

Effective and Suitable Protection to Prevent Pregnancy and STBBIs

Lesson Plan

Resource: H&PE Elementary Resources

Unit: Human Development and Sexual Health

Grade(s): 8

Lesson: 4 of 5

H&PE Curriculum Expectations

2019 H&PE Curriculum Expectations: A1.5, A1.6, D2.3

Materials

- Access to a shared document (chart paper and markers or online interactive tool)
- Student Resource: Sexually Transmitted and Blood-Borne Infections (STBBIs) and Pregnancy Prevention Methods (*included at the end of the lesson*)
- **Teacher Resource: Checklist**

Learning Goals

We are learning to use our self-awareness and critical thinking skills to understand abstinence, contraception, and the use of effective and suitable protection to prevent pregnancy and sexually transmitted and blood-borne infections (STBBIs).

Overall Assessment

Use the Teacher Resource: Checklist to observe and provide written and verbal feedback about students' understanding of abstinence, contraception, and the use of effective and suitable protection to prevent pregnancy and STBBIs.

Minds-On

Share the learning goals with the class and co-construct success criteria with students. Consider posting the success criteria in the learning space for reference throughout the lesson.

Remind students of general group rules, including the importance of showing respect for others' ideas and opinions.

Divide students into groups of 5. Provide groups with a [Placemat](#) divided into 5 equal sections. Write the following question in the middle of the placemat.

Placemat question: "What information might individuals need to know about effective and suitable protection to prevent pregnancy and sexually transmitted and blood-borne infections, and making safe and healthy decisions about sexual activity?"

Student responses:

- "People need to know about the benefits and risks of different types of contraception and choices."
- "People need to know which partner uses contraception or if both use it. All partners should take on the responsibility of using protection rather than one person taking on the responsibility."
- "Those who choose to be sexually active need to know which contraceptive methods provide a protective barrier against sexually transmitted and blood-borne infections (STBBIs) as well as pregnancy."
- "They need to know how protection works and how to use it properly."
- "People need to understand how important it is to talk with their partners about sexual health choices, consent, and keeping safe from getting or passing on a STBI or an unintended pregnancy."
- "People have to develop self-awareness, assertiveness and refusal skills to communicate their choices effectively, listen respectfully, and read body cues in these conversations."

Have students generate possible answers in their section of the placemat, then have groups share and combine their answers to create the most common or relevant answer. Invite groups to share their answers with the class.

Action

Using Direct Instruction, explain to students that youth need to know about the benefits and risks of different types of contraception. They need to understand that not engaging in sexual contact is the most effective way to avoid getting a sexually transmitted and blood-borne infection (STBBI) or having an unintended pregnancy. Those who choose to be sexually active also need to know which contraceptive methods provide a protective barrier against infections as well as pregnancy. For example, condoms provide protection against both pregnancy and STBBIs – but to be effective, they need to be used properly and used every time.

Divide students into new groups of 5 (or have them remain in their placemat activity group) and assign each group one of the following STBBI and pregnancy prevention methods: Abstinence, Birth Control Pills, Condoms, Emergency Contraceptive Pill, and Withdrawal. Provide groups with a shared document and the appropriate section from Student Resource: Sexually Transmitted and Blood-Borne Infections (STBBI) and Pregnancy Prevention Methods to create a product to educate their peers (e.g., an infographic, slide deck, Public Service Announcement, a video). Explain to groups that they will first answer the following questions to become experts on their assigned method.

Questions:

1. What is the method?
2. Who uses it?
3. How is it used? How does it work?
4. What are the advantages of using this method?
5. What are the disadvantages of using this method?
6. How effective is the method, including the percentage of effectiveness?
7. Where would a user obtain items required for this method?
8. How much does it cost to use this method?
9. Does this method help prevent STBBIs?
10. What questions should someone consider asking their partner about using this method?

Then, they are to use their expertise to create a product of their choice for others that includes information about the method, who and how it is used, its effectiveness, advantages and disadvantages, the cost and where it can be obtained. Have students post their completed infographic for other students to view.

Consolidation

Have students complete a [Gallery Walk](#) to view the infographics, then return to their expert group. Have expert groups create five questions about their STBBI and pregnancy prevention methods. Use a [Quiz-Quiz-Trade](#) strategy and student-generated questions for students to consolidate their learning about abstinence, contraception and the use of effective and suitable protection to prevent pregnancy and sexually transmitted and blood-borne infections.

