Parts
 - Anonymous Questions Box
 - Slips of paper for anonymous questions
 - (Optional) Samples of tampons and sanitary pads
 - (Optional) Plastic pelvis/vagina (to show tampon insertion)

Terms to Use

- | | |
|-----------------|----------------|
| ■ Ovulation | ■ Menstruation |
| ■ Egg | ■ Tampon |
| ■ Fertilization | ■ Sanitary pad |

SEL Skills Addressed

Self-awareness, social awareness

Logic Model Determinant(s)

Increase communication with parents and other caring adults.
Increase knowledge of how pregnancy happens.

→ Teacher Note

Ideally this lesson will be a dialogue between you and the students as you cover the information. The questions in the Teacher's Guide pages can help encourage student participation. This lesson can help correct student misconceptions about the vagina and related anatomy, how the parts work, and how pregnancy and STIs can occur.

There's a lot of information for students to retain in this lesson, and much of it is presented in a way that will appeal to auditory/verbal learners. Referring to the poster of the reproductive system will help visual learners. Creating a graphic organizer on the board that lists the sequence of the lesson will also help visual learners retain the information in each section.

Activity 6.5-1

5 minutes

Process Family Activity

Process Family Activity from Lesson 6.4

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 6.5-2

20 minutes

The Vagina, Related Parts and What They Do

Assess student knowledge

Explain that there are two different types of human reproductive systems, and that today's lesson will focus on the vagina and related parts and the role they play in reproduction. Tell students you want them to see how many of the parts they already know. Ask students to turn to **Handout 6.5-2** in the Student Workbook. Give them 3 minutes to try to label the diagrams on their own.

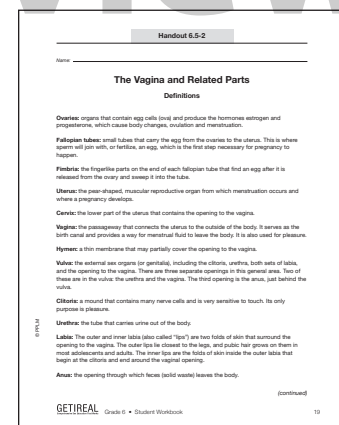
Show students the vagina and related parts poster. Tell them you are going to explain the parts and what they do, and that they should follow along and make any additional notes on their own diagrams. Explain that this information is an important part of learning to be healthy and to understanding how pregnancy occurs.

Explain basic functions of the parts

- **Ovaries:** organs that contain egg cells (ova, singular = ovum) and produce the hormones estrogen and progesterone, which cause body changes, ovulation and menstruation. Ovulation is the process by which an egg is released from one of the ovaries.
- **Fallopian tubes:** small tubes that carry the egg from the ovaries to the uterus. This is where sperm will join with, or fertilize, an egg, which is the first step necessary for pregnancy to happen.
- **Fimbria:** the fingerlike parts on the end of each fallopian tube that find an egg after it is released from the ovary and sweep it into the tube.

→ *Teacher Note***Engaging Students**

Refer to the Teacher's Guide pages for additional talking points and questions to help engage students during your discussion of the vagina and related parts and ensure you cover important material in a student-centered manner.

**Handout 6.5-2**

Student Workbook
pages 19–20

- **Uterus:** the pear-shaped, muscular reproductive organ from which menstruation occurs and where a pregnancy develops.
- **Cervix:** the lower part of the uterus that contains the opening to the vagina.
- **Vagina:** the passageway that connects the uterus to the outside of the body. It serves as the birth canal and provides a way for menstrual fluid to leave the body. It is also used for pleasure.

Discuss vaginal discharge and explain that it is normal.

- **Hymen:** a thin membrane that may partially cover the opening to the vagina.
- **Vulva:** the external sex organs (or genitalia), including the clitoris, urethra, both sets of labia, and the opening to the vagina. There are three separate openings in this general area. Two of these are in the vulva: the urethra and the vagina. The third opening is the anus, just behind the anus.
- **Clitoris:** a mound of skin that contains many nerve cells and is very sensitive to touch. Its only purpose is pleasure. It is located between the labia at the top of the vulva.
- **Urethra:** the tube that carries urine out of the body.
- **Labia:** the outer and inner labia (also called “lips”) are two folds of skin that surround the opening to the vagina. The outer lips lie closest to the legs, and pubic hair grows on them in most adolescents and adults. The inner lips are the folds of skin inside the outer labia that begin at the clitoris and end around the vaginal opening.
- **Anus:** the opening through which feces (solid waste) leaves the body. It is important for people with a vagina to wipe from front to back after using the toilet to make sure bacteria from the anus do not get into the urethra, which could cause a urinary tract infection.

Even though it’s not on the poster, remind students that the brain is the most important part of both human reproductive systems. The brain controls all of the parts of a person’s anatomy, regardless of whether they are awake or asleep.

→ Teacher Note

The Menstrual Cycle

The uterus is the size of a person’s fist, but it can grow to the size of a baby. Hormones cause the body to add extra lining to the inside of the uterus every month to get it ready for a fertilized egg. But if an egg reaches the uterus without being fertilized, the lining isn’t needed. The unfertilized egg disintegrates into the lining, which then leaves the body through a process called menstruation, or a “period.” Menstruation is one part of the menstrual cycle, which will be explained after the body parts are discussed.

→ Teacher Note

Hymen Facts

Many people with a vagina are born with no visible hymen. The hymen is a thin membrane that may cover the opening to the vagina. The hymen can disintegrate over time. It is normal for a person to have a noticeable hymen, and it’s also normal if a person does not have a noticeable hymen.

Process Questions

1. What was one fact we just discussed that surprised you?
2. Which body parts on the diagram belong to both human reproductive systems?
3. Why are some people more comfortable discussing some body parts than others?
4. How do you think pressure to have a person's body look or be a certain way might feel for that person?
5. Why is it important to get your questions about reproductive organs answered?

Activity 6.5-3

15 minutes

The Menstrual Cycle Explained

Explain process of ovulation and menstruation

The menstrual cycle is critical to reproduction and is important for everyone to understand whether they menstruate or not. Starting to menstruate is a normal part of going through puberty for a person with a uterus.

About once per month, an egg is released from the ovary (this process is called ovulation). The hormones estrogen and progesterone prepare the lining inside the uterus for a possible pregnancy. If an egg is present in the fallopian tube when semen is released into the vagina, sperm can swim up to the egg and fertilize it. When the fertilized egg reaches the uterus, it will implant itself in the lining, and a pregnancy will then start to grow. If the egg isn't fertilized and a pregnancy doesn't happen, the egg and lining of the uterus are shed and leave the body through the vagina. This process is called menstruation or a "period."

→ Teacher Note

See the Teacher's Guide pages for leading questions to help students participate and share important information.

→ Teacher Note

"Safe" Intercourse?

Q. Is there a "safe" time to have unprotected intercourse when a person can't get pregnant?

A. No, for several reasons. First, sperm can live in the fallopian tubes for several days. So, even if there's no egg there when the sperm are first ejaculated, a person could ovulate during the time sperm are present, and that egg could be fertilized. Second, very few people have perfectly regular cycles, especially when they are young. So it's difficult to predict when ovulation will occur.

Review facts about the menstrual cycle

Explain that some sixth-graders may already have their periods, and some may not get them for a while. The average age menstruation starts is between 12 and 13, but many people are younger or older when they get their first periods. Discuss cycle length and amount of blood.

Explain and demonstrate tampons and sanitary pads

Tell students that most people choose to use either a tampon or a sanitary pad to absorb the menstrual flow. Either is fine and normal.

Show both a tampon and a sanitary pad to the class and pass them around for students to see. If time permits, you might demonstrate how each works by submerging the tampon in a clear glass of water or pouring some water onto the pad.

Note that it's good hygiene practice for a person to change the tampon or sanitary pad when they go to the bathroom or take a bath or shower.

Process Questions

1. What was one fact that you learned today that surprised you?
2. Why do some people use slang terms to refer to their menstrual periods?
3. How might a person feel if they were the first person in their class to get their period?
4. How might a person feel if they were the only one of their friends who had not gotten their period yet?

Activity 6.5-4

5 minutes

“What Am I?” Game

Assess student knowledge

In this game, offer students a short description of the reproductive organs and functions they just learned about (vagina, ovaries, menstruation, etc.) and make them guess the answer. (You can give prizes if you want.) For example, “I am the organ that holds the eggs,” “I am the length of an average period,” or “I am the fold of skin on the outer part of the vulva.” This game assesses student knowledge and can be a great way to reinforce the important facts and ideas from the lesson.

Activity 6.5-5

Homework

Ask students to turn to **Handout 6.5-5** in the Student Workbook. Review and have them complete it for homework.

Handout 6.5-5

Name _____

“What Am I?” Homework

Instructions: On the lines provided, write the letter from the right column that corresponds with the definition in the left column.

Example:
 _____ I am the most important part of the reproductive anatomy. **Z. The Brain**

_____ 1. I am the location where a sperm fertilizes an egg.	A. Ejaculation
_____ 2. I am the tubes that carry the sperm from the testes.	B. Anus
_____ 3. I am the only part of the reproductive anatomy designed solely for pleasure.	C. Vagina
_____ 4. I am the part of the body through which solid waste is eliminated.	D. Vaginal Defenses
_____ 5. I am one of the hormones produced in the ovaries.	E. Fallopian Tubes
_____ 6. I am what is called when blood fills the blood vessels in the tissue of the penis, making it hard.	F. Endometrium
_____ 7. I am the term that refers to the uterus, both sets of fallopian tubes, and vaginal opening.	G. Scrotum
_____ 8. I am the sac of skin that holds the testes outside the body.	H. Clitoris

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GETREAL Grade 6 • Student Workbook

Handout 6.5-5
Student Workbook page 21

Activity 6.5-6 **Anonymous Questions Box**

Review anonymous questions

Address student questions from the Anonymous Questions Box. Give students a new question prompt that they can 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 6.5-7 **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 6.5

Word Connect: The Vagina and Related Parts

Instructions: Draw a line between the reproductive anatomy word on the left and the correct definition of the word on the right.

Fallopian tubes	The organs that contain egg cells (ovum) and produce the hormones (estrogen, progesterone) that cause body changes, ovulation and menstruation
Vagina	The tube that carries urine out of the body
Uterus	The lower part of the uterus that contains the opening to the vagina
Cervix	The term that refers to the uterus, both sets of labia, urethral opening and vaginal opening (external genitalia)
Ovaries	The passageway that connects the uterus to the outside of the body
Vulva	The small passageway an egg travels through to get from the ovary to the uterus

Bonus: Write down an additional fact you remember about three of these body parts.

Tip for Parents

The goal of this activity is to promote conversations between you and your child and young adults in their home. It provides a safe space to explore anatomy, understand, research resources for additional information, and share your feelings and thoughts.

Note: It is embarrassing to discuss these things with an adult, but you can decide to talk to them and do the research on your own.

Write down your answers and then read them aloud to yourself.

Remember: Stay safe and go right on learning!

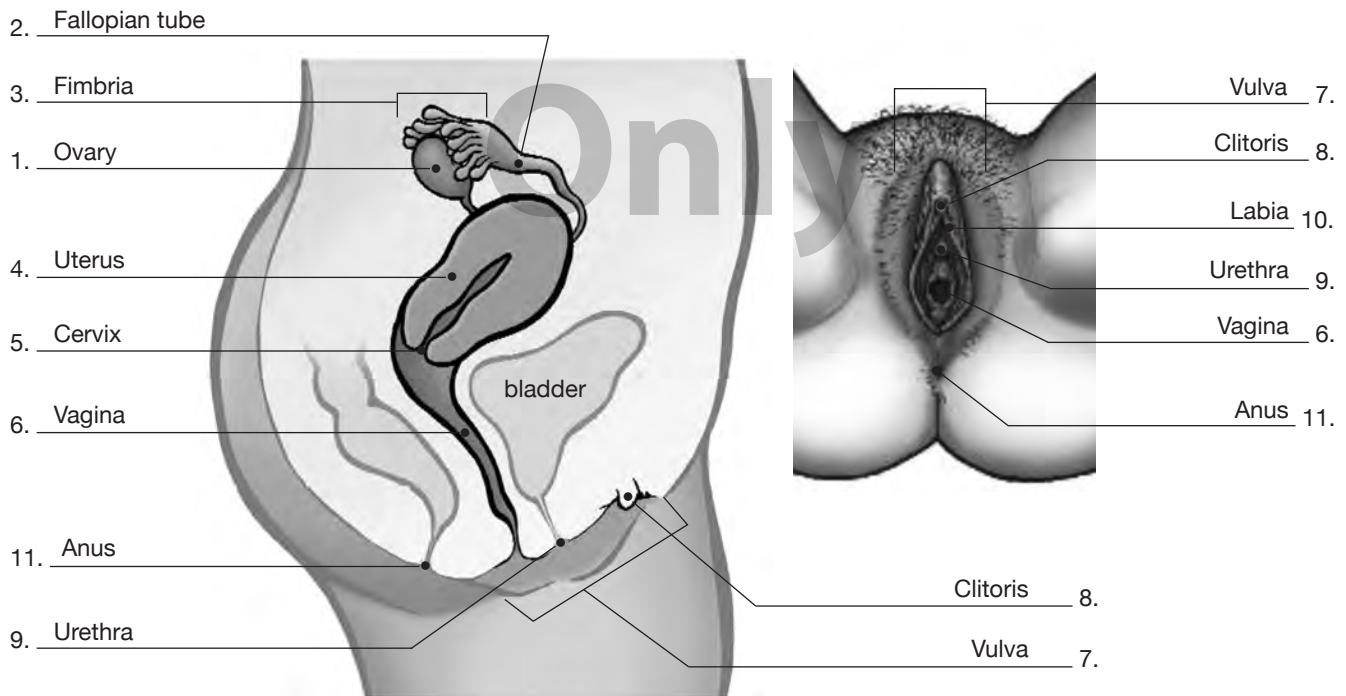
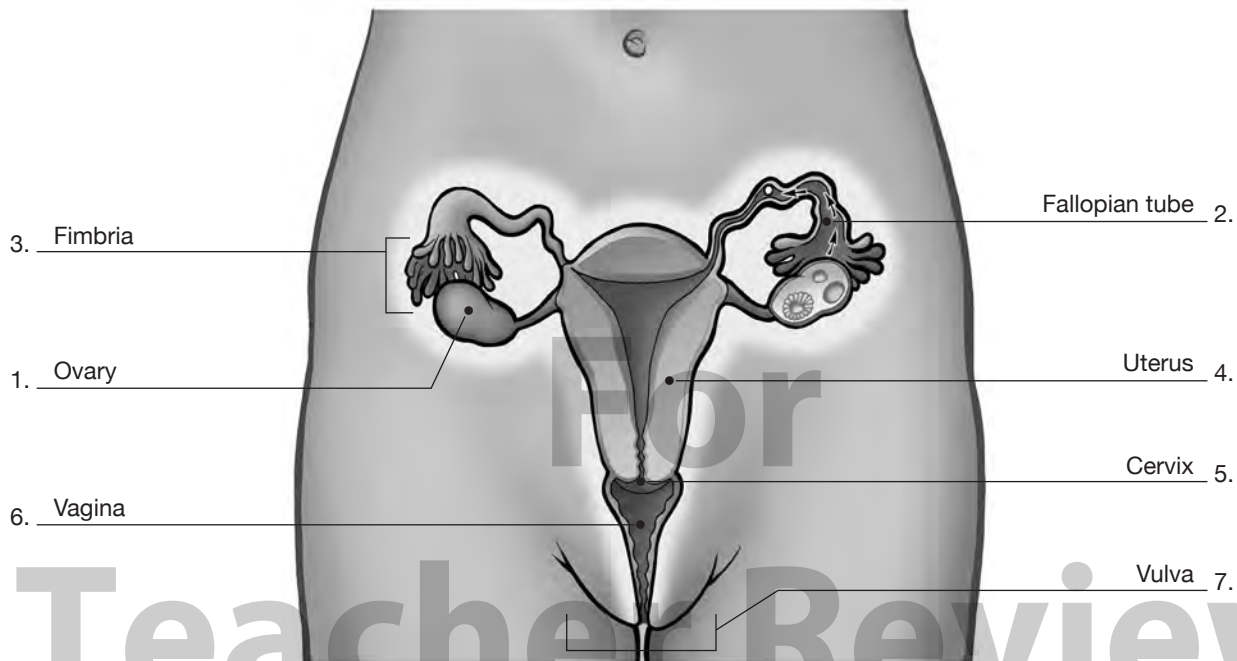
Parent or Other Caring Adult Signature _____ Student Signature _____

GETREAL Grade 6 • Student Workbook 23

Family Activity 6.5
Student Workbook page 23

Teacher Review
Only

The Vagina and Related Parts



These drawings are an example of sexual/reproductive parts. People's bodies come in all different shapes, sizes and colors. For more information, contact Planned Parenthood at 1-800-258-4448 or visit our website www.getrealeducation.org. Images © 2010 Planned Parenthood League of Massachusetts

For Teacher Review Only

GET|REAL

Comprehensive Sex Education That Works

Dear Parent or Other Caring Adult,

This week's Family Assignment again focuses on reproductive anatomy, specifically the vagina and related parts. The vagina and related sexual and reproductive parts are just as fascinating as the penis and related sexual and reproductive parts! Knowing the facts about bodies and how they work helps young people make healthier, safer, well-informed decisions related to sexuality.

Puberty, or adolescence, refers to the span of time between childhood and adulthood. It is a time of many changes. Between the ages of about 9 and 16, young people do more than just grow taller and bigger, as they have done since birth. During this time, hormones cause young people to grow and change in many ways—socially, emotionally, mentally, physically and sexually. The changes don't all take place at once. Most happen slowly over a few years' time, although a few may happen quickly. They often take place in a certain order, but not always.

