



# KNOW

## HIV/STD PREVENTION CURRICULUM

**GRADES 7 and 8**



**Randy Dorn**  
State Superintendent of  
Public Instruction

March 2014

This publication was supported by Grant/Cooperative Agreement Number 5U87DP001264-05 from the Centers for Disease Control and Prevention. Its contents are solely the responsibility of the authors and do not necessarily represent the official views of the Centers for Disease Control and Prevention.

OSPI provides equal access to all programs and services without discrimination based on sex, race, creed, religion, color, national origin, age, honorably discharged veteran or military status, sexual orientation including gender expression or identity, the presence of any sensory, mental, or physical disability, or the use of a trained dog guide or service animal by a person with a disability.



The [KNOW: HIV/STD Prevention Curriculum](#) developed by Office of Superintendent of Public Instruction is licensed under a [Creative Commons Attribution 4.0 International License](#).

# KNOW

## HIV/STD Prevention Curriculum

### Grades 7 and 8

Randy Dorn  
State Superintendent of Public Instruction

Jessica Vavrus  
Assistant Superintendent  
Teaching and Learning

Marissa Rathbone  
Program Supervisor  
HIV Prevention and Sexual Health Education

Laurie Dils  
Personal Responsibility Education Program Coordinator  
HIV Prevention and Sexual Health Education

Authors  
Andrea Gerber  
Kari Kesler  
Becky Reitzes  
Public Health – Seattle & King County

# Acknowledgments

The KNOW Curriculum is the product of many talented and committed educators. The authors of the 2014 edition are indebted to the following individuals for their significant contributions.

**Deborah Severtson-Coffin** for providing invaluable suggestions and review at every stage of the project.

**Valerie Fluetsch** for generously sharing her rich history with KNOW to inform the development of the current edition.

**Jodie Howerton** for offering thoughtful suggestions on strategies to reduce stigma and shame.

**Heather Maisen** for serving as a sounding board for the authors and for her unflagging dedication to reducing HIV rates.

**Family Planning Program, Public Health - Seattle & King County** for readily sharing materials originally developed for FLASH, Family Life and Sexual Health Curriculum.

**Cynthia Morrison, WA Department of Health; and Pete Hunt and Mary Schauer, Centers for Disease Control, Division of Adolescent and School Health** for their careful medical review and thoughtful comments about student learning.

**Center for AIDS Research, University of Washington** for bringing together a wide array of educators and researchers to discuss effective HIV prevention curricula.

**Evonne Hedgepeth** for developing earlier versions of the KNOW Curriculum lesson plans and teacher resources.

**Suzanne Hidde** for her unwavering commitment to high quality HIV education.

## HIV Educators

Brenda Still, Kennewick SD  
Cathy Crabb, Tumwater SD  
Connie Kelley, Whatcom County HD  
Connie Stacy, Spokane  
Deborah Severtson-Coffin, Yakima  
Eileen Bullinger, Seattle SD  
Evonne Hedgepeth, Olympia  
Heather Hill, Benton-Franklin HD  
Julie Zink, Spokane County HD  
Kim VanEpps, Skagit County HD  
Mary Quesnell, Kennewick SD  
Mike Taylor, North Central ESD  
Ray Liberg, Spokane  
Susie McIntyre, PH-Seattle & King County  
Valerie Fluetsch, Olympia

## KNOW Curriculum Advisory Members

Brenda Still, Kennewick SD  
Connie Stacy, Spokane  
Deborah Severtson-Coffin, Yakima  
Eileen Bullinger, Seattle SD  
Evonne Hedgepeth, Olympia  
Ray Liberg, Spokane  
Valerie Fluetsch, Olympia  
Vickiy Van Beek, Richland

## WA State HIV Materials Review Panel

Bonnie Nickle, WA State DOH  
Brenda Still, Kennewick SD  
Hilary Metzger, Jefferson County HD  
Laurie James, WA State DOH  
Mary Jane Johnson, Olympia  
Teri Hintz, WA State DOH  
Valerie Fluetsch, Olympia

# Table of Contents

## 7/8 KNOW

<b>Introduction</b> .....	1
KNOW Curriculum and U.S. HIV Epidemic .....	1
Teens and STDs .....	2
Effective HIV Prevention Education and the KNOW Curriculum .....	2
KNOW Compliance with Washington State Laws .....	3
AIDS Omnibus Act .....	3
Healthy Youth Act .....	5
Guidance for Utilizing Guest Speakers .....	6
<b>7/8 KNOW Standards Alignment</b> .....	7
Model Policies and Procedures for HIV Education .....	12
A. HIV and AIDS Prevention Education Administrative Policy 2126 .....	12
B. HIV and AIDS Prevention Education Administrative Procedure 2126P ..	13
Answer All HIV-Related Questions .....	16
Values Questions and Protocol .....	16
Personal Questions .....	18
Questions about Sexual Technique .....	20
Slang in Questions .....	20
Recognizing and Reporting Sexual Abuse and Assault .....	22
Resources .....	24
<b>Lesson 7-1, HIV and Other STDs</b> .....	1-10
<b>Lesson 7-2, Abstinence and Refusal Skills</b> .....	1-15
<b>Lesson 7-3, Risk Recognition</b> .....	1-8
<b>Lesson 8-1, Review of HIV and Other STDs</b> .....	1-12
<b>Lesson 8-2, Abstinence and Refusal Skills</b> .....	1-15
<b>Lesson 8-3, Condom Overview</b> .....	1-8

# Introduction

## 7/8 KNOW

### KNOW Curriculum and the U.S. HIV Epidemic

The KNOW Curriculum is a model HIV/STD prevention curriculum designed to meet the requirements of Washington State's AIDS Omnibus Act (RCW 28A.230.070) and requirements for instruction about sexually transmitted diseases (RCW 28A.230.020). The KNOW Curriculum is provided in three grade level manuals (Grades 5/6, 7/8, and High School). The KNOW Curriculum offers lessons specific to each grade level, including lesson objectives, activities, student handouts and visuals, recommendations for optional supporting videos, family newsletters and homework.

The goal of the KNOW Curriculum is to prevent HIV and other sexually transmitted diseases. Human Immunodeficiency Virus (HIV) was first identified in the United States in 1981. The impact of HIV has been dramatic in the U.S., especially among young people and marginalized communities. This is in large part due to limited access to appropriate and affordable healthcare, comprehensive and accessible education, and testing.

In the past 20 years, there have been major advances in HIV testing, treatment and prevention. Advances in HIV testing, counseling and outreach are helping people get quickly tested and connected to services. New treatments are helping people with HIV live longer and healthier lives, while at the same time, greatly reducing their risk of passing HIV to others. And new research on effective prevention education and strategies are helping to prevent the spread of HIV. As a result of these advances, many people with HIV can expect to live as long as their peers who don't have the illness.<sup>1</sup>

Despite the encouraging progress, HIV remains a deeply challenging problem in the United States. According to the Centers for Disease Control and Prevention (CDC), 1.1 million people in the U.S. are living with HIV, with 18% unaware that they have it. 50,000 people get HIV each year in the U.S., a quarter under the age of 25. HIV remains a significant cause of early death for some populations and, to date, more than 635,000 individuals with AIDS in the United States have died.<sup>2</sup> As a nation, and within our communities, there is much work to be done.

---

<sup>1</sup> Hogg RS, Althoff KN, Samji H, et al. Increases in life expectancy among treated HIV-positive individuals in the United States and Canada, 2000-2007. 7th IAS Conference on HIV Pathogenesis, Treatment and Prevention, 2013

<sup>2</sup> Centers for Disease Control HIV Surveillance Report (2011) and Supplemental Surveillance Report (2012)

## Teens and STDs

The alarmingly high rates of sexually transmitted diseases (STDs), other than HIV, among young people tell us that young people are also at risk for HIV. Nearly half of the 19 million new cases of STDs each year are among people aged 15–24 years<sup>3</sup>. By the time of high school graduation, almost two thirds of young people have had sex. Nearly 40 percent of sexually active students did not use a condom the last time they had sex, and one in five drank alcohol or took drugs before their last sexual intercourse<sup>4</sup>.

Sexual risk behaviors place adolescents at risk for HIV infection, other STDs and unintended pregnancy. A number of factors lead to sexual risk-taking and the higher likelihood of getting STDs.

1. Young women’s cervixes are still developing, which make them much more vulnerable to getting an STD than adult women.
2. Most people who have an STD, especially women, have no symptoms, so they and their partners do not know that they have them.
3. Many teens are not receiving comprehensive sexual health education.
4. Many teens do not have access or have limited access to free condoms and free and confidential testing and treatment.
5. And finally, many teens are in unequal and coercive relationships, especially young women.

## Effective HIV Prevention Education and the KNOW Curriculum

In the absence of a cure or vaccine for HIV, education remains one of the best ways to prevent the spread of HIV and other STDs. To this end, the 7/8 KNOW curriculum, 2014 edition, employs the most current HIV prevention research.

Research shows that high quality sexual health education that includes information on abstinence and condoms prevents the spread of HIV and other STDs by delaying the onset of sexual activity, reducing the frequency of sexual activity, reducing number of sexual partners, and increasing the use of condoms. The evidence shows that youth who receive education about both abstinence and condoms are NOT more likely to become sexually active, increase sexual activity, or experience negative sexual health outcomes.<sup>5</sup>

HIV prevention research instructs us to focus our efforts on beliefs, attitudes and skills. This approach is especially useful when working with elementary and middle school aged

---

<sup>3</sup> Weinstock H, Berman S, Cates W. Sexually transmitted diseases among American youth: incidence and prevalence estimates, 2000. *Perspectives on Sexual and Reproductive Health* 2004;36(1):6-10

<sup>4</sup> CDC. Youth risk behavior surveillance-United States, 2011. *MMWR* 2012;61(SS-4).

<sup>5</sup> Kirby, D. (2007). *Emerging Answers 2007: Research Findings on Programs to Reduce Teen Pregnancy and Sexually Transmitted Diseases*. Washington, DC: National Campaign to Prevent Teen and Unplanned Pregnancy

children, as they are still in the process of forming their beliefs, attitudes and skills related to sexual health and relationships. The vast majority of elementary and middle school students are not currently at risk for HIV, as they are not engaging in the most common behaviors for acquiring HIV, particularly vaginal, anal and oral sex, and injecting drugs. HIV education at this grade level develops beliefs, attitudes and skills that will help young people prevent HIV when they are older by not having sex, not injecting drugs, and using condoms when they do have sex.

Specifically, KNOW strives to prevent HIV by teaching medically accurate information about HIV transmission and prevention; strengthening the belief that people can protect themselves from HIV; promoting positive attitudes about abstinence and condoms; and developing refusal skills.<sup>6</sup> The 2014 edition of KNOW builds increasingly advanced refusal skills at every grade level with the purpose of helping students avoid sex as they transition to middle school and high school. The strengthened abstinence components of KNOW are informed by recent research on the characteristics of effective abstinence education for upper elementary and middle school students.<sup>7</sup>

### **KNOW Compliance with Washington State Laws**

The KNOW Curriculum is designed to fully meet the requirements of the AIDS Omnibus Act. It aligns with the WA State Health and Fitness Standards (2008), the WA State Guidelines for Sexual Health Information and Disease Prevention (2005), the National Sexuality Education Standards (2011), and current research on the prevention of HIV and other STDs.

However, the KNOW Curriculum, which focuses solely on HIV and other STDs, is not intended to meet the requirements of the Healthy Youth Act, which requires comprehensiveness of sexual health topics. To comply with the Healthy Youth Act, the KNOW Curriculum must be taught in conjunction with another evidence-based comprehensive sexual health education curriculum.

The following sections of the introduction describe the AIDS Omnibus Act, Healthy Youth Act and KNOW's alignment with standards and guidelines in greater detail.

### **AIDS Omnibus Act**

In 1988 the Washington State Legislature passed the [AIDS Omnibus Act](#), RCW 28A.230.070. This act mandates HIV/AIDS prevention education beginning in Grade 5 and continuing through Grade 12. Districts must adhere to the following criteria:

---

<sup>6</sup> Kirby, D. (2007). *Emerging Answers 2007: Research Findings on Programs to Reduce Teen Pregnancy and Sexually Transmitted Diseases*. Washington, DC: National Campaign to Prevent Teen and Unplanned Pregnancy

<sup>7</sup> Jemmott III, J. B., Jemmott, L. S., & Fong G. T. (February 2010). Efficacy of a theory-based abstinence-only intervention over 24 Months: A randomized controlled trial with young adolescents. *Archives of Pediatrics and Adolescent Medicine*, 164(2), 152–159



- Beginning no later than Grade 5, students shall receive yearly instruction in the life-threatening dangers of HIV/AIDS, its transmission, and its prevention.
- Each school district board of directors will adopt an HIV/AIDS prevention education program, which is developed in consultation with teachers, administrators, parents, and other community members including, but not limited to persons from medical, public health, and mental health organizations and agencies.
- The materials developed for use in the HIV/AIDS education program must be either: (a) model curricula and resources available from OSPI or (b) developed (or purchased) by the school district and approved for medical accuracy by the Department of Health Office on HIV/AIDS.
- If a district develops (or purchases) its own HIV/AIDS prevention curricula, the district must submit to the DOH office on HIV/AIDS a copy of its curricula and an affidavit of medical accuracy stating that the material has been compared to the model curricula for medical accuracy and that in the opinion of the district, the materials are medically accurate. After submission of these materials to the DOH Office on HIV/AIDS, the district may use the materials until the approval procedure by the DOH Office on HIV/AIDS has been completed.
- At least one month before teaching HIV/AIDS prevention education in any classroom, each district must conduct at least one presentation concerning the curricula and materials that will be used for HIV/AIDS education during weekend and evening hours for the parents and guardians of students.
- At least one month before teaching HIV/AIDS prevention education in any classroom, parents are to be notified of the presentation and that the materials are available for inspection. A student may be removed from HIV/AIDS prevention education if the student's parent or guardian, having attended one of the district presentations, objects in writing to such participation.

NOTE: As with all school district curricula, HIV/AIDS prevention instructional materials must also be reviewed by the school district instructional materials committee for bias as provided in the [Basic Education Law \(RCW 28A.150.240\)](#), the [Instructional Materials Law \(RCW 28A.320.230\)](#), and the [Sex Equity Law \(RCW 28A.640.010\)](#).

## Healthy Youth Act

While providing sexual health education (other than HIV/AIDS prevention) is the choice of the school district, any district that chooses to provide sexual health education must follow the requirements outlined in the Healthy Youth Act, WAC 392-410-140.

Per the Healthy Youth Act, all sexual health education (instruction and materials) offered in Washington public schools must meet the following criteria:

- Medically and scientifically accurate
- Age appropriate
- Appropriate for students regardless of gender, race, sexual orientation, and disability status
- Consistent with the Guidelines for Sexual Health and Disease Prevention (<http://www.k12.wa.us/HIVSexualhealth/pubdocs/SexEdGuidelines011005.pdf>)
- Include instruction about abstinence, and
- Include instruction about contraceptives and other methods of disease prevention

Abstinence may not be taught to the exclusion of instruction and materials on FDA approved contraceptives and other disease prevention methods. In other words, the instruction must be comprehensive.

The Healthy Youth Act defines “sexual health education” as:

1. The physiological, psychological and sociological developmental processes experienced by an individual;
2. The development of intrapersonal and interpersonal skills to communicate respectfully and effectively to reduce health risks and choose healthy behaviors;
3. Health care and prevention resources;
4. The development of meaningful relationships and avoidance of exploitative relationships; and
5. Understanding of the influences of family, peers, community and the media throughout life on healthy sexual relationships.