Note to Teachers

For additional information about effective and suitable protection to prevent pregnancy and STBBIs, refer to these websites:

- [Options for Sexual Health: Birth Control Methods](#)
- [Scarleteen: Sex ed for the real world](#)
- [Sexuality Education Resource Centre MB: Birth Control](#)
- [Shore Centre: Birth Control and Safer Sex](#)
- [Teaching Sexual Health: Birth Control Health Information Sheets](#)
- [Teen Health Source: Birth Control](#)

Student Resource: Sexually Transmitted and Blood-Borne Infections (STBBI) and Pregnancy Prevention Methods

Chart 1: Sexually Transmitted and Blood-Borne Infections (STBBI) and Pregnancy Prevention Methods

STBBI and Pregnancy Prevention Method	Effectiveness	Advantages	Disadvantages	Additional Information (how it's used, where to get it, cost, whether it helps to prevent STBBI and/or pregnancy)
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<p>Abstinence</p>	<ul style="list-style-type: none"> • Abstinence is 100% effective in preventing pregnancy if there is no penis-vagina contact of any kind • Abstinence is 100% effective in preventing sexually transmitted infections and blood-borne infections (STBBIs) if there is no oral, anal, or vaginal contact of any kind 	<ul style="list-style-type: none"> • There is zero chance of unintended pregnancies if there is no penis-vagina contact of any kind • It provides protection against STBBIs (depending on type of sexual activities engaged in) • It's free • It may align with personal values, beliefs, or cultural/religious practices • There are no medical or hormonal side effects • It encourages partners to build their relationship and express 	<ul style="list-style-type: none"> • Simply not having sex might sound easy, but pressure from partners, peers, and the media can make this decision very difficult • All partners must be committed to not engaging in sexual activity • Pregnancy is still possible — even without penis-vagina penetration — if semen is on or near the vagina • Other sexual activity, such as oral sex, 	<ul style="list-style-type: none"> • Personal limits should be determined before entering into a sexual situation • Partners should talk about their limits • People may wish to avoid situations where they feel pressured or unable to stay within their limits. For example, being alone with a partner, getting drunk or high, or feeling pressured because “everyone is having sex” may interfere with one’s judgment. • Willpower can sometimes fail, and people can get caught up in the “heat of the moment.” It can be a good idea to
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<p>Birth Control Pills</p>	<p>When used correctly, birth control pills are 92-99.2% effective in preventing pregnancy</p>	<ul style="list-style-type: none"> • Chances of becoming pregnant are very low • They often lead to regular periods that are lighter and/or shorter • Birth control pills also may have 	<ul style="list-style-type: none"> • Birth control pills do not protect against sexually transmitted or blood-borne infections (STBBIs), including HIV • They require a prescription. • They must be taken at the same time every day. If a pill is missed or if a pill is taken late, this method may not be as effective. • They may cause unwanted side effects such as: <ul style="list-style-type: none"> ◦ passing of blood between periods (break-through 	<ul style="list-style-type: none"> • Birth control pills are covered by most drug plans. It may be a good idea for individuals to talk to their parents/guardians about their coverage. • If individuals are not comfortable talking to their parents/guardians about birth control pills, they are available at a lower cost at many Public Health sexuality clinics or community health clinics (\$12/month). • Without a drug plan, birth control pills can cost anywhere from \$20 to \$50/month depending on the brand/type. There are different types
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<p>Condoms</p>	<p>External condoms:</p> <p>Used correctly and consistently, the effectiveness rate for preventing pregnancy is</p>	<p>External condoms:</p> <ul style="list-style-type: none"> • They can prevent pregnancy • They can prevent many STBBIs • They are available without prescription (from stores, pharmacies, vending machines, etc.) • They are 	<p>External condoms:</p> <ul style="list-style-type: none"> • They may cause an allergic reaction to the latex and/or spermicide • There are condoms made from other types of materials if people do have a latex allergy (e.g., Polyurethane) • They may cause vaginitis as a result of the additives in some 	<p>External condoms:</p> <ul style="list-style-type: none"> • They range in price from \$8/pack to more than \$20/pack depending on the brand/type • They are often free at community health clinics • Do not reuse condoms. Throw used condoms in the garbage as condoms may clog the toilet. • Place the condom on the erect penis before any genital-to-genital contact. • Do not use oil-based lubricants (e.g., petroleum jelly, mineral oil, baby oil, vegetable oil, massage oil) as these can
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<p>Condoms (continued)</p>	<p>Internal condoms:</p> <p>Used correctly and consistently, the effectiveness rate for preventing pregnancy is 79%</p>	<p>Internal condoms:</p> <ul style="list-style-type: none"> • They can prevent pregnancy • They can prevent many STBBIs • They protect the vagina and vulva • There are no hormonal side effects • There is no latex (for those with latex allergies) • They are available without prescription (from stores, pharmacies, vending machines etc.) • They can be inserted up to 8 hours before penis-vaginal sex • The open end covers a larger surface area, offering greater protection for 	<p>Internal condoms:</p> <ul style="list-style-type: none"> • They are very noticeable during sex • They are sometimes hard to insert or use. Practice inserting the condom may be necessary. • They do not contain spermicide • They can break or leak • They are more expensive than external condoms • During sex, there may be crackling noises caused by the friction • It is possible for the penis to enter the 	<p>Internal condoms:</p> <ul style="list-style-type: none"> • Cost is approximately \$3.50–\$5.00 each
