



Learner Outcomes

P12 *Examine aspects of healthy sexuality and responsible sexual behaviour*

- *describe sexually healthy choices for one's body, including abstinence*
- *assess the consequences of being sexually active*

How To Use

This lesson plan contains numerous activities to achieve the learner outcome above. You may choose to do some or all of the activities, based on the needs of your students and the time available. Some of the activities build on the ones that come before them, but all can be used alone.

For a quick lesson, combine activities A, C, F and H.

Classroom Activities & Timing

See also the [Differing Abilities](#) lesson plan on safer sex.

- A. Ground Rules (5-10 minutes)
- B. STI and HIV Kahoot! Quiz (15-30 minutes)
- C. Defining STBBIs (10-15 minutes)
- D. Is it Safer? (10-15 minutes)
- E. STBBI Role Plays (25-30 minutes)
- F. Condoms and Dental Dams (10-20 minutes)
- G. Accessing Condoms
- H. Question Box (5-10 minutes)

Required Materials

[KAHOOT! QUIZ](#) and ANSWER KEY: STIs and HIV

CARDS: Is it Safer?

HANDOUT: STBBI Scenarios 1-6

HANDOUT: Accessing Condoms

Two external condoms and one internal condom, a pair of sharp scissors

Background Information for Teachers

This lesson uses the terms sexually transmitted infections (STIs), blood-borne infections (BBIs) and sexually transmitted and blood-borne infections (STBBIs) as needed.

Learning about STBBIs helps students to take care of their own bodies, thereby reducing the risk of STBBIs and preventing possible health problems related to having an STBBI.

One of the greatest deterrents to the practice of safer sex is the “It won’t happen to me” mindset. However, the risk of infection is very real. [Statistics](#) show that over 18% of chlamydia cases reported in 2021 were in Albertans ages 15-19, while this age group makes up less than 6% of the population. Gonorrhoea and syphilis levels are also very high in this age group.

STBBI education has often focused on trying to scare students into abstinence. Research shows this technique does not work. STBBIs are often considered shameful and a “consequence” for sexual activity, especially for teens. This shame prevents many people from accessing testing and treatment. It is a major contributor to the high rates of STBBIs among young people.

A more effective strategy is to encourage everyone who is sexually active to access at least yearly testing, and treatment as needed, as a regular part of good healthcare.

[Guidelines from Action Canada](#) for STI testing include the following times to get tested:

- You have a new sexual partner, before you start having sex
- If you have noticed any bumps, discharge, rashes or other symptoms
- If you or your partners are having sex with other people
- If you had sex with someone who has an STI and didn’t use a condom or other prevention methods
- If you had sex without a condom with someone who doesn’t know if they have an STI (because they haven’t gotten tested in a long time)
- If you had sex with a condom and the condom broke

STI has replaced the term STD (sexually transmitted disease). In medical science, infection is the term used to indicate that a bacteria, virus, parasite or other microbe has entered the body and begun to multiply. The term disease indicates that signs and symptoms of illness are present. There are many people with STIs who have no symptoms, therefore, STI is a more accurate term.

For more extensive background information about STBBIs, see [Sexually Transmitted Infections](#) on MyHealth Alberta. For more information about Pre-Exposure Prophylaxis (PrEP) and HIV, visit [MyHealthAlberta](#) or www.prepalberta.ca

Using condoms and dental dams correctly can reduce the risk of STI transmission. To see a demonstration of how each is used, see:

- [External Condom Video](#) and [Teacher Notes](#)
- [Internal \(Vaginal\) Condom Video](#) and [Teacher Notes](#)
- [Dental Dam Video](#) and [Teacher Notes](#)

Inclusive Language

Language is complex, evolving, and powerful. In these lessons, [inclusive language](#) is used to include all students, including those with diverse gender identities and sexual orientations. This includes the use of ‘they’ as a singular gender-neutral pronoun.

A person’s sex can be assigned at birth as male or female. Some people are intersex (the reproductive, sexual, or genetic biology of a person is unclear, not exclusively male or female or otherwise does not fit within traditional definitions of male or female). Assigned sex is independent of gender.

Gender identity is a person’s internal sense of identity as girl/woman, boy/man, fluid among genders or no gender (regardless of what sex they were assigned at birth).

