



KNOW

HIV/STD PREVENTION CURRICULUM

GRADES 5 and 6



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 5 and 6

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

5/6 KNOW

Introduction	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
5/6 KNOW Standards Alignment	7
Model Policies and Procedures for HIV Education	10
A. HIV and AIDS Prevention Education Administrative Policy 2126	10
B. HIV and AIDS Prevention Education Administrative Procedure 2126P ..	11
Answer All HIV-Related Questions	14
Values Questions and Protocol	14
Personal Questions	16
Questions about Sexual Technique	18
Slang in Questions	18
Recognizing and Reporting Sexual Abuse and Assault	20
Resources	22
Lesson 5-1, HIV Overview: Immune System	1-19
Lesson 5-2, Abstinence and Refusal Skills	1-15
Lesson 6-1, HIV Overview: Transmission	1-17
Lesson 6-2, Abstinence and Refusal Skills	1-15

Introduction

5/6 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.¹

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.² As a nation, and within our communities, there is much work to be done.

¹ 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

² 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 years³. 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 intercourse⁴.

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 5/6 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.⁵

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

³ 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

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

⁵ 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.⁶ 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.⁷

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:

⁶ 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

⁷ 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 5th 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.

5/6 KNOW Standards Alignment

The entire 5/6 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 5/6 KNOW Curriculum aligns with state and national standards and guidelines.

Grade 5
Lesson 5-1, HIV Overview: Immune System
<i>Washington State Health and Fitness Standards</i>
Understands the structure and function of body systems (2.2.1)
Understands how to maintain sexual health throughout life (2.2.2)
Understands how to prevent or reduce the risk of contracting a communicable disease (2.3.1)
<i>National Sexuality Education Standards</i>
Define HIV and identify age appropriate methods of transmission, as well as ways to prevent transmission (SH.5.CC.1)
<i>Washington State Guidelines for Sexual Health Information and Disease Prevention</i>
<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
Encourages community support and reinforcement of key messages by other adults and information sources
Lesson 5-2, Abstinence and Refusal Skills
<i>Washington State Health and Fitness Standards</i>
Analyzes abusive and risky situations and points out safe behaviors to prevent injury to self and others at home, school and in the community (2.4.1)
Applies necessary social skills to promote health and safety (3.3.1)
<i>National Sexuality Education Standards</i>
Demonstrates ways to treat others with dignity and respect (HR.5.SM.1)
Demonstrates refusal skills (PS.5.IC.2)
<i>Washington State Guidelines for Sexual Health Information and Disease Prevention</i>
<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
Promotes healthy self-esteem, positive body image, good self-care, respect for others, caring for family and friends and a responsibility to community
Grade 6
Lesson 6-1, HIV Overview: Transmission
<i>Washington State Health and Fitness Standards</i>
Understands the structure and function of body systems (2.2.1)
Understands how to maintain sexual health throughout life (2.2.2)
Understands factors and prevention related to communicable diseases (2.3.1)
<i>National Sexuality Education Standards</i>
Define HIV and identify age appropriate methods of transmission, as well as ways to prevent transmission (SH.5.CC.1)
<i>Washington State Guidelines for Sexual Health Information and Disease Prevention</i>
<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
Encourages community support and reinforcement of key messages by other adults and information sources
Lesson 6-2, Abstinence and Refusal Skills
<i>Washington State Health and Fitness Standards</i>
Analyzes abusive and risky situations (2.4.1)
Solves conflicts while maintaining safe and respectful relationships (3.3.1)
<i>National Sexuality Education Standards</i>
Demonstrates ways to treat others with dignity and respect (HR.5.SM.1)
Demonstrates refusal skills (PS.5.IC.2)
<i>Washington State Guidelines for Sexual Health Information and Disease Prevention</i>
<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
Promotes healthy self-esteem, positive body image, good self-care, respect for others, caring for family and friends and a responsibility to community

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 5th through 12th 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 7th grade and no later than 8th 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

5/6 KNOW

Introduction, Page 12

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

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

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.⁸

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'

⁸ Family Planning Program, Public Health – Seattle & King County, FLASH Curriculum, all grade levels

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: *"Why do people even have sex?"*

"I'm so glad someone asked this question. This is not a question where there is just one right answer. Instead, people have many different beliefs about why people have sex, and when it is okay to have sex. First I want to say that no one ever has to have sex; people should only ever have sex if it is something they want to do. And, if someone does have sex, using a condom helps protect them from getting HIV. Different people believe it is okay to have sex under different circumstances. For example some people think it is okay to have sex if someone is married, or if they are in a long term relationship. Some people think it is only okay to have sex if you want to get pregnant. Other people think it is okay to have sex whenever someone chooses to, as long as both people agree to, which is called "consent." People choose to have sex for many different reasons. It's important for you to talk with an adult in your family or someone at your community of worship, if you have one, to find out what they think about when it is okay for two people to have sex."

Personal Questions

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

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 used a condom?”*

“I’m glad that someone asked this question. I know that you all are curious about the adults in your life, so I can understand why someone would ask me this question. However, adults should not share personal sexual information with kids, so I am not going to answer this question about myself. I can tell you that condoms are used for birth control, if two people are having sex and don’t want to become pregnant, and to protect both people from getting HIV and other illnesses called STDs. If the two people having sex don’t need birth control and neither of them has HIV or other STDs, they might choose not to use condoms.”

Questions about Sexual Technique

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 do people have sex?”*

“This question comes up every year. Let me give you a basic medical definition of the three main kinds of sex: vaginal sex is when the penis is in the vagina; anal sex is when the penis is in the butt; and oral sex is when the mouth is on the genitals. People can get HIV from all 3 types of sex, especially vaginal and anal sex, if the person they are having sex with already has HIV.”

Slang in Questions

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 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: *"If you get HIV does your dick fall off?"*

"I'm glad someone asked this so we can talk about it. First, 'dick' is a slang word for penis. So, this person wants to know if someone gets HIV will something bad happen to their penis. The answer is no. Even though someone may have gotten HIV from having sex, the virus lives in a person's blood and makes their body weaker. It does not do something to a man or woman's genitals."

Recognizing and Reporting Sexual Abuse and Assault

At least one in five girls and one in ten boys will be sexually abused at some point in their childhood.⁹ People aged 15 to 24 report rape and sexual assault at far higher rates than any other age group.¹⁰ 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 of clothing 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.”

⁹ Finkelhor, D., Dziuba-Leatherman, J. (1994). Children as Victims of Violence: A National Survey. *Pediatrics*, 94:413-420.

¹⁰US 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.¹¹ 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.¹²
 - If you need or want support or advice for yourself or the child in reporting the abuse, seek professional help.¹³
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.

¹¹ 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.

¹² Child Protective Services, personal communication, 2011.

¹³ 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
- OSPI's HIV and Sexual Health Program produced 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>

5/6 KNOW

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

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 5 Lesson 1

HIV Overview: Immune System

Overview

The purpose of this lesson is to help students learn basic information about HIV and AIDS, to learn how the immune system works, to identify behaviors that do and do not put individuals at risk for HIV infection, and to review ways to protect against acquiring and transmitting HIV.