The Healthy Youth Act defines “medically and scientifically accurate” as information that is:

- verified or supported by research in compliance with scientific methods
- published in peer review journals, where appropriate, and
- recognized as accurate and objective by professional organizations and agencies with expertise in the field of sexual health including but not limited to the American College of Obstetricians and Gynecologists, the Washington State

Department of Health (DOH) and the Federal Centers for Disease Control and Prevention.

A school may choose to use separate, outside speakers or prepared curriculum to teach different content areas or units within the comprehensive sexual health program as long as all speakers, curriculum, and materials used are in compliance with this law.

### **Guidance for Utilizing Guest Speakers**

Since HIV needs to be taught for at least one lesson per grade starting with 5<sup>th</sup> grade, some schools and teachers may choose to bring in guest speakers who are experts in HIV and prevention. It is important to note that these outside speakers are bound to the same laws and requirements around teaching HIV and other sexual health lessons as classroom teachers.

The AIDS Omnibus Act clearly states that the materials developed for use in the HIV/AIDS education program must be either:

- Model curricula and resources available from OSPI, or
- Developed or purchased by the school district and approved for medical accuracy by the Department of Health Office on HIV/AIDS.

The Healthy Youth Act, which is the law that upholds the standards for sexual health education, states, “A school may choose to use separate, outside speakers or prepared curriculum to teach different content areas or units within the comprehensive sexual health program as long as all speakers, curriculum, and materials used are in compliance with this section.” OSPI’s “Sexual Health Education Supplemental Materials Evaluation Form” can be used to assess guest speakers for alignment with WA State requirements.

It is also important to remember that at least one month before teaching HIV/AIDS prevention education in any classroom, parents are to be notified of the presentation and that the materials are to be available for inspection. This includes any materials and lesson plans from outside speakers. Per the Healthy Youth Act, parents must also have the ability to review lessons and materials for other sexual health education lessons, including those from outside speakers. Therefore, all materials and lesson plans must be in compliance with The AIDS Omnibus Act (or if it’s a non-HIV sexual health topic, the Healthy Youth Act) and be available for parents and guardians to review in advance. They must be medically and scientifically accurate and in compliance with the laws.

In order to ensure the best outcomes for students, it is also important that guest speakers utilize lessons and teaching methods aligned with current HIV prevention research. Specifically, guest speakers should share medically accurate information and focus on building the same beliefs, attitudes and skills that are the focus of the KNOW curriculum.

As a reminder, KNOW strives to prevent HIV by teaching medically accurate information about HIV transmission and prevention; strengthening the belief that people can protect themselves from HIV; promoting positive attitudes about abstinence and condoms; and developing refusal skills. Furthermore, guest speakers should avoid outdated and non-evidence based practices, such as using scare tactics, stressing gender differences, disparaging condoms and other contraceptives, perpetuating stereotypes, and shaming or belittling students.

## 7/8 KNOW Standards Alignment

The entire 7/8 KNOW Curriculum meets the following recommendations from the Washington State Guidelines for Sexual Health Information and Disease Prevention:

- Is age and culturally appropriate
- Uses information that is medically and scientifically appropriate
- Enlightens people to develop and apply health-promoting behaviors, including disease prevention and detection and accessing accurate health information that is age appropriate
- Stresses that abstinence from sexual activity is the only certain way to avoid pregnancy and to reduce the risk of STDs, including HIV
- Recognizes and respects people with differing personal and family values
- Teaches youth that learning about their sexuality will be a lifelong process as their needs and circumstances change

The following grid demonstrates how the 7/8 KNOW Curriculum aligns with state and national standards and guidelines.

<b>Grade 7</b>
<b>Lesson 7-1, HIV and other STDs</b>
<i>Washington State Health and Fitness Standards</i>
Understands the dimensions of health and relates to personal health behaviors (2.1.1)
Understands how to maintain sexual health throughout life (2.2.2)
Understands factors and prevention related to communicable diseases (2.3.1)
Understands abusive and risky situations and demonstrates safe behaviors to prevent injury to self and others at home, school and in the community (2.4.1)
Understands how family and cultural factors impact health (3.1.1)
<i>National Sexuality Education Standards</i>
Define STDs, including HIV, and how they are and are not transmitted (SH.8.CC.1)
Compare and contrast behaviors, including abstinence, to determine the potential risk of STD/HIV transmission from each (SH.8.CC.2)

Describe the signs, symptoms and potential impacts of STDs, including HIV (SH.8.CC.3)
Develop a plan to eliminate or reduce risk for STDs, including HIV (SH.8.GS.1)
Identify medically accurate information about STDs, including HIV (SH.8.AI.1)
<b><i>Washington State Guidelines for Sexual Health Information and Disease Prevention</i></b>
<i>In addition to the points listed above, this lesson also:</i>
Provides accurate information about STDs including how STDs are and are not transmitted and the effectiveness of all FDA approved methods of reducing the risk of contracting STDs
<b>Lesson 7-2, Abstinence and Refusal Skills</b>
<b><i>Washington State Health and Fitness Standards</i></b>
Understands how to maintain sexual health throughout life (2.2.2)
Understands abusive and risky situations and demonstrates safe behaviors to prevent injury to self and others at home, school and in the community (2.4.1)
Solves conflicts while maintaining safe and respectful relationships (3.3.1)
<b><i>National Sexuality Education Standards</i></b>
Demonstrate the use of a decision-making model and evaluate possible outcomes of decisions adolescents might make (PD.8.DM.1)
Analyze the impact of alcohol and other drugs on safer sexual decision-making and sexual behaviors (SH.8.INF.1)
Demonstrate communication skills that foster healthy relationships (HR.8.IC.1)
Demonstrate effective ways to communicate personal boundaries and show respect for boundaries of others (HR.8.IC.2)
<b><i>Washington State Guidelines for Sexual Health Information and Disease Prevention</i></b>
<i>In addition to the points listed above, this lesson also:</i>
Acknowledges that people may choose to abstain from sexual activity at various points in their life
Promotes the development of intrapersonal and interpersonal skills including a sense of dignity and self-worth and the communication, decision-making, assertiveness and refusal skills necessary to reduce health risks and choose healthy behaviors
Encourages young people to develop and maintain healthy, respectful and meaningful relationships and avoid exploitative or manipulative relationships
Address the impact of media and peer messages on thoughts, feelings, cultural norms and behaviors related to sexuality as well as address social pressures related to sexual behaviors
Promotes healthy self-esteem, positive body image, good self-care, respect for others, caring for family and friends and a responsibility to community
<b>Lesson 7-3, Risk Recognition</b>

<b><i>Washington State Health and Fitness Standards</i></b>
Understands the dimensions of health and relates to personal health behaviors (2.1.1)
Understands how to maintain sexual health throughout life (2.2.2)
Understands factors and prevention related to communicable diseases (2.3.1)
Understands abusive and risky situations and demonstrates safe behaviors to prevent injury to self and others at home, school and in the community (2.4.1)
<b><i>National Sexuality Education Standards</i></b>
Define STDs, including HIV, and how they are and are not transmitted (SH.8.CC.1)
Compare and contrast behaviors, including abstinence, to determine the potential risk of STD/HIV transmission from each (SH.8.CC.2)
Describe the signs, symptoms and potential impacts of STDs, including HIV (SH.8.CC.3)
Develop a plan to eliminate or reduce risk for STDs, including HIV (SH.8.GS.1)
Identify medically accurate information about STDs, including HIV (SH.8.AI.1)
<b><i>Washington State Guidelines for Sexual Health Information and Disease Prevention</i></b>
<i>In addition to the points listed above, this lesson also:</i>
Acknowledge that people may choose to abstain from sexual activity at various points in their lives
Provides accurate information about STDs including how STDs are and are not transmitted and the effectiveness of all FDA approved methods of reducing the risk of contracting STDs
<b>Grade 8</b>
<b>Lesson 8-1, Review of HIV and other STDs</b>
<b><i>Washington State Health and Fitness Standards</i></b>
Analyzes the dimensions of health and relates to personal health behaviors (2.1.1)
Understands how to maintain sexual health throughout life (2.2.2)
Understands factors and prevention related to communicable diseases (2.3.1)
Understands abusive and risky situations and demonstrates safe behaviors to prevent injury to self and others at home, school and in the community (2.4.1)
Evaluates health and fitness information (3.2)
<b><i>National Sexuality Education Standards</i></b>
Identify accurate and credible sources of information about sexual health (AP.8.AI.1)
Define STDs, including HIV, and how they are and are not transmitted (SH.8.CC.1)
Compare and contrast behaviors, including abstinence, to determine the potential risk of STD/HIV transmission from each (SH.8.CC.2)
Describe the signs, symptoms and potential impacts of STDs, including HIV (SH.8.CC.3)
Identify local STD and HIV testing and treatment resources (SH.8.AI.2)
Develop a plan to eliminate or reduce risk for STDs, including HIV (SH.8.GS.1)

Identify medically accurate information about STDs, including HIV (SH.8.AI.1)
<b><i>Washington State Guidelines for Sexual Health Information and Disease Prevention</i></b>
<i>In addition to the points listed above, this lesson also:</i>
Acknowledges that people may choose to abstain from sexual activity at various points in their lives
Addresses the health needs of all youth that are sexually active, including how to access health services
Provides accurate information about STDs including how STDs are and are not transmitted and the effectiveness of all FDA approved methods of reducing the risk of contracting STDs
Provides information on local resources for testing and medical care for STDs and pregnancy
Identify resources to address individual needs, for present and future concerns and questions
<b>Lesson 8-2, Abstinence and Refusal Skills</b>
<b><i>Washington State Health and Fitness Standards</i></b>
Understands how to maintain sexual health throughout life (2.2.2)
Understands abusive and risky situations and demonstrates safe behaviors to prevent injury to self and others at home, school and in the community (2.4.1)
Solves conflicts while maintaining safe and respectful relationships (3.3.1)
<b><i>National Sexuality Education Standards</i></b>
Demonstrate the use of a decision-making model and evaluate possible outcomes of decisions adolescents might make (PD.8.DM.1)
Analyze the impact of alcohol and other drugs on safer sexual decision-making and sexual behaviors (SH.8.INF.1)
Demonstrate communication skills that foster healthy relationships (HR.8.IC.1)
Demonstrate effective ways to communicate personal boundaries and show respect for boundaries of others (HR.8.IC.2)
<b><i>Washington State Guidelines for Sexual Health Information and Disease Prevention</i></b>
<i>In addition to the points listed above, this lesson also:</i>
Acknowledges that people may choose to abstain from sexual activity at various points in their life
Promotes the development of intrapersonal and interpersonal skills including a sense of dignity and self-worth and the communication, decision-making, assertiveness and refusal skills necessary to reduce health risks and choose healthy behaviors
Encourages young people to develop and maintain healthy, respectful and meaningful relationships and avoid exploitative or manipulative relationships
Address the impact of media and peer messages on thoughts, feelings, cultural norms and

behaviors related to sexuality as well as address social pressures related to sexual behaviors
Promotes healthy self-esteem, positive body image, good self-care, respect for others, caring for family and friends and a responsibility to community
<b>Lesson 8-3, Condom Overview</b>
<b><i>Washington State Health and Fitness Standards</i></b>
Understands how to maintain sexual health throughout life (2.2.2)
Understands factors and prevention related to communicable diseases (2.3.1)
Understands abusive and risky situations and demonstrates safe behaviors to prevent injury to self and others at home, school and in the community (2.4.1)
<b><i>National Sexuality Education Standards</i></b>
Develop a plan to eliminate or reduce risk for STDs, including HIV (SH.8.GS.1)
Describe the steps to using a condom correctly (SH.8.SM.1)
<b><i>Washington State Guidelines for Sexual Health Information and Disease Prevention</i></b>
<i>In addition to the points listed above, this lesson also:</i>
Addresses the health needs of all youth who are sexually active, including how to access health services
Provides accurate information about STDs including how STDs are and are not transmitted and the effectiveness of all FDA approved methods of reducing the risk of contracting STDs
Provides information on local resources for testing and medical care for STDs and pregnancy



## Model Policies and Procedures for HIV Education

### A. HIV and AIDS Prevention Education Administrative Policy 2126

Prevention of HIV (human immunodeficiency virus) and AIDS (acquired immune deficiency syndrome) shall be taught in the district to all students at least once each school year beginning no later than the fifth grade. HIV/AIDS prevention education shall be medically accurate, age-appropriate and include the discussion of HIV disease progression, transmission and prevention.

The curricula and materials used in the HIV/AIDS education may be the model curricula and resources available through OSPI, or if developed by the school district, be approved for medical accuracy by the Washington State Department of Health (DOH). District-developed curricula shall be submitted to HIV/AIDS Prevention and Education Services for approval of medical accuracy stating that the material in the district-developed curricula has been compared to the model curricula for medical accuracy and that in the opinion of DOH the district-developed materials are medically accurate. Upon approval of curricula, the district may use these materials.

HIV/AIDS prevention education curricula shall be age-appropriate, medically accurate and include:

- Definitions of HIV and AIDS
- Disease progression of HIV
- Transmission of HIV including sexual behaviors and injection drug use, where age-appropriate
- Prevention including abstinence and condoms, where age-appropriate.

Cross Reference: Board Policy 3414 Infectious Diseases  
Board Policy 2125 Health and Sexual Health Education

Legal References: RCW 28A.230.070 AIDS Education in public schools  
RCW 28A.300.475 Medically accurate sexual health education  
70.24.250 Repository and Clearing House for AIDS Education and Training Materials

Management Resources:  
*Policy News*, December 2008 HIV/AIDS Prevention Education

## **B. HIV and AIDS Prevention Education** **Administrative Procedure 2126P**

Prevention of HIV (human immunodeficiency virus) and AIDS (acquired immune deficiency syndrome) shall be taught in the district to all students at least once each school year 5<sup>th</sup> through 12<sup>th</sup> grade. HIV/AIDS prevention education shall be medically accurate, age-appropriate and include the discussion of HIV disease progression, transmission and prevention.

### Best Practice Guidelines for Instruction

**TEACH ACCURATE INFORMATION AND TEACH STUDENTS TO ACCESS RESOURCES.** Reliable sources include government sites and the peer-reviewed journals of major professional associations. Help students analyze the trustworthiness of sources. Introduce your school nurse and other supportive school personnel.

**TEACH AGE-APPROPRIATE CONTENT.** Understand that students have different physical, emotional, intellectual and social developmental needs. Review materials for age-appropriateness and consider age-appropriateness when answering questions that arise in the classroom.

**TEACH IN WAYS THAT INCLUDE EVERY CHILD.** Practice conscious regard for diversity among students in terms of developmental stage; physical characteristics and body types; genders and gender identities; races and ethnicities; languages and countries of origin; religious beliefs and faith communities; abilities and disabilities; sexual orientations; sexual experiences and histories of victimization; pregnancy, abortion and parenting experiences.

**TEACH IN YOUR USUAL CO-ED SETTING.** Teach the same content, using the same materials to all students. It is OK to separate genders for one lesson, if it feels safer/more appropriate.

**PREVIEW VISUAL AIDS & GUEST SPEAKER MATERIALS.** All materials should be reviewed before showing to students. Consider in review the age-appropriateness, relevance to lesson, and medical accuracy of information/images. All Guest Speaker materials must comply with school policy and procedures.

**TEACH COMPREHENSIVELY.** Emphasize that no birth control method, except abstinence, is 100% effective in avoiding pregnancy and reducing the risk of sexually transmitted disease. Instruct on contraceptive methods and other methods of disease prevention. Show and handle contraceptives no sooner than 7<sup>th</sup> grade and no later than 8<sup>th</sup> grade and continue lessons throughout high school. This includes condom

demonstration on correct condom use. Provide opportunities for students to practice communicating boundaries. Express genuine support for risk-reduction.