As a parent, it's important to help your child realize that all of these changes are normal. It can be reassuring to remind your child that:

- Puberty is a process, not a single event. *Everyone* will go through it.
- During this time, a person's body and feelings begin to change from a child's to an adult's.
- Puberty tends to occur between the ages of 9 and 16; but it can happen sooner or later as well.
- No matter when puberty begins or ends, the whole process is very normal.

The "Events of Puberty" chart outlines the age range for young people when some of the physical changes of puberty usually happen. But, remember, it's very normal for physical changes to happen before or after these ages.

To learn more about puberty, including the challenging but exciting emotional and social changes that take place, visit the parent education website at www.pplm.org/education and click on "For Parents." Keep on talking *and* listening to your child!

(continued)

Continued

The Events of Puberty

— People with a Vagina and Related Parts —

- 1. Age Range: Usually 8–11** There are no outside signs of development, but the ovaries are enlarging and hormone production is beginning.
- 2. Age Range: Usually 8–14, Average 11–12** The first sign is typically the beginning of breast growth, including “breast buds.” A person may also grow taller and heavier. The first pubic hairs start out fine and straight, rather than curly.
- 3. Age Range: Usually 9–15, Average: 12–13** Breast growth continues. Pubic hair becomes darker and more coarse, but there still isn’t a lot of it. The body is still growing. The vagina is enlarging and may begin to produce a clear or white discharge. This is a normal self-cleansing process. Often young people get their first menstrual periods late in this stage.
- 4. Age Range: Usually 10–16, Average: 13–14** Pubic hair growth takes on the triangular shape of adulthood, but doesn’t quite cover the entire area. Underarm hair is likely to appear in this stage, as is menstruation. Ovulation (release of egg cells) begins in some young people, but typically not on a regular monthly basis until the last stage.
- 5. Age Range: Usually 12–19, Average: 15** This is the final stage of development, when a person is now physically an adult. Breast and pubic hair growth are complete. Full height and physique are usually attained. Menstrual periods are well established, and ovulation occurs monthly.

— People with a Penis and Related Parts —

- 1. Normal Age Range: 9–12, Average: About 10** The hormone testosterone is becoming active, but there are hardly any outside signs of development. Testicles are maturing. Some young people start a period of rapid growth late in this stage.
- 2. Normal Age Range: 9–15, Average: 12–13** Testicles and scrotum begin to enlarge, but penis size doesn’t increase much. There is still very little, if any, pubic hair at the base of the penis. Increase in height and change in body shape.
- 3. Normal Age Range: 11–16, Average: 13–14** Penis starts to grow in length but not much in width. Testicles and scrotum are still growing. Pubic hair starts to get darker and more coarse and spreads toward the legs. Growth in height continues, and body and face shape start to look more adult. Voice begins to deepen (and crack). Some hair grows around the anus.
- 4. Normal Age Range: 11–17, Average: 14–15** Penis width and length increase. Testicles and scrotum are still growing. Pubic hair begins to take on adult texture but covers a smaller area. Most young people have their first ejaculations. Underarm hair develops. Facial hair increases on chin and upper lip. Voice gets deeper, and skin gets more oily.
- 5. Normal Age Range: 14–18, Average: Around 16** Full adult height and physique are nearly reached. Pubic hair and genitals have adult appearance. Facial hair grows more completely, and shaving may begin. During the late teens and early 20s, some people grow a bit more and develop more body hair, especially chest hair.

Word Connect: The Vagina and Related Parts

Instructions: Draw a line between the reproductive anatomy word on the left and the correct definition of the word on the right.

Fallopian tubes	The organs that contain egg cells (ova) and produce the hormones (estrogen, progesterone) that cause body changes, ovulation and menstruation
Vagina	The tube that carries urine out of the body
Urethra	The lower part of the uterus that contains the opening to the vagina
Cervix	The term that refers to the clitoris, both sets of labia, urethral opening and vaginal opening (external genitalia)
Ovaries	The passageway that connects the uterus to the outside of the body
Vulva	The small passageways an egg travels through to get from the ovary to the uterus

Bonus: Write down an additional fact you remember about three of these body parts.

→ *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

Word Connect: The Vagina and Related Parts

Instructions: Draw a line between the reproductive anatomy word on the left and the correct definition of the word on the right.

Fallopian tubes	The organs that contain egg cells (ova) and produce the hormones (estrogen, progesterone) that cause body changes, ovulation and menstruation
Vagina	The tube that carries urine out of the body
Urethra	The lower part of the uterus that contains the opening to the vagina
Cervix	The term that refers to the clitoris, both sets of labia, urethral opening and vaginal opening (external genitalia)
Ovaries	The passageway that connects the uterus to the outside of the body
Vulva	The small passageways an egg travels through to get from the ovary to the uterus

Bonus: Write down an additional fact you remember about three of these body parts.

→ 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

Lesson 6.6

Puberty

Connecting the Lessons

Builds on *Lesson 6.4: Anatomy and Reproduction: The Penis and Related Parts* and *Lesson 6.5: Anatomy and Reproduction: The Vagina and Related Parts*.

Lesson Goals

- Identify emotional and physical changes of puberty.
- Identify impact of social awareness during puberty.
- Discuss links between anatomy and puberty.
- Discuss emerging sexual feelings and the difference between sexual feelings and sexual readiness.

Preparation & Materials Checklist

- ☐ Review the information about the vagina and related anatomy in the Teacher's Guide pages.
- ☐ Review the prompt questions in the Teacher's Guide to ask your students during this lesson.
- ☐ Review student handouts:
 - Handout 6.6-3: They May Feel...
- ☐ Copy family letter and family activity.
- ☐ Have:
 - They May Feel... scenario cards
 - Puberty Changes cards
 - Male Assigned at Birth/Female Assigned at Birth/Most wall signs
 - Masking tape
 - Anonymous Questions Box
 - Slips of paper for anonymous questions

Terms to Use

- | | |
|----------------------------|----------------|
| ■ Puberty | ■ Pubic hair |
| ■ Normal | ■ Body odor |
| ■ Emerging sexual feelings | ■ Erections |
| ■ Sexual readiness | ■ Masturbation |
| ■ Pimples/acne | ■ Wet dreams |

SEL Skills Addressed

Self-awareness, social awareness

Logic Model Determinant(s)

Increase communication with parents and other caring adults.
Increase self-efficacy of SEL skills to delay and/or refuse sex.

→ Teacher Note

When processing Activity 6.6-2, it's important to describe emerging sexual feelings as normal for some (though not all) people during puberty, and to emphasize that having sexual feelings does not equal sexual readiness. This is a good opportunity to discuss the difference between the two. Also, masturbation is brought up in Activity 6.6-3 as a healthy part of sexual activity that some (though not all) people choose to engage in. See the Teacher's Guide pages for further explanation.

Activity 6.6-1

5 minutes

Process Family Activity

Process Family Activity from Lesson 6.5

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 6.6-2

20 minutes

Experiences in Puberty

Identify emotional and physical changes of puberty

State that today's activity will help students learn and talk about the process of puberty and the different changes young people experience. Explain that you will be discussing bodily changes that occur within different human reproductive systems, as well as both the similarities and differences people may experience during puberty.

Ask what kind of changes young people can expect to go through during puberty. (*Possible responses: the way teen bodies look on the outside and inside, feelings, emotions, decisions, etc.*)

Highlight that puberty is a process and doesn't happen overnight. A lot of changes occur over time based on a gradual increase of sex hormones, which affect how people develop physically and emotionally. These changes are normal parts of puberty.

Distribute Puberty Changes cards and tape MALE ASSIGNED AT BIRTH, FEMALE ASSIGNED AT BIRTH, and MOST signs on the board with space for students to tape their cards underneath. Depending on the size of the class, some students may get more than one card.

Ask students to come up to the board one or two at a time and tape their change card(s) on the board in the appropriate MALE ASSIGNED AT BIRTH, FEMALE ASSIGNED AT BIRTH or MOST column. Encourage students to guess if they are unsure where to place the cards.

→ *Teacher Note***Consent and Sexual Readiness**

This conversation about puberty, feelings and sexual readiness can be an important opportunity to add in talking points about consent and the importance of respecting other people's boundaries. Teachers may also choose to remind students that in the context of *Get Real*, sexual behavior is being discussed as something all partners have agreed to. If someone has been in a sexual situation in which their choice was removed, they are never at fault and this is not the same as sexual activity. If needed, provide students with sexual assault resources, connect with a school counselor, and remind them of the caring adults they brainstormed in Lesson 6.1 as people they can talk to.

After students have placed all the cards, review the columns and ask students whether the cards are placed correctly. Encourage discussion about why a card might need to be moved. Move cards to the places outlined in the Teacher's Guide.

Once all cards have been moved to the correct column, highlight the cards that relate to feelings. Note that all young people, regardless of which body parts and hormones they have, may feel confused and moody, and may have sexual feelings. Explain the difference between sexual feelings and sexual readiness. Remind students that the most effective way to avoid STIs and unwanted pregnancy is not to have sex.

Process Questions

1. What did you notice about the placement of most of the cards? *(There are more under MOST, which shows that young people are more alike than different when going through puberty.)*
2. How might this change the way you see other people who are experiencing puberty?
3. Which card placements surprised you?
4. What are some feelings people might have while going through puberty?
5. What age is normal for going through puberty? *(Between 9 and 16; but this isn't true for everyone)*
6. If young people have sexual feelings during puberty, does that mean they are ready to engage in sexual activity? What's the difference?
7. What skills from Social Emotional Learning does this activity make you think about? *(Self-awareness, self-management, social awareness)*

→ Teacher Note

Naming Feelings

If students are reluctant to name feelings, have them brainstorm in pairs quickly, then share their answers with the class.

Activity 6.6-3

20 minutes

They May Feel...

Explore the range of feelings about changes of puberty

State that exploring feelings during puberty is important and that everyone has different feelings about these physical changes. Some people might feel self-conscious or uncomfortable. Ask students how people can stand by their uniqueness in a time of change. What could they do to stay confident? Focus on the importance of self-awareness and social awareness during this time of change.

→ Teacher Note

It's Normal!

Puberty can be a confusing time! Be sure to normalize all these changes as part of the experience of growing older.

Explain that the next activity will give students a chance to discuss some of the normal feelings they may have about the changes puberty brings. Model this activity by reading aloud the first scenario and filling in the feelings bubbles. See the Teacher's Guide pages for helpful language to process the scenario.

Divide students into groups of 2 or 3. Ask students to turn to **Handout 6.6-3** in the Student Workbook, and give each group a They May Feel... scenario. Instruct groups to write the name of the person in their scenario in the box, and then fill in the bubbles with the feelings the person is having.

When students have completed the sheet, post the sheets on a classroom wall so everyone can see the images and read the scenarios. Have students tour the "art gallery," reading the scenarios and feelings.

When students complete their tour, have them return to their seats.

Process Questions

1. Which feelings appear more than once in the gallery?
2. Are there any similarities you noticed among the situations? Any big differences?
3. Think for a minute about what feelings you might have if some of these scenarios were about you.
4. How might you deal with those feelings?
5. How might your feelings and reactions differ from others'? (*Be sure to connect this conversation to social awareness and acknowledge that different people may feel differently about puberty. It's important to always put oneself in someone else's place to understand how they might feel.*)
6. To whom might you turn to get help with understanding these changes and feelings? (*Remind students about the Caring Adults Brainstorm from lesson 6.1.*)

Handout 6.6-3
Student Workbook
pages 25–26

→ Teacher Note

Defining Masturbation

You will most likely need to define *masturbation* for the class and offer more information about it, as discussed in the Teacher's Guide pages.

Activity 6.6-4

Anonymous Questions Box

Review anonymous questions

Address student questions from the Anonymous Questions Box. Give students a new question prompt they can 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 6.6-5

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 6.6

The Time Machine

Student Instructions: Imagine you are a journalist researching a story called "The Time Machine." Set up a time to interview a parent or other caring adult. You want to understand what middle school and puberty were like for this person. Lead them through a walk down memory lane by asking the questions below. Keep some notes as you can have a good picture of what life was like when this adult was your age.

1. Try to picture yourself as a teenager around the age of 11, 12, or 13. Describe where you lived. What did your room at home look like? Did you share a room with a sibling?
2. Describe your school. What was it like for you to walk down the hallway, enter a classroom, get dressed for school every day? Was school easy or hard for you? What were you interested in, sports, music, art?
3. Who was important to you? Did you have a big group of friends? Did you have friends who were girls or friends who were boys? What did you do together for fun? How did you feel around them? Did you have a crush on anyone? Did this person know, or was it a secret?
4. What was going on with your body? Were you the first to change in your class, or maybe the last? Did you want it to happen, or did you hope it didn't? Did anyone tell you about these changes or answer your questions? Did you understand what was happening?
5. Did your parents talk to you about this stuff? Were they easy to talk to? Did they tell you everything about your life—your friends, your body, and your feelings? Did they drive you crazy sometimes? Did you feel they understood you?
6. If you didn't talk to your parents, whom did you talk to—your friends? A sibling? An aunt or uncle?
7. Finally, how did you feel about life at that time?

Have one feeling word to describe this time in your life. Is there anything you would change about this time if you could?

Tip for Parents

The goal of this activity is to provide conversations between you and your child about puberty and life in middle school. It's a chance to share personal stories and learn research resources for additional information, and share your feelings and notes.

Now, if it's embarrassing to discuss these topics with your child, you can discuss it on the web and do the exercise anyway. One parent at a time. Write down your answers and then read each other's answers. Laugh, giggle, shrug, and go right on living.

Parent or Other Caring Adult Signature _____

Student Signature _____

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Family Activity 6.6**Student Workbook page 27**

Teacher Review Only

Wall Signs

Male
Assigned at Birth

For

Female
Assigned at Birth

Most

Puberty Changes

Most	
Skin & hair get more oily	Sweat more
Hands and feet get bigger	Shoulders get broader
Develop pubic hair	Voice gets deeper
Facial bones change	Breasts grow
Hair grows under arms	May feel confused
Grow very quickly	May feel moody

Continued

Most	
Have sexual feelings/dreams	Become more mature
Begin to get hair on face, legs	Experience physical response to sexual feelings
Gain more responsibility Female Assigned at Birth	Male Assigned at Birth
	Testes begin to grow
Ovaries release eggs	Have wet dreams
Periods begin	Get erections
Vaginal discharge appears	Penis grows

They May Feel...

<p>1. Vincent overheard his older brother telling a friend that he masturbated. Vincent isn't sure what masturbation is.</p>	<p>8. For the first time ever, Sasha's parents let Sasha stay home alone.</p>
<p>2. Marc noticed something wet in his bed when he woke up this morning. He's afraid to ask anyone about it and wonders if there's something wrong with him.</p>	<p>9. Susanna told her mom she got her period, and her mom made Susanna's favorite dinner to celebrate.</p>
<p>3. Troy got an erection in math class today. He hopes no one saw it.</p>	<p>10. Jamal has gym class today, which he normally likes. But lately he's been really smelly under his arms. He doesn't want the cute person he likes to be grossed out.</p>
<p>4. Whenever Jose sees Whitney in the school halls, his palms get sweaty, his stomach flutters, his heart races, and he stutters when he tries to talk to her.</p>	<p>11. Corey is nearly a foot taller than the rest of the students on the team, and scored the winning basket in this week's game.</p>
<p>5. Anne is getting pimples on her face and back.</p>	<p>12. Talia is the only one in her group of friends who wears a bra.</p>
<p>6. While Martin was reading aloud today, his voice went crazy. It got all squeaky and he sounded like a girl. Everybody laughed.</p>	<p>13. Judi and her friend Nikki have been flirting after class in the halls. Today Nikki worked up the courage to ask Judi on a date.</p>
<p>7. Erica has always been really good at soccer, but lately her friends all want to do other things after school instead of playing on the soccer team.</p>	<p>14. Chris has started binding their chest because they don't want people to see their developing breasts.</p>

GET|REAL

Comprehensive Sex Education That Works

Dear Parent or Other Caring Adult,

Many parents wait for their child to ask a question about puberty or sexuality rather than start the conversation themselves. But many children won't ask their parents about sexual topics, and parents may also avoid these conversations, because they feel uncomfortable with the subject. In fact, a study by the National Campaign to Prevent Teen Pregnancy (currently publishing as Power to Decide) found that 87% of U.S. teens said it would be easier to postpone sexual activity if they could talk more openly about sex with their parents, but 37% of teens had never had a single talk with their parents on this topic!

Open-ended questions can be a good way to begin talking about sexuality with your child in a comfortable way. Remember, it's your right and responsibility to be your child's primary sexuality educator. As much as you can, stay calm and relaxed, and keep in mind that you're talking because you care about your child's happiness and well-being. Try these conversation starters today!

For Kids Who Don't Bring Up the Subject

- "I can't believe how tall you've grown already. Have you noticed other changes in your body? What do you like (or what don't you like) about the changes you're going through?"
- "When do you think a person is ready to be a parent?"

Answering Tough Questions You Don't Feel Ready for

- "That's a really good question. It's normal to be curious about [fill in the topic]. I'd really like to talk about it with you, but I need some time to think about it first."
- "What have you heard or learned already about [fill in the topic], and where did you hear it?"

Questions That Open the Door to Discussing Values

- "How do you think people know for sure whether they're ready to have sex?"
- "What do you think about how that couple on [fill in a favorite TV show] deal with each other when they get angry?"

(See reverse side for more ideas)

Continued

Ways to Give the Facts and Clear Up Slang While Responding to the Question

Q. Why do we need to talk about this stuff? I'm not having sex.

A. I know it can be difficult to talk about this stuff, and I get embarrassed, too. But there are so many things you need to know about your body, and about human sexuality and reproductive anatomy, as you grow and mature. Your body is going to change, and some of those changes can seem scary or strange. I want you to have all the right information so you can stay safe and healthy.

