

Grade 8

STBBIs



Learner Outcomes

W-8.13 Describe symptoms, effects, treatments and prevention for common sexually transmitted diseases; i.e., chlamydia, HPV, herpes, gonorrhea, hepatitis B/C, HIV

W-8.1 Examine the relationship between choices and resulting consequences

W-8.2 Analyze the impact of positive and changing choices on health throughout the life span

W-8.10 Develop strategies to effectively access health information and health services in the community; e.g. health hot line, family doctor, public health unit

R-8.6 Describe and provide examples of ethical behaviour in relationships

This lesson addresses all of the specific outcomes listed above. Instruction in human sexuality (***bolded and italicized*** outcomes) requires schools to provide notice to parents about the learning outcomes, topics and resources.

How To Use

This lesson plan contains several activities to achieve the learner outcomes 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 and G.

Classroom Activities & Timing

- A. Ground Rules (5-10 minutes)
- B. Defining STBBIs (10-15 minutes)
- C. Studying STBBIs (30-35 minutes)
- D. Assessing the Risk (25-30 minutes)
- E. STIs Kahoot! Quiz (10 minutes)
- F. Health Services Detective Homework
- G. Question Box (5-10 minutes)

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

Required Materials

HANDOUT and ANSWER KEY: STBBI Chart

HANDOUT: [STI Health Information Sheets](#)

HANDOUT: Be a Health Services Detective

MATERIALS: Small pieces of paper or index cards, one per student

CARDS: Is it Risky?

[KAHOOT! QUIZ](#) AND ANSWER KEY: Grade 8 STIs

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 seen as shameful and a “consequence” for sexual activity, especially for teens. This shame prevents many people from accessing testing and treatment and 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 the [STI Health Information Sheets](#). These sheets are not included in this lesson plan, as they are updated frequently. Using the link will ensure access to the most recent version of each Health Information Sheet. For more information about Pre-Exposure Prophylaxis (PrEP) and HIV, visit [MyHealthAlberta](#) or [www.prepalberta.ca](#)

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

B. Defining STBBIs

These discussion questions help students define STBBIs and provide a rationale for learning about them through class discussion.

With the class, discuss answers to the following questions. Discussion notes are provided.

What is an STI?

- STIs are infections spread primarily by close sexual contact and sexual intercourse. Sexual contact means any intimate skin-to-skin contact of the genital area. This includes touching or oral, vaginal or anal sexual activity with partners of any gender.

What are some STIs you have heard of?

- List student suggestions on the board.
- Show the [STI Tool](#) and compare the student suggestions to the eight common infections shown on the tool.

What are BBIs?

- Blood-borne infections are passed from one person to another through an exchange of blood and other body fluids.
- Examples include HIV, hepatitis B and hepatitis C

Together these infections are referred to as STBBIs.

STBBIs can be viral, bacterial or parasitic. What do those words mean?

- **Viral:** If a virus causes an infection, it is possible for the person to remain 'asymptomatic' for periods of time (meaning there are no symptoms). It is possible to have the virus and not know it. Passing the virus to another person without either person knowing it is possible. Viral STIs can be treated but are more difficult to cure. Some viral STIs are not curable at this time.
 - Viral STIs include human papillomavirus (HPV or genital warts) and genital herpes.
 - HIV, hepatitis B and hepatitis C are viral blood-borne infections.
- **Bacterial:** If bacteria causes an infection, it can be treated and cured with antibiotic medication. STIs that are bacterial include gonorrhea, chlamydia and syphilis.
- **Parasitic:** If a parasite causes an infection, it can be treated and cured with medication. Parasitic STIs include pubic lice (crabs), scabies and trichomoniasis.

The STI Tool can be accessed at <https://teachingsexualhealth.ca/teachers/resource/stis/>

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 to 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

When you hear the words STI or STBBI, what do you think?

- Encourage students to share feelings and reactions.
- Common student responses may be that these words are “disgusting,” or that it makes them think about death. Other responses may include embarrassment or shame. If students express ideas of shame or stigma, it can help to talk about what causes these feelings. Stigma and shame are rooted in fear, and often provide a false sense of protection, that only ‘other’ people get STIs. In reality, anyone having sex can get an STI, and there is nothing to be ashamed of. They can be tested for and treated. Talking about STIs is part of good healthy sexual relationships and consent.

How do HIV and hepatitis B and C differ from other STIs?

- HIV and hepatitis B and C are blood-borne infections.
- HIV and hepatitis B can also be transmitted by exchanging body fluids such as semen and vaginal secretions. HIV can also be transmitted through breastmilk.
- BBIs can be transmitted through sex, sharing drug, tattooing or piercing equipment that has traces of infected blood, or to a baby during pregnancy or birth. Hepatitis B and C can also be transmitted by sharing razors, nail clippers or toothbrushes with someone who has hep B or C.