**MANAGE SEXUAL HARASSMENT, INTIMIDATION AND BULLYING** through climate-setting at the beginning of a unit and consistent, firm, equitable intervention. Recommended best practice is introduction of the climate setting including: setting written group agreements to set tone and note expected behavior, openness to diverse questions and use of an anonymous question box(es), noting confidentiality and mandatory reporting standards.

**PARTNER WITH FAMILIES.** Materials will be available to preview by parents/guardians upon request and during preview sessions. Invite parents to share their own family's structure and values with their children. Encourage families to communicate at home about the unit. All parents should be notified of lessons 30 days prior to instruction and may choose to opt-out. Respect a family's written request to waive a child's participation; excuse the child discreetly, providing meaningful alternative activities.

**ANSWER ALL QUESTIONS.** Identify and translate slang; when it is crude or disparaging, explain that. When personal questions arise, use good judgment about protecting your own and students' privacy. When value-laden questions arise, the best practices recommended include: definition of terms used, explanation of spectrum of values/beliefs related to the question and encouraging students to talk with family and other trusted adults. Recommended best practice for building skill for addressing value-laden questions includes use of the FLASH Value Question Protocol.

#### Parental/Guardian Notification Process

At least one month before teaching AIDS prevention education in any classroom, the school will conduct at least one presentation during weekend and evening hours for the parents and guardians of students concerning the curricula and materials that will be used for such education. The parents and guardians shall be notified of the presentation and that the curricula and materials are available for inspection.

#### Excluding Student from a Program/Opt-Out

A parent/guardian who wishes to have a student excused from planned instruction in HIV/AIDS education must file a written request with the principal, at least 7 days prior to the planned instruction. The district will make the appropriate opt-out form available. Excused students shall be provided with appropriate alternative educational opportunities. No student may be required to participate in AIDS prevention education if the student's parent or guardian, having attended one of the district presentations, objects in writing to the participation.

Cross Reference: Board Policy 3414

Infectious Diseases

**7/8 KNOW**

**Introduction, Page 14**

HIV/STD Prevention Curriculum, rev. 2014  
Office of Superintendent of Public Instruction

	Board Policy 2125	Health, Family Life and Sex Education
Legal References:	RCW 28A.230.070	AIDS Education in public schools
	RCW 28A.300.475	Medically accurate sexual health education
	70.24.250	Repository and Clearing House for AIDS Education and Training Materials

## Answer All HIV-Related Questions

Answering student questions is a fundamental part of high quality HIV education. It is considered best practice to answer all student questions accurately and age-appropriately. Not only are they fundamental to student learning, but they give the teacher an opportunity to build trust in their classroom, and to build their own credibility as a reliable source of accurate information. While most questions are relatively straightforward and easy to answer, some are more difficult. If a teacher needs time to think about the answer or to consult with a colleague or expert, it is fine to let the class know you will answer the question in the next few days. While it is best practice to answer all student questions, always follow your district policy (e.g. if certain topics are not allowed).

The following sections of the introduction describe strategies for handling different types of student questions. Teachers can also get guidance about answering student questions by attending OSPI sexual health education teacher training, listed on the OSPI website.

### Values Questions and Protocol<sup>8</sup>

Questions about value-laden topics can be challenging for teachers at first glance. These questions may be directly about values, or they may be about topics that people have strong values about. This section of the introduction offers a protocol for answering value-laden questions that is accurate, helpful to students, and respectful of the broad range of values and beliefs held by students and their families. It also provides clear guidelines about when it is okay for the teacher to express their opinion, and when it is not.

Relatively UNIVERSAL values are those shared by 95% of families. The teacher should feel comfortable, and is in fact, obligated to teach these values. (While some people may not act in accordance with their values, they are relatively UNIVERSAL values nonetheless). Examples of relatively UNIVERSAL values that may come up in sexual health education class:

- Forcing someone to have sex with you is wrong
- Knowingly spreading disease is wrong
- It's safest and healthiest for school-age kids not to have sex (this is NOT non-universal, what IS non-universal is when it's fine to have sex)
- Taking care of your reproductive health is important
- Sex between children and adults is wrong
- Adultery is wrong

---

<sup>8</sup> Adapted from FLASH, Important Reading for Teachers, Public Health – Seattle & King County

NON-UNIVERSAL values are those *without* consensus in the community. The teacher should *not* express a particular belief about these issues. Expressing their own personal values might hurt or offend a child and their family. It is the family's role to share their values with their child, not the teacher's. However, it is best practice to provide accurate information or facilitate discussion about the issues, similar to all other topics. Examples of NON-UNIVERSAL issues that have a wide range of values in the community:

- Abortion
- Birth control
- Masturbation
- Homosexuality
- Sex outside of marriage
- Cohabitation
- What age/under what circumstances it's acceptable to start having sex

The Values Question Protocol provides clear guidance on how to answer questions about value-laden topics in class.

1. Read the question verbatim or listen to it carefully.

If answering a written question, read it verbatim. If you decide to paraphrase it, make sure you are clear enough that the author of the question will recognize it as his or hers.

2. Legitimize the question.

Giving a brief affirmation encourages students to keep asking questions. It also discourages negative speculation about the asker.

*"I am glad someone asked this one." "People ask me this one every year." "This question is really thoughtful (compassionate, imaginative, respectful)."*

3. Identify it as a belief question.

Distinguish facts from values and beliefs.

*"Most of the questions you've been asking have been factual questions where I could look up an answer that the experts agree upon. This one is a values question where different people, families, and religions have different beliefs."*

4. Answer the factual part of the question.

Many questions about value-laden topics have a factual component. Give accurate information about the factual part of the question, then say, *"Now let's talk about the different beliefs people might have about (insert topic)."*

5. Help the class describe a full range of beliefs on the topic, not their own.

Encourage the class to describe a wide range of beliefs as respectfully as they would describe their own. Do not ask students about their about their own or their families'

beliefs. It is potentially an invasion of privacy, and in Washington State, is it illegal. At first, students may only be able describe a dichotomy of values (e.g. some people believe it is wrong, while others believe it is right.) Until students learn to describe a full range of values, the teacher will need to supplement them.

*"Tell me some of the things you've heard that people believe about that." Prompt the group. "Some people believe \_\_\_? Um, hmm, and some people believe \_\_\_? Great, some people also believe..."*

6. Refer to family, clergy and other trusted adults.

Encourage communication about values with family or other trusted adults.

*"Because people have such different beliefs about this, I really want to encourage you to talk with an adult in your family or another trusted adult, like somebody at your community of worship, if you have one. Have a conversation within the next week, if you can, to learn more about what they believe."*

Example: *"Isn't it wrong to get pregnant if you have HIV?"*

*"This is a very thoughtful question. People have a lot of different beliefs about this issue. I want to let you know that it is legal for someone to choose to become pregnant if they have HIV. Also, there are important things the woman can do to really lower the chance that the baby will be born with HIV. However, there is still a small risk. Some people believe that all pregnancies carry some risk, and this risk is no different. Other people believe that you should never take this kind of risk, even if it is small. Some people think of this as an issue of rights for the mother – that it is her right to decide how to start a family and how to manage her pregnancy. Other people think of this as an issue of rights for the baby – that the baby doesn't get to choose what is happening and because of that it has to be protected from this risk. It might be helpful for you all to hear from your families or communities of worship, if you have one, what they think about this issue. I would encourage you to ask them about this."*

### Personal Questions<sup>9</sup>

Students sometimes ask questions that contain a personal element. The question could be about you, such as, "How old were you the first time you had sex?" It could be about the student himself or herself, such as, "How do I know if I have HIV?" Or, it could be a personal question about someone else, such as, "I heard that Maria's uncle has HIV, is that true?"

Students ask these questions for a variety of reasons. They are curious about the trusted adults in their life. They are learning about boundaries. They are seeking to normalize their own experiences. They are applying the things they are learning in sexual health

---

<sup>9</sup> Adapted from FLASH, Important Reading for Teachers, Public Health – Seattle & King County

class to themselves and the people in their lives. And, they find you a credible and accurate source of information about things that are important to them.

There are many useful strategies for answering these questions in a helpful way, while also teaching about privacy and appropriate boundaries.

- Validate personal questions, just like other student questions. Be cautious about inadvertently embarrassing or shaming students for asking personal questions.
- Use personal questions as an opportunity to model and teach about healthy boundaries.
- Do not share information about your sexual experiences or history. Sometimes teachers want to share this information to set a positive example or to share a cautionary story. Even though the intent is good, it is still inappropriate to share with students. It is also less helpful to students than one might hope.
- When you decline to answer a question about yourself, follow these steps: (1) affirm that students are often curious about the adults in their life; (2) reframe the question, so that it is general, not personal; and (3) answer with factual information and/or the values question protocol.
- When students ask a written questions about themselves or someone else, paraphrase the question to the third person. Answer the question about people in general, not this specific person.
- When students ask questions out loud about themselves or someone else, remind the class about respecting people’s privacy, and answer the question about people in general, not this specific person.

Example: “Have you ever **had an STD?**”

*“This is a common question. Especially after we have learned how common STDs are, it’s normal to wonder if the adults in your life have any experience with them. Since this is private and personal information, I am not going share that information with you. It’s important for teachers not to ever share personal sexual information with students. However, I can tell you that STDs are very common, and they are especially common among teenagers and young adults. In fact, more than half of all people will get an STD at some point in their life. Most of those are curable, but some, like HIV, are not, which is why it’s so important that people choose to use condoms when they do have sex.”*



## Questions about Sexual Technique<sup>10</sup>

Technique questions are about how to perform a sexual act. They are often worded as “How do you...”, “How does a person...” or “What’s the best way to...” Clearly, giving guidance about sexual performance is inappropriate. However, most questions that appear to be about technique (to adults) are just a student’s way of getting more information about a topic. The intent of the question is usually “What is...” Even during those rare times when a sexual technique question is being asked, there is usually a general factual question embedded in it that can be answered instead.

- Validate questions worded in this way, just as you would all other types of question.
- Reframe technique questions as factual questions. Answer the factual aspect of the question.
- If you think the question is really asking for information on how to perform sexual acts, let the class know that teachers, school nurses, etc. don’t give sex advice. Instead, use the student’s question as an opportunity to give accurate information about the topic in general.
- Your answer might include the values question protocol.

Example: “*How does a guy have sex with another guy?*”

*“Thank you for asking this question. People are often curious about how two men or two women have sex. It is important to remember that no two people have sex the exact same way. All people, regardless of sexual orientation, like different things. This includes kissing, hugging and cuddling. In terms of sex, three types of sex people sometimes choose are vaginal sex, oral sex and anal sex. It’s important for men to use condoms to help protect themselves and their partners from STDs, whether their partner is a male or a female.”*

## Slang in Questions<sup>11</sup>

Student questions often contain slang. Most often, students use slang because it is the terminology they are most familiar with, or because they have a question about the meaning of the term. Sometimes, it is also an attempt to shock the teacher.

Slang terms range from widely used, common terms to words that some may find inappropriate or off-putting. When students use slang it is an opportunity to teach the

---

<sup>10</sup> Adapted from FLASH, Important Reading for Teachers, Public Health – Seattle & King County

<sup>11</sup> Ibid.

class the medical or standard term. It is also an opportunity to maintain a respectful environment and diffuse the need to test or shock the teacher.

- Validate questions with slang, just as you would all other types of student questions.
- When reading a written question aloud, read the question verbatim. Identify the slang as such, in a non-judgmental way, and translate it into medical/standard language. Let the class know we'll all be using the medical/standard term in class.
- Assume good intent on the part of your students. Students typically use the language they have been exposed to, including by family members. Don't denigrate students for using slang; simply instruct the class to use the medical/standard term in health class.
- Handle slang as a learning opportunity, in a calm and respectful manner. This greatly reduces students need to test or shock you.
- Your answer might include the values question protocol.
- Let your administrator know, in advance, how you handle slang in your classroom.
- Slurs fall into a different category than slang. If students use a slur in sexual health class (e.g. for women, people who are gay, etc.), use the following steps: (1) validate question by saying you're glad this important topic came up; (2) identify the term as an offensive word; (3) let the class know we won't be using this word in school, ever, because it is hurtful. It is helpful to proceed as though the speaker didn't mean harm because it will help them save face and more readily adopt more respectful language.

Example: *"Are you supposed to use a condom for a blowjob?"*

*"This is an important question. Blowjob is a slang word for oral sex on a penis. It is important for people to use a condom when having oral sex with a penis because HIV and other STDs can be spread through oral sex, as well as vaginal and anal sex. There are special condoms designed specifically for use during oral sex that do not have lubricant on them, but people can use any condom they have."*

## Recognizing and Reporting Sexual Abuse and Assault<sup>12</sup>

At least one in five girls and one in ten boys will be sexually abused at some point in their childhood.<sup>13</sup> People aged 15 to 24 report rape and sexual assault at far higher rates than any other age group.<sup>14</sup> If you suspect a student in your classroom has been or is being sexually abused, sexually exploited, or injured (by anyone, not just a caregiver) you are legally obligated to report it.

Keep in mind that, at all times, you likely have students in your class who have experienced sexual abuse or assault, either currently or in the past. Strive to create a classroom that is safe and inclusive, and in which good boundaries are modeled. You do not have to know for certain that a student has been abused to make a report and to offer the student support.

### 1. How to tell if a student has been sexually abused or exploited.

- The student tells you.
- A student confides to you that another student was exploited.
- The student acts differently from usual, in troubled ways. These behaviors can signal other stresses, but should still prompt the teacher to ask the student if they can help with a problem.
  - Regressing to more immature behavior
  - Clinging to you or another staff person
  - Cranky, hostile or depressed
  - Sleeping in class, or lacking energy
  - Development of minor ailments (headaches, stomach aches, no appetite)
  - Reluctant to leave school at end of day
  - Dressing provocatively or wearing many layers even during hot weather

### 2. What to do if a student confides in you about sexual abuse or assault or if you have reasonable cause to believe that abuse or assault has occurred.

- Tell the student “I believe you.”
- Tell the student that they’re not to blame and say, “I care about you and I’m glad you told me.”

---

<sup>12</sup> Adapted from FLASH, Important Reading for Teachers, Public Health – Seattle & King County

<sup>13</sup> Finkelhor, D., Dziuba-Leatherman, J. (1994). Children as Victims of Violence: A National Survey. *Pediatrics*, 94:413-420.

<sup>14</sup> US Department of Justice. (1997, July). *Age Patterns of Victims of Serious Violent Crime*. Retrieved from <http://bjs.ojp.usdoj.gov/content/pub/pdf/apvsvc.pdf>

- Speak privately with the student and maintain the student’s confidentiality within the school, unless you feel the need to enlist the help of another adult support person, such as your principal, school nurse, or counselor.
  - Report the abuse.<sup>15</sup> In all 50 states, the law requires professional school personnel to report the suspected abuse to either the police or to a child protection agency. It is not sufficient to “turn the case over” to your principal or another staff person, even if this is what your school protocol advises. You are required by law to report it yourself or make certain it has been reported by another person (for example, by being in the room at the time). You do not need to know for certain that abuse has occurred to be obligated to report. All you need is *reasonable cause to believe* it has occurred; it is the job of the child protection agency to investigate, not yours.
  - Offer the student as much control as possible over the timing and manner of reporting. If he wishes, for example, he could make the report himself while you sat at his side for support. In Washington State, if a student isn’t in imminent danger, you have 48 hours to make a report. You could allow her the choice to delay reporting to a child protection agency for a day in order to disclose it first to a parent or guardian.<sup>16</sup>
  - If you need or want support or advice for yourself or the child in reporting the abuse, seek professional help.<sup>17</sup>
3. What to do if you get an anonymous question from a student that indicates possible abuse or exploitation.
- If you recognize the handwriting, ask that student if you can talk with them privately. Do not pressure them, but tell them that you care and that if there is anything they want help with, you can help. If the student denies writing the question, tell them that you care and want to help if they ever do need help in the future. Explain that, in the meantime, you do have to notify Child Protective Services that you received the question, even if you aren’t sure who wrote it.
  - If you don’t recognize the handwriting, call Child Protective Services for advice about whether to make a formal report.