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 5/6 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 how the immune system functions
- * Distinguish between the ways HIV is and is not transmitted
- * Know ways to protect against acquiring and transmitting HIV

Grade 5 Lesson 1

HIV Overview: Immune System

Agenda

Time: 50 minutes

1. Introduction and Ground Rules (10 min)
2. HIV and AIDS DVD (10 min)
2. Alternative to DVD: Review of Basic Facts (15 min), optional
3. Immune System Presentation (20 min)
4. Staying Healthy and Family Connections (5 min)

Materials:

- * Basic HIV/AIDS Facts visual
- * Immune System visual
- * Immune System labels, 1 set per class (quantities given on label page)
- * Immune System script, cut into strips, 1 set per class
- * Tape
- * Two noisemakers
- * HIV/AIDS Family Newsletter, 1 per student

To order DVD:

“The Puberty Workshop: HIV and AIDS”

Human Relations Media

www.hrmvideo.com/catalog/puberty-workshop-hiv-aids

Activity 1

Introduction and Ground Rules

Time: 10 minutes

1. Introduce the topic of HIV.

“Today we’re going to learn about HIV and AIDS, and about how our immune system works. Some of you may have learned about HIV before, and for some of you, this will be a new topic. HIV is a very serious illness that can cause death. It’s important to know that many people who have HIV live for a long time with the help of a doctor. The way HIV hurts the body is by hurting the immune system, which is the system in our body that keeps us healthy. For that reason, today we will also learn about the immune system with a fun activity. This is an important subject, and I’m looking forward to sharing this information with you.”

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 5
Lesson 1

HIV Overview: Immune System

Activity 2

HIV Overview DVD

Time: 10 minutes

Materials: DVD, DVD player, projector

Show the DVD: “Understanding HIV and AIDS” by Human Relations Media. If you do not have the DVD, do the Review of Basic Facts (below) as an alternative.

Activity 2 alternative

Review of Basic Facts

Time: 15 minutes

Materials: “Basic HIV/AIDS Facts” Visual

Let the class know you will start by sharing some basic information about HIV and AIDS. Go over the following information slowly, checking for comprehension. Display the Visual “Basic HIV / AIDS Facts” as you share the following information.

- * *“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, which is the system that keeps us healthy. We will talk more about the immune system in a minute.”*
- * *“AIDS stands for Acquired Immune Deficiency Syndrome. That means that after a person has had HIV for a while, their immune system won’t work well and they can get very sick.”*
- * *“HIV is a very serious illness that can cause death. There is no cure for HIV. However, many people with HIV live for a very long time with the help of a doctor.”*
- * *“People usually get HIV from having sex or sharing needles for drugs with someone else who has HIV. Kids your age don’t usually get HIV because they aren’t doing those things.”*

Grade 5 Lesson 1

HIV Overview: Immune System

Activity 2 cont.

Review of Basic Facts

- * If students are confused by “sharing needles for drugs,” here is an age-appropriate clarification: *“Sometimes when people use drugs, they put the drug into their body with a needle. If two people are taking drugs with the same needle, a little of one person’s blood gets in the other person’s body. If one of the people has HIV, they can pass HIV to the other person.”*
- * *“The other way people get HIV is that 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. That’s why people can get HIV from sex, sharing needles, or sometimes from a mom when they are born or while they are breastfeeding.”*
- * *“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.”*
- * *“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.”*

Activity 3

Presentation on the Immune System

Time: 20 minutes

Materials:

- * Immune System visual
- * Immune System labels, quantities given on label page
- * Immune System script, cut in strips, 1 set per class
- * Tape
- * Two noisemakers

ARTS CONNECTIONS

On a day prior to this demonstration, have the class create costumes for the actors complete with labels. Also, you may want students to practice the performance to give at a teacher’s or parent’s meeting.

5/6 KNOW

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

Activity 3, cont.

Presentation on the Immune System

STEP 1: Describe the immune system

- * Remind students that HIV makes someone sick by hurting their immune system and let them know that they will now be learning about the immune system.
- * Ask the class, “*Who can tell me what the immune system is?*” Solicit responses, and fill in as necessary so that you end up with the following definition:

Immune System: The body system that helps us stay healthy by keeping germs out of our body, and by fighting germs off if they do get in our body.

- * Have volunteers read the following descriptive statements about the immune system from Immune System visual.
 1. The immune system has two main parts: skin and white blood cells.
 2. Skin is an important part of the immune system, because it helps to keep germs out. It works as a barrier.
 3. If a person has a cut, scrape or burn on their skin, the skin doesn't work as well to keep germs out. Germs can come in through that opening, especially if there isn't a scab yet.
 4. Germs can also enter a person's body through a mucous membrane – the pink, wet skin, like someone has in their mouth or eyes.
 5. If germs do make it inside a person's body, there are several different types of White Blood Cells that try to fight the germs off.
 6. There are two main types of germs that can make you sick: bacteria germs and virus germs. HIV is a virus.

Activity 3, cont.

Presentation on the Immune System

STEP 2: Set up the demonstration

- * Let students know that now we will see how HIV affects the immune system. The class will be acting out how the immune system works, and how HIV affects it.
- * Select 23 volunteers to serve as actors, with the remainder of the class serving as readers. Alternatively, the teacher can read the script. Tell students this is not a competitive game, and you don't want anyone to get hurt doing this activity, so it's important that they follow your instructions carefully. Hand out scripts in numerical order to readers (if students will be reading).
- * Place 6 actors playing "**White Blood Cells**" to form the inner circle, holding hands, and facing out. Give 2 of the students noisemakers.
- * Place 10 actors, five playing "**Skin**" and 5 playing "**Mucous Membranes**" to form the outer circle, holding hands, also facing out.
- * Place 4 actors, 2 labeled "**Virus**" and 2 labeled "**Bacteria**" outside the two circles (not holding hands).
- * Place 3 actors playing "**Rare Diseases**" on the sidelines until needed.
- * Place the "**HIV**" label aside for YOU to wear later. **IMPORTANT: Do not** assign this role to a student.
- * Remind students of ground rules and tell them to remember that volunteers are playing a role, not speaking for themselves, and everyone should show respect to all of the performers.

Grade 5
Lesson 1

HIV Overview: Immune System

Activity 3, cont.

Presentation on the Immune System

STEP 3: Perform the presentation

- * Begin the performance by having students demonstrate a healthy immune system: *“Let’s start by looking at how the immune system works to keep us healthy.”*
- * Have volunteers read the following statements, or they can be read by the teacher.

Script	Directions
1. “The immune system works first by keeping germs out of our body.”	Direct germs to walk towards the outside circle, but not to go in. Direct actors in the outer circle to “be strong” and keep out germ invaders.
2. “But sometimes, all of us are exposed to viruses and bacteria. They can enter the body through a cut or a mucous membrane, and get past the first line of defense.”	Walk over to the outer circle and break the handhold of two actors in the outer circle. Have Bacteria and Virus actors try to get past the outer circle and enter it successfully.
3. “When that happens, the immune system has a good back-up system: The White Blood Cells in the bloodstream.”	Have the Virus/Bacteria actors try to enter the circle. The two White Blood Cells with noisemakers should sound their noisemakers loudly, and the inner circle should “be strong” to keep the invaders out and work together to push them back out of the body.

Grade 5
Lesson 1

HIV Overview: Immune System

Activity 3, cont.