Services available in your area can be found on the [AHS Sexual and Reproductive Health](#) website.

- Individuals cannot become infected with BBIs through ordinary day-to-day contact such as kissing, hugging, shaking hands or sharing food or water.
- Transmitting hepatitis C through sex is rare, however, it can occur if infected blood is present (such as during menstruation). The presence of HIV also increases the risk of transmitting hepatitis C through sex.
- There is a lot of fear and misinformation about BBIs, especially HIV. This is because when it was first discovered, many people were dying of AIDS. However, now, there is really good treatment for HIV, and people can live long healthy lives. There is also great preventative medication, called PrEP.
- There is also excellent treatment for Hep C now, and it's possible to "clear" the virus and cure it. Most people are immunized against hepatitis B. Both of these viruses are now fairly uncommon.

If you want to find out about STBBIs, what sources can provide accurate information?

- Family doctors, clinics (e.g., Sexual and Reproductive Health Clinic or STI Clinic) or community health centres
- Teachers, counsellors or school nurse
- Fact sheets from a reliable source (Health Services/Agency)

C. Studying STBBIs

Students describe symptoms, effects, testing, treatment and prevention for common STBBIs.

1. Before the lesson, print several copies of the [STI Health Information Sheets](#) for these infections:
 - Chlamydia
 - Genital herpes
 - Gonorrhoea
 - HIV
 - HPV
2. Give each student their own copy of the **STBBI Chart** handout.
3. Divide the class into small groups. Assign each group a specific infection by giving each group a different **Health Information Sheet**.

4. Ask each group to complete the appropriate section in the STBBI Chart using the information on the **STI Health Information Sheet**. You may wish to provide expectations such as “Fill in 1-2 bullet points in every box” as the Health Information Sheets contain a great deal of information.
5. Have groups share their findings with other groups, while students fill in all sections of the chart. You can ask groups to present their findings to the entire class or use a [jigsaw](#) approach.
6. Use the **STBBI Chart Answer Key** to ensure students have the correct information in their charts. The answer key is very detailed, with more information than most students will have filled in, to give you a more complete background for each infection. You do not need to expect students to provide this level of detail.
7. Debrief this activity using the following questions:

What are some symptoms of STBBIs?

- Point out that many people with STBBIs have no symptoms.

How would you know if you had an STBBI?

- If you have no symptoms, regular testing is the only way to know.
- If you have symptoms, a test will confirm which STBBI you have.

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.

Prevention is key. 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 STIs?

- Open and honest communication about their STI history and test results
- Not having sex /sexual activity 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 STIs before sexual activity is part of getting consent for sexual activity. A person cannot consent to sexual activity with someone if they do not know about that person's STI.

D. Assessing the Risk

Students identify those activities that are lower and higher risk for transmission of STBBIs.

1. Print the **Is it Risky?** cards and cut into separate pieces.
2. Draw or cut out three large circles to represent the three colours of traffic lights: red, yellow and green.
3. Tape these three circles to the wall at the front of the classroom. Explain to students that the three traffic lights at the front of the class represent points along a risk continuum. Note that the risk refers only to STBBI transmission, not other types of risk.
 - Green means no risk of STBBI transmission.
 - Yellow means some risk of STBBI transmission.
 - Red means a higher risk of STBBI transmission.
4. Distribute the **Is it Risky?** cards, one to each student, until all cards are distributed. If a student does not have a card, they can partner up with someone who does.
5. Briefly discuss the content of the cards to ensure everyone understands the meanings of each activity listed. For example, 'using two condoms at the same time' can refer to putting two condoms on the penis or using an external condom (male condom) and internal condom (vaginal condom) together. Both of these make it more likely one or both condoms will slip or break due to friction.
6. Ask students to read their cards and discuss them with their neighbours, then place their cards beneath the appropriate traffic light.

Be sure to review the cards to ensure that they are appropriate for use in your classroom. Remove or add cards as needed.

7. Review each activity and its place along the continuum when all cards have been placed along the wall. Ask if any cards should be moved, discuss why and do so if appropriate. Remember that any activity that is not risk-free puts a person at risk of an STBBI and the purpose of the activity is to identify relative risk.