Q. Where do girls pee from?

A. Another word to describe peeing is "urinating." All people have a urethra from which they urinate, which is connected to the bladder where urine is stored.

Q. Everyone is talking about "hooking up." What does that mean?

A. That's a great question. I think it means different things to different people. Some people might use it to describe going out or dating, but others might use it to describe having sexual contact in a casual way (not in a serious relationship with a partner). Here's what concerns me about that: *[Insert your personal and family values here]*. What do you think "hooking up" means?

The Time Machine

Student instructions: Imagine you are a journalist researching a story called “The Time Machine.” Set up a time to interview a parent or other caring adult. You want to understand what middle school and puberty were like for this person. Lead them through a walk down memory lane by asking the questions below. Keep some notes so you can have a good picture of what life was like when this adult was your age.

1. Try to picture yourself as a teenager around the age of 11, 12, or 13. Describe where you lived. What did your room at home look like? Did you share a room with a sibling?
2. Describe your school. What was it like for you to walk down the hallway, enter a classroom, get dressed for school every day? Was school easy or hard for you? What were you interested in (sports, music, art)?
3. Who was important to you? Did you have a big group of friends? Did you have friends who were girls or friends who were boys? What did you do together for fun? How did you feel around them? Did you have a crush on anyone? Did this person know, or was it a secret?
4. What was going on with your body? Were you the first to change in your class, or maybe the last? Did you want it to happen, or did you hope it didn’t? Did anyone tell you about these changes or answer your questions? Did you understand what was happening?
5. Did your parents talk to you about this stuff? Were they easy to talk to? Did you tell them everything about your life—your friends, your body, and your feelings? Did they drive you crazy sometimes? Did you feel they understood you?
6. If you didn’t talk to your parents, whom did you talk to—your friends? A sibling? An aunt or uncle?
7. Finally, how did you feel about life at that time?
Name one feeling word to describe this time in your life. Is there anything you would change about this time if you could?

→ 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

Lesson 6.7

Abstinence

Connecting the Lessons

Builds on *Lesson 6.2: Communication and Refusal Skills* and *Lesson 6.3: Relationships and Boundaries*.

Planning ahead: Concepts learned in this lesson will be used in *Lesson 6.8: Decision Making and Values*.

Lesson Goals

- Identify behaviors that may carry risks for STIs and unintended pregnancy.
- State reasons why postponement and condom use are healthy behaviors for sixth-graders.
- Name risks of unprotected sex and drug/alcohol use.
- Give reasons why a majority of students in sixth grade abstain from sex.
- Address values around abstinence and sex.

Preparation & Materials Checklist

- ☐ Cut strips of paper for students. (*Optional: Use sticky notes.*)
- ☐ Review student handouts:
 - Handout 6.7-3: Abstinence Advice
- ☐ Copy family letter and family activity.
- ☐ Have:
 - Strips of paper (or sticky notes)
 - Tape
 - Anonymous Questions Box
 - Slips of paper for anonymous questions

Terms to Use

- Healthy and unhealthy behaviors
- Abstinence
- Postponement
- Sexual intercourse
- Sexually transmitted infection (STI)
- Commitment

SEL Skills Addressed

Self-management, responsible decision making

Logic Model Determinant(s)

Increase communication with parents and other caring adults.

Increase awareness of delaying sex as the healthiest choice.

Address values around abstinence and sex.

Increase self-efficacy of SEL skills to delay and/or refuse sex.

Increase knowledge of how drugs and alcohol can affect decision making around sexual behavior.

Address perceptions of peer norms regarding sexual behavior.

→ Teacher Note

The focus of this lesson is on abstinence and behaviors that may carry risk, including some sexual behaviors. Remind students that any time sexual activity is discussed in the *Get Real* curriculum, it is referring to consensual behavior—something all partners have agreed to—and that sexual assault is not the same as sexual activity. Remind students of their right to self-care and alert them in advance of the topic that will be discussed. Pay attention to students who disengage with the material, as they may have been triggered by something in the lesson, and follow up with them afterward.

Activity 6.7-1

5 minutes

Process Family Activity

Process Family Activity from Lesson 6.6

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 6.7-2

25 minutes

Defining Unhealthy Behaviors, Abstinence and Sexual Abstinence

Name behaviors that carry risk

State that the class will be looking at ways to stay healthy and safe by avoiding and reducing unhealthy behaviors.

Ask students to work in pairs to brainstorm examples of unhealthy behaviors. Answers may include drinking alcohol, taking illegal drugs, having sexual intercourse too soon, having unprotected sexual intercourse. Ask students to share some responses and make a list on the board. Assign one behavior to each pair, and ask each pair to identify two to three potential risks of the behavior. Have pairs share their answers with the class, and record on the board.

Note: For now leave out the behaviors of “having sexual intercourse too soon” and “having unprotected sexual intercourse.”

Define abstinence

Ask students why an individual might choose to engage in potentially harmful behaviors. Answers may include wanting to fit in, peer pressure, not feeling good about oneself, not thinking about the consequences. Despite these reasons, these behaviors can still carry risk and can be dangerous or harmful. Explain that considering risks is part of responsible decision making.

Introduce the term *abstinence* by stating that abstaining from a behavior means choosing not to engage in that behavior in order to eliminate the risk it could cause. Give an example, such as: “People who choose to abstain from using illegal drugs don’t have to worry about breaking the law, hurting their bodies or becoming dependent on a drug.” Ask students how abstinence relates to self-management.

Point to each behavior listed on the board and ask students for reasons abstaining from that behavior would be a healthy choice.

Now add “having sexual intercourse too soon” and “having unprotected sexual intercourse” to the list of behaviors on the board. Ask students what the benefits may be in abstaining from these behaviors.

Discuss motivations for sex and define sexual abstinence

State that, before talking about sexual abstinence, it’s important to first ask why people might choose to have sexual intercourse (define if needed as vaginal, oral and/or anal).

Possible responses include: “in love,” “feels good,” “to have a baby,” “fun,” “married,” “pressured,” etc.

Go back to the board and revisit the risks listed under “having sexual intercourse too soon” and “having unprotected sexual intercourse.” Ask students how they can know if something is “too soon.”

Bring out the fact that sometimes engaging in one unhealthy behavior can lead to engaging in others. For example, drinking alcohol can make it easier to use drugs or have unprotected sex.

→ Teacher Note

Definitions

Vaginal sex: penis to vagina

Anal sex: penis to anus

Oral sex: mouth to genitals (penis or vulva) or anus

→ Teacher Note

Engaging Students

If students seem resistant to discussing motivations for sex, have them write their ideas on a strip of paper and pass them to you to read.

Benefits of delaying sex

Ask if there are additional risks involved with these behaviors other than the ones listed. If needed, be sure to add “unintended pregnancy,” “STI transmission,” “getting emotionally hurt,” “difficulty staying in school,” and “going against personal, family or religious values or beliefs.”

State that, because of the risks involved, or simply because they’re not ready, many young people choose to delay sex. Very few middle school students have sex. If you think it will resonate with your students, ask them what percentage of teens they think have sex, then share the national statistics.

Explain that most young people decide to put off having sex until they are older. This is called abstinence, or postponement, because they are delaying the decision until a later time. Read students the *Get Real* definition of abstinence. Explain that delaying sex is a way of reducing the risks of sexual activity, because the longer people wait, the more they reduce risks associated with sex. Ask how delaying sex relates to responsible decision making. Ask students how people can know if

they're ready to have sex. Are they ready when their bodies change? Are they ready when their friends are ready?

Process Questions

1. What other behaviors do people choose to abstain from? (*Responses may include use of alcohol, drugs, certain foods, cigarettes, etc.*)
2. How does abstinence or postponement relate to responsible decision making?
3. How might people weigh their motivations for having sexual intercourse against the possible risks?
4. Why do many young people choose to delay sex?
5. Why might someone who's had sex before choose to not have sex (abstain or postpone) in the future?
6. Would choosing to postpone or abstain from sexual activity be easy or difficult? What might make it easy? What might make it difficult?

Confirm that for sixth graders, a healthy choice is to abstain from alcohol, other drugs and sex.

Abstinence Advice Scenarios

Apply learning

Tell students they will have an opportunity to discuss some “real-life” situations concerning abstinence. Explain that they will discuss these scenarios from the point of view of sexual health experts giving advice and feedback to the characters involved in each scenario.

Ask students to turn to **Handout 6.7-3** in the Student Workbook.

Read Scenario 1 aloud and ask the process questions included with the scenario.

Split the class into pairs or small groups.

Instruct students to work together for the next 10 minutes to read the remaining scenarios and answer the process questions. You may want to assign the students just one scenario, depending on the time remaining and their reading levels.

→ Teacher Note

Get Real's Definition of Abstinence

Get Real defines abstinence as “voluntarily choosing not to engage in certain sexual behaviors, including any sexual behaviors that can result in pregnancy or STIs, including HIV.”

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.

(from *SIECUS*, “Guidelines for Comprehensive Sexuality Education, K–12”)

Activity 6.7-3

15 minutes

Handout 6.7-3

Name _____

Abstinence Advice

Instructions: Discuss the following scenarios and record your answers to each of the process questions.

Scenario 1: Ashley met Corey at her cousin's house. Corey is her older cousin's friend. It didn't take long for Ashley and Corey to hit it off and start going out in secret. Corey is 16 years old, and Ashley is almost 18. If Ashley's parents or cousin found out she and Corey were dating, they would be really upset. Because Ashley is keeping her relationship with Corey a secret, she doesn't have anyone to talk to about it. Ashley is feeling pressured to have sex with Corey, even though she doesn't really want to. She feels confused and overwhelmed and doesn't know what to do.

Process Questions

1. What should Ashley do?
2. Can she choose abstinence? Why or why not?
3. What skills can she use to make abstinence work?

Scenario 2: Eric's parents are out late, and he has some friends over. Eric's friend Greg wants to take some of Eric's parents' alcohol to drink. Greg tells Eric that if they all get drunk, maybe the person Eric likes will make out with him. Eric tells Greg he doesn't feel right about that. He says that he likes this person but wants things to happen when they are both sober and in control. Plus he doesn't want to get in trouble with his parents if they find out he's been drinking.

Process Questions

1. Eric showed several positive behaviors during his conversation with Greg. What were they?
2. What could Eric do if Greg continued to give him a hard time about not wanting to drink?
3. What are some reasons Eric might not want to be drunk with the person he likes?

(continued)

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Handout 6.7-3

Student Workbook
pages 29–30

If there's time, ask for volunteers to read their scenarios aloud and share their process question answers with the class.

Before ending class, review the following process questions.

Process Questions

1. What types of commitments do people make? (*Possible responses include: getting good grades, being on an athletic team, getting married, etc.*)
2. How do people make commitments work? What qualities are important? (*Self-confidence, a plan, communication, trust if the commitment involves another person.*)
3. What qualities are important for a commitment to sexual abstinence?

Activity 6.7-4

Anonymous Questions Box

Review anonymous questions

Address student questions from the Anonymous Questions Box. Give students a new question prompt they can 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 6.7-5

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 6.7

Interview Questions

Instructions: Interview a parent or other caring adult. Fill in the blanks using the answers you and your caring adult come up with.

_____ (child's name) believes that dating for kids in sixth grade can be _____ (child's name) suggests the following guidelines for parents and their sixth graders:

1. An appropriate age for kids to be going out or dating is _____.
2. Two important rules that must be followed: _____ and _____.
3. Kids in sixth grade should be allowed to _____ but not to _____ because _____.
4. If dating someone started to feel uncomfortable for any reason, a person could _____ or _____.
5. A parent who felt uncomfortable about a child's dating situation could _____.

Being assertive and taking care of yourself in dating situations can be difficult because of feelings of excitement and being grown-up. Parents can encourage young people to take care of themselves by teaching their children to _____.

Parent/Other Caring Adult Signature _____ Student Signature _____

GETREAL Grade 6 • Student Workbook 31

Family Activity 6.7

Student Workbook page 31

References

Definition of abstinence:

From the Sexuality Information and Education Council of the United States (SIECUS), *Guidelines for Comprehensive Sexuality Education: Kindergarten to 12th Grade*, 3d ed., 2004, www.siecus.org/_data/global/images/guidelines.pdf.

More information is available from www.siecus.org and by contacting SIECUS at 90 John St., Suite 704, New York, NY 10038.

Background on risk behavior:

From Centers for Disease Control and Prevention, Youth Risk Behavior Surveillance—United States, 2013, www.cdc.gov/mmwr/pdf/ss/ss6304.pdf.

For
Teacher Review
Only

GET|REAL

Comprehensive Sex Education That Works

Dear Parent or Other Caring Adult,

This week's *Get Real* class presented the concept of abstinence and how it relates to sexual activity. *Get Real* defines abstinence as choosing not to engage in certain sexual behaviors, including any sexual behavior that could result in pregnancy or sexually transmitted infection (STI), including HIV.

People may have different ideas about what abstinence is. For some it means no sexual contact of any kind, including kissing. For others it can include everything but sexual intercourse. Still others fall somewhere in between. Some people choose to abstain from sex until marriage. Some decide to put off or postpone having sex until they are older.

The Family Activity gives you a chance to share your personal and family values around dating and romantic relationships, and talk about how these relate to abstinence, with your child. You can communicate your thoughts, concerns and values.

Values are deeply held beliefs about what is right and appropriate for us and what is wrong. Some people think of values as morals. Values guide our decisions in life and can help us stay healthy. They help us model healthy behavior and respect ourselves and others. Even if you and your child disagree about some values, these discussions give you a chance to understand each other's point of view and explain why you feel the way you do.

There are different kinds of values:

- **Personal values** come from our own experiences and are not necessarily agreed upon by everyone. For example, someone might tidy their room every day because of a value for cleanliness. Or different families may have different beliefs about when it's appropriate for people to begin engaging in sexual activity.
- **Cultural values** are influenced by groups, societies or cultures and are largely shaped by their members. For example, a person growing up in the United States might value democracy because that is the accepted political ideal of this country.
- **Universal values** can be defined as those that are important to the majority of humans. For example, across most cultures, people value safety, personal health and self-respect.

Interview Questions

Instructions: Interview a parent or other caring adult. Fill in the blanks using the answers you and your caring adult come up with.

_____ (adult's name)
believes that dating for kids in sixth grade can be

_____.

_____ (adult's name)
suggests the following guidelines for parents and their
sixth graders:

1. An appropriate age for kids to be going out or
dating is _____.

2. Two important rules that must be followed:

_____ and _____.

3. Kids in sixth grade should be allowed to _____

but not to _____

because _____.

4. If dating someone started to feel uncomfortable for any reason, a person could

or _____.

5. A parent who felt uncomfortable about a child's dating situation could _____

_____.

Being assertive and taking care of yourself in dating situations can be difficult because of
feelings of excitement and being grown-up. Parents can encourage young people to take care
of themselves by teaching their children to _____

_____.

Parent or Other Caring Adult Signature

Student Signature

→ 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.

Lesson 6.8

Decision Making and Values

Connecting the Lessons

Builds on *Lesson 6.7: Abstinence*.

Lesson Goals

- Examine personal values and how they inform decision making.
- Discuss factors that go into decision making.

Preparation & Materials Checklist

- ☐ Review student handouts:
 - Handout 6.8-4: Steps to a Decision
 - Handout 6.8-5: Decision-Making Homework
- ☐ Copy family letter and family activity.
- ☐ Have:
 - Decision Making poster
 - Decision Making scenario cards
 - Anonymous Questions Box
 - Slips of paper for anonymous questions

Terms to Use

- Decision making
- Personal values
- Pros
- Cons

SEL Skills Addressed

Self-awareness, social awareness, responsible decision making

Logic Model Determinant(s)

Increase communication with parents and other caring adults.

Increase knowledge of how drugs and alcohol can affect decision making around sexual behavior.

Address values around abstinence and sex.

Address perceptions of peer norms regarding sexual behavior.

Address future goal setting.

→ Teacher Note

People have many different ways of making decisions. The decision-making model is presented as one concrete method that can help students visualize the consequences of their actions. As you demonstrate the model with the class, be sure to use a controlled scenario where the pros and cons are strong enough that it will be easy for students to make a healthy decision.

Activity 6.8-1

5 minutes

Process Family Activity

Process Family Activity from Lesson 6.7

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 6.8-2

5 minutes

Introduction to Personal Values and Decision Making

Review key points about unhealthy behaviors

Review the following points from the previous class on abstinence and unhealthy behaviors:

- Some behaviors can lead to outcomes that a person wasn't expecting or ready for. (*Ask for examples; one could be using an illegal drug and becoming addicted to it.*)
- Some behaviors may lead to increased riskier behavior. (*Ask for examples; one could be having sex while under the influence and not using protection.*)
- Some behaviors can lead to outcomes that make it difficult for people to respect their own personal values and achieve personal goals. (*Ask for examples; one could be giving in to peer pressure to drink, use drugs or have sex when a person doesn't want to.*)

Discuss how responsible decision making reduces unhealthy behaviors

Ask students to name something they do every day without even realizing it. Prompt them to say "making decisions."

State that an important skill for everyone to have to minimize risk is knowing how to make safe and healthy decisions, which is the focus of today's class. Ask for examples of easy decisions and more difficult ones.

Ask why teens sometimes find it difficult to make healthy decisions about their behaviors. Answers may include peer pressure, wanting to fit in, curiosity, not thinking about negative risks.

Show link between values and reducing unhealthy behaviors

State that a key factor in making healthy decisions is knowing yourself—by becoming more *self-aware*. Today’s lesson will focus on discovering personal values and how knowing those values can help make decisions easier. Elicit a definition of values from students, prompting when necessary. Ask students to name some universal values (health, respect, safety, etc.). Ask them how values can reduce the risk of unhealthy behavior.