---

<sup>15</sup> In WA State, if you suspect that a child is being abused, call the WA State Child Abuse and Neglect Hotline at (866) END HARM (866-363-4276). The operator will connect you with the right office to make your report. The hotline runs 24 hours/day, 7 days/week.

<sup>16</sup> Child Protective Services, personal communication, 2011.

<sup>17</sup> In WA State, call (866) END HARM (866-363-4276). Nationally, call the National Sexual Assault Hotline: 1-800-656-HOPE.

## Resources

### WA State and National HIV and Sexual Health Education Resources

- OSPI's HIV and Sexual Health Education Program provides technical assistance and support to schools by promoting best practices in HIV/AIDS prevention and sexual health education.  
<http://www.k12.wa.us/HIVSexualhealth/default.aspx>
- OSPI's list of national resources for HIV and sexual health education  
<http://www.k12.wa.us/HIVSexualhealth/Resources.aspx>
- Center for Disease Control's Health Education Curriculum Analysis Tool (HECAT)  
<http://www.cdc.gov/healthyyouth/hecat/index.htm>  
HECAT Sexual Health Module  
[http://www.cdc.gov/healthyyouth/hecat/pdf/HECAT\\_Module\\_SH.pdf](http://www.cdc.gov/healthyyouth/hecat/pdf/HECAT_Module_SH.pdf)
- OSPI's HIV and Sexual Health Program has two videos on how to use the HECAT and its Sexual Health Module.  
<http://www.k12.wa.us/HIVSexualHealth/SHECAT.aspx>
- OSPI's Sexual Health Education Supplemental Materials Evaluation Form  
<http://www.k12.wa.us/HIVSexualhealth/Healthyyouthact.aspx>

### The KNOW Curriculum Online

- This is a link to the downloadable version of the KNOW Curriculum and an order form for the print version.  
<http://www.k12.wa.us/HIVSexualHealth/KNOW.aspx>

### HIV Resources

Many teachers want information and resources on HIV and other STDs. Here are some great resources for basic information on HIV and other STDs from reliable government sources.

- The Federal Government's AIDS.gov website <http://aids.gov/hiv-aids-basics/>
- Center for Disease Control (CDC) Website <http://www.cdc.gov/std/>
- King County's STD website  
<http://www.kingcounty.gov/healthservices/health/communicable/std.aspx>
- King County's HIV/STD Program  
<http://kingcounty.gov/healthservices/health/communicable/hiv.aspx>

### HIV Classroom Resources

- OSPI's HIV Lending Library <http://www.k12.wa.us/HIVSexualHealth/Library.aspx>
- King County's Comprehensive Sexual Health FLASH Curriculum  
<http://www.kingcounty.gov/healthservices/health/personal/famplan/educators/FLASH.aspx>
- King County's Resources for Teachers page, including HIV and Puberty film reviews  
<http://www.kingcounty.gov/healthservices/health/personal/famplan/educators/teachers.aspx>

## Training Resources for Teachers

- All of WA State  
<http://www.k12.wa.us/HIVSexualhealth/training.aspx>
- In King County  
<http://www.kingcounty.gov/healthservices/health/personal/famplan/educators/training.aspx>

# Grade 7

## Lesson 1

# HIV and Other STDs

### Overview

The purpose of this lesson is to review basic information about HIV and other STDs. It also aims to reinforce the belief that people can protect themselves from HIV and other STDs.



**NOTE:** Teachers need to be prepared to respond to unexpected questions from students regarding sexual health, even though they are not part of the planned presentation. See introductory section on tips for answering different types of questions.

### Laws & Standards

The 7/8 KNOW Curriculum, 2014 edition, complies with the AIDS Omnibus Act and partially fulfills the Healthy Youth Act (2008). It aligns with the WA State Health and Fitness Standards (2008), the WA State Guidelines for Sexual Health Information and Disease Prevention (2005), the National Sexuality Education Standards (2011), and current research on the prevention of HIV and other STDs. Please see the introduction for more details, including information on how to fully comply with the Healthy Youth Act.

### Objectives

The students will:

- \* Understand basic facts about HIV and other STDs
- \* Identify how HIV and other STDs are transmitted
- \* Identify how HIV and other STDs can be prevented

# Grade 7 Lesson 1

## HIV and Other STDs

### Agenda

Time: 50 minutes

#### With DVD:

1. Introduction and ground rules (10 min)
2. HIV Overview DVD (20 min)
3. HIV and STD sentence stems (20 min)

#### Without DVD:

1. Introduction and ground rules (10 min)
2. HIV Lecture (10 min), alternative to DVD
3. HIV and STD sentence stems (30 min)

#### Materials:

- \* Understanding HIV and AIDS DVD
- \* DVD and projector
- \* Basic HIV/AIDS Facts Visual
- \* 3 sheets of newsprint per class
- \* 3 sticky notes per student
- \* HIV/AIDS Family Newsletter, 1 per student

#### To order DVD:

“Understanding HIV and AIDS”

Human Relations Media

<http://www.hrmvideo.com/catalog/understanding-hiv-and-aids>



Activity 1

Introduction and Ground Rules

Time: 10 minutes

1. Introduce the topic of HIV and other STDs.

*“Today we’re going to learn about HIV and other sexually transmitted diseases. Some of you have started learning about HIV in past classes, or at home, and for some of you, this will be a new topic. HIV is a very serious illness that can cause death. However, many people live a long time with HIV with the help of a doctor. We are going to learn a lot about HIV and other STDs, like how people get this illness, and most importantly, how people can protect themselves. This is an important subject, and I know we’re all going to learn a lot in this unit.”*

2. Share ground rules with the class. Write them down as you cover each one.

*“Even though we already have rules for classroom behavior, I’m going to go over class rules especially for this topic. I want to help everyone feel comfortable asking questions and participating in the lessons. I’m going to start by giving you my ideas, and then I’ll ask if you have any others to add.”*

- \* Ask questions. (Tell the class you will do your best to answer all questions or find the answer, if you don’t know it.)
- \* No put-downs.
- \* It is okay to disagree.
- \* Listen and be respectful of others’ opinions.
- \* Protect people’s privacy. For example, questions about friends and family members should not include their names or identities. Instead, say “Someone I know…” or “Someone I heard of…”

3. Ask the class if they have any ground rules to add. Add them to the list.
4. Ask for a raise of hands to show agreement with the ground rules.

## Grade 7 Lesson 1

# HIV and Other STDs

### Activity 2

### HIV Overview DVD

Time: 20 minutes

Materials: DVD, DVD player, projector

Show the DVD: “Understanding HIV and AIDS” by Human Relations Media. If you do not have the DVD, use HIV Overview Lecture as an alternative.

### Activity 2 alternative

### HIV Overview Lecture

Time: 10 minutes

Materials: Basic HIV/AIDS Facts Visual

If you don't have the DVD, give HIV Overview Lecture while showing the Basic HIV/AIDS Facts visual. Go over the following information slowly, checking for comprehension as you go.

- \* *“Let’s begin today with an overview. It’s important for everyone to learn about HIV and other STDs: people who are having sex and people who aren’t, gay and lesbian people and straight people, guys and girls, because STDs are so common and it’s important for everyone to know how to keep themselves healthy.”*
- \* *“HIV is the germ that causes AIDS. Many people with the HIV germ will eventually get very sick, especially if they don’t have the help of medicine and a doctor. When they are very sick, it is called AIDS.”*
- \* *“HIV stands for Human Immunodeficiency Virus. This means it is a virus that humans can get, and that it hurts your immune system. The immune system is what keeps our body healthy.”*
- \* *“AIDS stands for Acquired Immune Deficiency Syndrome. That means that after a person has had HIV for a while, sometimes a very long time, their immune system won’t work well and they can get very sick.”*

## Grade 7 Lesson 1

## HIV and Other STDs

### Activity 2 alternative

### HIV Overview Lecture cont.

- \* *“HIV is a very serious illness that can cause death. There is no cure for HIV. However, people who have HIV can live for a very long time with the help of a doctor.”*
- \* *“HIV is a type of STD, which stands for Sexually Transmitted Disease. An STD is an illness that people get from having sex with someone who already has it. There are many types of STDs besides HIV.”*
- \* *“People usually get HIV from having sex or sharing needles for drugs with someone who has HIV. People your age don’t usually get HIV because they usually aren’t doing those things.”*
- \* *“The other way people can get HIV is from their mother when they are being born or are a small baby. If a woman has HIV when she is pregnant, sometimes the baby is born with HIV. If a woman HIV when she is nursing her baby, sometimes the baby can get HIV from breast milk.”*
- \* *“If a person has HIV, the HIV virus is in their blood, semen, vaginal fluids and breast milk. (Semen is the fluid with sperm in it that comes out of the penis. Vaginal fluids are the wetness in a woman’s vagina.) That’s why people can get HIV from sex, sharing needles, or sometimes from a mom to a baby.”*
- \* *“HIV is NOT in other body fluids. It is not in tears, sweat, spit, pee, or any other fluid. A person cannot get HIV from being around someone with it. They can’t get it from hugging or kissing. They can’t get it from a mosquito bite or from a toilet seat.”*
- \* *“People can prevent getting HIV and other STDs by not having sex and by not sharing needles. They can also prevent HIV and other STDs by using a condom if they do have sex. A condom is a stretchy piece of rubber that fits over the penis like a glove and prevents germs passing between each person.”*
- \* *We are talking about HIV now, even though kids your age almost never get HIV, so you can learn what you need to know when you are older to keep yourself healthy.”*

**Grade 7**  
**Lesson 1****HIV and Other STDs**

Activity 2 alternative

**HIV Overview Lecture**

## Basic HIV / AIDS Facts

- HIV is the virus that causes AIDS.
- HIV stands for Human Immunodeficiency Virus.
- AIDS stands for Acquired Immune Deficiency Syndrome.
- HIV is a very serious illness that can cause death.
- People usually get HIV from having sex or sharing needles for drugs with someone else who has HIV.
- If a woman has HIV when she is pregnant sometimes the baby is born with HIV.
- If a person has HIV, the HIV virus is in their blood, semen, vaginal fluids and breast milk.
- A person can't get HIV from hugging or kissing or playing with someone who has it. They can't get it from a mosquito bite or from a toilet seat.
- Kids your age almost never get HIV, but it's important to know how to keep yourself healthy as you get older.

Activity 3

HIV and STD Sentence Stems

**Time:** 20 minutes (30 minutes, if you do HIV lecture instead of DVD)

**Materials:**

- \* 3 sticky notes per student
- \* 3 pieces of newsprint per class
- \* HIV/AIDS Family Newsletter, 1 per student

1. Explain that this activity will give students a chance to learn more about the information covered in the video. It will focus on both HIV and other types of STDs.
2. Post 3 pieces of newsprint around the room with one of the following sentence stems on each one.
  - \* A person can tell if they have HIV or other STDs by...
  - \* A person can get HIV or other STDs by...
  - \* A person can protect themselves from HIV and other STDs by...
3. Give each student at least 3 sticky notes. Have them finish each one of the sentences on a separate sticky note and post it on the newsprint. You can also give them the option of writing a question on their sticky note. Tell them it is okay to guess.
4. Bring the 3 completed newspapers to the front of the room.
5. Debrief the newspapers one at a time by reading the responses, acknowledging how much the students already know about HIV and other STDs, and clarifying any misconceptions. Be sure to focus on the following key concepts.

**Key concepts for “A person can tell if they have HIV or other STDs by...”**

- \* The only way to know if you have HIV or other STDs is to get tested.
- \* You can't tell if someone has HIV or other STDs by looking at them.
- \* There are many people who have HIV or other STDs but don't know they have them.

Activity 3

HIV and STD Sentence Stems cont.

Key concepts for “A person can get HIV or other STDs by...”

- \* HIV is a type of STD.
- \* An STD is an illness that people get from having sex with someone who already has it.
- \* Some STDs, including HIV, are spread by sharing needles.
- \* Some STDs, including HIV, are spread from mother to baby, through pregnancy, childbirth or breastfeeding.
- \* The most common way to get an STD is by having unprotected sex with someone who already has an STD.
- \* People cannot get HIV or other STDs from casual contact like holding hands, sharing drinks, or kissing.

Teacher Note: If it comes up on the newsprint, dispel the myth that only gay people are at risk for HIV. You might say: *“Straight men and women, gay men, and lesbians can all get HIV. It doesn’t matter what a person’s sexual orientation is. If one person has sex without a condom with another person who has HIV, they can get HIV.”*

Key concepts for “A person can protect themselves from HIV and other STDs by...”

- \* You can prevent getting HIV and other STDs.
- \* People can prevent getting HIV and other STDs by not having sex.
- \* People can prevent getting HIV and other STDs by using a condom if they do have sex.
- \* People can prevent getting HIV and other STDs by not sharing needles.

6. Conclude the lesson by restating the main points and encouraging students to share the family newsletter at home.

*“We covered a lot of material about HIV and other STDs today. The movie and sticky note activity both showed that people can prevent getting HIV and other STDs by not having sex. Considering that most high school students don’t have sex, abstinence is an important way that teens protect themselves from HIV and other STDs. Tomorrow we’re going to look more closely at the skills involved in being successful with abstinence.”*

## Grade 7 Lesson 1

## HIV and Other STDs

### FAMILY NEWSLETTER Working Together to Keep Our Youth Healthy

You have probably asked yourself, “What should my child know about HIV and AIDS?” Well, they have probably heard something about AIDS on television or from a friend. They know that HIV and AIDS exist, probably have many questions, and have maybe received some wrong information.

Your student has been learning about HIV and AIDS at school since the fifth grade. As they get older, this information may take on new meaning for them.

Today in class, your student learned that:

- AIDS is a disease that is caused by a virus called Human Immunodeficiency Virus (HIV).
- HIV damages the immune system when it gets into the body, leading to other diseases and infections.
- HIV is spread by sharing needles and by having sex with a person who has HIV.
- HIV is also spread from mother to baby if a woman has HIV while she is pregnant.
- Kids their age don't usually get HIV, because having sex and sharing needles are not things that kids their age usually do.
- There are important things they can do to protect themselves from getting HIV in the future, like remaining abstinent or using condoms if they do have sex.
- HIV is a very serious illness that can cause death, although people who have HIV can live for a long time with the help of a doctor

We believe this information will help your student understand the facts about HIV and AIDS. They will know what to do to protect themselves from infection as they get older.

Continued on page 2

## Grade 7 Lesson 1

## HIV and Other STDs

### FAMILY NEWSLETTER (continued)

#### Talking With Your Student

Your student may seek reassurance that he or she is not going to get HIV. We have discussed the fact that kids their age almost never get HIV. You may want to tell them the following information to help them understand.

When young children have HIV, it is usually because they were born with it, because their mother had HIV while she was pregnant.

In the past, another other way children have gotten HIV is from blood that was contaminated with the virus. Since 1985, the blood supply in this country is very safe, and people no longer get HIV from blood transfusions in the U.S.

Now that your student is getting older, you may also want to discuss with them the two main ways people get HIV: sharing needles and sexual intercourse without a condom. Straight men and women, gay men, and lesbians can all get HIV. It doesn't matter what a person's sexual orientation is. If one person has sex without a condom with another person who has HIV, they can get HIV.