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<p>Emergency Contraceptive Pill</p>	<ul style="list-style-type: none"> • The sooner one takes the emergency contraceptive pill following unprotected penis- vaginal sex, the more effective it is in preventing pregnancy • The emergency contraceptive pill is approximately: <ul style="list-style-type: none"> - 95% effective if taken within 24 hours of unprotected penis-vaginal sex – 85% effective if taken within 25-48 hours of unprotected penis-vaginal sex – 58% effective if taken within 	<ul style="list-style-type: none"> • It can be used after penis- vaginal sex • It can be used in addition to regular birth control pills • It can be purchased ahead of time in case you ever need to use it • It is simple to use • It doesn't affect your ability to have children in the future • It can be purchased at a pharmacy without a prescription • It can be used when other birth control methods have failed (e.g., condom breaking/slipping 	<ul style="list-style-type: none"> • It does not protect against STBBIs, including HIV • It's only effective if taken as soon as possible after unprotected penis-vaginal sex, and only up to 72 hours later • Side effects can include nausea, vomiting, mild stomach pain, fatigue, headache, and spotting or blood passing from the vagina. This usually lasts only a few days. • It must be readily 	<ul style="list-style-type: none"> • The emergency contraceptive pill is an emergency method of birth control containing the hormone progestin. It is prescribed by health professionals but can also be purchased at pharmacies after speaking with the pharmacist. • It is also available at a lower cost at many Public Health sexuality clinics (\$40–50 in pharmacy, \$12 at a public clinic). <p>Note: It does not protect against pregnancy during the rest of the same menstrual</p>
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<p>Intrauterine Device (IUD)</p>	<ul style="list-style-type: none"> • The effectiveness rate for the copper IUD is between 99.2% and 99.9%. • The effectiveness rate for the hormonal IUD is 99.9%. 	<ul style="list-style-type: none"> • Doesn't interrupt sex • Doesn't require your partner's involvement • Highly and immediately effective • Requires no daily attention • Isn't messy 	<ul style="list-style-type: none"> • It does not protect against STBBIs, including HIV • Requires visits to a doctor or clinic for insertion and removal • Cramping and discomfort during insertion • Expulsion or partial dislodging of the IUD • Can cause longer and heavier periods unless you are using the hormonal IUD • If you get a STBBI, it could increase the likelihood of Pelvic 	<ul style="list-style-type: none"> • An IUD is a small plastic or copper device shaped like a T that fits inside the uterus • Prevents pregnancy by slowing the sperm as they move toward the egg and by altering the lining of the uterus so that a fertilized egg is not able to attach to the uterus wall • Each IUD has thin plastic strings attached to it that hang through the cervix into the vagina. These strings can't be felt by your partner during penis-vaginal sex • At least once a month a person must check if they can feel the strings to ensure
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<p>Vaginal Contraceptive Ring</p>	<p>When used correctly, the ring's effectiveness rate is 99.7%. However, with typical use, the effectiveness rate is 92%.</p>	<ul style="list-style-type: none">• Less painful menstrual periods and bleeding• More regular periods• Less acne• Reduced risk of cancer of the ovaries and cervix	<ul style="list-style-type: none">• It does not protect against STBBIs, including HIV• If you start using the ring on any day other than the first day of your period, you must use a backup method of birth control for 7 days• Some people suffer side effects such as upset stomach or nausea, weight gain/loss, headaches, mood swings and increased vaginal discharge	<ul style="list-style-type: none">• A flexible ring that slowly releases low doses of hormones (estrogen and progesterone)• You will need a prescription from a doctor to get the ring• One ring is inserted for 21 days, and then taken out for 7 days. During these 7 days, you will get your period.• The ring works the same as birth control pills
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<p>Withdrawal</p>	<ul style="list-style-type: none"> • Withdrawal is NOT an effective way to prevent pregnancy, even for partners who think that they're doing it correctly • Even when done at exactly the right time, it's still only about 73% effective in preventing pregnancy 	<ul style="list-style-type: none"> • It is better than using no birth control at all • It is free • No prescription is needed • There are no chemicals or hormones • It can be used at any time 	<ul style="list-style-type: none"> • It does not protect against STBBIs, including HIV • It requires strong self-control, understanding, and trust • There's a higher chance of unintended pregnancy • It is not recommended for people with penises who ejaculate prematurely – sperm can still enter the vagina through pre-ejaculate 	<p>It is not reliable for the following reasons:</p> <ul style="list-style-type: none"> • A person with a penis cannot always control when they are going to ejaculate • If judgment is impaired because of drugs or alcohol, self-control can be affected • If a person with a penis ejaculates close enough to the outside of the vagina, the sperm can still swim up into the vagina and uterus and fertilize an egg • Most people with penises release a small amount of semen before they ejaculate
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(The information within Chart 1: Sexually Transmitted and Blood-Borne Infections (STBBI) and Pregnancy Prevention Methods was adapted from: Peel Public Health. (2016). Birth control methods.)