Activity 6.8-3

10 minutes

Stand Up/Sit Down Activity

Clarify personal values and discuss challenging situations

State that this activity is an exercise that will help students learn more about some values they may hold.

Tell students you will read eight brief statements. Each statement represents a different value. They should stand up if they agree with the statement and remain seated if they disagree.

Remind students about group agreements and how everyone is free to share their opinions and feelings. Read the following statements, then ask students to add a few statements of their own:

- Getting good grades is important to me.
- It’s OK to get into a car with someone who has been drinking.
- Hanging out with my family is a priority for me.
- Girls should be allowed to play football.
- It’s OK for boys to wear pink.
- If two people are in love, they should have sex.
- A couple should wait until they’re married before trying to have a baby together.
- It’s OK for people in high school to have sex.
- Having sex makes people cool.

→ Teacher Note

This activity assumes all students have the ability to stand. Be sure to create accommodations for students who cannot—e.g., having all students raise their hands, or hold up a green (agree) or red (disagree) card, etc.

Process Questions

1. Name some feelings you had during this activity.
2. Were any of the questions hard to answer? Why?
3. What can make it difficult to stand up for personal values? What does “should” mean? Who decides what “should” happen?
4. Ask students for examples of situations in which their values have been or could be challenged (prompt if necessary). Why are these situations difficult?

5. How does it feel to make a decision that goes along with your values?
How does it feel to make a decision that goes against your values?
6. How does it feel to make a decision that goes along with/ goes against your peers?

Summarize by stating that the first step in acting on personal values and standards is becoming aware of what your values are.

Activity 6.8-4

25 minutes

Decision-Making Activity

Introduce importance of decisions

State that parents usually take care of most decision making for their young children. Part of growing up, however, is getting the opportunity to make your own decisions. Learning how to make decisions can help young people deal with difficult situations and problems and follow through on their personal goals in ways that match their values.

Explain that people have many different ways of making decisions. One way to practice the steps is to look at real-life situations and go through a decision-making model. Ask students if they've ever gone through a model in any other class.

Present decision-making model

Ask students to turn to **Handout 6.8-4** in the Student Workbook and go over the steps of the decision-making model. Then, using the model, go through either the first example from the handout or a simple situation to review the steps (e.g., deciding whether or not to cut school).

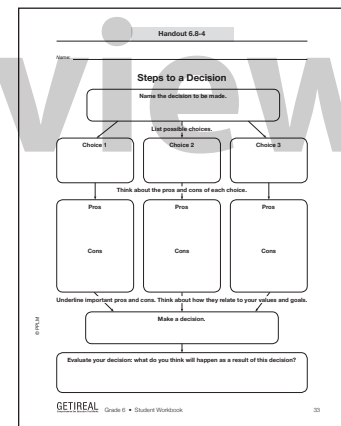
After students understand the steps, divide the class into pairs or small groups. Each group will be given a scenario that requires a decision to be made. They should discuss the case study, apply the decision-making model, and fill out the steps to the decision. Prompt students to think of values and short-term goals that relate to the decision-making process. When it comes time for them to evaluate, ask students to consider the possible effects of their decisions.

Practice using model in groups

Give students about 10 minutes to complete the handout in their groups. Allow as many groups to present as time allows, leaving time to ask the following process questions.

➔ Teacher Note

The Responsible Decision Making Activity is not designed to teach students to choose the “right” or “best” decision. Instead, this process gives students an opportunity to recognize that they have many choices and ultimately need to weigh the pros and cons of each choice against their personal values. For more information about how to facilitate this activity, view the modeling video on www.getrealeducation.org and read through the Teacher’s Guide.



Handout 6.8-4

Student Workbook page 33

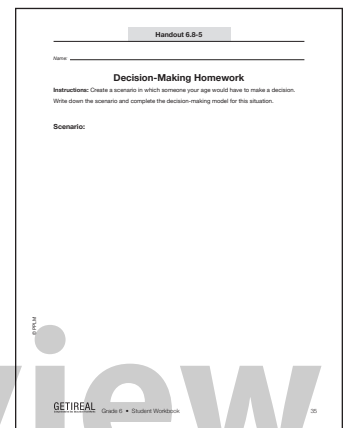
Process Questions

1. Was it easy for your group to make a decision on your case study? Why or why not?
2. How might using drugs or alcohol affect the decision making in your scenario? (*It might lead to making decisions a person wouldn't normally make or ones that are risky or potentially unsafe—a person would not be able to think through the decision-making process clearly.*)
3. How could you decide when to use the decision-making model in your life?
4. What can happen when you don't give yourself time to think through important decisions?
5. Which parts of this model could you share to help someone else make a decision?
6. Complete this sentence: "The next time I'm faced with a tough decision, I will..."

Activity 6.8-5

Homework

Ask students to turn to **Handout 6.8-5** in the Student Workbook. Review and have them complete it for homework.



Handout 6.8-5

Student Workbook page 35

Activity 6.8-6

Anonymous Questions Box

Review anonymous questions

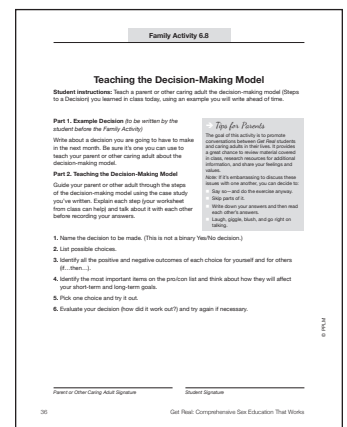
Address student questions from the Anonymous Questions Box. Give students a new question prompt they can answer if they don't have one about the class material, and remind students to place their anonymous questions in the box as they leave the classroom.

Activity 6.8-7

Family Activity

Explain family activity

Review the Family Activity for this lesson.



Family Activity 6.8

Student Workbook page 36

Get Real for Parents

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

Decision Making

1. Your friend sent a sexy picture of herself to her crush. Without her knowledge, someone emailed it to everyone you know. What do you do?

2. You overhear your older sister talking to her boyfriend about having sex. Your sister tells you to swear you won't tell anyone. She says it's none of your business. What do you do?

3. You and four of your friends are at the movies on a Saturday night. One friend's dad is supposed to meet you at the end of the movie to take everyone home. When he arrives you can tell that he's drunk. What do you do?

4. You're invited to a sleepover with several friends. When you arrive, you find out your friend's parents are out of town. You are not supposed to attend any events when parents aren't there. What do you do?

5. Two classmates are planning on drinking this weekend. They ask if you want to join them. You aren't sure what to say, and they call you a "chicken." What do you do?

GET|REAL

Comprehensive Sex Education That Works

Dear Parent or Other Caring Adult,

This week, the *Get Real* lesson focused on decision making and how it relates to values. As part of this week's Family Activity, your child will be teaching you about the decision-making model taught in class.

Risk taking is a part of life that can result in both healthy and unhealthy outcomes. When parents understand the parts of an effective decision-making process, they can support their children and help them see that avoiding unhealthy behaviors is the best choice.

The *Get Real* decision-making model can be used for any decision in life—from deciding whether to watch television or do homework, to save money or spend it, or to join or refuse to do a risky behavior a friend or partner is encouraging or pressuring you to do.

Having useful skills, accurate information and good resources can empower young people to make healthier, safer and well-informed choices, including decisions related to sex and sexuality. Recent studies show that children who have frequent and open conversations with their parents about sex and sexuality have closer relationships with their parents and are more likely to make healthy decisions.

For
Teacher Review
Only

Teaching the Decision-Making Model

Student instructions: Teach a parent or other caring adult the decision-making model (Steps to a Decision) you learned in class today, using an example you will write ahead of time.

Part 1. Example Decision *(to be written by the student before the Family Activity)*

Write about a decision you are going to have to make in the next month. Be sure it's one you can use to teach your parent or other caring adult about the decision-making model.

Part 2. Teaching the Decision-Making Model

Guide your parent or other adult through the steps of the decision-making model using the case study you've written. Explain each step (your worksheet from class can help) and talk about it with each other before recording your answers.

1. Name the decision to be made. (This is not a binary Yes/No decision.)
2. List possible choices.
3. Identify all the positive and negative outcomes of each choice for yourself and for others (if...then...).
4. Identify the most important items on the pro/con list and think about how they will affect your short-term and long-term goals.
5. Pick one choice and try it out.
6. Evaluate your decision (how did it work out?) and try again if necessary.

→ *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

Lesson 6.9

Grade 6 Conclusion and Review

Connecting the Lessons

Builds on *Lesson 6.2 Communication and Refusal Skills* and *Lesson 6.7: Abstinence*.

Lesson Goals

- Name topics covered in the course.
- Name facts learned in the course.
- Demonstrate refusal skills as they relate to abstinence and healthy decision making.
- Identify goals.

Preparation & Materials Checklist

- ☐ Review key points of previous lessons.
- ☐ Set up classroom for brainstorming exercise.
- ☐ Find and enlarge photos of two young people who are close to students' age and reflect your students' demographics.
- ☐ Copy family letter and family activity.
- ☐ Have:
 - Several large pieces of paper
 - Markers
 - Tape
 - SEL Skills poster
 - Large pictures of two young people
 - Anonymous Questions Box
 - Slips of paper for anonymous questions
- ☐ (*Optional*) Create unit test from Grade 6 Test Question Bank.

Terms to Use

- | | |
|-------------------|-------------------------------|
| ■ Refusal skills | ■ Self-management |
| ■ Abstinence | ■ Awareness of others |
| ■ Plans and goals | ■ Relationship skills |
| ■ Self-awareness | ■ Responsible decision making |

SEL Skills Addressed

Self-awareness,
self-management,
responsible decision-making

Logic Model Determinant(s)

Increase communication with
parents and other caring adults.
Increase self-efficacy of SEL
skills to delay and/or refuse sex.
Address future goal setting.
Increase knowledge of how
drugs and alcohol can affect
decision making around sexual
behavior.

Teacher Note

Since this is the final lesson of sixth grade, be sure to answer any remaining questions from the Anonymous Questions Box. It's also important to review local resources with students and encourage them to seek out caring adults with any questions or concerns they may have about sexuality.

Activity 6.9-1

5 minutes

Process Family Activity

Process Family Activity from Lesson 6.8

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 6.9-2

10 minutes

Review Contest

Review course topics and importance of abstinence and refusal skills

Write the words “sex” and “sexuality” on the board. Remind students of the first day of *Get Real*, when you asked them whether they knew the difference between the two words. Remind students that sex is only a part of what makes up sexuality.

Divide students into groups of four or five. Instruct them to brainstorm as a group all the things, including topics, messages and SEL skills, that help define “sexuality.” Their goal is to come up with more ideas than any other group. When the teacher calls time, groups should tally up the number of topics they listed and write it at the bottom of their sheet.

Have groups post their sheets on the classroom wall and circulate to look at other groups’ sheets. Review the tallies and declare one group the winner.

Process Questions

1. What was something your group forgot?
2. Which ideas appear on every sheet?
3. What is puberty? Why is it important?
4. What is abstinence? Why is it important?
5. What are refusal skills? Why are they important?
6. Which ideas or topics do you think will be the most important to your future decision making?

Activity 6.9-3

5 minutes

Character Case Study and Personal Goal Reflection**Reflect on personal goals and achievements**

Show students the pictures of the two young people. Label them Character 1 and Character 2. Announce that the class will be inventing character histories for these people. Using student responses, write the following things on the board for each person:

- Character's name and age
- Character's inner circle (closest relationships)
- Character's favorite TV show
- Character's favorite music
- Character's plans for the weekend
- Character's plans for summer vacation
- Character's proudest achievements
- Character's future career goals

Once each character is established, ask students, "What is important to this character? What has this character already achieved?"

Distribute slips of paper to students and ask them to write down at least three things they themselves have already accomplished and at least one goal they have. Goals could be things they plan to do in the next week, in the next few years, or at any point in their lifetimes. Ask students to keep this slip of paper out for another activity.

→ *Teacher Note***Guided Improvisation**

For educators who have been trained in the Guided Improvisation role-play technique, this is an opportunity to utilize this technique with the class by building out the characters in Activity 6.9-3 and using them in Activity 6.9-4 to script the start of a dialogue between the characters. For a reminder of how these activities are facilitated, log on to www.getrealeducation.org for modeling videos.

Activity 6.9-4

15 minutes

Refusal Skills Demonstration**Process a scenario and demonstrate key refusal skills**

Using the characters developed above, explain that the class is going to do a brief review of refusal skills. Ask students to name important elements of clear communication and refusal skills.

Read the following scenario to the class, inserting the names given by the class:

"Character 2 has a crush on Character 1, and Character 1 knows it. Character 1 likes Character 2 back. After school, Character 2 invites Character 1 over to hang out. Character 2's parents are gone and Character 2's older brother will buy them beer. Character 1 isn't sure about it, but wants to still be liked by Character 2."

Ask students to turn to a partner and practice what they would say as *Character 1* in this situation. Then ask for volunteers to role-play the scene between *Character 1* and *Character 2*. Have other students step into the role-play and take on the role of *Character 1* or *Character 2* if they think they have something to say.

Process Questions

1. What were *Character 1*'s options?
2. What might make it hard for *Character 1* to refuse in this situation?
3. How could alcohol make the situation more complicated? How does it affect responsible decision making?
4. Which SEL skills does this scenario involve?
5. If *Character 1* were your friend, what advice would you give?

→ Teacher Note

Talking Point

Ask students what *Character 1*'s friends might say and have them model it from their seats.

Examine the relationship between goals and sexual activity

Ask students to imagine that *Character 1* decides not to refuse, and instead goes over to *Character 2*'s house to drink beer without parents home. What are some possible outcomes of this decision? If *Character 1* and *Character 2* engage in sexual activity while drinking, what are some possible effects—what could happen?

Ask students to look back at their list of their own achievements and goals from the previous activity. Ask them to think about how sexual activity might affect their achievements. How might sexual activity before they're ready affect their goals? What is the role of self-management in helping them achieve their goals? Ask students to circle achievements or goals that might be negatively affected by sexual behavior before they're ready.

→ Teacher Note

Consent and Alcohol

It is important to highlight that a person is unable to give consent if they are under the influence of drugs or alcohol. In order for consent to occur, all partners must be sober. In the processing of this activity, it's important to remind students of their right to self-care. Be sure to check in with any students who may need additional support.

Activity 6.9-5

Anonymous Questions Box

Review anonymous questions

Address any remaining student questions from the Anonymous Questions Box. Remind students that you are always available to help them find resources or answers to their questions.

Activity 6.9-6

5 minutes

Giving a Message (Optional)

Clarify values surrounding sexuality

Ask students to think of all the parts of sexuality that came up during the brainstorming for the review contest.

Prompt: “Think of someone younger who looks up to you. What message would you want to give this person about sexuality?”

Allow students to write their individual responses. Call on volunteers to share if they choose.

Activity 6.9-7

5 minutes

Wrap-Up (Optional)

Encourage students to seek help for questions

Thank students for participating in their first year of the *Get Real* curriculum. Encourage them to talk with their caring adults about the issues discussed in class, and to come to you with questions at any time.

Activity 6.9-8

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 6.9

What Have We Learned?

Instructions: Work together to finish these sentences. Think about the things you've both learned and discussed over the 9 weeks of *Get Real* classes and Family Activities.

- One fact I learned about sex and sexuality is...
- One value about sex and sexuality I have is...
- One thing I still hesitate about the topic of sex and sexuality is...
- One thing I want my parent or child to understand about my feelings on this topic is...
- One thing that's working well in our relationship and communication about this topic is...
- One of the main messages I want to share with my parent or child about the topic of sex and sexuality is...

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Parents/Caring Adult Signature _____ Student Signature _____

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Family Activity 6.9
Student Workbook page 37

For Teacher Review Only

GET|REAL

Comprehensive Sex Education That Works

Dear Parent or Other Caring Adult,

This was the final week of *Get Real* classes! The Family Activity will help you and your child talk about the experience together. We hope you've found the *Get Real* Family Activities and letters helpful in your ongoing conversations with your child.

As the primary sexuality educator of your child, here are some general strategies to remember as you continue to talk about relationships, communication, decision making and values—the keys to sexual health!

- **Remember, sexuality isn't just about sex.** Sexuality includes gender, reproduction and sexual activity, but it's also much more. Sexuality involves feelings, attitudes, intimacy, caring, messages about gender identity, body image and sexual orientation.
- **Know that children and teens want to hear from their parents.** Teens cite parents as the number-one influence on their sexual decision making. Remind them that you care and want to help them make safe, healthy choices.
- **Be connected with their world.** Be curious about young people's interests (music, TV, sports, etc.) and get to know their friends.
- **Affirm them.** Compliments and support build positive self-esteem and will help your child open up to you.
- **Talk less, listen more.** Ask questions that open the door for discussion (e.g., "When do you think a person is ready to be a parent?"). Validate your child's questions, and really listen to your child's thoughts and views without judging. Start on a positive note by giving a compliment.
- **Choose the right times.** Talk in the car or while having a snack, etc., not when people are on the run or in the middle of an activity such as homework.
- **Be prepared.** Learn about the sexuality education being taught in the schools, faith communities and youth groups. Identify available resources, such as websites, books and professionals.
- **Remember that it's never too late.** Starting early and talking often is great. But it's never too late to begin. Conversations about sexuality should be ongoing.
- **Be honest.** Communicate your true feelings and values. If you believe your child should wait to become sexually active, say so in a positive, supportive way. Don't expect to have all the answers. Admit when you don't know. Be willing to seek answers together. It's OK to feel embarrassed or uncomfortable, as long as you keep talking.
- **Understand why facts and knowledge are important.** Respect your child's right to accurate and honest information about sexuality. Giving them the information they need helps young people make good decisions.

What Have We Learned?