Sexual intercourse without a condom is the main way HIV is spread. We encourage you to communicate your family values and beliefs about sexual intercourse and condoms to your child. Abstinence from sexual intercourse and injection drug use is the most effective way to prevent the spread of HIV. Condoms are highly effective for people who are having sex.

#### Answering Questions about HIV and AIDS

We have encouraged your student to ask you if he or she has more questions about HIV and AIDS. The most important thing you can do is to share your beliefs and values regarding the behaviors that spread HIV. It is okay if you do not know much about HIV. They will learn that information at school.

When your student comes to you with a question, you might find it helpful to keep the following points in mind as you answer them.

- ◆ Listen carefully to the question.
- ◆ Give a simple and honest answer.
- ◆ Check to make sure your child understood the answer.

- ◆ Remember that it is okay to take a “time out” to think about your answer, or to say, “I don't know but I'll try to help you find the answer.”

There are many people who can help you get more information. Here are a few resources you might like to contact:

- \* Your local school
- \* Your local health department
- \* Advocates for Youth:  
[www.advocatesforyouth.org/hiv-home](http://www.advocatesforyouth.org/hiv-home)

*Reproduced and modified with permission of the Educational Materials Center, Central Michigan University, (1995) [www.emc.cmich.edu](http://www.emc.cmich.edu).*

#### 7/8 KNOW

*HIV/STD Prevention Curriculum, rev. 2014  
Office of Superintendent of Public Instruction*



## Grade 7 Lesson 2

# Abstinence and Refusal Skills

### Overview

The purpose of this lesson is to review basic information about abstinence, increase students' motivation to avoid sex, and promote a positive attitude about abstinence. It is also to provide students with refusal skills and give students an opportunity to practice these skills.

### Laws & Standards

The 7/8 KNOW Curriculum, 2014 edition, complies with the AIDS Omnibus Act and partially fulfills the Healthy Youth Act (2008). It aligns with the WA State Health and Fitness Standards (2008), the WA State Guidelines for Sexual Health Information and Disease Prevention (2005), the National Sexuality Education Standards (2011), and current research on the prevention of HIV and other STDs. Please see the introduction for more details, including information on how to fully comply with the Healthy Youth Act.

### Objectives

The students will:

- \* Understand a basic definition of abstinence
- \* Effectively use refusal skills

# Grade 7

## Lesson 2

# Abstinence and Refusal Skills

### Agenda

Time: 50 minutes

1. Definition of abstinence (5 min)
2. Refusal skills (15 min)
3. Refusal skills scenarios (10 min)
4. Small group scenario practice (20 min)

Materials:

- \* Refusal Skills Visual, 1 copy for document camera or projector
- \* Scenario A: Juanita and David, 2 copies for large group demonstration
- \* 1 copy per student of the following handouts:
  - \* Refusal Skills Checklist
  - \* Scenario B: Juanita and David
  - \* Scenario C: Aliyah and Jonathan
  - \* Scenario D: Carlos and Samuel
  - \* Scenario E: Jermaine and Mei
- \* The characters' names in the scenarios reflect the population of WA State. If needed, please look up pronunciation in advance.

Grade 7  
Lesson 2

## Abstinence and Refusal Skills

### Activity 1

### Definition of Abstinence

Time: 5 minutes

1. Introduce and define abstinence.

*“Today we are going to discuss abstinence. Can someone define abstinence for me?”* (Allow students time to give their own definitions of abstinence and validate them.)

*“People have a lot of personal definitions of abstinence. The definition we are going to use in this class is that abstinence means not having vaginal, anal or oral sex. Vaginal sex is when a penis goes in someone’s vagina, anal sex is when a penis goes in someone’s anus (butt), and oral sex is when one person’s mouth goes on another person’s penis or vagina.”*

*“The reason that we are including all of these types of sex in our in our definition of abstinence is because abstinence is the only 100% effective way to not get pregnant and not get an STD. Since people can get STDs from anal, oral and vaginal sex and can get pregnant from vaginal sex, we are going to include all of these types of sex in our definition of abstinence.”*

2. Discuss how common abstinence is among teens.

*“The overwhelming majority of middle school students are abstinent. But did you also know that most high school students are also abstinent? Why do you think that it’s important to know this?”*

Allow students time to respond.

*“Right. If you were to walk into high school on the first day of school and think that most high school students were having sex, how would that feel?”*

Grade 7  
Lesson 2

## Abstinence and Refusal Skills

### Activity 1 cont.

#### Definition of Abstinence

Allow students time to respond.

*“It’s important to know that most middle and high school students are not having sex so that you don’t feel pressured to have sex.”*

*“Abstinence is something that teens and adults choose at different times in their lives. People of every sexual orientation, including gay, lesbian, bisexual and straight people, choose abstinence. And, people choose abstinence at different points in their life, even after they’ve already had sex.”*

### Activity 2

#### Refusal Skills

**Time:** 15 minutes

**Materials:**

Refusal Skills Visual, 1 copy for document camera or projector

1. Introduce refusal skills.

*“Even though the overwhelming majority of 7th graders are not having sex, and many of you are not experiencing crushes or sexual feelings at this age, we also know that most people will choose to have sex in their lifetime.”*

*“Everyone can make the decision not to have sex, or to be abstinent, when they are older. Once we make this decision, it’s important to be able to communicate our decision to the person who we are dating. It’s also really helpful to keep ourselves out of situations where we might be tempted to have sex. For example, sometimes being home alone without any parents can make it harder to stick to a decision of abstinence.”*

Grade 7  
Lesson 2

## Abstinence and Refusal Skills

Activity 2 cont.

### Refusal Skills

2. Brainstorm ways to say no clearly.

*“As people start having sexual feelings, they still might make the choice not to have sex, even when they are older. Sometimes, one person wants to have sex and the other person doesn’t.”*

*“What are some things that a person could do to make it clear that they mean ‘no’?”*

Be sure to include the following points:

- \* Saying no
- \* Clear voice
- \* Matching what we are saying with our body language

3. Discuss that force and coercion are always wrong. Explain that it is never a person’s fault if someone forces or coerces them into doing something sexually that they do not want to do.

*“I want to be really clear that it is always the other person’s responsibility to listen to us when we say no or make it clear that we do not want to have sex or engage in any kind of sexual touch. It is never ok to force or coerce someone into having sex or into any kind of sexual touch.”*

*“Coercion is manipulating someone into doing something that they do not want to do – like having sex or engaging in sexual touch. If someone is forced or coerced into having sex or a sexual act, it is never their fault. It is always the fault of the person who forced or coerced them, and it is always wrong.”*

*“Unfortunately, people do not always respond well to no or want to hear no. There are times when people are asking or pressuring us to do something and we need to say no very clearly and leave the situation. At these times, we also might need to tell an adult or ask an adult or friend for help.”*

Activity 2 cont.

Refusal Skills

4. Discuss that people need to leave the situation or get help if someone is not respecting their “no”.

*“In order to be abstinent, there might be times when we will have to refuse sex. Sometimes this is easy to do, and sometimes this can feel difficult to do. Either way something is always easier to do once we have practiced it.”*

*“For the purposes of this lesson, we want to assume that we like the person who we are saying no to and want to continue hanging out with them, but we do not want to have sex with them, which is what they will be proposing.”*

5. Show students the Refusal Skills Visuals, read the refusal skills steps, and give a brief explanation of each step.

*Refusal Skills Steps:*

1. **Say no.**

*“Clearly state that you do not want to have sex.”*

2. **Explain why.**

*“For example, I don’t want to get pregnant or I’m not ready to have sex.”*

3. **Suggest an alternative.**

*“Suggest something else that you two can do instead. For example, I think that we should go outside now.”*

4. **Leave if you need or want to.**

*“Like we discussed earlier, sometimes the other person is not respecting our ‘no’. At that point we might need to get out of the situation or get help from someone else.”*

Grade **7**  
Lesson 2

Abstinence and Refusal Skills

Activity 2

Refusal Skills

1. Say no.
2. Explain why.
3. Suggest an alternative.
4. Leave if you need or want to.

## Grade 7 Lesson 2

# Abstinence and Refusal Skills

### Activity 3

### Refusal Skills Scenarios

Time: 10 minutes

Materials:

- \* Scenario A: Juanita and David, 2 copies, for large group demonstration
- \* Scenario B: Juanita and David (partially scripted), 1 per student

1. Introduce scenarios.

*“Now we will have a chance to practice the refusal skills through a series of scenarios. The first scenario we will do as a large class. It is scripted and two volunteers will need to read the script.”*

2. First, do large group demonstration of refusal skills using Scenario A (Juanita and David, fully scripted).
  - \* Ask for two volunteers to read the script out loud to the class, with one person reading as David and another reading as Juanita.
  - \* The purpose is to model an effective use of refusal skills.
3. Next, have students practice refusal skills by writing new lines for Juanita in Scenario B (Juanita and David, partially scripted).
  - \* Hand out Scenario B. Have each student fill in Juanita’s part. Remind the class that the person playing Juanita likes David and wants to continue hanging out with him, but does not want to have sex.
  - \* After they fill in Juanita’s script, ask for one volunteer to read David’s part and a second volunteer to read Juanita’s. As you go through Scenario B, ask if anyone else wants to offer their responses as well.



## Grade 7 Lesson 2

# Abstinence and Refusal Skills

### Activity 4

### Small Group Scenario Practice

Time: 20 minutes

Materials: One copy per student of the following handouts:

- \* Refusal Skills Checklist
- \* Scenario C: Aliyah and Jonathan
- \* Scenario D: Carlos and Samuel
- \* Scenario E: Jermaine and Mei

1. Introduce the small group scenario practice: “Now we are all going to get a chance to practice using refusal skills by doing 3 more scenarios in small groups.”
2. Pass out and review Refusal Skills Checklist.
3. Break the class into small groups with three people per group. Each small group will practice with all three scenarios (Scenarios C, D and E). For each scenario, one person will be the asker, one person will be the refuser, and one person will fill out the Refusal Skills Checklist while they observe.
4. Remind the class that the person playing the refuser likes the asker and wants to continue hanging out with them, even though they want to say no to them.
5. Give students 2 minutes for each scenario. After completing each scenario, everyone will switch roles and do another scenario, so that each person gets the opportunity to be in each role. The purpose is for everyone to practice refusal skills and to hear good refusal skills.
6. Debrief as a large group between each scenario. Ask volunteers from a few of the groups to give examples of the refusal skills that they came up with or observed. Validate all of the refusal language. Ask what kind of body language would help reinforce the refusal.
7. Conclude the lesson: *“Great job! You were all so clear and said no really well. Saying no is such an important skill to learn. It’s great for us to know how to do this every day, and the more we practice the easier it gets. It’s also an important skill for us to know when we get older so that we can remain abstinent.”*

#### KNOW

HIV/STD Prevention Curriculum  
Office of Superintendent of Public Instruction

Abstinence and Refusal Skills  
Grade 7 Lesson 2

Grade 7  
Lesson 2

Abstinence and Refusal Skills

Activity 4

Refusal Skills Scenario Check List

Directions:

For each scenario, check off the refusal skills that you see the actors using.

	Scenario B Juanita and David	Scenario C Aliyah and Jonathan	Scenario D Carlos and Samuel	Scenario E Jermaine and Mei
Says NO (or states that they do not want to have sex).	_____	_____	_____	_____
Is clear.	_____	_____ <input checked="" type="checkbox"/>	_____	_____
Explains why.	_____	_____	_____	_____
Offers an alternative activity.	_____	_____	_____	_____

**Grade 7**  
**Lesson 2****Abstinence and Refusal Skills****Scenario A****Juanita and David****Class Demonstration**

Juanita and David have been dating for three weeks. They are hanging out at David's house with his mom and little brother, Tommy. Unexpectedly, Tommy gets sick and starts throwing up so their mom takes him to the doctor. Juanita and David find themselves alone in the house. They decide to use their time to kiss on the couch.

**David:** I really like you. I know that we already decided not to have sex, but I just didn't think we would ever really get this chance. I think that we should do it. You're so hot.

**Juanita:** I like you, too, and it's cool hanging out. And, I want to kiss you, but I do not want to have sex.

**David:** But this is our one chance. When are we going to get another chance to be alone again? Plus, aren't you having fun?

**Juanita:** David, I don't want to have sex. I'm not ready to have sex and I don't want to get pregnant.

**David:** Aw man, I thought that you liked me. This would be a great way to say how much we love each other.

**Juanita:** David, the answer is no. I like you too, and I'm not ready to have sex. I think that we should go outside to hang out so we don't get more tempted.

**David:** Ok. You're right. I respect your decision.

**Grade 7**  
**Lesson 2****Abstinence and Refusal Skills****Scenario B****Juanita and David****Large Group Practice**

Juanita and David have been dating for three weeks. They are hanging out at David's house with his mom and little brother, Tommy. Unexpectedly, Tommy gets sick and starts throwing up so their mom takes him to the doctor. Juanita and David find themselves alone in the house. They move to the couch and start to kiss.

**David:** I really like you. I know that we already decided not to have sex, but I just didn't think we would ever really get this chance. I think that we should do it. You're so hot.

**Juanita:** \_\_\_\_\_  
\_\_\_\_\_

**David:** But this is our one chance. When are we going to get another chance to be alone again? Plus, aren't you having fun?

**Juanita:** \_\_\_\_\_  
\_\_\_\_\_

**David:** Aw man, I thought that you liked me. This would be a great way to express how much we love each other.

**Juanita:** \_\_\_\_\_  
\_\_\_\_\_

**David:** Ok. You're right. I respect your decision.

**Grade 7**  
**Lesson 2****Abstinence and Refusal Skills****Scenario C****Aliyah and Jonathan****Small Group Practice**

Aliyah and Jonathan go to the same school and both have crushes on each other. However, Jonathan's parents don't allow him to date. They think that he is too young to date and want him to stay focused on school. Aliyah asked Jonathan to go with her to the upcoming dance. Jonathan really likes Aliyah, but has to say no since he's not allowed to date.

**Aliyah:** Hey Jonathan. I'm glad we got this second together after class to talk. I wanted to see if you wanted to ask me to the dance Friday night?

**Jonathan:** \_\_\_\_\_

**Aliyah:** Your parents never have to find out. Just tell them you're going to a friend's house or something.

**Jonathan:** \_\_\_\_\_

**Aliyah:** Don't you want to go with me? Come on, we'd have a lot of fun.

**Jonathan:** \_\_\_\_\_

**Aliyah:** Ok. You're right. I respect that.

**Grade 7  
Lesson 2****Abstinence and Refusal Skills****Scenario D****Carlos and Samuel****Small Group Practice**

Carlos and Samuel have been best friends for a couple of years. Samuel can't believe that Carlos won't ask out Alessandra. Carlos likes Alessandra, but he isn't ready to have a girlfriend. Carlos doesn't want to tell Samuel this because he feels embarrassed about it and doesn't want Samuel to make fun of him. Samuel keeps pressuring Carlos to ask her out. In this scenario, Carlos will not talk bad about Alessandra to Samuel in order to get Samuel to leave him alone because he likes Alessandra.

**Samuel:** Hey man, how's it going? I saw Alessandra looking at you again at lunch today. Why aren't you asking her to hang out?

**Carlos:** \_\_\_\_\_

**Samuel:** That's ridiculous. She obviously likes you and you like her. What are you waiting for? Ask her out.

**Carlos:** \_\_\_\_\_

**Samuel:** If you don't ask her out, someone else will. Then you're going to be real sad. You can't just keep waiting. Asking her out.