Presentation on the Immune System

- * Next, have students demonstrate how a healthy immune system works to fight illness: *“Now we are going to act out what happens to the immune system when someone gets sick.”*

Script	Directions
4. “This person was exposed to germs that got in their body through a mucous membrane or through a cut.”	Direct Bacteria and Virus to try to enter the body and to do so successfully.
5. “Once germs are inside the person’s body, sometimes a person’s immune system can fight them off right away, and sometimes it can’t. When it can’t, that is when a person gets sick. Even though it might take a little while for the immune system to fight off the germs, it usually does in the end.”	Once the invaders are past the outer circle, the White Blood Cells with the noisemakers should sound the noisemakers softly, gradually getting louder. The inner circle should act confused and uncoordinated at first, but then should start working together.
6. “Everyone gets sick sometimes. It’s no fun, but they do get better once the immune system fights off the germs.”	Eventually, the inner circle should muster up enough strength to throw out the invaders.

Grade 5
Lesson 1

HIV Overview: Immune System

Activity 3, cont.

Presentation on the Immune System

- * Help students demonstrate how HIV impacts the immune system, *“Finally, we will act out what happens to the immune system when a person has HIV.”* If needed, give expectation about not teasing “Rare Diseases” actors. Remind students that they are role playing.

Script	Directions
7. “HIV is a virus that attacks the immune system directly, so the immune system can’t fight it off. When it enters the body, it takes over some of the white blood cells so they can’t sound the alarm at all. The rest of the immune system doesn’t even know there is any danger.”	Put the HIV label on yourself. (NEVER put it on a student). Break the handhold of the actors in the first circle, then go directly to the White Blood Cells with the noisemakers and take the noisemakers away. Stand close behind one of these actors.
8. “After years, the immune system in a person with HIV can become so weak because of the HIV that it cannot fight off diseases successfully.”	Tell all remaining inner and outer circle actors to kneel.
9. “Now this person’s immune system is not working right. This person can get all kinds of rare diseases that can make them very sick, especially if they do not have a doctor to help them.	Point out the Rare Disease actors.
10. “In a healthy immune system, the body would fight off these diseases. But in a person with HIV, their immune system isn’t working right, and it can’t even recognize the rare diseases.	Have the actors playing Rare Diseases enter the body through the outer circle and then go inside the inner circle. The inner circle should not respond to their presence in the body, as if they are not there.
11. “The good news is that HIV is really hard to get, and there are ways to keep yourself safe.”	Tell actors to return to their seat and thank everyone for their participation.

Grade 5 Lesson 1

HIV Overview: Immune System

Activity 4

Staying Healthy and Family Connections

Time: 5 minutes

Materials: HIV/AIDS Family Newsletter, 1 per student

Remind class that kids their age almost never get HIV. Brainstorm with the class what are some important things people should do when they are older to protect themselves from getting HIV.

Make sure your list includes the following:

- * Choose not to have sex
- * Use a condom when having sex
- * Don't share needles for drugs or anything else

The list may also include:

- * Don't do drugs or drink
- * Get tested for HIV

Wrap-up the lesson by restating the main points and encouraging students to share the family newsletter at home.

"I want everyone to remember that kids your age almost never get HIV. That is because the behaviors that spread HIV, like having sex and sharing needles, are not things that kids do."

"It is still important that we discuss HIV because it is a very serious illness, and there are important things people can do to prevent getting it. The purpose of the family newsletter is to help your families learn more about HIV, and to help start conversations between you and your parent, guardian or other trusted adult."

"I want to make sure you all know how to keep yourselves healthy when you get older."

Grade 5
Lesson 1

HIV Overview: Immune System

Activity 2 alternative

Review of Basic Facts

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. With the help of a doctor, many people with HIV live a long time.
- 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 can get HIV during pregnancy or birth.
- 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.

Grade 5
Lesson 1

HIV Overview: Immune System

Activity 3

Presentation on the Immune System

Immune System

1. The immune system has two main parts: skin and white blood cells.
2. Skin is an important part of the immune system, because it helps to keep germs out. It works as a barrier.
3. If a person has a cut, scrape or burn on their skin, the skin doesn't work as well to keep germs out. Germs can come in through that opening, especially if there isn't a scab yet.
4. Germs can also enter a person's body through a mucous membrane – the pink, wet skin, like someone has in their mouth or eyes.
5. If germs do make it inside a person's body, there are several different types of White Blood Cells that try to fight the germs off.
6. There are two main types of germs that can make you sick: bacteria germs and virus germs. HIV is a virus.

Grade 5
Lesson 1

HIV Overview: Immune System

Activity 3

Presentation on the Immune System

Immune System Label Instructions: Copy and cut the following quantities:

- * 6 White Blood Cells
- * 5 Skin
- * 5 Mucous Membranes

White Blood Cells

Skin

Mucous Membranes

Grade 5
Lesson 1

HIV Overview: Immune System

Activity 3

Presentation on the Immune System

Immune System Label Instructions: Copy and cut the following quantities:

- * 2 Virus
- * 2 Bacteria
- * 3 Rare Diseases
- * 1 HIV (teacher wears this one)

Virus

Bacteria

Rare Diseases

HIV

Grade 5
Lesson 1

HIV Overview: Immune System

Activity 3

Presentation on the Immune System

Immune System Script Instructions:

Copy this sheet onto paper and cut into strips. You'll need 1 set per class.

1. The immune system works first by keeping germs out of our body.
2. But sometimes, all of us are exposed to viruses and bacteria. They can enter the body through a cut or a mucous membrane, and get past the first line of defense.
3. When that happens, the immune system has a good back-up system: the White Blood Cells in the bloodstream.
4. This person was exposed to germs that got in their body through a mucous membrane or through a cut.
5. Once germs are inside the person's body, sometimes a person's immune system can fight them off right away, and sometimes it can't. When it can't, that is when a person gets sick. Even though it might take a little while for the immune system to fight off the germs, it usually does in the end.
6. Everyone gets sick sometimes. It's no fun, but they do get better once the immune system fights off the germs.

Grade 5
Lesson 1

HIV Overview: Immune System

Activity 3

Presentation on the Immune System

Immune System Script Instructions:

Copy this sheet onto paper and cut into strips. You'll need 1 set per class.

- 7. HIV is a virus that attacks the immune system directly, so the immune system can't fight it off. When it enters the body, it takes over some of the white blood cells so they can't sound the alarm at all. The rest of the immune system doesn't even know there is any danger.
- 8. After years, the immune system in a person with HIV can become so weak that it cannot fight off diseases successfully.
- 9. Now this person's immune system is not working right. This person can get all kinds of rare diseases that can make them very sick, especially if they do not have a doctor to help them.
- 10. In a healthy immune system, the body would fight off these diseases. But in a person with HIV, their immune system isn't working right, and it can't even recognize the rare diseases.
- 11. The good news is that HIV is really hard to get, and there are ways to keep yourself safe.

Grade 5 Lesson 1

HIV Overview: Immune System

FAMILY NEWSLETTER Working Together to Keep Our Youth Healthy

You have probably asked yourself, “What should my fifth grader know about HIV and AIDS?” Well, your child has probably heard something about HIV and AIDS in a news report or on a television program. He or she knows that HIV and AIDS exist, probably has many questions, and has maybe received some wrong information from friends or TV.

In words that fifth graders can understand, your child has learned information at school he or she needs to know about this disease. This will help lessen any fears your child may have about HIV and AIDS.