For many people, their gender is the same as the sex they were assigned at birth (cisgender). For others, their gender identity is different from the sex they were assigned at birth. They may use terms like transgender, trans, non-binary, gender fluid, gender queer, agender or others, to describe their gender identity. The umbrella term ‘trans’ is primarily used here to describe people whose gender identity and sex assigned at birth differ. While this umbrella term does not fit everyone, the intention is to be inclusive as possible.

A. Ground Rules

Ensure [ground rules/group agreements](#) are established before beginning this lesson. For classes that have already established ground rules, quickly reviewing them can help ensure a successful lesson.

B. STIs and HIV Kahoot! Quiz

Students determine how much they know about STIs and HIV, and identify where their knowledge gaps are. You can use this quiz as a pre-and post-test, a fun wrap-up of the lesson, or an energizer between other activities. For more information on using a Kahoot!, visit getkahoot.com

1. Open the Kahoot! Quiz: [CALM STIs and HIV](#)
2. As a class, answer the quiz questions and discuss the answers together. You can play the quiz in individual or team mode.
3. Ghost Mode allows students to complete the quiz again at the end of the lessons for a post- test score.

C. Defining STBBIs

Students define STBBIs and provide a rationale for learning about STBBIs through class discussion of the following questions. This material is a review of concepts covered in grade 8 Health.

What is an STI?

- STIs are infections spread primarily by close sexual contact and sex.
- Sexual contact means any intimate skin-to-skin contact in the genital area. This includes touching or oral, vaginal, hand or anal sex with partners of any gender.
- The term STI has replaced the term sexually transmitted diseases (STD). In medical science, infection is the term used to indicate a bacteria, virus, parasite or other microbe has entered the body and begun to multiply. The term disease indicates that signs and symptoms of illness are present. As many people with STIs have no symptoms, STI is a more accurate term.

What is a BBI?

- Blood-borne infections are passed from one person to another through contact with infected blood, semen or vaginal fluid.
- Blood-borne infections can also spread from an infected mother to the baby during pregnancy or birth,
- HIV is also spread through breastmilk to babies.
- Although hepatitis B can be found in saliva, it is uncommon to transmit through saliva that is not visibly contaminated with blood.
- Hepatitis B and C can also be spread by sharing razors, nail clippers or toothbrushes with an infected person.
- Transmitting hepatitis C through sexual intercourse is rare. However, it can occur if there is infected blood present (such as

during menstruation). The presence of HIV also increases the risk of transmitting hepatitis C through sex.

What is an STBBI?

- STBBI is an umbrella term used when talking about infections that are sexually transmitted and/or blood-borne.

Why is it important to learn about STBBIs?

- It helps a person be able to take care of their own body.
- It helps a person discuss STBBIs with a partner.
- Some STBBIs can be prevented through immunization (HPV, Hep B) or medication (PrEP for HIV).
- Regular testing and treatment can eliminate or minimize the health problems caused by an STBBI. Testing guidelines can be found here <https://www.actioncanadashr.org/resources/sexual-health-info/sexually-transmitted-infections/how-often-should-i-get-tested>
- Untreated STBBIs can cause problems for a person's health and future ability to have children.
- BBIs and some untreated STIs can be passed to unborn children or babies during pregnancy or childbirth, although with testing and treatment this can be prevented.

What are some symptoms of STBBIs?

- The majority of people with STBBIs have no symptoms.
- Anytime a person notices irritation, sores, rash, itchiness, unusual discharge or pain in the area of sexual contact; pain or bleeding when peeing or during/after sex or any other changes that are worrying, it's important to see a health care provider.

How would you know if you have an STBBI?

- If you have no symptoms, the only way to know is to be tested. That is why regular testing is recommended for all sexually active people.

What does a person with an STBBI look like?

- Stress that anyone can get an STBBI. You can't tell if someone has an STBBI by looking at them.

What are the best ways to prevent STBBIs?

- Abstinence
- Using condoms (internal or external) and dental dams correctly
- Using condoms/dental dams every time there is sexual touching, vaginal, oral or anal sex or use of sex toys
- Limiting the number of sexual partners

- Having open and honest communication with every partner about STI history and testing
- Not having sex if there are any symptoms present (e.g., sores, unusual discharge)
- Regular STI testing (annually or as recommended by a doctor)
- Vaccination for HPV and hepatitis B
- Using Pre-Exposure Prophylaxis (PrEP) to help prevent HIV in people who have a very high risk of getting the virus

What ethical responsibilities does a person have to their sexual partner(s) regarding STBBIs?