8. Debrief this activity using the following questions:

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

- Choose to not have sex or intimate sexual contact
- Use condoms/dental dams
- Limit the number of sexual partners
- Go for regular STI testing
- Get immunized
- Access PrEP

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

- Go for STI testing and treatment
- Choose lower risk behaviours in the future if they wish to have lower risk of contracting or transmitting an STI

Answer Key:

GREEN LIGHT	YELLOW LIGHT	RED LIGHT
NO RISK	LOWER RISK	HIGHER RISK
<ul style="list-style-type: none"> • Massage • Dry kissing • French kissing • Fantasizing • Masturbating • Hugging • Flirting • Sexting 	<ul style="list-style-type: none"> • Sex with a condom/dental dam • Mutual masturbation 	<ul style="list-style-type: none"> • Oral, vaginal or anal sex without a condom/dental dam • Using the same condom/dental dam twice • Sharing needles • Sharing sex toys • Using two condoms at the same time • Multiple sexual partners

E. STIs Kahoot! Quiz

This quiz can be a great review, wrap-up of the unit or a fun energizer in between other activities. For more information on using Kahoot!, visit kahoot.com

1. Open the Kahoot! Quiz: [Grade 8 STIs](#)
2. As a class, answer the quiz questions and discuss the answers together. You can play the quiz in individual or team mode.

F. Health Services Detective

Students identify community-based resources where they could go to get testing and information about STBBIs. Consider completing the entire assignment during class time if your students do not have reliable internet access or devices at home.

1. Distribute the **Be a Health Services Detective** handout. Review the instructions with students.
2. Invite students to complete this assignment at home on their own or with a parent, guardian or other supportive adult.
3. In the next class, create a list of clinics/community-based resources.
4. Discuss the following questions:
 - What advice would you give someone who thought they had an STBBI?
 - Which of the clinics we identified looks like a good place to go for support?
 - How would you get to the clinic if you needed to go for yourself or with a friend?

Keep in mind that not all students have equal opportunities for open discussion with family or other adults in their life. Although it is best for students to complete this assignment with a supportive parent or other adult, it may not be possible. Be sensitive to the needs of your students.

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

G. 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 symptoms, testing, treatments and prevention for common STBBIs?

Skills:

- identify community-based resources where information and testing for STBBIs is available?
- assess lower and higher risk activities for STBBIs?

Attitudes:

- accept the need to prevent STBBIs?

Name: _____

STBBI Chart

Transmission and Symptoms

Using the information provided on the health information sheets, fill in the chart below.

Infection	Bacteria or Virus?	Transmission	Symptoms/Effects
Chlamydia			
Gonorrhea			

Name: _____

Infection	Bacteria or Virus?	Transmission	Symptoms/Effects
HPV			
Genital Herpes			
HIV			

STBBI Chart

Prevention, Testing and Treatment

Infection	Prevention	Testing	Treatment
Chlamydia			
Gonorrhea			

Name: _____

Infection	Prevention	Testing	Treatment
HPV			
Genital Herpes			
HIV			

Answer Key

Infection	Bacteria or Virus?	Transmission	Symptoms/Effects
The majority of STBBIs are asymptomatic. There are often no symptoms!			
Chlamydia	Bacteria	<ul style="list-style-type: none"> Vaginal, anal, or oral sex with a person who has Chlamydia without using a condom and/or a dental dam 	<ul style="list-style-type: none"> Pain or burning when peeing Discharge, bleeding or itching from the bum Redness and/or discharge from one or both eyes Watery or milky discharge from penis Unusual discharge from the vagina Pain or swelling of the testicles Irritation or itching inside the penis Vaginal bleeding/spotting between periods Vaginal bleeding or pain during or after sex Lower abdominal pain If untreated, could lead to pelvic inflammatory disease, pain and swelling of the testicles, urinary tract problems, tubal pregnancy, fertility issues and/or arthritis
Gonorrhea	Bacteria	<ul style="list-style-type: none"> Vaginal, oral or anal sex with a person who has gonorrhea without using a condom and/or a dental dam. 	<ul style="list-style-type: none"> Pain or burning when peeing Swelling, itching, or pain in the genital area Discharge, bleeding, or itching from the bum Redness and/or discharge from one or both eyes Unusual vaginal discharge Irregular vaginal bleeding (often after sex) Pain in the lower abdomen or pain during sex Green or yellow discharge from the penis Irritation or itching inside the penis Painful or swollen testicles If left untreated, could lead to pain and swelling of the testicles, urinary tract problems, pelvic inflammatory disease, tubal pregnancy, and/or fertility issues