In the fifth grade lessons, your child has learned:

- 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 cannot be caught by:
 - * Touching someone who has HIV or AIDS
 - * Sharing pencils or toys
 - * Hugging someone who has HIV or AIDS
 - * Playing with someone who has HIV or AIDS
 - * Talking to someone who has HIV or AIDS
 - * A mosquito bite or from a toilet seat
- HIV is spread by sharing needles and by having sex with a person who has HIV.
- Kids their age almost never get HIV, because having sex and sharing needles are not things that kids do.
- HIV is a very serious illness that can cause death, although people who have HIV can usually live for a long time with the help of a doctor

We believe this information will help your child understand the facts about HIV and AIDS. Your child will know what to do to protect himself/herself from infection as he or she gets older, and ways to show kindness to people who have HIV or AIDS.

Continued on page 2

Grade 5 Lesson 1

HIV Overview: Immune System

FAMILY NEWSLETTER (continued)

Talking With Your Child

Your child may seek reassurance that he or she is not going to get HIV. We have discussed the fact that children almost never get HIV. You may want to tell your child the following information to help him or her understand.

When children do 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.

As your child approaches his or her teenage years, you may want to discuss the two main ways people get HIV: sharing needles and sexual intercourse without a condom.

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 child 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. Your child will learn that information at school.

When your child comes to you with a question, you might find it helpful to keep the following points in mind as you answer him or her.

- ◆ Listen carefully to the question.
- ◆ Give a simple short answer that is appropriate for your child's age.
- ◆ 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

Reproduced and modified with permission of the Educational Materials Center, Central Michigan University, Michigan Model K-6 Curriculum, Grade 5, Supplemental Lesson 2, (1995) www.emc.cmich.edu.

5/6 KNOW

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

Grade 5 Lesson 2

Abstinence and Refusal Skills

Overview

The purpose of this lesson is to review basic information about abstinence, promote a positive attitude about abstinence, and to allow students to build and practice refusal skills.

Laws & Standards

The 5/6 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:

- * Know the definition of abstinence
- * Know the refusal skills steps
- * Use refusal skills in a realistic scenario

Grade 5 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: Le'liana and Quan, 2 copies for large group demonstration
- * 1 copy per student of the following handouts:
 - * Refusal Skills Checklist
 - * Scenario B: Le'liana and Quan
 - * Scenario C: George and Jose
 - * Scenario D: Carlos and Samuel
 - * Scenario E: "David" and Thuong
- * The characters' names in the scenarios reflect the population of WA State. If needed, please look up pronunciation in advance.

Activity 1

Definition of Abstinence

Time: 5 minutes

1. Introduce the lesson.

“Yesterday we learned some basic information about HIV. Today we are going to learn more about what it means to be abstinent and we will have a chance to practice saying no to some things we might not want to do. I think we will all have fun while we learn some important skills.”

2. Define abstinence.

“Let’s start by defining the word abstinence: Does anyone know what it means?”

Solicit responses and wrap up by stating:

“Abstinence means not doing something. For example, someone can abstain from drinking or from doing drugs. Often when people just say the word ‘abstinence’ they mean not having sex. That is what we are going to talk about today.”

“Why would we be talking about abstinence in our HIV unit?” Solicit response.

“That’s right—not having sex is an excellent way for someone to prevent getting HIV. We are talking about abstinence now, even though kids your age are not having sex, because abstinence will be an important choice you will make when you are older to help keep yourself healthy and protect yourself from HIV.”

Grade 5
Lesson 2

Abstinence and Refusal Skills

Activity 2

Refusal Skills

Time: 15 minutes

Materials:

Refusal Skills Visual, 1 copy for document camera or projector

1. Set abstinence as the norm.

“Sometimes the things we see on TV and the things we hear older kids say make it seem like all teenagers are having sex. But let me ask you, how many teenagers do you think are having sex? Just a few? Half of them? Almost all of them?” Solicit responses.

“Would you be surprised if I told you that most middle and high school students are not having sex? Most teenagers are actually abstinent, even though that may not be what we think.”

2. Introduce Refusal Skills.

“Abstinence means deciding not 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.”

“In order to be abstinent, people need to be able to say no to sex. Since you will need to be able to say no to sex when you are older, we are going to practice this skill now. Honestly, saying no to sex is a lot like saying no to other things. Let’s talk a little more about how people can say no effectively.”

3. Discuss reasons it can be hard to say no.

“Sometimes, it can be hard to say no. For example, if I offer you a snack you don’t like, maybe it’s not too hard to just say “no thanks.” But, let’s imagine a more challenging situation. What if a friend you really like asks you to do something you shouldn’t, like steal candy from his sister’s room, or watch something on TV you know you are not allowed to see? Why would it be harder to say no to your friend in those situations?”

Activity 2 cont.

Refusal Skills

Solicit responses, making sure the list includes the following:

- * You don't want to hurt your friend's feelings
- * You are afraid they won't want to be your friend anymore
- * You want to seem cool
- * You are afraid other people will think you are dumb or a baby
- * You really want to do the thing you are not supposed to do

3. Discuss strategies for saying no effectively.

"We all need to say no sometimes, even when it is hard. In a minute we are going to have a chance to practice saying no in some different situations."

"Let's start by thinking about how we can make sure that we can say no in a really clear and strong way. What are some things you can say or do that lets someone know you really mean it when you say no? If it's helpful, you can think of a time someone else told you no—maybe a friend, a brother or sister, or a parent, and you knew they really meant it. How did you know?"

Solicit responses, making sure the list includes the following:

- * Use a firm voice
- * Look someone right in the eye
- * Stand up tall
- * Use a loud voice
- * Say "no," not "maybe" or something else
- * Say no even if you are asked several times

Praise students for their thoughtful answers.

Activity 2 cont.

Refusal Skills

4. Go over refusal skills steps.

“There are a few steps you can follow when you have to say no to someone that can make it a little easier. It’s important to remember also that when someone tells us no, we need to accept it even if it is not what we want to hear. If you ever try to tell someone no and they don’t listen, it’s important to say no very clearly and then walk away. If someone isn’t listening when you say no, it may not be a safe place for you to stay.”

“In just a minute we will practice saying no in some specific situations. In these situations, we are going to imagine that we like the person we are saying no to. They are our friend and we want to stay friends with them. We don’t want to be mean or hurt their feelings unless we have to.”

“Here are the steps we will follow that will help us say no. Remember to also use the tips we just went over, like looking the other person in the eye and using a firm voice.”

Show Refusal Skill Visual as you read through these steps.

1. **Say no.**
“Clearly say that you don’t want to do what the other person is asking.”
2. **Explain why.**
“For example, my mom doesn’t allow me to or I don’t feel comfortable.”
3. **Suggest an alternative.**
“Suggest something else that you can do instead. For example, I think that we should make some popcorn or play a video game.”
4. **Leave if you need or want to.**
“If someone keeps pressuring you or doesn’t accept your no, you need to leave the situation or get help from someone else.”

Grade 5
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.

Activity 3

Refusal Skills Scenarios

Time: 10 minutes

Materials:

- * Scenario A: Le'liana and Quan, 2 copies, for large group demonstration
- * Scenario B: Le'liana and Quan (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 (Le'liana and Quan, fully scripted).
 - * Ask for two volunteers to read the script out loud to the class, with one person reading as Le'liana and another reading as Quan.
 - * The purpose is to model an effective use of refusal skills.
3. Next, have students practice refusal skills by writing new lines for Le'liana in Scenario B (Le'liana and Quan, partially scripted).
 - * Hand out Scenario B. Have each student fill in Le'liana's part. Remind the class that the people in the scenario like each other and want to stay friends.
 - * After they fill in Le'liana's script, ask for one volunteer to read Quan's part and a second volunteer to read Le'liana's. As you go through Scenario B, ask if anyone else wants to offer their responses as well.