**Carlos:** \_\_\_\_\_

**Samuel:** Ok, you're right. I'm sorry. I respect that.

**Grade 7  
Lesson 2****Abstinence and Refusal Skills****Scenario E****Jermaine and Mei****Small Group Practice**

Adisa and Mei are seventh grade girls who live next door to each other. Adisa invited Mei over to hang out on a Friday night, and Adisa's older brother had some friends over. Mei didn't know that the older teens would be there and that there would be drinking. Jermaine, a boy from school who is in the 8th grade is also at Adisa's house and has had a couple of beers. Jermaine asks Mei to go upstairs with him so they can go somewhere quieter to talk. Mei thinks Jermaine is really cute and likes him, but doesn't like that he's been drinking and doesn't want to go upstairs with him or anywhere alone.

**Jermaine:** Hey Mei. I'm so glad to see you. I was hoping that you would be here. I've been really wanting to hang out with you. Man, it's so loud here. Let's go upstairs where it's quieter so we can talk.

**Mei:** \_\_\_\_\_

**Jermaine:** I respect that girl, but it's so loud. I can barely hear you. Let's go upstairs so we can be alone.

**Mei:** \_\_\_\_\_

**Jermaine:** You are so pretty. I'm so glad to be hanging out with you. I wish I could hear you better, though. Let's go upstairs so we can talk easier.

**Mei:** \_\_\_\_\_

**Jermaine:** I respect that. You're right.

### Overview

The purpose of this lesson is to give students the opportunity to practice identifying risky behaviors and protective behaviors for HIV and other STDs. It also reinforces positive attitudes and positive peer norms for protective behaviors, which research shows is a critical aspect of HIV and STD prevention.

### Laws & Standards

The 7/8 KNOW Curriculum, 2014 edition, complies with the AIDS Omnibus Act and partially fulfills the Healthy Youth Act (2008). It aligns with the WA State Health and Fitness Standards (2008), the WA State Guidelines for Sexual Health Information and Disease Prevention (2005), the National Sexuality Education Standards (2011), and current research on the prevention of HIV and other STDs. Please see the introduction for more details, including information on how to fully comply with the Healthy Youth Act.

### Objectives

The students will:

- \* Identify behaviors that put a person at risk for getting HIV and other STDs
- \* Identify behaviors that provide protection against getting HIV and other STDs
- \* Identify positive attributes of behaviors that provide protection against HIV and other STDs



Activities

Time: 50 minutes

1. True/False Risk Worksheet (35 min)
2. Protection Brainstorm (15 min)

Materials:

- \* True/False Worksheet for each student

Activity 1

True/False Risk Worksheet

Time: 35 minutes (10 minutes to complete, 25 minutes to discuss)

Materials: True/False Worksheet for each student

1. Introduce the topic.

*“Today we are focusing on risk. We’re going to talk about which behaviors put a person at risk for getting HIV and other STDs. And even more importantly, we’ll talk about which behaviors give the most protection.”*

2. Hand out True/False Risk Worksheet. Allow students to answer worksheet in pairs.

3. After pairs complete the worksheet, review answers as a class.

4. With each question, clarify misinformation and reinforce key concepts, using the Answer Key.

# Grade 7 Lesson 3

## Risk Recognition

### Activity 1

### True/False Risk Worksheet Answer Key

Using the Answer Key:

It is important to help the class stay focused on the primary ways that people are at risk of getting HIV and other STDs: sex without a condom, and sharing injection drugs. Spending time on theoretical transmission routes for which there have been no documented cases, such as blood brother/sister, helping an injured classmate, piercing friends' ears, etc., distract students from the ways that teens and adults get infected. Instead, redirect them to key concepts.

	Question	Answer	Teacher Talking Points
1.	It is risky to hug someone who has HIV.	False	People cannot get HIV from the skin, sweat or saliva of someone who has HIV.
2.	It is risky to kiss someone who has HIV.	False	People cannot get HIV from skin, sweat or saliva of someone who has HIV. (There have been a few cases of HIV from deep-mouth kissing when one person has HIV and is bleeding heavily from their gums.)
3.	It is risky to play sports with someone who has HIV or other STDs.	False	No one has ever caught HIV or another STD from sports, even if someone was injured.
4.	The best ways to protect yourself against HIV and other STDs is to not have sex and not inject drugs.	True	People can prevent getting HIV and other STDs by not having sex and by not sharing needles.
5.	It is risky to donate blood.	False	Giving blood is safe.
6.	It is risky to receive donated blood.	False	The blood supply is very safe. It is tested for HIV.
7.	It is risky for a person to put a needle in their body after it has been in someone else's body.	True	Some STDs, including HIV, are spread by sharing needles. After one person uses a needle, some of their blood is left in the needle, even though you can't see it.

**Grade 7  
Lesson 3**

**Risk Recognition**

**Activity 1**

**True/False Risk Worksheet Answer Key cont.**

	<b>Question</b>	<b>Answer</b>	<b>Teacher Talking Points</b>
8.	It is risky to have sex without using a condom.	True	The most common way to get an STD, including HIV, is by having sex without a condom with someone who already has an STD.
9.	It is risky to have sex without using a condom, even if the person has no symptoms of an STD.	True	Most people who have an STD, including HIV, do not have any symptoms.
10.	Using a condom makes sex much safer.	True	Condoms are the best way for a person who has sex to protect themselves from HIV and other STDs.
11.	Using a condom makes sex much safer, even if the other person has HIV.	True	Condoms provide a huge amount of protection, as an important research study shows. All of the couples in the study had one partner with HIV and used condoms every time they had sex. Nobody got HIV from their partner.
12.	If a young teen dates an older teen, they are more at risk of getting an STD.	True	Teens who date someone much older are more likely to have sex (in general) and to have sex without a condom. The older boyfriend or girlfriend has more influence in the relationship and is also more likely to have an STD already. Depending on how much older they are, it might also be against the law for them to have sexual contact.
13.	A person can choose abstinence at any point in their life.	True	There are times in everyone's life when abstaining from sex is the healthiest choice. Both gay and straight people choose abstinence at different points in their lives, as teens and as adults.
14.	Choosing abstinence means a person does not have to worry about getting HIV or other STDs from sex.	True	Abstinence is a 100% effective way to not get an STD from sex.
15.	A person who abstains from sex can still get HIV.	True	HIV is also spread by sharing needles with someone who has HIV.

Activity 2

Protection Brainstorm

Time: 15 minutes

The purpose of this activity is to develop positive attitudes about the behaviors that protect against HIV (abstinence and condoms) by doing a brainstorm about the benefits of each. The focus is not skill-building.

1. Introduce the activity.

*“One of the ideas that we saw on the worksheet - that keeps coming up in this unit - is that you can prevent getting HIV and other STDs. We’re going to spend a little time focusing on two of the very best ways to prevent getting HIV and other STDs: abstaining from sex and using condoms.”*

2. Do a brief classroom brainstorm of all the good things your students have ever heard, or could imagine, about abstaining from sex. It is okay if they use humor or come up with far-fetched benefits.

3. During the brainstorm, write the list on the board. Title it “Benefits of Abstinence”. If students come up with drawbacks, acknowledge them but do not add them to the list.

4. Add benefits of abstinence that students miss. Keep the list posted for the rest of the class.

Benefits:

- No risk of HIV and other STDs
- No risk of pregnancy
- Free
- Effective for a person of any age
- Effective for a person of any sexual orientation
- Effective whether or not a person has had sex before
- Helps protect a person’s health and future goals
- Enhances responsibility and mutual respect between partners

Activity 2

Protection Brainstorm cont.

5. Do a second brief classroom brainstorm, this time of all the good things your students have ever heard, or could imagine, about using condoms. Like before, it is okay if they use humor or come up with far-fetched benefits.
6. During the brainstorm, write the list on the board. Title it “Benefits of Condoms.” If students come up with drawbacks, acknowledge them but do not add them to the list.
7. Ask the class if they see anything on the “benefits of abstinence” list that would also work for the “benefits of condoms” list? Add them. (There will be a lot in common.)
8. Add any benefits of condoms that students miss.

Benefits:

- Prevents HIV and other STDs
- Prevents pregnancy
- Lots of choices
- Easy to use
- Easy to get
- No prescription needed
- Cheap (Free at some clinics)
- Helps protect a person’s health and future goals
- Enhances responsibility and mutual respect between partners

9. Conclude the lesson by discussing why people are so successful with abstinence and condoms, based on the lists of benefits.

*“These lists have a lot of great benefits of abstinence and condoms! When you look at the lists, do you see any benefits that might explain why so many people choose abstinence and use condoms at different times in their lives? (Any benefit they give is fine.) What do you see that might explain why teens, in particular, are so successful being abstinent and using condoms? (Again, any benefit is fine.) Your lists give a lot of insight into why people have so much success protecting themselves from HIV and other STDs.”*

Grade 7  
Lesson 3

Risk Recognition

True/False Risk Worksheet

Read each of the following statements about the risk of getting HIV and other STDs. Decide whether it is true or false.

- \_\_\_ 1. It is risky to hug someone who has HIV.
- \_\_\_ 2. It is risky to kiss someone who has HIV.
- \_\_\_ 3. It is risky to play sports with someone who has HIV.
- \_\_\_ 4. The best ways to protect yourself against HIV and other STDs is to not have sex and not inject drugs.
- \_\_\_ 5. It is risky to donate blood.
- \_\_\_ 6. It is risky to receive donated blood.
- \_\_\_ 7. It is risky for a person to put a needle in their body after it has been in someone else's body.
- \_\_\_ 8. It is risky to have sex without using a condom.
- \_\_\_ 9. It is risky to have sex without using a condom, even if the person has no STD symptoms.
- \_\_\_ 10. Using a condom makes sex much safer.
- \_\_\_ 11. Using a condom makes sex much safer, even if the other person has HIV.
- \_\_\_ 12. If a young teen dates an older teen, they are more at risk of getting an STD.
- \_\_\_ 13. A person can choose abstinence at any point in their life.
- \_\_\_ 14. Choosing abstinence means a person does not have to worry about getting HIV or other STDs from sex.
- \_\_\_ 15. A person who abstains from sex can still get HIV.

# Grade 8 Lesson 1

## Review of HIV and Other STDs

### Overview

The purpose of this lesson is to review basic information about HIV and how it is transmitted. The game show format with classroom competition is intended to meet the learning needs of students who have already had several lessons on HIV since 5th grade, as well as those who are learning about HIV and other STDs for the first time.



**NOTE:** Teachers need to be prepared to respond to unexpected questions from students regarding sexual health, even though they are not part of the planned presentation. See introductory section on tips for answering different types of questions.

### Laws & Standards

The 7/8 KNOW Curriculum, 2014 edition, complies with the AIDS Omnibus Act and partially fulfills the Healthy Youth Act (2008). It aligns with the WA State Health and Fitness Standards (2008), the WA State Guidelines for Sexual Health Information and Disease Prevention (2005), the National Sexuality Education Standards (2011), and current research on the prevention of HIV and other STDs. Please see the introduction for more details, including information on how to fully comply with the Healthy Youth Act.

### Objectives

The students will:

- \* Understand basic facts about HIV and STDs
- \* Identify how HIV and STDs are transmitted
- \* Identify how HIV and STDs can be prevented



Grade 8  
Lesson 1

Review of HIV and Other STDs

Agenda

Time: 50 minutes

1. Introduction and ground rules (10 min)
2. Game Show - HIV and Other STDs (35 min)
3. Conclusion and Family Homework (5 min)

Materials:

- \* Bell or other noisemaker (optional)
- \* Family Homework, 1 per student

# Grade 8

## Lesson 1

# Review of HIV and Other STDs

## Activity 1

## Introduction and Ground Rules

Time: 10 minutes

1. Introduce the topic of HIV and other STDs.

*“Today we’re going to learn about HIV and other sexually transmitted diseases. Some of you have been learning about HIV in past classes or at home, and for some of you, this will be a new topic. HIV is a very serious illness that can cause death. However, many people live a long time with HIV with the help of a doctor. We are going to learn a lot about HIV and other STDs, like how people get this illness, and most importantly, how people can protect themselves. This is an important subject, and I know we’re all going to learn a lot in this unit.”*

2. Share ground rules with the class. Write them down as you cover each one.

*“Even though we already have rules for classroom behavior, I’m going to go over class rules especially for this topic. I want to help everyone feel comfortable asking questions and participating in the lessons. I’m going to start by giving you my ideas, and then I’ll ask if you have any others to add.”*

- Ask questions. (Tell the class you will do your best to answer all questions or find the answer, if you don’t know it.)
- No put-downs.
- It is okay to disagree.
- Listen and be respectful of others’ opinions.
- Protect people’s privacy. For example, questions about friends and family members should not include their names or identities. Instead, say “Someone I know…” or “Someone I heard of…”

3. Ask the class if they have any ground rules to add. Add them to the list.
4. Ask for a raise of hands to show agreement with the ground rules.

# Grade 8

## Lesson 1

# Review of HIV and Other STDs

## Activity 2

## Game Show

Time: 35 minutes

Materials: Bell or other noisemaker (optional)

- \* Divide the class into 4 teams. Try to mix ability levels.
- \* Teacher acts as game moderator.
- \* Have teams arranged so they will be able to quietly discuss the answer to each question among themselves.
- \* Determine the order in which teams will answer the questions (1<sup>st</sup>, 2<sup>nd</sup>, 3<sup>rd</sup>, 4<sup>th</sup>). Have teams select classroom-appropriate sexual health names (e.g. HIV Fighters).
- \* Using the questions and answers on pages XYZ, read a question to the first team. They have 60 seconds to discuss and answer the question. They can only give one answer.
- \* During this time, all other teams should also quietly discuss the question.
- \* If the first team answers correctly, they get 10 points. If they answer incorrectly, they get no points, and the other teams will get a chance to answer. If another team answers correctly, they get 10 points.
- \* Teams that answer correctly can try to answer the BONUS POINT QUESTION for 10 additional points. If you have a bell or other noisemaker, use it to indicate a BONUS POINT QUESTION.
- \* Follow the team order for answering questions.
  - If the 1<sup>st</sup> team answers incorrectly, the 2<sup>nd</sup> can try it, followed by the 3<sup>rd</sup>, then 4<sup>th</sup>.
  - If the 2<sup>nd</sup> team answers incorrectly, the 3<sup>rd</sup> team can try it, followed by the 4<sup>th</sup>, then 1<sup>st</sup>.
  - If the 3<sup>rd</sup> team answers incorrectly, the 4<sup>th</sup> team can try it, followed by the 1<sup>st</sup>, then 2<sup>nd</sup>.
  - If the 4<sup>th</sup> team answers incorrectly, the 1<sup>st</sup> team can try it, followed by the 2<sup>nd</sup>, then 3<sup>rd</sup>.

## Grade 8 Lesson 1

# Review of HIV and Other STDs

### Activity 2 cont.

#### Game Show

- \* Repeat this process, with each team taking turns trying to answer the question first.
- \* With each question, acknowledge how much the students already know, clarify misinformation, and cover the main points listed under each answer.
- \* Continue the game until time is up. Congratulate the winning team.

### Activity 3

#### Conclusion and Family Homework

Time: 5 minutes

Materials: Family Homework, 1 per student

#### 1. Assign Family Homework.

- \* Students have two options for getting credit.
- \* Option 1: Discuss the family questions with a trusted adult. The trusted adult can be a parent, guardian, another family member, their religious leader, etc. You will not be asking them what they talked about. They get credit by turning in the signed confirmation slip.
- \* Option 2: If anyone decides not to do the family homework, for whatever reason, there are individual questions that they can answer on paper and turn in for the same credit.