Instructions: Work together to finish these sentences. Think about the things you've both learned and discussed over the 9 weeks of *Get Real* classes and Family Activities.

1. One fact I learned about sex and sexuality is...

2. One value about sex and sexuality I have is...

3. One thing I still wonder about the topic of sex and sexuality is...

4. One thing I want my parent or child to understand about my feelings on this topic is...

5. One thing that's working well in our relationship and communication about this topic is...

6. One of the main messages I want to share with my parent or child about the topic of sex and sexuality is...

→ *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

There are multiple ways to assess student learning throughout the unit. In addition to the assignments embedded within the unit, you may choose to do a final assessment at the end of the unit. In addition to the test questions included below, here are three creative options you may choose as assessments:

- 1. Creative anatomy:** Working individually or in groups, students will create a model of the reproductive anatomy using art supplies and found materials. The model should be approximately to scale. Students must be able to identify all the parts of the anatomy and explain the function that each part plays in reproduction.
- 2. Puberty brochure:** As a class, look at examples of brochures found in nurse's offices and health clinics geared toward middle school students. Working individually or in groups, students will create an original brochure that explains puberty to sixth graders. The brochure should contain facts about physical and emotional changes and should help students to feel normal about the process of going through puberty.
- 3. Assertive scripting:** Working individually or in groups, students will brainstorm a situation in which two young people need to solve a problem within their friendship or relationship. The scenario does not have to be about a romantic relationship, but there does need to be an important issue being resolved by the two characters. Then, based on the scenario, the student(s) will write three scenes. The first scene should demonstrate passive communication. The second scene should demonstrate aggressive communication. The third scene should demonstrate assertive communication. After they complete their scenes, students should write a one-paragraph analysis explaining why assertive communication is the most effective. If students work in groups on this project, they could also present their scenes to the class.

You may also choose to create a final unit test for your students. Below are questions in several different formats that test their ability to recall and apply concepts from this unit of *Get Real*. Use this bank of questions to assemble a test that is well suited to assess your students' knowledge of the material from this unit.

Multiple-Choice Questions

1. When Albert gets angry, his first instinct is to yell. Lately he has started counting to 3 and taking a deep breath when he gets angry to prevent himself from yelling. Albert is demonstrating:
 - a. Relationship skills
 - b. The decision-making model
 - c. Self-management
 - d. Social awareness
2. When saying “no” the most effective way to get your message across is to:
 - a. Use a soft tone of voice
 - b. Say “no” clearly and directly
 - c. Avoid eye contact
 - d. Giggle
3. In which situation is a person giving consent for sexual activity?
 - a. If they say “yes” enthusiastically
 - b. If they are drunk or asleep and don’t say anything
 - c. If they don’t say anything
 - d. If they are pressured into saying “yes”
4. What percentage of high school students have sex?
 - a. 100%
 - b. 75%
 - c. 50%
 - d. Less than 50%
5. Abstinence is:
 - a. Breaking the law
 - b. Pressuring your friends to do something
 - c. Choosing not to engage in certain sexual behaviors
 - d. A sexual act

6. When making a decision using the decision-making model, you consider all possible choices. What happens next?
- a. Think about the pros and cons of each choice
 - b. Ask your friends for advice
 - c. Make a decision
 - d. Think about what will happen as a result of the decision
7. One important factor in making a responsible decision is...
- a. What other people think is cool
 - b. Thinking about what someone else might do
 - c. Ignoring all possible consequences
 - d. Examining your personal values
8. This organ is found in both reproductive systems:
- a. Testes
 - b. Cervix
 - c. Urethra
 - d. Foreskin
9. Carlos wants to be an active listener when his brother shares his problems. When his brother starts sharing his problems, Carlos should:
- a. Stop talking
 - b. Leave his earbuds in
 - c. Tell his brother he's being stupid
 - d. Interrupt his brother to explain what he would do in the situation
10. Talia likes to hug people, but her cousin hates to be hugged by anyone. Talia and her cousin have a difference of:
- a. Circles of relationships
 - b. Personal space
 - c. Values about sex
 - d. Puberty development

True or False Questions

If the statement is true, circle T. If the statement is false, circle F.

1. **T** **F** Every person who has a vagina also has a hymen.
2. **T** **F** All young people develop pubic hair.
3. **T** **F** Only some young people develop hair under their arms.
4. **T** **F** Many young people may experience sexual feelings during puberty.
5. **T** **F** When a person begins menstruating, that means they're ready to have sex.
6. **T** **F** Someone who has had sex before can never be abstinent.
7. **T** **F** Self-awareness can help someone make healthy decisions.
8. **T** **F** Everyone has the same values about sex.
9. **T** **F** Drinking alcohol can lead to risky sexual activity.
10. **T** **F** Abstaining from sexual behavior is a healthy choice for sixth graders.

Short-Answer Questions

1. Respond assertively to the following scenario: A friend sends a mean email about a classmate of yours and tells you to send it to other people, but you don't want to.

You respond:

2. What are three possible risks of dating someone significantly older?

1.

2.

3.

3. How does delaying sex relate to responsible decision making?

4. What is the difference between sex and sexuality?

5. Why is it important to talk with a caring adult about sexuality?

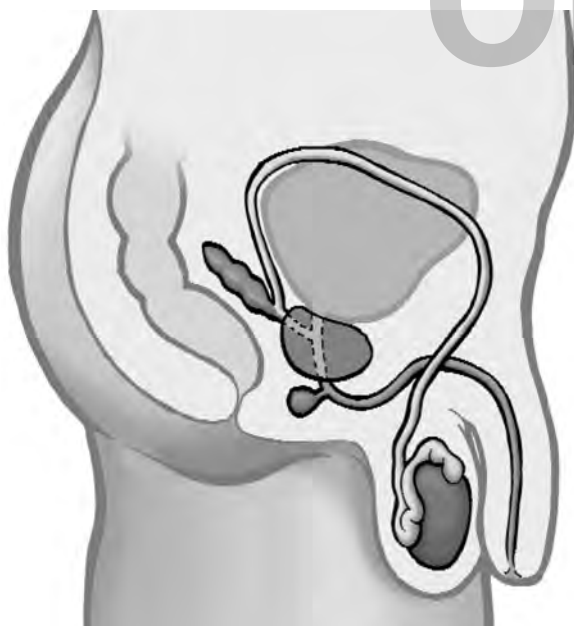
Diagram Questions

Label the following parts:

1. Scrotum
2. Testes
3. Penis
4. Vas deferens
5. Urethra

Label the following parts:

6. Clitoris
7. Ovary
8. Fallopian tubes
9. Uterus
10. Vagina



Matching Questions

Match the following terms with their definitions:

1. _____ The process in which the lining of the uterus is shed through the vagina
2. _____ The tube that carries urine out of the body
3. _____ The two folds of skin that surround the opening to the vagina
4. _____ The part of the uterus that includes the opening between the uterus and the vagina
5. _____ The pear-shaped reproductive organ where a pregnancy develops
6. _____ The process of a sperm and egg meeting
7. _____ Organs that produce sperm
8. _____ The loose skin that covers the head of the penis
9. _____ The process of sperm and semen leaving the body
10. _____ The fluid that gets the urethra ready for the passage of sperm

- a) Ejaculation
- b) Labia
- c) Testicles (Testes)
- d) Menstruation
- e) Uterus
- f) Urethra
- g) Pre-ejaculate
- h) Cervix
- i) Fertilization
- j) Foreskin

Multiple-Choice Questions

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 - ☒ c. **Self-management**
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- ☒ a. **Think about the pros and cons of each choice**
 - b. Ask your friends for advice
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6. T ☐ F Someone who has had sex before can never be abstinent.
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8. T ☐ F Everyone has the same values about sex.
9. ☐ T F Drinking alcohol can lead to risky sexual activity.
10. ☐ T F Abstaining from sexual behavior is a healthy choice for sixth graders.

Short-Answer Questions

1. Respond assertively to the following scenario: A friend sends a mean email about a classmate of yours and tells you to send it to other people, but you don't want to.

You respond:

Possible answers: use of "I" statement and clear, open refusal; response that is assertive, not passive or aggressive.

2. What are three possible risks of dating someone significantly older?

1. *Possible answers: inequality in relationship, pressure to have sex, jealousy, getting in*
2. *trouble with parents, legal trouble*
3. _____

3. How does delaying sex relate to responsible decision making?

Possible answers: considering potential risks of sexual activity, including unintended pregnancy, STIs and emotional consequences; thinking about the pros and cons of waiting for sex; thinking about how sexual activity might affect long-term goals.

4. What is the difference between sex and sexuality?

Sex (sex assigned at birth or sexual behavior) is one part of sexuality. Sexuality is many things, including values, relationships, body changes and functions, body image, and romantic or sexual feelings.

5. Why is it important to talk with a caring adult about sexuality?

Possible answers: get advice, help you answer questions, hear from the perspective of someone older, help you clarify your values and beliefs.

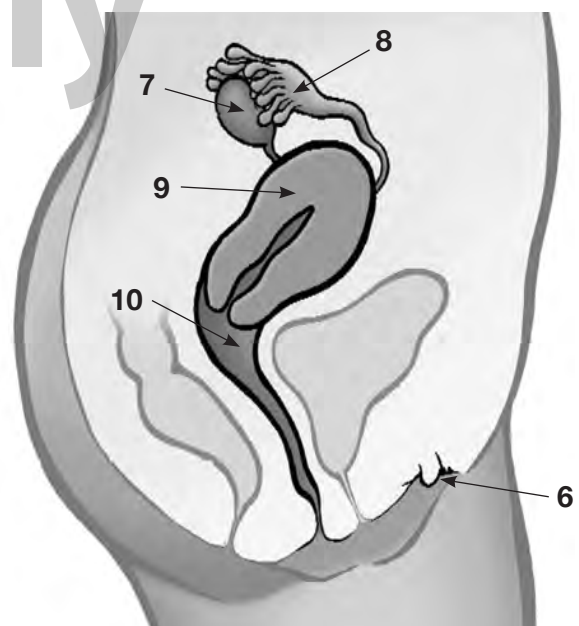
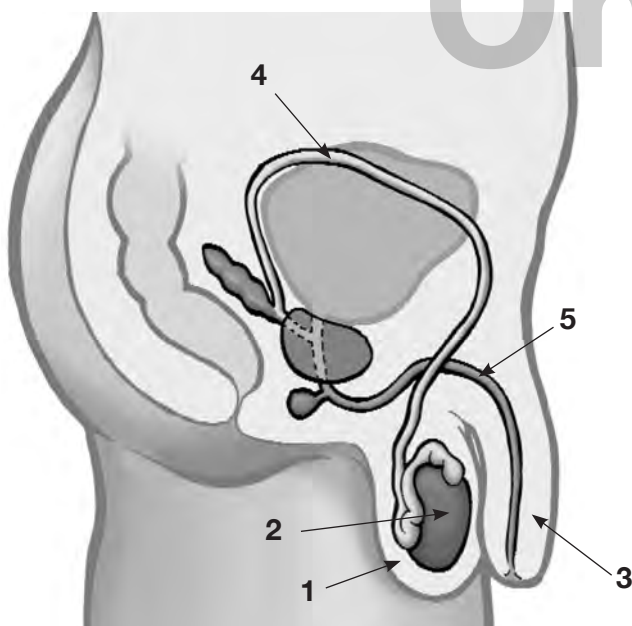
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9. Uterus
10. Vagina



Matching Questions

Match the following terms with their definitions:

1. d The process in which the lining of the uterus is shed through the vagina
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3. b The two folds of skin that surround the opening to the vagina
4. h The part of the uterus that includes the opening between the uterus and the vagina
5. e The pear-shaped reproductive organ where a pregnancy develops
6. i The process of a sperm and egg meeting
7. c Organs that produce sperm
8. j The loose skin that covers the head of the penis
9. a The process of sperm and semen leaving the body
10. g The fluid that gets the urethra ready for the passage of sperm

- a) Ejaculation
- b) Labia
- c) Testicles (Testes)
- d) Menstruation
- e) Uterus
- f) Urethra
- g) Pre-ejaculate
- h) Cervix
- i) Fertilization
- j) Foreskin

For Teacher Review Only

Activity 6.1-1

Introduction and Class Rights and Responsibilities

Facts to Know

The first *Get Real* lesson sets the tone for the next eight lessons. Establishing *Get Real* Class Rights and Responsibilities is the first step in creating a positive and safe learning environment. It's essential that students actively decide what they need in order to speak freely about sexual topics in class.

Brainstorm ideas and write responses on large butcher paper to display their suggestions. You should prompt students to share their responses but offer examples if students hesitate. To help elicit student responses, ask, "What do you need from your peers in order to feel comfortable asking questions in class?"

You can ask students to sign their names to create student buy-in. Posting the Rights and Responsibilities in a visible spot in the classroom is a constant reminder of their commitment. Refer to the list throughout the nine lessons to aid in behavior management and student engagement.

The following Rights and Responsibilities will set a positive and safe tone for the classroom environment:

- **Be enthusiastic.** It's the teacher's job to engage students in the lesson topics. Being enthusiastic yourself will allow students to feel enthusiastic. Explain to students that you are aware some of them may feel uncomfortable with the topic, while others may be very excited to learn about sexuality. It's completely normal to feel any of those feelings, but all students have the right to be enthusiastic.
- **Feel positive about your sexuality.** Affirm that, although it might be embarrassing to talk and learn about sexuality, it can be a fun and positive experience. Normalize that everyone has sexual body parts and goes through sexual changes, and most people have sexual feelings. Feeling excited, curious and positive about these changes is completely normal.
- **Feel how you feel.** Acknowledge that discussions about sexual health can make anyone feel uncomfortable or embarrassed. By normalizing these feelings and reactions, you become more approachable, and students may feel more at ease. Some teachers find it helpful to allow students to giggle for a set amount of time when an "embarrassing" topic is first introduced. It's also important to acknowledge that many families

do not talk about sex in their homes, and this may be the first time some students have had an opportunity to talk about these topics.

- **Pass.** Sometimes talking about a subject goes beyond embarrassment. Discussions on sexual health can bring up feelings of discomfort for personal reasons. Students need to know that if they feel too uncomfortable, for any reason, they can sit and be quiet, pass on classroom discussions, or be excused.
- **Self-care.** Providing students the space to interact with the material at their own comfort level is critical to providing trauma-informed sexuality education. Educators need to create an environment where students feel safe and comfortable. The topics discussed in *Get Real* may trigger students and bring up memories of past experiences that require self-care. Providing them an opportunity to leave class, if the school/organization allows, to go to a separate area of the classroom to disengage, or simply to pass are key parts of being trauma-informed. It is important to encourage students to practice self-care when needed and to check in with them throughout and after the class.
- **Be heard.** Everyone has important insights to share. Students should speak one at a time to respect everyone's right to be heard.
- **Express your opinions.** The teacher's role is to provide factual information. Neither peers nor teachers should attempt to change a student's personal values or beliefs. People have the right to their own opinions.
- **Ask questions.** Questions can be asked in front of the class, asked privately to the teacher after class, or written down anonymously for the Anonymous Questions Box. Asking questions should be encouraged. Refer to the Anonymous Questions Box section below for more information.
- **Be respected.** Everyone will be treated with respect. Name calling, using disrespectful language, and negative facial expressions (rolling eyes, etc.) when people are speaking are all considered disrespectful. In order to create a safe space, these behaviors will not be tolerated.
- **Not have assumptions made about you.** Jumping to conclusions or making judgments about people based on what they say or don't say, how they act, how they dress, etc., is not appropriate. Ask students if they know what an assumption is. Use the following example if needed: "Can I assume blue is your favorite color just because you are wearing a blue shirt? Without having all the facts or asking for clarification, it's unfair to make assumptions about each other."

- **Privacy.** Students can share information in class if they choose, but they are never required to do so. Remind students to think carefully before sharing a personal story, as once they say something aloud, they can't take it back. This is much like writing a text message or an email. Once the message is sent, there's no way to unsend it. Also explain that the right to privacy extends to people who are not in the room. If someone wants to share a personal story or a friend or family member's personal story, they should change the people's names or not use names at all.
- **Confidentiality.** Confidentiality means that personal information will not be shared outside of the classroom with students, parents, other teachers, etc. Explain that one-on-one conversations between the teacher and student can be kept confidential unless the teacher has a concern about personal safety. Teachers are required by law to report information if students disclose being hurt or intentions to hurt themselves or others. Reportable disclosures include physical, emotional and sexual abuse; suicidal thoughts or behavior; and other dangerous behaviors. Reporting these situations will allow students to access help. Before teaching the curriculum, teachers should ask about the mandated reporting procedures at their school or organization. Teachers should be upfront with students about what is reportable; they should also let students know what could happen if a report is made (i.e., a social worker may call or visit your home to check up on you and your family).
- **Use appropriate language.** In order to keep class discussions respectful, encourage students to use the medically accurate terms for body parts and sexual functions, instead of slang terms. If students don't know the appropriate terminology, they may ask.

Potential Challenges

Students have different levels of knowledge and experience when it comes to defining “sex” and “sexuality.” Some students may be very uncomfortable and embarrassed, while others will eagerly await any information you give them. Setting a comfortable, positive, and open tone is extremely important. As the educator, you have the responsibility to be as approachable as possible. You must normalize and affirm the experiences students have during adolescence. It's important to look for teachable moments (e.g., anonymous questions, personal stories, student interactions, false assumptions about someone or something, etc.). It's also important to refer to the Class Rights and Responsibilities poster when needed.

Engaging Students

Creating a Rights and Responsibilities poster should be a class activity. This is a great tool for getting student buy-in. After the class brainstorms their Rights and Responsibilities, have the students sign this poster like a contract. Their signatures symbolize that every student promises to make the classroom a comfortable learning environment.