Grade 5 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: George and Jose
- * Scenario D: Carlos and Samuel
- * Scenario E: “David” and Thuong

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 remain friends, 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 5
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 Le'liana and Quan	Scenario C Pedro and Lexi	Scenario D George and Jose	Scenario E "David" and Thuong
Says NO (or states that they do not want to do what the other person is doing).	_____	_____	_____	_____
Is clear.	_____	_____	_____	_____
Explains why.	_____	_____	_____	_____
Offers an alternative activity.	_____	_____	_____	_____

**Grade 5
Lesson 2****Abstinence and Refusal Skills****Scenario A****Le'liana and Quan****Class Demonstration**

Le'liana is at her best friend Quan's slumber party. At the slumber party, the girls decide to go on YouTube and watch some videos after Quan's mom goes to bed. Le'liana is not allowed to watch YouTube at her home without adult supervision and feels really uncomfortable.

Quan: Now that my mom's asleep, we should watch some videos on YouTube. There is new music video that I've been dying to watch.

Le'liana: That sounds like fun, but I'm not allowed to watch YouTube without a parent around.

Quan: Oh come on Le'liana. Your parents will never find out.

Le'liana: Maybe not, but I don't really want to break the rule. Maybe we can watch tomorrow morning when your mom is up?

Quan: Le'liana, don't be a baby.

Le'liana: I really don't want to get in trouble with my parents.

Quan: I've been wanting to watch these for ages. It'll be fun.

Le'liana: If you want to watch by yourself that's fine, but I'm not going to do it.

Quan: Ok. I'm sorry. And I shouldn't have called you a name. You're right. We'll do something else instead.

Grade 5
Lesson 2

Abstinence and Refusal Skills

Scenario B

Le'liana and Quan

Large Group Practice

Le'liana is at her best friend Quan's slumber party. At the slumber party, the girls decide to go on YouTube and watch some videos after Quan's mom goes to bed. Le'liana is not allowed to watch YouTube at her home without adult supervision and feels really uncomfortable.

Quan: Now that my mom's asleep, we should watch some videos on YouTube. There is new music video that I've been dying to watch.

Le'liana: _____

Quan: Oh come on Le'liana. Your parents will never find out.

Le'liana: _____

Quan: Le'liana, don't be a baby.

Le'liana: _____

Quan: I've been wanting to watch these for ages. It'll be fun.

Le'liana: _____

Quan: Ok. I'm sorry. And I shouldn't have called you a name. You're right. We'll do something else instead.

Grade 5
Lesson 2

Abstinence and Refusal Skills

Scenario C

Lexie and Pedro

Small Group Practice

Pedro and Lexie are in the same 5th grade class together and live down the street from each other. They often ride bikes together after school. One day, they are hanging out riding bikes and Lexie turns up onto a neighbor's driveway where they are out of sight from their homes. Lexie tries to kiss Pedro. Pedro likes Lexie and enjoys hanging out with her, but he doesn't want to kiss her or any other girl. Pedro has to tell Lexie that he doesn't want to kiss her and that he just wants to ride bikes.

Lexie: Hey. I've never kissed a boy before and I think you're really cute. We should kiss.

Pedro: _____

Lexie: Oh come on Pedro, don't be such a wimp.

Pedro: _____

Lexie: I can't believe you don't want to kiss me. Come on.

Pedro: _____

Lexie: Ok. I'm sorry. And I shouldn't have called you a name. You're right. Let's go ride some more.

Grade 5
Lesson 2

Abstinence and Refusal Skills

Scenario D

George and Jose

Small Group Practice

Jose, George and Jenny are in the same fifth grade class. Jose and George are hanging out after school one day and George thinks it would be funny to forward out an embarrassing picture of Jenny to some of the other students in their class. Jose doesn't want to embarrass Jenny or hurt her feelings, and also doesn't want to get in trouble with his parents.

George: You know that girl Jenny from school? She gets on my nerves. I took a ridiculous picture of her today at recess. I told her that I deleted it, but I didn't. Let's send it out to our friends. That'll be really funny.

Jose: _____

George: I can't believe you don't want to send it out. Do you like her or something?

Jose: _____

George: Oh come on, Jose. It'll be funny. Just do it.

Jose: _____

George: Ok. I'm sorry. You're right.

Grade 5
Lesson 2

Abstinence and Refusal Skills

Scenario E

“David” and Thuong

Small Group Exercise

Thuong is online one day after school playing video games in an online gaming site. She is doing really well playing against someone she doesn't know. That person starts instant messaging her privately. He says that his name is David. At first the other person is just playing around, saying what a good player she is and praising her skills. After a while, he starts trying to get more personal information out of her and asking to hang out sometime. Thuong feels really uncomfortable with this. At the end of this, she will tell her dad what happened since it's important to let an adult know.

‘David’: Wow, Thuong, I have a lot of fun talking to you and playing video games together. It would be fun to meet and do this in person. I could pick you up one day after school. Want to meet?

Thuong: _____

‘David’: Well, if you think this game is fun, I have way better. I have a huge TV and the latest version of this game at my place.

Thuong: _____

‘David’: Oh come on, don't be so uptight. Just tell me where you live and I'll come pick you up.

Thuong: _____

‘David’: Ok, fine.

Thuong hangs up from instant message and goes and tells her dad about “David”.

Grade 6 Lesson 1

HIV Overview: Transmission

Overview

The purpose of this lesson is to help students understand how HIV is transmitted, to identify behaviors that do and do not put individuals at risk for HIV infection, and to review ways to protect against acquiring and transmitting HIV.



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 5/6 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:

- * Know that AIDS is caused by a virus (HIV)
- * Identify ways HIV is transmitted
- * Identify ways HIV is NOT transmitted
- * Identify behaviors that protect a person from HIV infection

Agenda

Time: 50 minutes

1. Introduction and Ground Rules (10 min)
2. Review of Basic Facts (10 min)
3. Fluid Transmission Demonstration (10 min)
4. Transmission Risk and Prevention Game (15 min)
5. Staying Healthy (5 min)

Materials:

- * 2 clear glass or plastic cups
- * 1 eyedropper
- * Blue food dye (liquid)
- * Two paper tents, one labeled HIV+ (positive) and one HIV- (negative)
- * Family Homework, 1 per student

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 AIDS. Some of you may have learned about HIV in other 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 can live a very long time with HIV with the help of a doctor. 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 6 Lesson 1

HIV Overview: Transmission

Activity 2

Review of Basic Facts

Time: 10 minutes

- * Tell students to indicate whether they “agree,” “disagree,” or are “unsure” about each statement as you read it aloud. (The teacher can select one of the following two methods.)