#### 2. Conclude the lesson with key concepts.

*“As you all noticed, teens CAN prevent getting HIV and other STDs. Most teens prevent HIV and other STDs by not having sex. And those who do have sex, prevent it by successfully using condoms. We’ll be talking more about these two topics over the next few days.”*

Grade 8  
Lesson 1

Review of HIV and Other STDs

Activity 2 cont.

Game Show Questions and Answer Key

	Question	Answer	Teacher talking points (in italics) and teacher notes
1.	What does HIV stand for?	Human Immunodeficiency Virus	<i>“Immunodeficiency means the body has a hard time fighting off diseases and keeping itself healthy.”</i>
2.	When someone has HIV for a long time and gets sick from it, what illness is it called?	AIDS or Acquired Immune Deficiency Syndrome	<i>“HIV is a very serious illness that can cause death.”</i>
3.	Which of the following groups of people can get HIV: straight men and women, gay men and lesbian women, bisexual women and men?	All of them	<i>“Straight men and women, gay men and lesbians, and bisexual women and men can all get HIV. It doesn’t matter what a person’s sexual orientation is. If one person has sex without a condom with another person who has HIV, they can get HIV.”</i>
4.	What does STD stand for?	Sexually transmitted disease	<i>“HIV is a type of STD, but there are also many other STDs.”</i>
	BONUS POINT QUESTION: Name one STD besides HIV.	Continue awarding bonus points until the teams run out of correct answers.  POSSIBLE BONUS POINT ANSWERS: Chlamydia, Gonorrhea Syphilis, Herpes, HPV Hepatitis B, Hepatitis C Crabs	Note: It is not necessary for people to know the names or symptoms for all STDs in order to protect themselves from STDs.

Grade 8  
Lesson 1

Review of HIV and Other STDs

Activity 2 cont.

Game Show Questions and Answer Key

	Question	Answer	Teacher talking points (in italics) and teacher notes
5.	What is the #1 most common way that STDs are spread?	Having sex with someone who has an STD without using a condom	Note: If they only answer "having sex," be sure to point out the other 2 important parts of the answer: <ul style="list-style-type: none"> <li>• Without a condom</li> <li>• With someone who has an STD</li> </ul>
6.	Name two other ways that STDs, including HIV, are spread.	Sharing needles Mother to baby (during pregnancy, childbirth or breastfeeding)	Note: If students answer with blood-brother/sister, or helping a friend who is bleeding, acknowledge that it is smart not to touch others' blood, but that there have been no cases of HIV spread this way. Reiterate the risks of sex without a condom and sharing needles.
7.	What are the 4 body fluids that someone can get HIV from?	Vaginal fluid, semen, blood, breast milk.	Same note as above.
8.	Can a person get HIV from a mosquito bite?	No	<i>"This may seem similar to sharing a needle, but it is not. No blood remains in the mosquito stinger, so no blood is shared between the people who are bit."</i>
9.	Name three body fluids that cannot spread HIV.	Tears, saliva and sweat	

Grade 8  
Lesson 1

Review of HIV and Other STDs

Activity 2 cont.

Game Show Questions and Answer Key

	Question	Answer	Teacher talking points (in italics) and teacher notes
10.	Is donating blood considered risky for getting HIV?	No	<i>“Donating blood was never a risk for getting HIV. In the past, getting someone else’s donated blood was risky (e.g. for surgery), but now the blood supply is tested and is very safe.”</i>
11.	Are STDs common among teens who have sex?	Yes, very common	<i>“It is very important for teens to protect themselves from HIV and other STDs.”</i>
12.	What is the most effective way to prevent getting HIV or other STDs for people who have sex?	Use a condom every time they have sex.	<i>“A condom is a thin, stretchy piece of latex or polyurethane that fits over a penis like a glove.”</i>
	<b>BONUS POINT QUESTION:</b> What else does a condom protect against besides HIV and other STDs?	<b>BONUS POINT ANSWER:</b> Pregnancy	
13.	What is the definition of the word abstinence?	Not having oral, anal or vaginal sex.	Note: If they only say “not having sex,” prompt them to be more specific.  <i>“The answer ‘virginity’ is incorrect. A person can abstain from sex at any point in their life, whether or not they have had sex already.”</i>

Grade 8  
Lesson 1

Review of HIV and Other STDs

Activity 2 cont.

Game Show Questions and Answer Key

	Question	Answer	Teacher talking points (in italics) and teacher notes
14.	True or false. Most U.S. high school students are abstinent. That is, they do not have sex.	True	<i>"This is surprising to many teens. It often looks like more teens are having sex than they actually are."</i> (Sources: National Survey of Family Growth, Healthy Youth Survey)
	<b>BONUS POINT QUESTION:</b> Why do you think high school students are so successful being abstinent?	Give points to any plausible reason that does not put down abstinence or condoms.	
15.	True or false. Condoms are the most commonly used method of birth control among teens.	True	
	<b>BONUS POINT QUESTION:</b> True or false. Most teen men use a condom the first time they have sex.	<b>BONUS POINT ANSWER:</b> True	<i>"This is surprising to many teens. Teens are excellent condom users."</i> (Source: National Survey of Adolescent Males)
16.	Why are teens so successful using condoms?	Give points to any plausible reason that does not put down condoms or abstinence.	Note: Be sure to add any points that students leave out: <ul style="list-style-type: none"> <li>• Condoms are easy to get.</li> <li>• Condoms are easy to use.</li> <li>• Condoms are cheap or free.</li> <li>• Many teens are thinking about their goals for the future (like graduation).</li> </ul>



Grade 8  
Lesson 1

Review of HIV and Other STDs

Activity 2 cont.

Game Show Questions and Answer Key

	Question	Answer	Teacher talking points (in italics) and teacher notes
17.	What is the only way for a person to find out if they have HIV?	To get an HIV test	<i>"You can't tell if someone has HIV or other STDs by looking at them. There are many people who have HIV or other STDs but don't know they have them."</i>
18.	True or False. Most people who have HIV or another STD can tell from their symptoms.	False	<i>"Most people with HIV or other STDs have no symptoms at all. The only way to know for sure if someone has HIV or another STD is to get tested."</i>
	<b>BONUS POINT QUESTION:</b> How does a person know they need to be tested for STDs?	<b>POSSIBLE BONUS POINT ANSWERS:</b> <ul style="list-style-type: none"> <li>• They had sex with someone without a condom.</li> <li>• They have symptoms, such as burning when they pee, bumps, sores, itching or discharge that seems unusual.</li> </ul>	
19.	Can a high school student request an HIV test without anyone else's permission?	Yes, if they are 14 or over	<i>"In WA, teens 14 and older can get a confidential HIV test without anyone else's permission. The clinic staff is not allowed to share this information, unless they have the clients' permission."</i>
20.	Where can a teen get an HIV test in this community?	See teacher note.	If you don't know your local testing sites, go to <a href="http://www.cdc.gov/hiv">www.cdc.gov/hiv</a> and enter your zip code.

## Family Homework: Talking about HIV

All Family Homework is optional. You may complete the Individual Homework questions instead.

**Purpose:** To share your thoughts with each other about HIV.

### Directions for family homework:

- \* Find a place where the two of you (the student and the trusted adult) can talk privately.
- \* The trusted adult can be a parent, guardian, another family member, their religious leader, etc.
- \* Only share your discussion with others if you give each other permission.
- \* To receive credit, turn in the signed confirmation slip.

### Family homework questions:

1. Adult asks student: What is the single most important or interesting thing you learned today?
2. Student asks adult: If people can live a very long time with HIV, do you think it's still important to try to prevent it? If so, why?

---

### Confirmation Slip Family Homework: Talking About HIV

We have completed the family homework.

Adult signature: \_\_\_\_\_

Student signature: \_\_\_\_\_

Date: \_\_\_\_\_



## Grade 8 Lesson 2

# Abstinence and Refusal Skills

### Overview

The purpose of this lesson is to review basic information about abstinence, increase students' motivation to avoid sex, and promote a positive attitude about abstinence. It is also to provide students with refusal skills and give students an opportunity to practice these skills.

### Laws & Standards

The 7/8 KNOW Curriculum, 2014 edition, complies with the AIDS Omnibus Act and partially fulfills the Healthy Youth Act (2008). It aligns with the WA State Health and Fitness Standards (2008), the WA State Guidelines for Sexual Health Information and Disease Prevention (2005), the National Sexuality Education Standards (2011), and current research on the prevention of HIV and other STDs. Please see the introduction for more details, including information on how to fully comply with the Healthy Youth Act.

### Objectives

The students will:

- \* Understand a basic definition of abstinence
- \* Effectively use refusal skills

# Grade 8

## Lesson 2

# Abstinence and Refusal Skills

## Agenda

Time: 50 minutes

1. Definition of abstinence (5 min)
2. Refusal skills (15 min)
3. Refusal skills scenarios (10 min)
4. Small group scenario practice (20 min)

### Materials:

- \* Refusal Skills Visual, 1 copy for document camera or projector
- \* Scenario A: Levi and Gabrielle, 2 copies for large group demonstration
- \* 1 copy per student of the following handouts:
  - \* Refusal Skills Checklist
  - \* Scenario B: Levi and Gabrielle
  - \* Scenario C: Jackson and Rebecca
  - \* Scenario D: Nathan and Maria
  - \* Scenario E: Tiffany and Genevieve
- \* The characters' names in the scenarios reflect the population of WA State. If needed, please look up pronunciation in advance.

Grade 8  
Lesson 2

## Abstinence and Refusal Skills

### Activity 1

### Definition of Abstinence

Time: 5 minutes

1. Introduce and define abstinence.

*“Today we are going to discuss abstinence. Can someone define abstinence for me?” (Allow students time to give their own definitions of abstinence and validate them.)*

*“People have a lot of personal definitions of abstinence. The definition we are going to use in this class is that abstinence means not having vaginal, anal or oral sex. Vaginal sex is when a penis goes in someone’s vagina, anal sex is when a penis goes in someone’s anus (butt), and oral sex is when one person’s mouth goes on another person’s penis or vagina.”*

*“The reason that we are including all of these types of sex in our definition of abstinence is because abstinence is the only 100% effective way to not get pregnant and not get an STD. Since people can get STDs from anal, oral and vaginal sex and can get pregnant from vaginal sex, we are going to include all of these types of sex in our definition of abstinence.”*

2. Discuss how common abstinence is among teens.

*“The overwhelming majority of middle school students are abstinent. But did you also know that most high school students are also abstinent? Why do you think that it’s important to know this?”*

Allow students time to respond.

*“Right. If you were to walk into high school on the first day of school and think that most high school students were having sex, how would that feel?”*

## Grade 8 Lesson 2

# Abstinence and Refusal Skills

### Activity 1 cont.

### Definition of Abstinence

Allow students time to respond.

*“It’s important to know that most middle and high school students are not having sex so that you don’t feel pressured to have sex.”*

*“Abstinence is something that teens and adults choose at different times in their lives. People of every sexual orientation, including gay, lesbian, bisexual and straight people, choose abstinence. And, people choose abstinence at different points in their life, even after they’ve already had sex.”*

### Activity 2

### Refusal Skills

**Time:** 15 minutes

**Materials:**

Refusal Skills Visual, 1 copy for document camera or projector

1. Introduce refusal skills.

*“Even though the overwhelming majority of 8th graders are not having sex, and many of you are not experiencing crushes or sexual feelings at this age, we also know that most people will choose to have sex in their lifetime.”*

*“Everyone can make the decision not to have sex, or to be abstinent, when they are older. Once we make this decision, it’s important to be able to communicate our decision to the person who we are dating. It’s also really helpful to keep ourselves out of situations where we might be tempted to have sex. For example, sometimes being home alone without any parents can make it harder to stick to a decision of abstinence.”*

Activity 2 cont.

Refusal Skills

2. Brainstorm ways to say no clearly.

*“As people start having sexual feelings, they still might make the choice not to have sex, even when they are older. Sometimes, one person wants to have sex and the other person doesn’t.”*

*“What are some things that a person could do to make it clear that they mean ‘no’?”*

Be sure to include the following points:

- \* Saying no
- \* Clear voice
- \* Matching what we are saying with our body language

3. Discuss that force and coercion are always wrong. Explain that it is never a person’s fault if someone forces or coerces them into doing something sexually that they do not want to do.

*“I want to be really clear that it is always the other person’s responsibility to listen to us when we say no or make it clear that we do not want to have sex or engage in any kind of sexual touch. It is never ok to force or coerce someone into having sex or into any kind of sexual touch.”*

*“Coercion is manipulating someone into doing something that they do not want to do – like having sex or engaging in sexual touch. If someone is forced or coerced into having sex or a sexual act, it is never their fault. It is always the fault of the person who forced or coerced them, and it is always wrong.”*

*“Unfortunately, people do not always respond well to no or want to hear no. There are times when people are asking or pressuring us to do something and we need to say no very clearly and leave the situation. At these times, we also might need to tell an adult or ask an adult or friend for help.”*



Activity 2 cont.

Refusal Skills

4. Discuss that people need to leave the situation or get help if someone is not respecting their “no”.

*“In order to be abstinent, there might be times when we will have to refuse sex. Sometimes this is easy to do, and sometimes this can feel difficult to do. Either way, something is always easier to do once we have practiced it.”*

*“For the purposes of this lesson, we want to assume that we like the person whom we are saying no to and want to continue hanging out with them, but we do not want to have sex with them, which is what they will be proposing.”*

5. Show students the Refusal Skills Visual, read the refusal skills steps, and give a brief explanation of each step.

*Refusal Skills Steps:*

1. **Say no.**

*“Clearly state that you do not want to have sex.”*

2. **Explain why.**

*“For example, I don’t want to get pregnant or I’m not ready to have sex.”*

3. **Suggest an alternative.**

*“Suggest something else that you two can do instead. For example, I think that we should go outside now.”*

4. **Leave if you need or want to.**

*“Like we discussed earlier, sometimes the other person is not respecting our no. At that point we might need to get out of the situation or get help from someone else.”*

1. Say no.
2. Explain why.
3. Suggest an alternative.
4. Leave if you need or want to.

## Grade 8 Lesson 2

# Abstinence and Refusal Skills

### Activity 3

### Refusal Skills Scenarios

Time: 10 minutes

Materials:

- \* Scenario A: Levi and Gabrielle 2 copies, for large group demonstration
- \* Scenario B: Levi and Gabrielle (partially scripted), 1 per student

1. Introduce scenarios.

*“Now we will have a chance to practice the refusal skills through a series of scenarios. The first scenario we will do as a large class. It is scripted and two volunteers will need to read the script.”*

2. First, do large group demonstration of refusal skills using Scenario A (Levi and Gabrielle, fully scripted.)

- \* Ask for two volunteers to read the script out loud to the class, with one person reading as Levi and another reading as Gabrielle.
- \* The purpose is to model an effective use of refusal skills.

3. Next, have students practice refusal skills by writing new lines for Levi in Scenario B (Levi and Gabrielle, partially scripted).

- Hand out Scenario B. Have each student fill in Levi’s part. Remind the class that the person playing Levi likes Gabrielle and wants to continue hanging out with her, but does not want to have sex.
- After they fill in Levi’s script, ask for one volunteer to read Gabrielle’s part and a second volunteer to read Levi’s. As you go through the Scenario B, ask if anyone else wants to offer their responses as well.