- Open and honest communication about their STBBI history and test results
- Not having sex if there are any symptoms present or you think you are infected
- Discussing with partners the ways of reducing the risk, such as using condoms and dental dams every time there is sexual touching, vaginal, oral or anal sex or use of sex toys
- Sharing a known exposure to STBBIs before sexual activity is part of getting consent for sexual activity. A person cannot ethically consent to sexual activity with someone if they do not know about that person's STBBI.

Where can a person learn more?

- Family doctors, clinics (e.g., Sexual and Reproductive Health Clinic, STI Clinics, drop-in clinics) and community health centres
- Teachers, counsellors or school nurses
- Fact Sheets from a reliable source, such as [MyHealth.Alberta](https://myhealth.alberta.ca)
- Community Agencies

D. Is it Safer?

Students consider various sexual activity scenarios and the relative risks of contracting an STBBI.

1. Divide the class into small groups.
2. Give each group a set of **Is it Safer?** cards.
3. Ask each group to discuss the cards and arrange them in a line, from least risk to most risk.
4. When all groups have completed their discussion, share the answers with the other groups. If all groups have not arranged the cards in the same order, ask groups to share some of their thinking.

5. No answer key is provided, as there are multiple ways the cards could be arranged. Given the lack of information regarding the use of a condom/barrier in most of the examples, and the unknown STBBI status of the various people means that absolute comparisons are impossible. The point of the exercise is not to decide which activities are always safe, but to generate conversations about relative risks and the importance of the most complete information possible when judging risks.
6. Debrief this activity using the following questions:

It is important to remember that some students may have been exposed to STBBI through sexual assault or abuse.

What can a person do to reduce their risk for STBBIs?

- Abstinence
- Using condoms (internal or external) and dental dams correctly
- Using condoms/dental dams every time there is sexual touching, vaginal, oral or anal sex or use of sex toys
- Limiting the number of sexual partners
- Having open and honest communication with every partner about STI history and testing
- Not having sex if there are any symptoms present (e.g., sores, unusual discharge)
- Regular STI testing (annually or as recommended by a doctor)
- Vaccination for HPV and hepatitis B
- Using Pre-Exposure Prophylaxis (PrEP) to help prevent HIV in people who have a very high risk of getting the virus

What could a person who has engaged in risk behaviour do?

- Get regular testing, and treatment if required
- Consider what safer sex practices they might be willing to try (see list above)

Students may be embarrassed when identified as 'having' an STBBI during role plays. It is important to remind students that this is an activity, and reinforce the need for them to be kind, caring and respectful of each other.

E. STBBI Role Plays

Students develop and practice STBBI prevention skills that can help them make sexually healthy choices.

1. Divide the class into small groups of 2-5.
2. Provide each group with one **STBBI Scenario** handout. Explain that they are going to plan and present a role play based on the scenario they were given.
3. Give each group time to plan their role play. You can choose to have everyone play a character in the role play, or allow some students to help plan the presentation but not have a speaking role.
4. Have each group present their role play to the class, or have each group present to you while the other groups rehearse. If the groups are

presenting to the whole class, have them start by reading the scenario and introducing each character.

5. After each role play, ask the group/class to determine the adequacy and accuracy of the responses chosen by the characters in the presentation.
6. Finally, debrief the entire activity using the following questions:

What are the most effective ways to prevent STBBIs?

- See list in Activity D or E above

If a person thinks they have an STBBI, what should they do?

- Go to a family doctor, STI, Sexual and Reproductive Health or drop-in clinic to be tested, and treated as needed
- Tell their sexual partner(s)
- Abstain from all sexual activity until they know if they have an STBBI or not

F. Condoms and Dental Dams

Students observe how to use internal condoms, external condoms and dental dams correctly and how to create a dental dam using a condom. This material is also in the Grade 9 curriculum. If you are unsure of how to do the demonstrations, use the [demonstration videos](#) and [teacher notes](#) before teaching this topic to become familiar with the procedure.