The optional icebreaker game is useful for teachers who do not know their students well and for students who do not know each other well. Engaging students in an icebreaker activity at the beginning of the *Get Real* curriculum is a method for gaining student trust and respect, since sexuality education may often make students feel uncomfortable or embarrassed. Teachers should also participate in icebreaker activities to show their interest in the students. Here are some recommended examples of icebreaker activities:

- **Name Tags:** Students make name tags for their desks and decorate them with words or pictures that describe themselves.
- **Name and a Movement:** Students say their names while making a specific movement, and the rest of the class repeats the name and movement.
- **Name and a Hidden Fact:** Students say their names and one fact that people would not know from looking at them. This activity can be tied to “Not have assumptions made about you” on the Rights and Responsibilities list.
- **Name and a Feeling Word:** Students say their names and a word that describes how they are feeling about the day or about beginning the curriculum.
- **North Wind:** Students stand in a circle with one person in the center. The center person says, “The north wind blows for anyone who...” and then completes the statement with something that’s true about themselves. For example, “The north wind blows for anyone who loves baseball.” Once the statement has been made, everyone who also identifies with the statement attempts to move to a new spot in the circle. The person left in the middle begins the next statement. This game is very engaging, but it requires classroom space and additional class time.

Activity 6.1-2

Introduction to Social and Emotional Learning**Potential Challenges**

Students really enjoy this activity. If you have multiple class periods to cover this material, they can happily spend 20 to 30 minutes perfecting their pictures and sharing them with each other. However, if you are teaching it over one class period and, therefore, have only 10 minutes for the activity, set a timer and explain that students will only have 2 minutes per picture in class, but will be able to finish their artwork at home.

Engaging Students

Allow students to draw cartoons as they are given the description of each of the SEL skills. It will help if students can see examples, which can be simple stick figures with speech or thought bubbles. Enabling the students to visually depict each SEL skill will help them recall these skills throughout the curriculum.

Activity 6.1-3

Find Someone Who...**Facts to Know**

The following information pertains to each question in **Handout 6.1-3**, Find Someone Who....

Are you someone who knows how long a pregnancy is?

The average pregnancy lasts for 40 weeks, or about 9–10 months. If you think your class would be interested, share some comparative examples of average lengths of pregnancies (gestation periods) for animals:

- Kangaroos: 1–2 months
- Dogs and cats: 2–3 months
- Cows: 9–10 months
- Elephants: 17–24 months

Are you someone who knows at least three slang words for “elbow”?

There aren't three slang words for “elbow.” Use this question to begin a conversation about why slang words exist for certain body parts and not for others. If time allows, this conversation could become a much larger discussion about cultural norms and societal influences on sexuality.

Are you someone who knows the difference between sex and sexuality?

“Sexuality” is a fundamental aspect of being human throughout life. It grows and changes over time and is dependent on each individual person’s understanding of themselves and others. Sexuality includes, but is not limited to:

- Sexual behaviors, sexual relationships, and intimacy
- How people express themselves (including the way they talk, dress and relate to others)
- Values, beliefs and attitudes
- Whom people are attracted to (sexual orientation)
- Changes bodies go through during puberty
- Whether or not and how people choose to have children
- The kind of friends people have
- How people feel about the way they look
- Who people are as individuals
- The way people treat others

The term “sex” can refer to sex assigned at birth or to sexual behavior.

Sex assigned at birth refers to how a person is most often assigned a sex at birth (male, female, intersex) based on their external genitalia.

Sexual behavior usually involves touching oneself or another person or persons in ways that stimulate sexual feelings and pleasure.

Sexual behavior can include many different acts:

- Talking about sex
- Kissing
- Hugging
- Massage
- Masturbation
- Intercourse, including oral, vaginal or anal intercourse

Engaging Students

Find Someone Who... is a comfort-building activity. Students leave their seats and move around the classroom. They have the opportunity to see that their classmates also have questions about topics related to sexuality. If students are hesitant to begin, the teacher is encouraged to participate.

To follow up, the teacher should not feel obligated to review all the questions in the activity. Some of the questions will help engage students by normalizing feelings around sexuality and relationships.

Go over the question, “Are you someone who has told a lie to a friend?” It is important that students explore how it feels to be lied to and why people lie. For example, people might lie to keep from being judged. This is an opportunity to introduce the ideas of stigma and judgment and why people—even people who are in love—may not always be honest when it comes to sexuality.

End this activity by reviewing the question, “Are you someone who can talk about sexuality openly with parents or guardians?” This is a great bridge to Activity 6.1-4, *Caring Adults Brainstorm*.

See the “Facts to Know” section above for important talking points for the *Find Someone Who...* activity.

Activity 6.1-5

Anonymous Questions Box

Engaging Students

A key component of the *Get Real* program is the opportunity for students to ask questions anonymously, and the Anonymous Questions Box is a great way to engage students. Although students are encouraged to ask questions out loud, having an Anonymous Questions Box is a welcome option for some students.

The anonymous questions activity is suggested for the end of this first lesson. Index cards or slips of paper are passed to each student, and they are asked to write down a question. The teacher can provide examples of anonymous questions from previous classes, such as “What’s a wet dream?” or, “Is it normal for a young teen to have sexual feelings?” You can also prompt students by suggesting different *Get Real* topics (e.g., puberty, anatomy, relationships, sexual health, etc.). All students should be encouraged to write something down to support anonymity. Students who have no questions can answer an alternate prompt, such as, “What is your favorite TV show?” or “What type of music do you like?” If students are reluctant to ask questions, teachers can even plant some questions in the box to read out loud.

Once the process for asking anonymous questions is established, the teacher can close each lesson by answering questions from the previous

class. If time is limited, the teacher can decide to answer questions every other class or select only a few questions each time.

A decorated shoe box with a slit cut in the top makes a good Anonymous Questions Box. Having the students decorate the box can help make using it a fun rather than a feared activity. Some teachers opt to leave the box where it is accessible to students during the week. To ensure anonymity, it's best to use a box that can be locked so that students cannot access questions written by other students.

Student questions must always be answered in age-appropriate and medically accurate ways. Always allow students to follow up with the teacher after class for more information. Sometimes it's necessary to address the feelings and values of the person asking the question, but it's always important for the teacher to answer questions factually. Students may also be directed to ask a parent or other caring adult (e.g., religious mentor, family physician, school nurse, or counselor) for further discussion, especially for questions regarding personal values.

Mandated reporting extends to anonymous questions. Educators must be informed of their state and school/organization policies. It is important to let students know about mandated reporting so they are not surprised if an educator follows up with them about a question or something written on a card. Educators can tell students that if they wish to disclose something or discuss a sensitive subject further, they can put their name on the card and the educator will follow up one on one with them.

Use the Frequently Asked Student Questions section of www.getrealeducation.org for hundreds of vetted answers to student questions.

Adolescents' questions often fall into one of five categories. The following types of questions have common themes and have been noted in several comprehensive sex education programs. A sample question and suggested answer is provided for each one.

- **Information-seeking.** These are straightforward questions with specific, factual answers. Answer these questions honestly and factually. If you believe there is a value component to the question, it is important to address multiple points of view in your answer.

Q: What is masturbation?

A: Masturbation is defined as touching, rubbing, and/or fondling one's own sex organs for pleasure and stimulation. There are no medical or safety concerns for people who choose to masturbate. It is a personal decision and a normal behavior for people of all ages. People may have

different opinions about masturbation, often based on cultural or religious reasons. It's important to know that it's OK to choose to masturbate, and it's OK to choose not to masturbate.

- **Am I normal?** These questions focus on adolescents' concerns about physical and emotional change. Answers should validate their concern and provide factual information about the question asked. Also acknowledge that everyone has different bodies and experiences.

Q: What is the average size of a penis?

A: Lots of people want to know what's considered average. Sometimes people worry that their penises are too big or too small. The average size of a penis for adults ranges from 2.5 to 4 inches if it is soft (flaccid), and 4 to 6 inches if it is hard (erect). "Average" means that most fall within this range, but some are smaller or larger.

- **Permission-seeking/advice.** These questions indirectly ask the teacher for permission to engage in or avoid a behavior. It's important to remind students that a behavior may be appropriate for one person (e.g., at a certain age) but not necessarily for everyone.

Q: What's the right age to have sex?

A: People have sexual intercourse for different reasons and at different times in their lives. There is no "right" age to have sex. It's important that the two people involved have agreed and given their mutual consent to engage in sexual intercourse. They must be physically and emotionally mature enough to know about, prepare for, and deal with the potential risks of sexually transmitted infections or pregnancy. Research shows that abstinence, or not having sex, is a healthy choice and the most effective way to prevent unintended pregnancy and STIs.

- **Personal beliefs or experiences.** These questions ask about the teacher's values, beliefs or experiences with regard to a certain topic. Teachers should not share personal information. The teacher's job is to share the facts, not personal opinions or experiences. Refer students to parents and other caring adults for discussions about values surrounding the question asked.

Q: How old were you when you had sex for the first time?

A: I understand you may be curious about my life experience. However, my experiences are not as important as your own values around having sex for the first time. Speaking to a parent or other caring adult will help you form and clarify your own values and beliefs.

- **Shock questions.** These questions are asked to elicit a reaction from the teacher. This is often a test of a teacher's sense of humor and ability to remain calm. Students are looking to see if the teacher will get upset or flustered by a question. Sometimes it's best to ignore the question, but, if the question is relevant, the teacher can reword the question and give a serious answer.

Q: If I banged 200 ladies, do I have AIDS?

A: This question asks, "If I've had sex with 200 women, do I have AIDS?" Having multiple partners can increase the risk of getting an STI, including HIV. Using condoms can help reduce the risk significantly. The only way to know for sure if a person has an STI is to get tested.

Lesson 6.1 Resources

Information on social and emotional learning:

Collaborative for Academic, Social, and Emotional Learning: www.casel.org

Information on sexuality education:

SIECUS: Sexuality Information and Education Council of the United States: www.siecus.org

Click on the "Information & Education" tab at the top of the screen to reach the "Comprehensive Sexuality Education" page.

See www.getrealeducation.org for more information and resources.

Activity 6.2-2

Communication Skills**Facts to Know**

The following are additional ways to explain the words passive, aggressive and assertive to students.

- **Passive:** People give in and say “yes” when they are not sure, feel confused, or really don’t want to. They don’t ask for what they really want, or act in a specific way in order to feel liked, to be nice, or to avoid hurting another person’s feelings. Passive communication may keep people from getting what they need.
- **Aggressive:** People try to get what they want (not always consciously) by showing the anger, frustration or fear they feel in reaction to a situation or something someone says. They react strongly, often by name-calling, without considering how it might hurt or insult another person. Aggressive communication may lead to getting into a fight or argument.
- **Assertive:** People give an open and honest answer about what they want and don’t want. They make sure they are speaking for themselves and their feelings. This can include using “I” statements and asking for time when they feel confused and aren’t sure what they want. It also means they don’t use or manipulate other people and don’t allow others to take advantage of or manipulate them.

The teacher should use one scenario to provide examples of these three types of communication. Have a student be the supporting actor and demonstrate three possible responses. After each example, ask students for pros and cons of the given response. Also ask students which communication types were being demonstrated.

For example, say a friend borrows your favorite shirt and then loses it. Here are different types of responses you could give:

- **Passive:** “Oh, that’s OK...it’s no big deal....” (In this example, the person gives in without expressing personal needs.)
- **Aggressive:** “I hate you! You lost my shirt! Why do you always mess things up? I’m never lending you anything again!” (In this example, the person responds before thinking and attacks the other person in a hostile tone.)
- **Assertive:** “I understand that you didn’t do it on purpose, but I feel frustrated when you lose my belongings because they are really important to me. Could you please replace it for me this week?” (In this example, the person responds in an open and honest way without giving in or being hostile.)

An important way to help students formulate assertive responses is to practice using the “I” statement template:

Step 1: “I feel...”

Step 2: “when you...”

Step 3: “because...”

Often misunderstandings and hurt feelings occur over social media and texts because of the absence of tone and body language. To explain the difficulties of communicating with these methods, you can introduce the following concepts.

One-way communication: Communication that works in only one direction, such as:

- Posting on social media
- Text message
- Information relayed through a third party

Two-way communication: Communication that goes back and forth, such as:

- Face-to-face conversation
- Phone call
- Conversations over social media
- Replying to text messages

Students should consider how one-way communication can be confusing and lead to misunderstandings. Which forms of two-way communication are most effective for important discussions? Why?

Engaging Students

Some prompts to introduce this lesson:

- What are three common ways in which people communicate? (Spoken word, such as talking in person or on the phone; written word, such as social media, text messages, letters; body language, such as nonverbal body and facial expressions.)
- What does effective communication have to do with a comprehensive sex education class? (Learn how to establish healthy relationships with family, friends, romantic partners, and acquaintances; learn how to stand up to peer pressure and ask for help when needed; etc.)

A great way to get students thinking about active listening is to ask a student to share a 2-minute story with the class. While the student is talking, the

teacher can demonstrate poor listening skills by talking to other students, texting/checking phone, and turning away from the speaker. Ask the students for suggestions on becoming a better listener.

Activity 6.2-3**Assertive Communication Scenarios****Potential Challenges**

If time is running short, choose two or three scenarios. Demonstrate one of them with a student, but do not demonstrate either of the scenarios that involve dating. Ask for two or three student volunteers to demonstrate the other two scenarios. This will give students who aren't comfortable with performing an opportunity to be engaged by their classmates.

You know your students better than anyone. You should use only the scenarios that your students will feel comfortable exploring. If the students are not at a level where they can handle the more sexual scenarios, focus on other examples.

For more information about successfully facilitating role-play, see the "Guidelines for Role-Play" document at www.getrealeducation.org.

Lesson 6.2 Resources**Steps to Respect:**

Information on assertive communication from www.cfchildren.org/Portals/0/STR/STR_DOC/Research_Review_STR.pdf

Communication Skills:

www.seriouslysexuality.com/index.cfm?fuseaction=Page.ViewPage&pageId=1084

See www.getrealeducation.org for more information and resources.

For Teacher Review Only

Activity 6.3-2**Circles of Relationships****Potential Challenges**

Having enough time for this activity may be a challenge. One way to save time is to display a filled-out example of the Circles of Relationships handout that includes types of relationships (close friends, distant relatives, neighbors, etc.). Explain why each of the relationships fits into each circle. Then assign the Circles of Relationships handout for homework so students can reflect on their own relationships.

Activity 6.3-3**Examining and Respecting Personal Space****Engaging Students**

It's extremely important for students to recognize the importance of respecting others' personal boundaries. The following process questions are included in this activity in order to connect this learning to address bullying and bystander behaviors:

- What would you do if you saw a friend invading someone's personal space? How can you talk to your friends about their actions and their comments?
- How does it feel when someone tells you "no"? Is it OK to feel disappointed? How can you deal with that disappointment?
- What does it mean if someone respects you? Does it mean they can cross into your personal space without your permission? Does it mean you can cross into their personal space?

Note: Once consent is introduced in 6.3-5 these same concepts can be revisited as part of the definition of consent.

Activity 6.3-4**Healthy Vs. Unhealthy Relationship Brainstorm****Facts to Know**

Students may come up with a variety of words to describe healthy and unhealthy relationships. The acronym HERRC, which stands for "honesty, equality, respect, responsibility, consent," may be useful in guiding them. Research shows that people look for these characteristics in friendships and romantic relationships. Elicit examples of each of these characteristics from the students.

Help students identify equality of power as a characteristic of healthy relationships. Equality of power in relationships means that both partners have equal standing in the relationship. Both people are heard equally, can share their interests, communicate effectively, and feel safe and secure in their relationship. Prompt students if needed by asking why these qualities are important in healthy relationships. If students struggle with this concept, ask how different levels of power can affect a relationship. For example, what if one partner controls all the money in a relationship? How could that affect the dynamics? Help students understand that when there are different levels of power in a relationship, including friendships and dating relationships, it can lead to inequality, with one person feeling as if they have less power than the other.

Responsibility can be tied into the SEL skill of responsible decision making. People in healthy relationships help each other make responsible decisions. Unhealthy characteristics can be the opposites of the HERRC qualities: dishonesty, inequality, disrespect, irresponsibility, manipulation or a lack of consent.

Activity 6.3-5**Dating Older Partners****Facts to Know**

This activity is included because one of the biggest risk factors for pregnancy and STIs in young people is dating significantly older partners. The discussion may get students thinking about power dynamics. While it's important for students to know the age of consent in your state, the goal of the lesson is not to explain the intricacies of legality, but to focus on the main teaching points.

Instead of explaining the wording of the law or definitions of “statutory rape,” concentrate on possible risks for each partner in a relationship. The younger partner may feel pressure to engage in sexual activities, may be jealous of the older partner’s freedom, or may have feelings of inequality. The older partner may become frustrated with the age difference or get into trouble, including legal trouble. This last point can be a good place to mention the law, which makes it illegal for someone in your state to have sex with a person under the age of consent. Enforcement of the law varies depending on circumstances. It’s important to emphasize that the law exists to keep young people safe.

To find the age of consent in your state, see a summary of state laws at <http://aspe.hhs.gov/hsp/08/sr/statelaws/summary.shtml>.

Activity 6.3-6

Boundaries and Peer Pressure Scenarios**Potential Challenges**

Because of the personal nature of this activity, it is important to refer students back to the class Rights and Responsibilities. Students always have the right to feel embarrassed and the right to pass. Some students may never have been in these types of situations, and others may have personal experiences very similar to these situations.

It's important that no one act out the boundary breaking/peer pressure behaviors listed. Model the first few scenarios by asking students, "How might someone respond in this situation?" Then act out the response. Students should focus on appropriate, assertive responses.

Reinforce that students might consider telling a parent or other caring adult about situations in which they feel uncomfortable. If a student discloses anything that concerns the teacher about potential abuse, the teacher should remind the student about confidentiality and mandated reporting and consult with the proper officials at the school. Refer to the introduction to the *Get Real* curriculum for more information on this subject.