Thumbs up = agree Thumbs down = disagree Thumbs sideways = unsure

or

Stand up = agree Sit down = disagree Hold both hands up = unsure
--

- * After each statement is “voted” upon, give students the correct answer (shown in parentheses after the statement).
- * If many students are unsure about answers, review the KNOW Grade 5 Lesson 1, Activity 2 “Review of Basic Facts.”
 1. HIV is a virus. (True)
 2. HIV causes AIDS. (True)
 3. HIV is easy to get. (False)
 4. HIV is found in the blood, semen, vaginal fluids and breast milk of someone who has HIV. (True)
 5. People who have HIV may not show any signs of being sick. (True)
 6. People can live a very long time with HIV with the help of a doctor. (True)
 7. Anyone who has sex without a condom can get HIV if the other person has it, whether they are male or female, gay or straight, rich or poor. (True)
 8. HIV infection can be cured. (False)
 9. HIV infection can be prevented. (True)
 10. HIV can be transmitted in sweat. (False)
 11. Abstinence from sexual intercourse and from sharing needles are two ways to avoid HIV. (True)
 12. If someone gives HIV to another person, the first person doesn’t have it anymore. (False)

Grade 6 Lesson 1

HIV Overview: Transmission

Activity 3

Fluid Transmission Demonstration

Time: 10 minutes

Materials:

- * 2 clear glass or plastic cups
- * 1 eyedropper
- * Blue food dye (liquid)
- * Two paper tents, one labeled HIV+ (positive) and one HIV- (negative)

Preparation:

- * Fill the 2 cups with water.
- * Add enough blue food dye (at least several drops) to one of the cups to turn the water deep blue.
- * Place the “HIV+” (HIV positive) label beside the cup with blue water.
- * Place the “HIV-” (HIV negative) label beside the cup with clear water.

SCIENCE CONNECTIONS

This activity will reinforce science concepts related to conducting an experiment and understanding cause/effect relationships.

1. Introduce the demonstration by explaining that the cups represent two people, Joe and Teri. If there is a student in the class that uses one of these names, substitute a different name.
2. Remind students that the term HIV positive (with a plus sign) means a person has HIV, and the term HIV negative (with a minus sign) means a person does not have HIV. In this demonstration, **Joe (the HIV+ cup) has HIV. Teri (the HIV- cup) does not.**
3. Explain that the blue water in Joe’s cup represents fluids from Joe’s body that can transmit HIV, like blood, semen, vaginal fluid or breast milk. The clear water represents fluids from Teri’s body. Teri does NOT have HIV.
4. Explain that in order for someone to get HIV, they must get blood, semen or vaginal fluids into their body, through sharing needles or by having sex with someone who has HIV. In this demonstration, some of Joe’s HIV+ fluid would have to get into Teri’s body. (In other words, Teri’s test tube fluids will turn bluish if they have HIV.)
5. Follow the demonstration script on the next page.

Grade 6
Lesson 1

HIV Overview: Transmission

Activity 3 cont.

Fluid Transmission Demonstration

Ask Students	Demonstrate	Explain
<i>“Can Teri get HIV by sitting next to Joe?” (e.g. Do Teri’s fluids turn blue?)”</i>	Push cups closer together, but not touching.	<i>“No. Teri would not get HIV because none of Joe’s fluid got in her body.”</i>
<i>“Can Teri get HIV by touching Joe?”</i>	Push cups together so they are touching.	<i>“No. Teri would not get HIV because none of Joe’s fluid got in her body.”</i>
<i>“Can Teri get infected by sharing a pencil with Joe?”</i>	Touch a pencil to one cup, then the other cup.	<i>“No. Teri would not get HIV because none of Joe’s fluid got in her body.”</i>
<i>“What if Teri donates blood to Joe?”</i>	Use the clean, unused dropper to take a dropperful of water from Teri’s cup to Joe’s cup.	<i>“No, because Teri’s blood does not have HIV.”</i>
<i>“What if Joe and Teri had sex, or Joe’s blood got into Teri’s body because they shared a needle?”</i>	Take a dropperful of Joe’s blue fluid and inject it into Teri’s cup. Add more until it turns noticeably blue.	<i>“Yes, Teri could get HIV. This is why people should not share needles or have sex with someone who has HIV.”</i>
<i>“Why do you think the fluid in Teri’s cup is <u>light blue</u> instead of <u>dark blue</u> like Joe’s?”</i>	Add a couple more drops from the blue food dye bottle into Teri’s cup.	<i>“Once HIV is in the body, it multiplies and damages the immune system, which usually protects us from diseases. Over time, Teri’s water would get darker and darker blue, as the virus made more copies of itself. That’s why people with AIDS get sick with serious diseases, especially if they don’t have a doctor who can help them stay healthier and live longer.”</i>
<i>“If Joe and Teri were real people, would anyone know they had HIV just by looking at them?”</i>		<i>“No. People with HIV usually look as healthy as anyone else. We can’t see inside a person (like we did here) to see if there is HIV in their blood, which is why the blood must be tested to tell if it has HIV in it.”</i>

Activity 4

Transmission Risk and Prevention Game

Time: 15 minutes

Materials:

- * Category Cards, 1 set per small group
- * Behavior Cards, 1 set per small group

Introduction:

1. Introduce the activity: *“Next we are going to play a cooperative game to review how HIV can be transmitted and how it can be prevented.”*
2. Explain the game rules:
 - * The class will be divided in small groups.
 - * Each group will be given one set of category cards and one set of behavior cards.
 - * Each small group will try to place the behavior cards under the correct category.
 - * At the end, we’ll review the correct answers as a large group.
3. Give an example:
 - * Write the two categories on the board, “You Can Get HIV” and “You Can’t Get HIV.”
 - * Using one of the behavior cards (for example, “kissing”), demonstrate how you expect them to place behavior cards under the appropriate category (in this case, “You Can’t Get HIV.”)

Small Group Work:

4. Divide the class into groups of 4 or 5, using whatever method you prefer. Give each group the two sets of cards to place on a table or floor. If they are uncertain about the placement of a particular behavior, they should set that card to the side or make their best guess.
5. Offer help, if needed. Allow groups to work until most have completed the task or until you have 8 minutes left.

Debriefing the Activity

6. You will find debrief points for each behavior on the following pages to assist you as you debrief each individual behavior.
7. Ask for volunteers to report on the behavior cards they placed under the “You Can Get HIV” category. Write their answers on the board under that category.
8. Ask for volunteers to report the behaviors they placed under “You Can’t Get HIV”. Write their answers on the board under that category.
9. Use the debrief points on the following page to correct answers as necessary.

A Person Can Get HIV

- * Sharing needles for drug use with someone who has HIV
- * Sex without a condom with someone who has HIV
- * Born to a mom who has HIV
- * Breastfeeding from a mom who has HIV

A Person Can't Get HIV

- * Sitting on public toilet seats
- * Kissing someone who has HIV
- * Hugging someone who has HIV
- * Sharing food with someone who has HIV
- * Getting bit by a mosquito that has bitten someone with HIV

Debrief Points: CAN get HIV

Sharing needles for drug use with someone who has HIV

"A person can get HIV this way because there is some blood left inside the needle from when the person with HIV used it. If another person uses it, they are injecting the HIV + blood into their body."

Sex without a condom with someone who has HIV

"If someone has sex without a condom with someone who has HIV, they can get HIV because the other person's semen or vaginal fluid contains HIV. Using a condom would protect them from those fluids."

Born to a mom who has HIV

"HIV can be passed to the developing fetus in the uterus, or to the baby during birth as it passes through the vagina. When a woman has HIV and is pregnant, there is a 25% (1 in 4) chance her baby will be born with HIV. However, if she takes HIV medications while she is pregnant, and has a C-section, there is only a 2% chance that the baby will get HIV."