1. Remind the class that less than half of youth age 15-19 are sexually active. The following material is not to encourage sexual activity. Rather it is meant to help those who have already made the decision to be sexually active be safer, and is also information that they may need when they are older.
2. Reinforce with the class:
 - the importance of making individual decisions
 - discussing sexual decisions and safer sex with a partner
 - good communication surrounding decisions to have sex
 - the importance of obtaining consent for every sexual act, every time
3. Remind students that abstinence is the most effective method of protection from pregnancy and STBBIs. If students choose to be sexually active, it is important to think about how to protect themselves and others.
4. Introduce the three types of condoms/barriers available for STI protection:
 - External Condoms (also known as male condoms or penile condoms)

- Internal condoms (also known as female condoms or vaginal condoms)
 - Dental dams (also known as latex barriers or oral dams)
5. Ask the class “Why might people use condoms or dental dams?”
Ensure you discuss:
 - Condoms and dental dams help to reduce the risk of acquiring or transmitting STBBIs.
 - Condoms are available without a prescription.
 - Most external condoms are inexpensive.
 - Dental dams are easy to make from external condoms.
 - Dual protection (using a condom and another method of birth control) provides the best protection against pregnancy and STBBIs.
 6. Demonstrate to the class how to use an internal condom, external condom, and dental dam. You can demonstrate this yourself or show the [demonstration videos](#).
 7. Some additional information that may be needed to answer student questions:
 - If students ask about double bagging, it refers to wearing two condoms at the same time, one on top of the other, in the mistaken belief that this will provide greater protection. Using two condoms at once actually increases risk because the condoms are much more likely to break.
 - Some people believe that some types of sex (e.g. oral sex, anal sex or skin to skin contact in the genital area) are safer. But all types of sex carry a risk of STI transmission, and pregnancy is a risk anytime semen or a penis comes in contact with the vaginal area - this includes anal sex.

G. Accessing Condoms

Students identify community-based programs or stores in their community where they could get condoms, and experience asking for condoms from one of the sources. You will need to consider the availability of condoms in your community and your students' ability to access transportation before assigning this homework. In this activity, 'condom' refers to both condoms and vaginal condoms. If the community part of this activity is not feasible for your students, complete the class discussion portion only.

1. Explain that after completing activity G, that they all know how to use both types of condoms (internal and external), it is important that they know how and where to get them. Ask for suggestions of where condoms are available. Answers may include:
 - Drugstores, grocery stores, convenience stores
 - Online ordering

- Community health centres
 - Sexual and Reproductive Health clinics or STI clinics
 - Bathroom vending machines
 - Community agencies
 - From an older sibling, parent, or friend
2. Ask students to identify which of the sources provide free or lower cost condoms, and which are places condoms have to be purchased.
 3. Distribute the **Accessing Condoms** handout. Review it with students. Reinforce that they do not need to actually buy the condoms. If they choose to visit a store, simply find or ask for where the condoms are located and see where they are kept without buying them. The assignment requires them to interact with a real person, so going online to order them or buying one from a vending machine is not an option for this activity (although it is an option in real life). If they are visiting a clinic that distributes free condoms, they must interact with someone at the clinic, not just 'run up to the bowl, grab a condom and run away'.
 4. In the next class, ask for volunteers to share their experiences of accessing condoms. Collect the completed handouts to gain a better understanding of the students' experiences.

Due to the sensitive nature of human sexuality topics, it is recommended that homework is reviewed or discussed but not graded.

H. Question Box

Answer any questions from the [question box](#) in the previous lesson. Have students submit any new questions and address them next class.

Addressing the questions at the next class allows you time to review the questions and prepare responses.

Self-Reflection

During the lesson, were:

- Ground rules being followed?
- Good practices established regarding group work and discussion?

What will you change for future classes with this group?

What will you change for future use of this lesson?

Student Assessment

During the lesson, did students:

Knowledge:

- Define STIs, BBIs and STBBIs?
- Identify STBBIs as one potential outcome of being sexually active?
- Identify ways STBBIs are spread?
- Identify effective ways to reduce the risk of STBBIs?
- Identify community-based resources where students can access condoms?
- Describe sexually healthy choices for one's body?

Skills:

- Demonstrate effective STBBI prevention skills?

Attitudes:

- Accept the importance of learning about STBBIs?

ANSWER KEY: CALM STIs and HIV

Correct answers are in bold text.