Teachers know their students better than anyone else. If you think the scenarios that are more sexual are too much for the students to handle, change the words "sexually inappropriate" to "mean." For example, "Someone makes a sexually inappropriate joke about someone else around you" could read "Someone makes a mean joke about someone else around you." The important thing is that students explore how they would assertively communicate their needs, wants and personal boundaries to others.

Engaging Students

The scenarios in this activity are not role-play scenarios. Students should determine excellent, assertive responses without acting out the situations. This is a great opportunity to review passive, aggressive and assertive communication. Challenge students to present their responses to the scenarios in an assertive way. "I" statements work very well for the majority of the scenarios.

In addition to thinking about the question, "How can we tell when we have invaded someone else's personal space?," it's important that students learn how to respect other people's boundaries as part of healthy relationships and consent.

Lesson 6.3 Resources

Domestic violence and sexual assault:

Futures Without Violence: www.futureswithoutviolence.org

That's Not Cool: www.thatsnotcool.com

Domestic Violence and Incest Resource Centre: www.dvrcv.org.au

Age of consent by state:

U.S. Department of Health and Human Services Summary of Current State Laws:
<http://aspe.hhs.gov/hsp/08/sr/statelaws/summary.shtml>

Laws pertaining to consent, sexual assault or statutory rape by state:

Sexlaws.org: www.sexlaws.org

See www.getrealeducation.org for more information and resources.

**For
Teacher Review
Only**

6.4 Activities

All 6.4 Activities**Potential Challenges**

Some students may be too embarrassed to talk about the parts and functions of the reproductive system. Emphasize that this information is important for keeping people healthy and safe. Another way to counter this discomfort and enable students to feel positive about the lesson is to play the “What Am I?” game described in the Engaging Students section for this lesson.

Students may ask why they have to learn about the body parts they don't have. Explain that understanding anatomy is a human issue and not a gender-specific one. This knowledge is related to the SEL skill of social awareness. Understanding another human's body helps to better understand one's own body and to empathize with others.

Be sure to acknowledge that human bodies come in all different shapes and sizes. This includes sexual body parts, such as penises and breasts. Our society puts a lot of pressure on people to look a certain way, but it is important to know that people's bodies can all do the things they are supposed to do even if they look different than others'. An easy analogy to make is this: Do all our noses look the same? No. But do all our noses smell? Yes. Our sexual body parts are no different.

Engaging Students

When talking about reproductive anatomy it's important to model inclusive language. For this reason *Get Real* does not use the terms *male* and *man* or *female* and *woman*. A person's sex assigned at birth and gender identity may be different. External genitalia do not define a person's gender identity. A person may be assigned a specific sex at birth but not identify in a gender binary way. (For more information about gender and sexual identity, see Lesson 7.3.)

As you explain terms such as *erection*, *ejaculation* and *wet dreams*, feel free to ask “How might a person feel...?” follow-up questions. For example, “How might it feel for someone to get an erection in the middle of class?” (This will be reinforced in the They May Feel... activity in Lesson 6.6.)

In each part of this lesson, emphasize that the most important organ in the reproductive system is the brain. People are not always in control of

→ Teacher Note

Explaining Slang Terms

Horny: a term used to indicate feeling sexual.

Getting hard: an erection. The flow of additional blood into the vessels inside the penis is what makes the penis stiff.

Boner: an erection. No bone is involved in a human erection.

their brains—for example, when they are asleep. It's common for people to experience erections without knowing why, because the brain can send signals when people are asleep or even when they're thinking about something completely different.

You may also include information here about masturbation as it relates to wet dreams, erections, etc. You might tell students that as they are starting to have sexual feelings, erections and wet dreams, masturbation may become a topic of conversation and questions. (See information in Lesson 6.6 on masturbation.)

Activity 6.4-2

The Penis, Related Parts and What They Do

Facts to Know

The following parts correspond to the numbers on the anatomy handout:

1. Scrotum
2. Testes (singular = testicle)
3. Epididymis
4. Vas deferens
5. Seminal vesicle
6. Prostate
7. Cowper's gland
8. Urethra
9. Penis
10. Foreskin
11. Anus

The following provides additional information on the reproductive anatomy and physiology terms discussed in this lesson.

Scrotum: This is the thin sac of skin that holds the testes outside the body. In order for sperm to be produced, the testes must be kept at a temperature that is two to three degrees cooler than the rest of the body. Although a person can't feel it happening, the scrotum is constantly moving and shifting the testes to keep them at the correct temperature.

Testes (singular = testicle): These are the organs where sperm are made and hormones are produced. They are located in the scrotum. Each testicle is about the size of a walnut, and it's normal for one to hang lower than the other. It's also normal if one does not hang lower. Once a young person begins puberty, the testes begin to make sperm, which is a sex cell.

Sperm can combine with an egg to create a pregnancy. The testes are also responsible for the production of the hormone testosterone.

Epididymis: The epididymis is a coiled tube behind each testicle where sperm mature and develop the ability to swim. The epididymis acts as a sperm “warehouse and recycling center,” storing sperm until they are needed, or recycling them back into the body when they aren’t used.

Vas deferens: These are the tubes that carry the sperm from the testes to the urethra. The vas deferens act as a highway that the sperm use to travel to the urethra. The tubes are very tiny, each about the width of a piece of uncooked spaghetti.

Seminal vesicles: These are glands on each of the vas deferens. They produce fluids that mix with sperm to make semen.

Prostate: This is a gland under the bladder that produces fluids that mix with sperm to make semen. It also contains pleasure sensors. It’s the size and shape of a walnut and has the texture of a kitchen sponge. It has a muscle that acts as a trap door, so it is physically impossible for a person to ejaculate sperm and urinate at the same time.

Cowper’s glands: These are glands on either side of the urethra that release a fluid through the urethra every time a person has an erection. This pre-ejaculate fluid acts as a lubricant for the sperm. Pre-ejaculate can contain sperm and can transmit STIs.

Urethra: The tube that can carry sperm or urine out of the body.

Penis: This organ is made up of soft, spongy tissue and blood vessels. The penis serves three purposes: (1) reproduction, (2) urination, and (3) pleasure.

Foreskin: All people with penises are born with this loose skin covering the end of the penis. Usually, a decision is made soon after a person is born about whether they will be circumcised. Circumcision is the removal of the foreskin. This decision of whether to circumcise is made for religious, cultural and health-related reasons. It’s completely normal for a person to be circumcised, and it’s completely normal for a person to be uncircumcised.

Teacher Note

Circumcision

The New England Journal of Medicine has reported multiple studies that link circumcision to prevention of HIV, herpes virus simplex 2, HPV and syphilis. However, the American Academy of Family Physicians website notes: “Studies about the benefits of circumcision have provided conflicting results. Some studies show certain benefits, while other studies do not.... The American Academy of Family Physicians believes parents should discuss with their son’s doctor the potential benefits and the risks involved when making their decision.”

Anus: The anus is not part of the reproductive system, but is located near the external genitalia. It is the end of the digestive tract and the opening through which feces (solid waste) is excreted.

Sperm and semen: It's important to clarify the difference between sperm and semen. Sperm are the sex cells produced by the testes. Sperm are so tiny that 10,000 can fit on a period at the end of a sentence. There can be as many as 300 million to 500 million sperm in one ejaculation and can be up to 20,000 in each pre-ejaculation. The seminal vesicles and prostate gland are the parts responsible for adding fructose and nutrients to the sperm to create semen. Semen is the fluid that's released during ejaculation, along with the sperm. Both ejaculate and pre-ejaculate fluid may contain the bacteria/virus that can cause STIs, such as HIV.

Vaginal intercourse: This term refers to when a penis enters a vagina. If a condom is not being used to act as a barrier, this contact may allow the sperm released during ejaculation or pre-ejaculation to travel into the partner's reproductive organs to potentially join with an egg.

→ *Teacher Note***Wet Dreams**

Once sperm production starts during puberty, it's very normal for people with a penis and sperm to experience wet dreams. They may wake up with a sticky fluid on their sheets. These dreams are the result of our brains being at work even when we're sleeping.

If the brain thinks of something sexual, it may cause the penis to become erect and ejaculate. People with a vagina can have wet dreams or sexual dreams too. But there is less evidence because less liquid is produced or spilled on the bed.

Activity 6.4-3

Linking Parts with Reproduction**Engaging Students**

The following questions could be asked of the students post-lecture to assess retention of the material.

Testes:

- What are sperm? (The sex cells made by people with a penis.)
- How big are sperm? (Very small. Ten thousand of them can fit on the period at the end of this sentence.)
- What is testosterone? (The hormone responsible for changes in the body of a person with a penis.)

- Can a person run out of sperm? (No. People with a penis produce sperm continuously starting in puberty.)
- What happens to sperm if they don't leave the body? (They are reabsorbed by the body and new ones are made.)

Erections:

- What can cause an erection? (The brain sends messages to the penis, causing the blood vessels in the penis to fill up and the penis to become hard.)
- Do erections mean someone is ready to have sex? (No. Even babies can get erections because erections are a physical response to increased blood flow to the penis. This can happen during sexual arousal, but can also happen at lots of other times.)

Vaginal intercourse:

- Could a person become pregnant after having vaginal intercourse only once? (Yes.)
- Can a person get pregnant at any time? (The egg needs to be present to join with a sperm, and this only happens a few days per month; however, sperm can live in the organs of a person with a vagina for several days and wait there for an egg.)
- What can happen if a couple has vaginal intercourse without protection? (Pregnancy and/or STI transmission.)

Ejaculation/pre-ejaculation:

- Could there be any sperm in the pre-ejaculate that may or may not be visible at the tip of the penis? (Yes, which is why any contact of the penis with the sexual organs of a person with a vagina can result in pregnancy.)
- How many sperm does it take to get a person pregnant? (One.)
- How long can sperm stay alive and get a partner pregnant after an ejaculation? (Several days.)

Condoms (if you were able to offer the condom portion of the lesson):

- If a condom is not used correctly and consistently, what could happen? (Whenever sperm comes in contact with the reproductive organs of a person with a vagina, there is a chance of pregnancy or STI transmission.)
- Where can a person get condoms? (At a health clinic, drugstore or health center, or online.)
- What are some things you've heard about condoms? (Answers will vary. Correct any misinformation. For more talking points on condoms, see Lessons 7.8 and 8.4.)

Activity 6.4-4

“What Am I?” Game**Engaging Students**

This game was included to engage students even if they are uncomfortable with the topic. Ideally it should be played with candy or some other small treat as a reward. Pick the major talking points you want your students to leave with, and make them the questions for the game. Playing this game requires students to use the appropriate language and reinforces the material in a fun way.

Here are some potential questions and answers for the game:

- “I am about the width of a piece of uncooked spaghetti, and I am the tube that carries sperm from the testes to the seminal vesicle.” (Vas deferens)
- “I am the sex cell produced in the testes.” (Sperm)
- “I am the hormone that the testes produce.” (Testosterone)
- “I am the average number of sperm in a pre-ejaculation.” (20,000)
- “I am the average number of sperm in an ejaculation.” (300 million to 500 million)
- “I am the three fluids that can travel down the urethra in the body of a person with a penis.” (Ejaculate, pre-ejaculate and urine)
- “My job is to keep the testicles two to three degrees cooler than the rest of the body.” (Scrotum)
- “I am the time in life when a person with a penis starts producing sperm.” (Puberty/between ages 11 and 15)

Lesson 6.4 Resources**Information about reproductive anatomy:**

Genitalia and Sexually Related Body Issues: www.kinseyconfidential.org/resources/bodies

Info for Teens: My Body: <http://www.plannedparenthood.org/teens/my-body>

Circumcision information from *New England Journal of Medicine*:

<http://www.nejm.org> (search for “circumcision”)

Information on herpes, HPV, syphilis, and circumcision:

<http://www.nejm.org/doi/full/10.1056/NEJMoa0802556>

See www.gettrealeducation.org for more information and resources.

6.5 Activities

All 6.5 Activities**Potential Challenges**

Students may question why they need to learn about the body parts they don't have. This is a good opportunity to remind students that the more they know about human reproductive anatomy, the more they will be able to understand others. While some may not experience menstruation firsthand, learning about it will give them some insight into the experiences of those who do. This is also a good place to emphasize the SEL skill of social awareness. While topics such as menstruation and erections may be embarrassing for some to talk about, they are normal, natural parts of the experience of puberty.

Engaging Students

When talking about reproductive anatomy it's important to model inclusive language. For this reason *Get Real* does not use the terms *male* and *man* or *female* and *woman*. A person's sex assigned at birth and gender identity are potentially different. External genitalia do not define a person's gender identity. A person may be assigned a specific sex at birth but not identify in a gender binary way. (For more information about gender and sexual identity, see Lesson 7.3.)

Although the They May Feel... activity isn't used in full until Lesson 6.6, feel free to add some "How would it feel...?" follow-up questions as you review terms such as *menstruation* and *hymen*. For example, "How would it feel to have your value judged by others based on a tiny membrane?"

You may also include information here about masturbation, since it is tied to sexual feelings. You might tell students that as they start to have sexual feelings, masturbation may become a topic of conversation and questions, etc. (See information in Lesson 6.6 on masturbation.)

Activity 6.5-2

The Vagina, Related Parts and What They Do**Facts to Know**

The following parts correspond to the numbers on the anatomy handout:

- | | | |
|-------------------|-------------|------------|
| 1. Ovary | 5. Cervix | 9. Urethra |
| 2. Fallopian tube | 6. Vagina | 10. Labia |
| 3. Fimbria | 7. Vulva | 11. Anus |
| 4. Uterus | 8. Clitoris | |

The following provides additional information on the reproductive anatomy and physiology terms discussed in this lesson.

Ovaries: The ovaries are each about the size of an olive and are the “holding grounds” for eggs. Unlike people with a penis, who continuously produce sperm after puberty, people with a vagina are born with all the eggs they will ever have. They have 500,000 eggs at birth, and by puberty there are about 250,000 left. The ovaries release approximately 500 eggs during a lifetime. The ovaries also are responsible for producing the hormones estrogen and progesterone. These hormones cause body changes, ovulation and menstruation.

Ovulation: This is the release of an egg cell from one of the ovaries, which occurs about once each month starting in puberty. Once ovulation has begun to occur, a person can get pregnant if an egg is fertilized by a sperm. Since a person cannot tell when they have ovulated for the first time, there is never a “safe” time for a young person to have unprotected intercourse.

Fallopian tubes: The fallopian tubes are about the width of three strands of hair. They are the tubes that eggs travel through to get from the ovaries to the uterus. Fertilization generally occurs in a fallopian tube.

Fimbria: These fingerlike parts on the end of each fallopian tube find an egg after it is released from the ovary and sweep it into the tube.

Fertilization: Fertilization occurs when a sperm and egg meet. This usually takes place in the fallopian tubes. Fertilization is the first step toward pregnancy.

Uterus: This is where a pregnancy develops. It's about the size of a fist and shaped like a pear. Hormones cause an extra lining to be added to the uterus every month, which prepares it for a fertilized egg. But if the egg doesn't get fertilized after ovulation, the lining isn't needed. Then the egg and the lining leave the body during menstruation or a “period.” Menstruation is one part of the menstrual cycle, which also includes ovulation and the building up of the lining in the uterus. (More information about the menstrual cycle appears in Activity 6.5-3, The Menstrual Cycle Explained.)

Cervix: The cervix is located at the lower part of the uterus. It contains the opening that leads to the vagina. It is made of muscle, like the rest of the uterus. Have students touch the tip of their noses to approximate the firmness of the cervix.

Vagina: Generally 3–5 inches in length, the vagina is the tube through which a person can give birth and have vaginal intercourse. It's made up of very stretchy skin. Vaginal discharge, often clear or white, is often present from

puberty onward. This discharge is the way the vagina keeps itself clean. Abnormal changes in color or smell of the discharge may be evidence of an infection.

Vulva: Although the entire outside area of a person with a vagina's reproductive system is often mistakenly called the vagina, this area is actually the vulva. The vulva includes the labia, clitoris, urethral opening and vaginal opening.

Clitoris: There is an internal and external part of the clitoris. The external part is a mound about the shape and size of a pea. It has many sensitive nerve endings and is made of the same erectile tissue as the penis. It is sensitive to touch and protected by a hood of skin. Just like the penis, the clitoral tissue fills with blood when sexually aroused, causing the clitoris to become firm and erect. The internal part of the clitoris fans out to support the external part of the clitoris and attaches to the internal tissue.

Urethra: The tube that carries urine out of the body.

Labia: The outer and inner labia are folds of skin that surround the opening to the vagina. Pubic hair grows on the outer labia for most adolescents and adults.

Anus: The anus is not part of the reproductive system, but is located near the external genitalia. It is the end of the digestive tract and the opening through which feces (solid waste) is excreted. Because the anus is near the vulva, people with a vagina should wipe from front to back after using the bathroom; otherwise, bacteria contained in feces can come into contact with the vulva and cause infections.

Hymen: The hymen is not on the anatomy poster because many people with a vagina are born without a visible hymen. The hymen is a thin membrane that covers the opening of the vagina in some people. There are many myths about the hymen; it is often referred to by the slang term "cherry."

If students bring these myths to the classroom, it's important to normalize that some people are born without a visible hymen. So the presence or absence of a hymen cannot prove whether a person has had vaginal intercourse.

Engaging Students

If there is extra time, the following questions could be asked of the students post-lecture to assess retention of the material:

Ovaries:

- How large are the ovaries? (Each about the size of an olive.)
- What is ovulation? (The release of an egg cell from one of the ovaries once a month.)