Breastfeeding from a mom who has HIV

"A baby can get HIV if it drinks breast milk from a mom who has HIV. Breast milk is one of the fluids that contains HIV, and it enters the baby's body through the soft tissue in the mouth."

Activity 4 cont.

Transmission Risk and Prevention Game

A Person Can Get HIV

- * Sharing needles for drug use with someone who has HIV
- * Sex without a condom with someone who has HIV
- * Born to a mom who has HIV
- * Breastfeeding from a mom who has HIV

A Person Can't Get HIV

- * Sitting on public toilet seats
- * Kissing someone who has HIV
- * Hugging someone who has HIV
- * Sharing food with someone who has HIV
- * Getting bit by a mosquito that has bitten someone with HIV

Debrief Points: CAN'T Get HIV

Sitting on public toilet seats

"A person cannot get HIV this way because there is no semen, vaginal fluid, blood or breast milk present." Only if students ask, tell them: "Even if someone sat on blood, semen or vaginal fluid on a toilet seat, the skin would keep that fluid out of the their body."

Kissing someone who has HIV

"A person cannot get HIV this way because saliva does not contain HIV." Only if students ask, tell them: "If someone had a little cut in their mouth when they were kissing, there would not be enough blood to transmit HIV. The only way HIV could be passed this way would be very unlikely: if the person with HIV had a lot of sores in their mouth, and the other person had a lot of sores and cuts in their gums."

Hugging someone who has HIV

"A person cannot get HIV this way because there is no semen, vaginal fluid, blood or breast milk present."

Sharing food with someone who has HIV

"A person cannot get HIV this way because there is no semen, vaginal fluid, blood or breast milk present."

Getting bit by a mosquito that has bitten someone with HIV

"Although this may seem similar to sharing a needle, it is not. No blood remains in the mosquito stinger and so no blood is shared between the people who are bitten."

Activity 5

Staying Healthy

Time: 5 minutes

Materials: Family Homework, 1 per student

1. Review the lesson by reminding the class that kids their age almost never get HIV. Ask the class to tell you quickly what are some important things people should do when they are older to protect themselves from getting HIV. Make sure your list includes the following:
 - * Choose not to have sex
 - * Use a condom when having sex
 - * Don't share needles for drugs or anything else

Remind students that it is also important for people to get tested for HIV, so if they do have it they can make sure not to pass it on to anyone else, like to a person they have sex with or to a baby if they are pregnant.

2. Assign Family Homework.
 - * Students have two options for getting credit.
 - * Option 1: Discuss the family questions on the sheet 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.
3. Wrap-up the lesson by restating the main points.

"I want everyone to remember that kids your age almost never get HIV. That is because the behaviors that spread HIV, like having sex and sharing needles, are not things that kids do. It is still important that we discuss HIV, because it is a very serious illness, and there are important things people can do to prevent getting it. I want to make sure you all know how to keep yourselves healthy when you get older."

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, your 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. Both: How do you think HIV has affected our family or community?
2. Adult asks student: What is the most important thing you've learned about HIV?
3. Student asks adult: Why do you think it's important for me to learn about preventing HIV?

Confirmation Slip
Family Homework: Talking About HIV

We have completed the family homework.

Adult signature: _____

Student signature: _____

Date: _____

Category Cards for Activity 4: Transmission Risk Game

Copy onto WHITE paper and cut



You Can
Get HIV



You Can't
Get HIV

Behavior Cards for Activity 4: Transmission Risk Game

Copy all Behavior Cards onto the SAME COLOR PAPER and cut



**Sharing needles for drug use
with someone who has HIV**



**Sitting on public
toilet seats**



**Kissing someone
who has HIV**

Behavior Cards for Activity 4: Transmission Risk Game

Copy all Behavior Cards onto the SAME COLOR PAPER and cut



**Sharing food with someone
who has HIV**



**Hugging someone
who has HIV**



**Sex without a condom with
someone who has HIV**

Behavior Cards for Activity 4: Transmission Risk Game

Copy all Behavior Cards onto the SAME COLOR PAPER and cut



**Getting bit by a mosquito
that has bitten someone
with HIV**



Born to a mom who has HIV



**Breastfeeding from a mom
who has HIV**

Grade 6 Lesson 2

Abstinence and Refusal Skills

Overview

The purpose of this lesson is to review basic information about abstinence, promote a positive attitude about abstinence, and to allow students to build and practice refusal skills.

Laws & Standards

The 5/6 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:

- * Know the definition of abstinence
- * Know the refusal skills steps
- * Use refusal skills in a realistic scenario

Grade 6 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: Chris and Hector, 2 copies for large group demonstration
- * 1 copy per student of the following handouts:
 - * Refusal Skills Checklist
 - * Scenario B: Chris and Hector
 - * Scenario C: Sari and Junior
 - * Scenario D: Asante and Sashi
 - * Scenario E: Thuc and Beth
- * The characters' names in the scenarios reflect the population of WA State. If needed, please look up pronunciation in advance.

Activity 1

Definition of Abstinence

Time: 5 minutes

1. Introduce the lesson.

“Yesterday we learned some basic information about HIV. Today we are going to learn more about what it means to be abstinent and we will have a chance to practice saying no to some things we might not want to do. I think we will all have fun while we learn some important skills.”

2. Define abstinence.

“Let’s start by defining the word abstinence: Does anyone know what it means?”

Solicit responses and wrap up by stating:

“Abstinence means not doing something. For example, someone can abstain from drinking or from doing drugs. Often when people just say the word ‘abstinence’ they mean not having sex. That is what we are going to talk about today.”

“Why would we be talking about abstinence in our HIV unit?” Solicit responses.

“That’s right—not having sex is an excellent way for someone to prevent getting HIV. We are talking about abstinence now, even though kids your age are not having sex, because abstinence will be an important choice you will make when you are older to help keep yourself healthy and protect yourself from HIV.”

Activity 2

Refusal Skills

Time: 15 minutes

Materials:

Refusal Skill Visual, 1 copy for document camera or projector

1. Set abstinence as the norm.

“Sometimes the things we see on TV and the things we hear older kids say make it seem like all teenagers are having sex. But let me ask you, how many teenagers do you think are having sex? Just a few? Half of them? Almost all of them?” Solicit responses.

“Would you be surprised if I told you that most middle and high school students are not having sex? Most teenagers are actually abstinent, even though that may not be what we think.”

2. Introduce Refusal Skills.

“Abstinence means deciding not 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.”

“In order to be abstinent, people need to be able to say no to sex. Since you will need to be able to say no to sex when you are older, we are going to practice this skill now. Honestly, saying no to sex is a lot like saying no to other things. Let’s talk a little more about how people can say no effectively.”

3. Discuss reasons it can be hard to say no.

“Sometimes, it can be hard to say no. For example, if I offer you a snack you don’t like, maybe it’s not too hard to just say “no thanks.” But, let’s imagine a more challenging situation. What if a friend you really like asks you to do something you shouldn’t, like steal candy from his sister’s room, or watch something on TV you know you are not allowed to see? Why would it be harder to say no to your friend in those situations?”

Activity 2 cont.

Refusal Skills

Solicit responses, making sure the list includes the following:

- * You don't want to hurt your friend's feelings
- * You are afraid they won't want to be your friend anymore
- * You want to seem cool
- * You are afraid other people will think you are dumb or a baby
- * You really want to do the thing you are not supposed to do

3. Discuss strategies for saying no effectively.

"We all need to say no sometimes, even when it is hard. In a minute we are going to have a chance to practice saying no in some different situations."