1. You can catch STIs or HIV from door knobs, toilet seats, or drinking fountains.
 - True
 - **False**
 - Unsure

STIs and HIV are spread from an infected person to an uninfected person through sexual contact between one person's body and another person's genital area, semen, vaginal fluid, anal fluid, or through contact with infected blood or breastmilk. For HIV to spread, the infected fluid must enter the other person's bloodstream directly or via a mucous membrane through risk activities like sex, sharing of drug works, unsafe tattooing or piercing or breastfeeding.

2. Statistics in AB show the largest number of people who have chlamydia are teens & young adults.
 - **True**
 - False
 - Unsure

Chlamydia is the most commonly reported STI for Canadian teens. STI rates continue to escalate in Alberta. In 2017, teens were diagnosed with chlamydia at a rate of 1,452 cases per 100,000 people. In 2017, 79% of female cases and 67% of male cases of chlamydia were in people aged 15-29 years.

3. You can have an STI and not know it.
 - **True**
 - False
 - Unsure

You can be infected with an STI and have no symptoms, possibly for years.

4. If the symptoms of an STI go away, you don't need to see a doctor.
 - True
 - **False**
 - Unsure

STIs often don't go away without medical treatment. Without treatment, they can cause serious health problems and can be spread to other people.

5. There are things you can do to reduce your risk of an STI.
 - **True**
 - False
 - Unsure

You can abstain from sexual contact, use condoms or dental dams every time you have sex, communicate with your partners, and choose to be mutually monogamous with an uninfected partner or a partner who has had regular check-ups for STIs/HIV.

6. You have to be 18 years or older to be tested for STIs or HIV.
- True
 - **False**
 - Unsure

You can be tested and treated for an STI at any age. You can go to a doctor, STI clinic, or Sexual & Reproductive Health Clinic.

7. You can get an STI or HIV the first time you have sex.
- **True**
 - False
 - Unsure

You can get an STI or HIV as a result of any sexual contact, even if it is your first time.

8. You do not need your parent's consent to be tested or treated for an STI or HIV.
- **True**
 - False
 - Unsure

Information shared between a doctor and a patient is strictly confidential. Even though it can be a good idea for parents to know about your health, you do not need their consent/permission to be tested and treated for STBBI. It is also confidential, which means that without your permission, they cannot tell your parents about it either.

9. Condoms provide good protection from STIs and HIV.
- **True**
 - False
 - Unsure

If condoms are used correctly and every time, they can provide good (but not 100% effective) protection from STIs/HIV. Condoms that contain spermicide are not more effective, but they can cause irritation and increase the risk of STI/HIV transmission.

10. Only adults can get STIs or HIV.
- True
 - **False**
 - Unsure

Anyone, regardless of age, can get STIs or HIV if they participate in a risk activity like unprotected sex.

11. You are at greater risk for an STI or HIV if you have many sexual partners.

- **True**
- False
- Unsure

The more sexual partners a person has, the more likely it is for that person to get STIs/HIV. However, it is possible to get STIs/HIV with only one partner.

12. If you know your partner, you can't get an STI or HIV.

- True
- **False**
- Unsure

Knowing partners does not provide STI protection. Open, honest and clear communication about sex, sexual history and safer sex can lower risk by making it more likely that people access testing and treatment and use safer sex practices.

13. All STIs can be cured if diagnosed early enough.

- True
- **False**
- Unsure

Most STI can be cured. Some STI, like HIV and herpes, cannot be cured but can be very well managed with treatment. This means that when the person follows the directions from their health care provider, they can be very healthy, live a typical lifespan and be unlikely to pass it to others.



**Sex with someone who
has sex with others**

**Sex with one uninfected
person who has only had
sex with you**

**Frequent sex with
partners
you don't know well**



**Sex without a condom,
with a partner you
don't know well**

Total abstinence

**Sex with more
than one person**



Sex with a condom

Sex with one person who currently only has sex with you, but has had sex with others in the past

STBBI Scenario 1

Roj and Kris have been dating for two months. Sometimes they have sex. Roj thinks that Kris is having sex with other partners, but isn't sure.

Your role play can include conversations between any combination of the following:

- Roj
- Kris
- Their friend(s)
- Parent or other adult support person
- Teacher/guidance counsellor/principal
- A nurse or doctor

Write a script that addresses this question:

- What could Roj do?