Fallopian tubes:

- Is there a “safe” time for a young person to have unprotected intercourse and not get pregnant? (No, for several reasons. First, sperm can live in the fallopian tubes for several days. So even if there’s no egg there when the sperm are first ejaculated, a person could ovulate during the time sperm are present and that egg could be fertilized. Second, very few people have perfectly regular cycles, especially when they are young. So it is difficult to predict when ovulation will occur. Finally, infections or germs can be passed at any time between partners having unprotected sex.)
- How wide are the fallopian tubes? (About the width of three strands of hair.)

Vagina:

- Is it normal for a person with a vagina to have clear or white fluid come from the vagina when not having a period? (Yes. This is vaginal discharge, which keeps the vagina clean and healthy. Abnormal changes in odor or color of the discharge may be signs of an infection.)

Activity 6.5-3

The Menstrual Cycle Explained**Facts to Know**

The following are some points to note about the menstrual cycle:

- Menstrual cycles can range between 21 and 35 days.
- Menstrual periods typically last between 3 and 7 days. *Note:* Highlight the difference between the menstrual cycle and the menstrual period. Students can easily become confused and think that a menstrual period will last 21–35 days.
- What actually comes out of the body is mostly the extra lining from the uterus. A period is typically about half a cup to a full cup of liquid and tissue over several days, and only about 3–4 tablespoons of that liquid is blood.
- The average age for a first period is 12; however, some people may get their period earlier or later.

- Some people use tampons to absorb menstrual fluids. Show an example of a tampon and use the poster to demonstrate how it is used. It is inserted into the vagina, held in place by surrounding tissue, and later removed using the attached string. Any applicators should be thrown away in a trash can or disposal box. Used tampons should be wrapped in toilet paper and thrown away in a trash can or disposal box. Depending on the plumbing system, they may sometimes be flushed down the toilet as well. Tampons will not get lost in the body. Remind students that the cervix is at the end of the vagina. The opening of the cervix is so tiny that it will not allow a tampon to pass through.

Sometimes people who use high-absorbency tampons for longer than is recommended may become ill. This happens when bacteria in the vagina grow too much, and this rare illness is called toxic shock syndrome. If a person vomits and has a high fever, diarrhea, and a sunburn-type rash while using a tampon, it's important to remove the tampon, tell a parent or caring adult, and see a doctor or clinician right away.

- Some people use pads to absorb menstrual fluids. Show an example of a pad and use the poster to demonstrate how it is used. Pads stick to underpants and absorb fluid as it leaves the body. Used pads should be thrown away in a trash can or disposal box.

Potential Challenges

Some students may become embarrassed by seeing pads or tampons. Emphasize how handling these products and talking about menstruation can be a normal, natural part of having a vagina.

Engaging Students

Here are some prompt questions to engage students in the explanation of the menstrual cycle:

- How often does menstruation happen? (About once a month, depending on length of menstrual cycle.)
- When a person gets pregnant, does that person continue to have a period? (Not usually. The absence of a period can be a sign of pregnancy.)
- Does every person have the same-length cycle? (No, it varies quite a bit between individuals and may change throughout life. Most cycles are 21–35 days.)

Activity 6.5-4

“What Am I?” Game**Engaging Students**

Here are some potential questions and answers for the game:

- “I am about the width of three strands of hair, and I am what an egg travels down to get to the uterus.” (Fallopian tubes)
- “I am the part of the body where a fertilized egg implants and a pregnancy begins.” (Uterus)
- “I am the part of the body that controls the reproductive system.” (Brain)
- “I am the folds of skin on the outer part of the vulva.” (Labia)
- “We are the hormones the ovaries produce.” (Estrogen and progesterone)
- “I am the average length of a menstrual period.” (3–7 days)
- “I am the part of the uterus that is shed during menstruation.” (Endometrium, or uterine lining)

Lesson 6.5 Resources**Information about reproductive anatomy:**

Genitalia and Sexually Related Body Issues: www.kinseyconfidential.org/resources/bodies

Info for Teens: My Body: <http://www.plannedparenthood.org/teens/my-body>

Information about menstruation:

All About Menstruation: http://kidshealth.org/kid/grow/body_stuff/menstruation.html?tracking=K_RelatedArticle

Menstruation: www.plannedparenthood.org/health-topics/womens-health/menstruation-20696.htm

See www.getrealeducation.org for more information and resources.

Activity 6.6-2**Experiences in Puberty****Facts to Know**

The following are some additional talking points for this activity.

“Have wet dreams” is listed in the “Male Assigned at Birth” category because “wet dreams” is the term used to describe ejaculation by a person with a penis during sleep. Another term for wet dreams is “nocturnal emissions.” However, during puberty, anyone can have sexual dreams that cause arousal and a physical response. It is important to normalize students’ experiences by explaining that sexual dreams do not happen exclusively to people with a penis.

Similarly, “Get erections” is listed in the “Male Assigned at Birth” category because penile erections commonly occur during puberty. However, as discussed in the Teacher’s Guide for Lesson 6.5, people with vaginas may experience clitoral erections during arousal as well, although clitoral erections are less visible than penile erections. Likewise, anyone may experience erect nipples as a result of a variety of stimuli, including arousal and temperature. If your students can grasp this concept, feel free to list this characteristic under the “Most” category.

“Have sexual feelings” is listed under “Most” because all people have brains, and, as discussed in Lessons 6.4 and 6.5, the brain is the most important sexual organ in the human body. It’s important that students understand the difference between having sexual feelings and being sexually ready. A healthy choice for teenagers is not to engage in sexual intercourse. Just because a body is physically capable of doing something does not mean the person is emotionally ready to do it.

Potential Challenges

Students are often surprised to find “Breasts grow” listed under “Most.” Remind the class of the concept of “respect” on the Class Rights and Responsibilities poster. Try to foster both self-management and social awareness. Explain that breast development happens as a result of hormonal changes in puberty. In some people with a penis it’s more visible than in others, and the condition usually goes away after a few months. Students may assume that breast growth is a result of weight gain. Explain that breast development during puberty for people with a penis (gynomasticism) is different than breast growth associated with weight gain.

Engaging Students

The purpose of this exercise is to normalize changes that happen and to show that people have similar experiences in puberty.

The process questions for this activity are a great opportunity to review the key parts of the reproductive anatomy.

Activity 6.6-3

They May Feel...

Facts to Know

The following are some additional talking points on masturbation:

Masturbation is defined as touching, rubbing or fondling one's own sex organs for pleasure or stimulation. Masturbation is done to cause pleasurable sexual sensations and may result in orgasm. Masturbation is a safe sexual behavior because there is no risk for STIs or pregnancy. Masturbation, along with all other sexual activities, is something people may choose to do or not to do throughout their lives based on personal values.

It's important for educators to talk openly about masturbation and dispel any myths about the health risks of masturbation. It should also be acknowledged that people have different beliefs and values about masturbation.

The most important messages to emphasize:

- Masturbation can be a healthy way to explore one's own body, if that is something a person is comfortable with.
- It's OK if someone masturbates. It's OK if someone doesn't masturbate.
- The idea of "too much" masturbation is a myth. Some people masturbate more often, some less often.
- In order to normalize masturbation, don't associate it solely with people with a penis.
- Whether to masturbate is a private decision, and masturbation should be done privately.
- Many people masturbate at various points in their lives.

Engaging Students

In scenario 1, Vincent's older brother talks about masturbating. Help the students process this scenario by asking the following questions:

- What slang words or phrases have you heard for masturbation?

- Do they apply to everyone?
- Why do you think that is?

Discuss how masturbation is common for everyone. This may also be a good point to talk about double standards regarding sexual desire.

After the gallery walk, ask students what feelings appeared in the gallery. These feelings may include embarrassment, fear, etc. Some of the They May Feel... scenarios had positive feelings associated with them. Highlight positive emotions, such as pride and excitement, in order to normalize puberty.

Lesson 6.6 Resources

Teen Talk: Sex and Masturbation: www.plannedparenthood.org/teen-talk/sex-masturbation/masturbating-25057.htm

See www.getrealeducation.org for more information and resources.

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6.7 Activities

All 6.7 Activities**Engaging Students**

A way to get buy-in from the students about abstinence is to elicit examples of celebrities or television characters who have chosen abstinence or postponement:

- Lots of people choose different forms of abstinence. Some people choose to be abstinent until they are married. Can you think of any celebrities who have made that choice?
- Other people choose to be abstinent until a certain age or until they meet the right person and feel ready for sex. Deciding to put off sex until later is called “postponement.” Can you think of any TV shows where characters have decided to postpone having sex? Why did they postpone?

Many students are under the impression that their peers and high school students are having sex because of media messaging. According to the National Youth Risk Behavior Survey (CDC), in 2017:

- Less than 40% of high school students reported ever having had sexual intercourse.
- Less than 4% of high school students reported having had sexual intercourse before age 13.

Sharing these statistics with students will demonstrate that their peers are not likely to be sexually active. This may help reduce perceived pressure to become sexually active.

Activity 6.7-2

Defining Unhealthy Behaviors, Abstinence and Sexual Abstinence**Facts to Know**

Unhealthy behaviors can be anything from eating junk food to using drugs. To get the conversation started, the teacher may need to provide an example of one type of unhealthy behavior. For example, eating nothing but chips and soda would be an unhealthy behavior because of obesity, diabetes, high blood pressure, etc.

→ Teacher Note

Get Real's Definition of Abstinence

Get Real defines abstinence as “voluntarily choosing not to engage in certain sexual behaviors, including any sexual behaviors that can result in pregnancy or STIs, including HIV.”

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.

(from SIECUS, “Guidelines for Comprehensive Sexuality Education, K–12”)

Like the word sex, the concept of “abstinence” means different things to different people. This can lead to misunderstandings about what people mean when they refer to sex or abstinence. Giving students the *Get Real* definition of abstinence will prevent confusion.

When discussing sexual behaviors that can result in pregnancy or STIs, you should briefly define oral, anal and vaginal sex as follows:

- **Vaginal sex:** penis to vagina
- **Anal sex:** penis to anus
- **Oral sex:** mouth to genitals (penis or vulva) or to anus

The *Get Real* curriculum does not use the term “virgin” in discussions of abstinence. Virginity is a culturally constructed concept, not a scientific term. The phrase used in *Get Real* is “a person who has not been sexually active.” This phrase carries less culturally charged connotations than the term “virgin.”

Potential Challenges

Sex is not an unhealthy behavior. However, having unprotected sex and having sex without being ready can be potentially harmful because it could lead to unintended pregnancy or STI. When brainstorming the list of unhealthy behaviors with students, it is important that this distinction be clear.

Use language that promotes abstinence and postponement as normal. People postpone all kinds of activities in their lives. People postpone doing homework, cleaning their rooms, etc. Sexual activity is something else that people can postpone for minutes, days, months or years. A healthy option for adolescents is to abstain from or postpone sexual activity.

Often questions arise about whether or not a person can decide to be abstinent after they have already had sex. According to the *Get Real* definition of abstinence, people can decide to be abstinent at any point in their lives, even if they’ve had sex in the past.

Activity 6.7-3

Abstinence Advice Scenarios

Facts to Know

In Scenario 1, 13-year-old Ashley feels pressure to have sex with her 16-year-old boyfriend. Relationships with a significantly older partner are more likely to be sexual than those with a partner who is the same age, slightly younger or only slightly older.

Research shows that girls in relationships with partners 3 or more years older are more likely to be sexually active than girls with same-age partners, and they are also more likely to partake in risky sexual behavior, including sex under the influence of drugs and alcohol. They have lower rates of condom use and higher rates of STIs (Gowen et al). Girls with older partners are also more likely to face sexual coercion and intimate partner violence (Volpe et al). This scenario is also an opportunity to remind students about the age of consent in their state.

Engaging Students

This activity is a wonderful time to use the role-play technique “mantle of the expert,” in which students are placed in the role of experts rather than adolescents. For more information about this, see the “Guidelines for Role-Play” document at www.getrealeducation.org.

Lesson 6.7 Resources

Centers for Disease Control and Prevention. *Youth Risk Behavior Surveillance—United States, 2017*. www.cdc.gov/healthyyouth/data/yrbs/pdf/2017/ss6708.pdf.

Gowen, et al., “A Comparison of the Sexual Behaviors and Attitudes of Adolescent Girls with Older vs. Similar-Aged Boyfriends,” *Journal of Youth and Adolescence*, 33.2 (2004), 167–175.

Volpe, et al., “What’s Age Got to Do with It? Partner Age Difference, Power, Intimate Partner Violence, and Sexual Risk in Urban Adolescents,” *Journal of Interpersonal Violence*, 28.10 (2013), 2068–2087.

See www.getrealeducation.org for more information and resources.

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Activity 6.8-2**Introduction to Personal Values and Decision Making****Facts to Know**

Students may define “values” as “the things we believe in,” “the things that matter the most to us,” etc. Help them understand that values are also the ideas and beliefs that guide our decision making and our behaviors.

When eliciting a definition of “values” from students, it’s important to clarify the distinction between universal and personal values. An example of a universal value is, “People deserve to be healthy and safe,” whereas a personal value might be, “It’s important to recycle.”

Activity 6.8-3**Stand Up/Sit Down Activity****Engaging Students**

This is an opportunity to discuss peer norms. An additional follow-up question could be, “How many of you looked around the room before you decided whether or not to stand up?” Even if they won’t admit it, odds are most students did look around.

You can also ask the following process questions:

- Even if you didn’t look around the room, why do you think someone might do this?
- When making decisions about concepts that are so personal, why do people feel the need to see what others are doing and saying?

Note that it’s completely normal to want to fit in. However, when it comes to personal values, it is very important for people to stand up for what they believe in, regardless of peer pressure.

Explain that none of the prompts have obvious “yes” or “no” answers. There are gray areas in each and every one. This can be a difficult, abstract concept for concrete middle-school minds to grasp, but it’s important to explain. The process question “Were there any questions that were hard to answer?” is a good prompt for this conversation.

Activity 6.8-4

Decision-Making Activity**Facts to Know**

A decision-making model is a concrete tool to help middle-school students identify the steps involved in making a complicated decision. The visual element of the chart will help many students see the steps more clearly.

Potential Challenges

The six steps may be confusing at first to some students. To make sure students understand, it is important to demonstrate the decision-making model on the board for the class. Pick a simple decision (e.g., “When should I start studying for next week’s test?”) so the focus is on the model, rather than the details of the decision.

Students may get stuck on the first part of the model if they fill in a very simple, closed-ended question, such as “Should I brush my teeth today?” This leads them to outline the choices as “Yes,” “No” and “Maybe.” To avoid this, encourage students to word their questions in an open-ended way, such as, “What could I do?”

One of the steps in the model asks students to consider how the pros and cons they have identified relate to their values before they make a decision. One way to phrase this is to ask students, “How do the pros relate to the universal values of health and safety? How do the pros relate to your personal values?”

To keep students from getting off track, ask them to limit their thinking to examining the three most likely outcomes of their decision. While there may be more than three options for any given decision, ask them to pick the three options that seem the most plausible and to pick the pros and cons that would be likely results of those options.

It can be difficult to not lead students into picking a choice that an educator feels is “right” or “best” for them. Some of the choices students come up with may be unhealthy or have an increased level of risk. Encourage students to close their eyes when making a decision as a class so they are not influenced by peers, and fight the urge to guide students to choose one choice over another. The biggest takeaway from this activity is helping students realize that they always have choices and that weighing the pros and cons can help them determine what is healthy and right for them based on their own personal values. For a video of this activity being modeled go to www.getrealeducation.org.

Engaging Students

In addition to using the decision-making scenario strips provided, groups of students could make their own scenarios to try out with the model.

The decision-making model can be applied to many other scenarios. Refer to previous classes that discussed choices. How would the decision-making model be useful in those situations? For example, in Activity 6.7-3, there are two scenarios in which characters make decisions regarding abstinence. How could a decision-making model help those characters?

It's important to get students thinking about the fact that there are pros and cons to every decision. Pros and cons should guide the decision-making process. Teachers need to remember that the pros and cons are going to be different for each group and each individual student.

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6.9 Activities

All 6.9 Activities**Facts to Know**

The following definitions should be reviewed in this lesson.

Puberty: The emotional and physical changes that young people generally experience between the ages of 9 and 16.

Sexual abstinence: Choosing not to engage in behaviors that could lead to pregnancy or STI transmission, including vaginal, anal and oral intercourse.

Refusal skills: The skills, such as assertive communication, self-awareness, and social awareness, that enable people to refuse to engage in unhealthy behaviors and make responsible decisions.

Activity 6.9-3

Character Case Study and Personal Goal Reflection**Engaging Students**

It's important to bring in pictures that represent a diverse group of young people from which students can choose characters. Students usually love this activity.

If you are concerned about time, the exercise can be shortened to include only the following:

- Character's name and age
- Character's inner circle
- Character's proudest achievement/moment
- Character's goals

Activity 6.9-4

Refusal Skills Demonstration**Potential Challenges**

A classroom-management technique for this activity is to establish yourself as the director of the scene. This means that at any point, you can freeze the action and replace actors. By doing this, you maintain control of the exercise while still allowing student participation. Students who don't feel comfortable performing can offer solutions from their seats for the volunteers to act out. Students who want to volunteer can all have a chance to do so, because you can freeze the scene at any time and bring in new actors.

For more information about successfully facilitating role-plays, see the Role-Play Guidelines under Teacher Resources at www.getrealeducation.org.

Activity 6.9-5**Anonymous Questions Box****Engaging Students**

Be sure to answer any remaining anonymous questions before the end of class, since you will not be teaching these topics again until the students are in seventh grade.

Activity 6.9-6**Giving a Message****Potential Challenges**

Students may struggle with this activity. Remind students about the definition of sexuality from the review contest. Then ask them to imagine that a younger sibling or friend who looks up to them asked them about sexuality. They should explain their definition of sexuality to this person. Explain how sexuality ties into health, safety, personal values, beliefs, and the ability to achieve goals.