Name: _____

HPV	Virus	Through intimate skin-to-skin contact with a person who has HPV	<ul style="list-style-type: none"> • Some strains of HPV cause genital warts; some strains cause cancer in the mouth, throat, anus, penis or cervix • Many people with HPV do not have symptoms • Some people get warts • Warts can show as tiny bumps or in clustered growths on the skin (may look like small cauliflower-like bumps) • Warts can be found in and around the genital area, including in the vagina • Warts may feel itchy or irritated
Genital Herpes	Virus	<ul style="list-style-type: none"> • Herpes simplex virus is spread through intimate skin-to-skin contact and oral, vaginal or anal sex • It can be transmitted by people who have oral or genital herpes but don't have sores at the time of contact • Cold sores are a form of the herpes virus. If a cold sore comes into contact with someone's genitals (oral sex) there is a risk for genital herpes. 	<ul style="list-style-type: none"> • Some people have mild or no symptoms and don't know that they are infected • One or more painful blisters in or around the genitals, or wherever there is skin-to-skin contact (rectum, mouth) • Feeling unwell (e.g., flu-like symptoms such as chills, fever or muscle aches) • Tingling or itching of the skin around the genitals • Burning when urinating • Unusual discharge from vagina or penis • The first outbreak is the most painful. Repeat outbreaks tend to be shorter and less severe than the first outbreak.
HIV	Virus	<ul style="list-style-type: none"> • Infected semen, vaginal secretions, rectal fluid or breastmilk that gets into the blood stream through: <ul style="list-style-type: none"> • vaginal, anal, oral sex without a condom and/or dental dam • sharing sex toys • sharing needles used for tattooing, drugs, piercings • Pregnancy – the infection can be passed to a baby through childbirth or breastfeeding 	<ul style="list-style-type: none"> • People with HIV often have no symptoms and look and feel fine. • Some people with HIV will have flu-like symptoms when they first get infected (e.g., fatigue, fever, sore throat, swollen glands loss of appetite, night sweats etc.) • HIV can lead to a condition called AIDS, after the virus has damaged the immune system. With access to treatment, most people living with HIV never develop AIDS.

Answer Key

Infection	Prevention	Testing	Treatment
Chlamydia	<ul style="list-style-type: none"> • Choose not to have oral, vaginal or anal sex • Choose safer sex practices with lower risk (e.g. masturbation, massage) • Use condoms and/or dental dams for oral, vaginal, and anal sex. • Limit the number of sexual partners • Regular testing • Discuss STI history and when you were last tested with your partner(s) • Don't have sexual contact if you or your partner(s) have symptoms of an STI or may have been exposed to an STI 	<ul style="list-style-type: none"> • Urine sample or swab of the penis, rectum, vagina or throat 	<ul style="list-style-type: none"> • Antibiotic
Gonorrhoea	<ul style="list-style-type: none"> • Choose not to have oral, vaginal or anal sex • Choose safer sex practices with lower risk (e.g. masturbation, massage) • Use condoms and/or dental dams for oral, vaginal, and anal sex. • Limit the number of sexual partners • Regular testing • Discuss STI history and when you were last tested with your partner(s) • Don't have sexual contact if you or your partner(s) have symptoms of an STI or may have been exposed to an STI 	<ul style="list-style-type: none"> • Urine sample or swab of the penis, rectum, vagina or throat 	<ul style="list-style-type: none"> • Antibiotic

Infection	Prevention	Testing	Treatment
HPV	<ul style="list-style-type: none"> Choose not to have oral, vaginal or anal sex Choose safer sex practices with lower risk (e.g. masturbation, massage) Using condoms can lower risk, but can't completely prevent HPV because they don't cover all the skin around the genitals Tell your partner(s) if you have genital warts so you can make choices together to lower the risk of passing the virus Avoid intimate skin-to-skin contact where the warts are until warts are treated Get immunized! Ask your health care provider about the HPV vaccine 	<ul style="list-style-type: none"> Visual exam if warts are present Regular PAP tests (cervical cancer screening) 	<ul style="list-style-type: none"> Warts can be treated by health care provider with freezing Can apply prescription liquids or creams to the wart
Genital Herpes	<ul style="list-style-type: none"> Choose not to have oral, vaginal or anal sex Choose safer sex practices with lower risk (e.g. masturbation, massage) Tell your partner(s) if you have herpes or cold sores so you can make choices together to lower the risk of passing the virus. Use condoms and/or dental dams between outbreaks to lower the risk of passing the virus – the virus can be transmitted even when symptoms aren't present Avoid sexual contact while sores are present (during an 'outbreak') 	<ul style="list-style-type: none"> When sores are present, they can be swabbed to test for the herpes virus 	<ul style="list-style-type: none"> No cure Medicine may help shorten or prevent outbreaks