STBBI Scenario 2

Shaun and Mahalia have been dating for a long time, and both of them want to have sex. When Mahalia asks Shaun to use a condom, Shaun is insulted. He says he is clean, that condoms are unnatural, fake and a total turn off, and since Mahalia is on the pill it shouldn't be necessary.

Your role play can include conversations between any combination of the following:

- Shaun
- Mahalia
- Their friend(s)
- Parent or other adult support person
- Teacher/guidance counsellor/principal
- A nurse or doctor

Write a script that addresses this question:

- What could Mahalia do?

STBBI Scenario 3

Jovanie and Dale have been in a long term relationship, and have been having sex for the last 8 months. Dale has been trying to convince Jovanie to stop using condoms “now that they know each other so well”.

Your role play can include conversations between any combination of the following:

- Jovanie
- Dale
- Their friend(s)
- Parent or other adult support person
- Teacher/guidance counsellor/principal
- A nurse or doctor

Write a script that addresses this question:

- What could Jovanie do?

STBBI Scenario 4

Kai and Ceri have been in a relationship for 3 months and have been having sex for 2 months. Kai recently noticed an unusual discharge from their penis. When they got tested, the results showed that they had gonorrhoea.

Kai accused Ceri of giving it to Kai, since they had been faithful to Ceri. Ceri has had sex with other partners, but doesn't have any symptoms. Kai would like Ceri to get tested, but Ceri doesn't want to.

Your role play can include conversations between any combination of the following:

- Ceri
- Kai
- Their friend(s)
- Parent or other adult support person
- Teacher/guidance counsellor/principal
- A nurse or doctor

Write a script that addresses this question:

- What could Kai do?

STBBI Scenario 5

Deniz has been with the same partner for a year, and just tested positive for chlamydia.

Your role play can include conversations between any combination of the following:

- Deniz
- Deniz's partner
- Their friend(s)
- Parent or other adult support person
- Teacher/guidance counsellor/principal
- A nurse or doctor

Write a script that addresses this question:

- What could Deniz do?

STBBI Scenario 6

Eden has never had sex. They recently shared needles with friends at a tattooing party. Eden realizes they have put themselves at risk for HIV or hepatitis B or C, and is worried. What should Eden do?

Your role play can include conversations between any combination of the following:

- Eden
- Their friend(s)
- Parent or other adult support person
- Teacher/guidance counsellor/principal
- A nurse or doctor

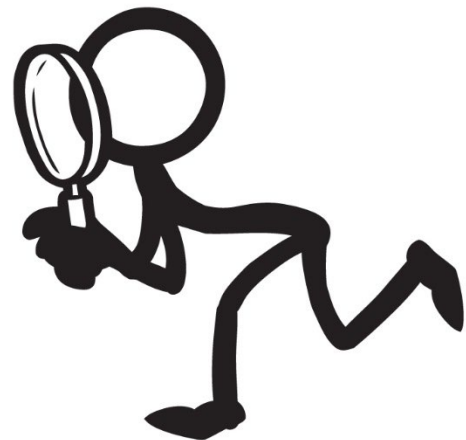
Write a script that addresses this question:

- What could Eden do?

Accessing Condoms

Knowing why and how to use internal and external condoms for sexual activity is important. Knowing where to get condoms (including free and low-cost options) is just as important as knowing how to use them.

1. Visit a store in your community that sells condoms, or a community program that provides free or low-cost condoms to clients. This can be a drug store, grocery store, convenience store, STI clinic, sexual health resource centre, community or public health centre, community agency etc. You can visit [ahs.ca/srh](https://www.ahs.ca/srh) for a list of programs and services in your area
2. Speak with someone at the store/clinic/agency and ask them to show you where the condoms are.
3. If the condoms are prominently displayed (like a bowl on the counter) or in the regular store aisles, think of another question to ask the staff member. The point is to actually speak to a person directly about condoms.
4. Take a picture of your hand and the condom/condom package to prove you completed the assignment. You do NOT need to buy or take a condom to complete this assignment.
5. Answer the questions on the next page.



Name: _____

CALM STBBIs

Questions:

Name of store/clinic/agency etc. that you visited:

Where were the condoms kept?

Could you have accessed the condoms without speaking to someone? Why or why not?

Did the person you spoke to seem approving or supportive of you accessing condoms?
What made you feel that way?

If you needed condoms, would you go back to this place? Why or why not?