"Let's start by thinking about how we can make sure that we can say no in a really clear and strong way. What are some things you can say or do that lets someone know you really mean it when you say no? If it's helpful, you can think of a time someone else told you no—maybe a friend, a brother or sister, or a parent, and you knew they really meant it. How did you know?"

Solicit responses, making sure the list includes the following:

- * Use a firm voice
- * Look someone right in the eye
- * Stand up tall
- * Use a loud voice
- * Say "no," not "maybe" or something else
- * Say no even if you are asked several times

Praise students for their thoughtful answers.

Activity 2 cont.

Refusal Skills

4. Go over refusal skills steps.

“There are a few steps you can follow when you have to say no to someone that can make it a little easier. It’s important to remember also that when someone tells us no, we need to accept it even if it is not what we want to hear. If you ever try to tell someone no and they don’t listen, it’s important to say no very clearly and then walk away. If someone isn’t listening when you say no, it may not be a safe place for you to stay.”

“In just a minute we will practice saying no in some specific situations. In these situations, we are going to imagine that we like the person we are saying no to. They are our friend and we want to stay friends with them. We don’t want to be mean or hurt their feelings unless we have to.”

“Here are the steps we will follow that will help us say no. Remember to also use the tips we just went over, like looking the other person in the eye and using a firm voice.”

Show Refusal Skill Visual as you read through these steps.

1. **Say no.**

“Clearly say that you don’t want to do what the other person is asking.”

2. **Explain why.**

“For example, my mom doesn’t allow me to or I don’t feel comfortable.”

3. **Suggest an alternative.**

“Suggest something else that you can do instead. For example, I think that we should make some popcorn or play a video game.”

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

“If someone keeps pressuring you or doesn’t accept your no, you need to leave the situation or get help from someone else.”

Grade 6
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.

Activity 3

Refusal Skills Scenarios

Time: 10 minutes

Materials:

- * Scenario A: Chris and Hector, 2 copies, for large group demonstration
- * Scenario B: Chris and Hector (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 (Chris and Hector, fully scripted).
 - * Ask for two volunteers to read the script out loud to the class, with one person reading as Chris and another reading as Hector.
 - * The purpose is to model an effective use of refusal skills.
3. Next, have students practice refusal skills by writing new lines for Hector in Scenario B (Chris and Hector, partially scripted).
 - * Hand out Scenario B. Have each student fill in Hector’s part. Remind the class that the people in the scenario like each other and want to stay friends.
 - * After they fill in Hector’s script, ask for one volunteer to read Chris’s part and a second volunteer to read Hector’s. As you go through Scenario B, ask if anyone else wants to offer their responses as well.

Activity 4

Small Group Scenario Practice

Time: 20 minutes

Materials: One copy per student of the following handouts:

- * Refusal Skills Checklist
- * Scenario C: Sari and Junior
- * Scenario D: Asante and Sashi
- * Scenario E: Thuc and Beth

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 remain friends, 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 6
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 Chris and Hector	Scenario C Sari and Junior	Scenario D Asante and Sashi	Scenario E Thuc and Beth
Says NO (or states that they do not want to do what the other person is doing).	_____	_____	_____	_____
Is clear.	_____	_____	_____	_____
Explains why.	_____	_____	_____	_____
Offers an alternative activity.	_____	_____	_____	_____

**Grade 6
Lesson 2****Abstinence and Refusal Skills****Scenario A****Chris and Hector****Class Demonstration**

Chris, Hector and Luis are all in 6th grade together. Chris does not like Luis and thinks he is a know-it-all. One afternoon, Chris tries to get Hector to distract Luis so he can go pants him in the hallway. Hector does not want to participate in this and thinks that Chris should just leave Luis alone.

Chris: Hey Hector. Let's go get Luis while no teachers are around.

Hector: Dude, I don't think that's cool.

Chris: Oh come on Hector. Don't be such a wimp.

Hector: I wouldn't want someone to do that to me. Chris is a pain, but he doesn't deserve that.

Chris: Why are you being so stupid? Come on.

Hector: I'm not going to do it. Let's hurry and get to P.E early so we can get the good basketballs.

Chris: Ok. I'm sorry I called you names. You're right.

Grade 6
Lesson 2

Abstinence and Refusal Skills

Scenario B

Chris and Hector

Large Group Practice

Chris, Hector and Luis are all in 6th grade together. Chris does not like Luis and thinks he is a know-it-all. One afternoon, Chris tries to get Hector to distract Luis so he can go pants him in the hallway. Hector does not want to participate in this and thinks that Chris should just leave Luis alone.

Chris: Hey Hector. Let's go get Luis while no teachers are around.

Hector: _____

Chris: Oh come on Hector. Don't be such a wimp.

Hector: _____

Chris: Why are you being so stupid? Come on.

Hector: _____

Chris: Ok. I'm sorry I called you names. You're right.

Grade 6
Lesson 2

Abstinence and Refusal Skills

Scenario C

Sari and Junior

Small Group Practice

Junior and Sari are hanging out together at Sari’s house after school. Sari thinks that Junior is really cute. They are out in the backyard playing in the yard while Sari’s aunt is cooking dinner. Sari goes over to Junior and tries to kiss him behind the shed. Junior does not want to kiss Sari. He thinks the idea of kissing a girl is pretty gross and just wants to continue playing their game.

Sari: Hey Junior. You should kiss me while no one can see us.

Junior: _____

Sari: What’s wrong with you that you don’t want to kiss me?

Junior: _____

Sari: Oh come on, Junior. You can be such a baby sometimes.

Junior: _____

Sari: Ok. I’m sorry for calling you a name. You’re right. That was rude of me.

Grade 6
Lesson 2

Abstinence and Refusal Skills

Scenario D

Asante and Sashi

Small Group Practice

Sashi is a 6th grade girl who is away at overnight camp. One night a group of the campers sneaks out into the woods to hang out while the camp counselors sleep. Asante, a 6th grade boy, suggests that they all play spin the bottle. Sashi feels uncomfortable with this and doesn't want to play. She decides to go back to her cabin, but Asante tries to get her to stay and play.

Asante: Come on guys. Let's play spin the bottle. It'll be fun.

Sashi: _____

Asante: Come on Sashi. It'll be fun. Just try it.

Sashi: _____

Asante: Why do you want to go back to your cabin. That's so boring. Just stay and hang out.

Sashi: _____

Asante: Ok. I'm sorry. You're right.

Grade 6
Lesson 2

Abstinence and Refusal Skills

Scenario E

Thuc and Beth

Small Group Practice

Fatima and Beth, two 6th grade girls, go to school with Thuc, a 6th grade boy. Fatima and Beth have a class together and don't get along. Thuc thinks it would be funny for him and Beth to spread a rumor that Fatima got her period over the summer. Even though Beth doesn't like Fatima, she thinks that would be mean and wouldn't like it if that rumor were going around about her. Thuc tries to talk her into it.

Thuc: Let's spread a rumor about Fatima. We can tell everybody that she got her period this summer.

Beth: _____

Thuc: Oh Beth, give me a break. It will be funny.

Beth: _____

Thuc: Don't be so dumb, Beth. Come on.

Beth: _____

Thuc: Ok. I'm sorry. You're right.

**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:
14-0020**

**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