## Grade 8 Lesson 2

# Abstinence and Refusal Skills

### Activity 4

### Small Group Scenario Practice

Time: 20 minutes

Materials: One copy per student of the following handouts:

- \* Refusal Skills Checklist
- \* Scenario C: Jackson and Rebecca
- \* Scenario D: Nathan and Maria
- \* Scenario E: Tiffany and Genevieve

1. Introduce the small group scenario practice: “Now we are all going to get a chance to practice using refusal skills by doing 3 more scenarios in small groups.”
2. Pass out and review Refusal Skills Checklist.
3. Break the class into small groups with three people per group. Each small group will practice with all three scenarios (Scenarios C, D and E). For each scenario, one person will be the asker, one person will be the refuser, and one person will fill out the Refusal Skills Checklist while they observe.
4. Remind the class that the person playing the refuser likes the asker and wants to **continue hanging out with them**, even though they want to say no to them.
5. Give students 2 minutes for each scenario. After completing each scenario, everyone will switch roles and do another scenario, so that each person gets the opportunity to be in each role. The purpose is for everyone to practice refusal skills and to hear good refusal skills.
6. Debrief as a large group between each scenario. Ask volunteers from a few of the groups to give examples of the refusal skills that they came up with or observed. Validate all of the refusal language. Ask what kind of body language would help reinforce the refusal.
7. Conclude the lesson: *“Great job! You were all so clear and said no really well. Saying no is such an important skill to learn. It’s great for us to know how to do this every day, and the more we practice the easier it gets. It’s also an important skill for us to know when we get older so that we can remain abstinent.”*

Grade 8  
Lesson 2

Abstinence and Refusal Skills

Activity 4

Refusal Skills Scenario Check List

Directions:

For each scenario, check off the refusal skills that you see the actors using.

	Scenario B Levi and Gabrielle	Scenario C Jackson and Rebecca	Scenario D Nathan and Maria	Scenario E Tiffany and Genevieve
Says NO (or states that they do not want to have sex).	_____	_____ <input checked="" type="checkbox"/>	_____	_____
Is clear.	_____	_____	_____ <input checked="" type="checkbox"/>	_____
Explains why.	_____	_____	_____	_____
Offers an alternative activity.	_____	_____	_____	_____

**Grade 8**  
**Lesson 2****Abstinence and Refusal Skills****Scenario A****Levi and Gabrielle****For Class Demonstration**

Levi and Gabrielle have been dating for 2 weeks. They decide to go to Gabrielle's house after school to study. Gabrielle's mom is running late at work and won't be home for an hour. They have the house to themselves. They decide to skip studying and kiss on the couch. Levi and Gabrielle have talked and decided they were not going to have sex. Levi is not ready to have sex and is really scared about the idea about getting someone pregnant.

**Gabrielle:** I really like you and think that you are so hot. I know that we already decided not to have sex, but I really didn't think we'd ever get the chance to be alone together. Now that we're alone, I really think we should have sex.

**Levi:** I like you, too, and it's cool hanging out. And, I want to kiss you, but I don't want to have sex.

**Gabrielle:** But don't you like me? If you liked me, you'd want to have sex with me.

**Levi:** Gabrielle, I don't want to have sex. I'm not ready to have sex and I don't want to get you pregnant.

**Gabrielle:** But when are we going to get the chance to be alone like this again? I really want you.

**Levi:** the answer is no. I like you too, and I'm not ready to have sex. I think that we should go outside to hang out so we don't get more tempted.

**Gabriel:** Ok. You're right. I respect that.

**Grade 8**  
**Lesson 2****Abstinence and Refusal Skills****Scenario B****Levi and Gabrielle****Large Group Practice**

Levi and Gabrielle have been dating for 2 weeks. They decide to go to Gabrielle's house after school to study. Gabrielle's mom is running late at work and won't be home for an hour. They have the house to themselves. They decide to skip studying and kiss on the couch. Levi and Gabrielle have talked and decided they were not going to have sex. Levi is not ready to have sex and is really scared about the idea about getting someone pregnant.

**Gabrielle:** I really like you and think that you are so hot. I know that we already decided not to have sex, but I really didn't think we'd ever get the chance to be alone together. Now that we're alone, I really think we should have sex.

**Levi:** \_\_\_\_\_

**Gabrielle:** But don't you like me? If you liked me, you'd want to have sex with me.

**Levi:** \_\_\_\_\_

**Gabrielle:** But when are we going to get the chance to be alone like this again? I really want you.

**Levi:** \_\_\_\_\_

**Gabrielle:** Ok. You're right. I respect that.

**Grade 8**  
**Lesson 2****Abstinence and Refusal Skills****Scenario C****Jackson and Rebecca****Small Group Practice**

Rebecca and Jun are eighth grade girls who live on the same street. Jun invited Rebecca over to hang out on a Friday night and keep her company while her older brother has some friends over. Rebecca didn't know that the older teens would be there and that they would be drinking. Jackson, a boy from school is there. He offers Rebecca a beer. Rebecca does not want to drink. She doesn't like the taste of beer and doesn't want to get in trouble when she goes home.

**Jackson:** Hey Rebecca. It's nice to see you outside of school. Fun party, huh? Can I get you a beer?

**Rebecca:** \_\_\_\_\_  
\_\_\_\_\_

**Jackson:** Oh come on, don't tell me you don't drink. I'll get you a beer.

**Rebecca:** \_\_\_\_\_  
\_\_\_\_\_

**Jackson:** Really? It's just one beer?

**Rebecca:** \_\_\_\_\_  
\_\_\_\_\_

**Jackson:** Ok. You're right. I respect that.



**Grade 8**  
**Lesson 2****Abstinence and Refusal Skills****Scenario D****Nathan and Maria****Small Group Practice**

Maria, an 8<sup>th</sup> grade girl, is hanging out at the mall after school with some friends. Nathan, a 9<sup>th</sup> grade boy, just stopped by with some friends. Maria thinks that Nathan is really cute and is very flattered when Nathan starts talking to her. Maria is not allowed to date, and her parents would definitely not let her date a high school boy.

**Nathan:** It's been so fun hanging out with you. We should hang out again sometime. Want to hang out again after school on Friday?

**Maria:** \_\_\_\_\_  
\_\_\_\_\_

**Nathan:** Oh come on, it's not like you have to tell your parents that we're hanging out. We could just meet up at the mall again.

**Maria:** \_\_\_\_\_  
\_\_\_\_\_

**Nathan:** That's really a shame. I like you and would like to get to know you better. What do you say? Meet me here on Friday?

**Maria:** \_\_\_\_\_  
\_\_\_\_\_

**Nathan:** Ok. You're right. I respect that.

**Grade 8**  
**Lesson 2****Abstinence and Refusal Skills****Scenario E****Tiffany and Genevieve****Small Group Practice**

Tiffany and Genevieve have been best friends since the 5th grade. Genevieve does not want to have sex with her boyfriend, Dimitri. She thinks that she is way too young for sex and does not want to get pregnant. Even though Tiffany has never had sex, she is pressuring Genevieve to have sex since Genevieve has a boyfriend.

**Tiffany:** I can't believe that you haven't had sex with Dimitri. He's so hot. Girl, what are you waiting for?

**Genevieve:** \_\_\_\_\_  
\_\_\_\_\_

**Tiffany:** You better rethink that before he finds someone else. You should have sex with him.

**Genevieve:** \_\_\_\_\_  
\_\_\_\_\_

**Tiffany:** Oh come on. You can't stay a virgin forever!

**Genevieve:** \_\_\_\_\_  
\_\_\_\_\_

**Tiffany:** Ok. I'm sorry. You're right. I respect your decision not to have sex.

### Overview

Next to abstinence, condoms are the most effective way to prevent getting HIV and other STDs. The purpose of this lesson is to support positive attitudes about condoms and teach correct condom use, so that students are more likely to use condoms when they need them in the future. A large body of research shows that teaching about condoms does not encourage teens to have sex at a younger age.

### Laws & Standards

The 7/8 KNOW Curriculum, 2014 edition, complies with the AIDS Omnibus Act and partially fulfills the Healthy Youth Act (2008). It aligns with the WA State Health and Fitness Standards (2008), the WA State Guidelines for Sexual Health Information and Disease Prevention (2005), the National Sexuality Education Standards (2011), and current research on the prevention of HIV and other STDs. Please see the introduction for more details, including information on how to fully comply with the Healthy Youth Act.

### Objectives

The students will:

1. Understand the steps of correct condom use
2. Gain positive attitudes about condoms
3. Understand the importance of condoms in preventing HIV and other STDs

Agenda

Time: 50 minutes

1. Introduction (5 min)
2. Brainstorm of condom benefits (10 min)
3. Condom card line-up (10 min)
4. Debrief of condom card line-up (15 min)
5. Condom demonstration (5 min)
6. Conclusion (5 min)

Materials:

- \* 6 sets of condom cards per small group
- \* 1 male condom per class
- \* Penis model for condom demonstration (optional)

Preparation:

- \* Copy and cut 6 packs of condom cards per class
- \* Practice condom demonstration
- \* Find out if community clinics, public health centers, or Planned Parenthood clinics in your community have free or inexpensive condoms.

To order penis model (optional):

Total Access Group has special pricing for non-profits and schools.  
[www.totalaccessgroup.com](http://www.totalaccessgroup.com)

Activity 1

Introduction

Time: 5 minutes

1. Introduce lesson.

*“Today we’re going to be focusing on condoms. I want to remind you that condoms are the best way for someone who has sex to protect themselves from both pregnancy and STDs, including HIV.”*

2. Reinforce importance of learning about condoms.

“It’s important for everyone to learn how to use condoms whether they need the information now or in the future. It’s important even if they think they will never need condoms. Why would this be important? Right, so they can help educate their friends and family about them”.

Activity 2

Benefit of Condoms Brainstorm

Time: 10 minutes

1. Do a brief classroom brainstorm of all the good things your students have ever heard, or could imagine, about condoms. If students come up with drawbacks, acknowledge them but do not add them to the list.
2. Add any benefits of condoms that the students miss.
  - \* Prevents HIV and other STDs
  - \* Prevents pregnancy
  - \* Lots of choices
  - \* Easy to use
  - \* Easy to get
  - \* No prescription needed
  - \* Cheap (Free at some clinics)
  - \* Helps protect a person’s health and future goals
  - \* Enhances responsibility and mutual respect between partners

## Grade 8 Lesson 3

# Condom Overview

### Activity 3

### Condom Card Line-Up

Time: 10 minutes

Materials: 6 sets of condom cards in random order.

1. Introduce the activity.

*“Condoms prevent pregnancy and STDs, including HIV. When two people agree to have vaginal or anal sex it is important to use a condom. It is also important to use a condom when having oral sex with a man. Now we’re going to do an exercise to learn the steps for using a condom.”*

2. Divide the class into 6 small groups.
3. Give each small group a set of all 9 condom cards in random order.
4. Have each small group work together to put their cards in the correct order. Tell them it’s okay to guess.

### Activity 4

### Debrief of Condom Card Line-Up

Time: 15 minutes

1. Ask the class to describe each step, one at a time:

*“Which card did you pick for Step 1?” etc.*

2. For each step, share the main teaching points. See Answer Key on p. XYZ.
3. Have small groups correct the order of their cards.

Grade 8  
Lesson 3

Condom Overview

Activity 4

Condom Card Answer Key for Debrief

Order	Cards	Teaching Points
Step 1	Check expiration date.	<i>"The expiration date is important to make sure the condom is not old and more likely to be weak."</i>
Step 2	Carefully open package.	<i>"This means being careful not to rip the condom with anything sharp like fingernails, teeth, or a scissors." "Condoms are usually slippery and wet. This is to keep the condom from breaking."</i>
Step 3	Pinch tip of condom.	<i>Ask the class: "Can you guess what might happen if there wasn't room at the tip?" Answer: "If there's no place to catch the semen, there's a chance it might leak out the bottom of the condom into their partner's body or even possibly break the condom. Condoms work well and don't break very often, so this is an important step."</i>
Step 4	Roll condom down erect penis.	<i>"The penis gets harder before sex. The condom doesn't get rolled on until the penis is hard."</i>
Step 5	Sex – with condom.	<i>"The couple has sex with a condom on, every time. This is true for vaginal sex, anal sex, and oral sex with a penis."</i>
Step 6	Ejaculation – with condom.	<i>"When the man ejaculates, the semen is caught inside the condom. With a condom, neither person gets the others' body fluids."</i>
Step 7	Hold condom onto penis while pulling out.	<i>"After ejaculation, the penis gets soft again. The condom is held onto the penis while pulling out, so that none of the semen leaks out and so the condom doesn't slip off."</i>
Step 8	Take condom off penis.	
Step 9	Throw condom in the garbage.	<i>"Condoms can only be used once."</i>

Activity 5

Condom Demonstration

Time: 5 minutes

Materials: 1 condom, 1 penis model (optional)

1. Demonstrate the steps for correct condom use. Do not demonstrate with fruits or vegetables, as some people find it offensive or trivializing. A penis model is ideal for demonstrating condoms, if you can obtain one. If that is not an option, demonstrate by rolling a condom onto your fingers.
2. Teacher talking points.

*“Most condoms are made of latex. If someone is allergic to this material, there are condoms made of other kinds of materials like plastic and polyurethane.”*

*“First the person looks at the package to check the expiration date and make sure there aren’t any holes in it.*

*“Then, they carefully open the package.*

*“Before having sex, the condom goes on the tip of the erect penis. It should look like a little hat, with the rolled side facing out.”*

*“Then, the person pinches the tip of the condom and unrolls the rest of the condom all the way to the base of the penis. Pinching the tip makes a space to catch the semen when the man ejaculates.”*

*“Once the condom is on, the couple has sex.”*

*“After sex, before the penis gets soft, the condom is held in place while pulling out.”*

*“The condom is taken off and thrown away. Condoms can only be used once.”*

*“To sum it up, the main steps are to pinch the tip of the condom and roll it down the penis before having sex. With practice, people find them easy to use.”*



Activity 6

Conclusion

Time: 5 minutes

1. Discuss where condoms are available in the community - free or inexpensively.

*“It’s important to know where people can get condoms in our community, even if they won’t need condoms until they’re much older, or it’s only information to share with others.”*

*“Condoms are usually inexpensive, and in some places they are free. There are no age limits on who can get condoms. Has anyone seen condoms for sale or free anywhere in the community? If not, could you guess where they might be? One hint is that we learned that condoms are very important for people keeping healthy.”*

Possible answers:

- Doctors office
- Public health clinic
- School-based health center
- Planned Parenthood clinic
- Drug store
- Grocery store
- Gas station
- DSHS office

2. Conclude by reiterating the importance of abstinence and condoms in preventing HIV and other STDs.

*“Good job. Yesterday we focused on preventing HIV and other STDs by not having sex. Today we focused on preventing HIV and other STDs by using condoms when someone does has sex.”*

*“Not having sex and using condoms are the two best things a person can do to protect themselves. It makes me feel confident that everyone here can be successful in keeping themselves healthy.”*

Grade 8  
Lesson 3

Condom Overview

Cards to copy and cut for Activity 3, Condom Card Line-Up

Pinch tip of condom	Ejaculation - with condom	Throw condom in the garbage
Carefully open package	Sex - with condom	Take condom off penis
Check expiration date	Roll condom down erect penis	Hold condom onto penis while pulling out

**Office of Superintendent of Public Instruction  
Old Capitol Building  
P.O. Box 47200  
Olympia, WA 98504-7200**

**For more information about the contents  
of this document, please contact:  
HIV and Sexual Health Education, OSPI  
(360) 725-6364 TTY (360) 664-3631**

**To order more copies of this document,  
Please call 1-888-59-LEARN (1-888-595-3276)  
or visit our Web site at <http://www.k12.wa.us/publications>**

**Please refer to the document number below for quicker service:  
14-0021**

**This document is available online at:  
<http://www.k12.wa.us/HIVSexualhealth/default.aspx>**

**This material is available in alternative format upon request.  
Contact the Resource Center at (888) 595-3276, TTY (360) 664-3631.**



Office of Superintendent of Public Instruction  
Old Capitol Building  
P.O. Box 47200  
Olympia, WA 98504-7200  
2014