Infection	Prevention	Testing	Treatment
HIV	<ul style="list-style-type: none"> • Choose not to have oral, vaginal or anal sex • Choose safer sex practices with lower risk (e.g. masturbation, massage) • Use condoms for vaginal and anal sex • Use a condom or dental dam for oral sex • Use lubrication to help avoid injury to body tissues • Use condoms on sex toys or avoid sharing them. • Don't share needles or equipment for injecting drugs • Be sure that the instruments for tattoos and body piercing have been sterilized • Pre-Exposure Prophylaxis (PrEP) helps prevent HIV in people who have a very high risk of getting the virus 	<ul style="list-style-type: none"> • Blood test – the most accurate results will be 3 months after a potential exposure 	<ul style="list-style-type: none"> • Anti-retroviral drugs cannot cure HIV but can help people with HIV live long, healthy lives. Treatment also makes it so that people with HIV who are on treatment are less likely to pass the virus to others.

Be a Health Services Detective

Pretend your friend thinks they have an STI. Your friend wants to get testing to see if they needed treatment and counselling. Where could they go for help? Fill out the handout with information from a clinic in your community. If possible, ask your parent, guardian or other supportive adult for advice on where to go.

Try starting your search at ahs.ca/srh

1. Name of Clinic:
2. Address and phone number of clinic:
3. Clinic website:
4. Clinic hours:
5. Does this clinic have appointments, walk-in times, or both?
6. Can everyone use this clinic? If not, who is it for?

Name: _____

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7. The following services are available at this clinic:
- | | |
|---|--|
| <input type="checkbox"/> STI testing | <input type="checkbox"/> Birth control |
| <input type="checkbox"/> STI treatment | <input type="checkbox"/> Free/low-cost condoms |
| <input type="checkbox"/> HIV testing/PrEP | <input type="checkbox"/> Pregnancy tests |
| <input type="checkbox"/> HIV counselling | <input type="checkbox"/> Prenatal care |
| <input type="checkbox"/> Support groups | <input type="checkbox"/> Referrals to other healthcare |
8. What is the clinic's policy on confidentiality?
9. Would you tell your friend to visit this clinic for help? Write 2-4 sentences telling why or why not.



Massage

Dry kissing

French kissing

Fantasizing

Masturbating



Hugging

Flirting

Sexting

**Sex with a condom/dental
dam**

Mutual masturbation



**Oral, vaginal or anal sex
without a condom/dental
dam**

**Using the same
condom/dental dam twice**

Sharing needles

Sharing sex toys

**Using two condoms at the
same time**



Multiple sexual partners

ANSWER KEY: Grade 8 STI Quiz

Correct answers are in bold text.

1. STI stands for:
 - Small Talk International
 - Sexually Transmitted Disease
 - Subaru Tecnica Internal
 - **Sexually Transmitted Infection**

STI has replaced the older term Sexually Transmitted Disease (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.

2. Many people who have an STI have no symptoms.
 - **True**
 - False

Some people have symptoms, but many don't. That is why regular testing is important for people who are sexually active.

3. Ways to reduce the chance of getting an STI include:
 - **Using condoms/dental dams**
 - **Abstinence**
 - **HIV PrEP**
 - **HPV immunization**

All of these are effective strategies for reducing transmission and preventing STIs.

4. Herpes cannot be cured, but there are good treatments for the symptoms.
 - **True**
 - False

Currently, there is no medical cure for herpes. Treatment is available for the symptoms and to reduce the likelihood of passing the virus on to others.

5. STI testing is very painful.
 - True
 - **False**

STI tests often involve a urine sample (pee in a cup), a throat swab (like a Covid test) or a blood test. They are quick and usually painless. Some tests can be taken home to do in private.

Kahoot! Quiz Answer Key

6. Sexually active people should get tested for STIs regularly.

- **True**
- False

Yearly testing is recommended for all sexually active people, and more often for some people. See the background information section for detailed recommendations on when a person should go for STI testing.

7. If you have an STI and don't tell your partner, that is fair. It is only your business.

- True
- **False**

We each have the responsibility to be honest with our partners. If you know or suspect you have an STI, it's important to tell your partner. People cannot fully consent to sex if they don't know their partner has an STI.

8. STIs among teenagers are really pretty rare.

- True
- **False**
- Unsure
- Nobody Knows

Thousands of teenagers have STIs. It doesn't matter what age you are; STIs can infect a person of any age.

9. In Alberta, parents need to be notified if their child is treated for an STI.

- True
- **False**
- Unsure
- Nobody Knows

At the Sexual & Reproductive Health Clinics and STI Clinics, parents are NOT notified if their child is being treated for an STI as long as there are no concerns for the child's safety. However, it is always best to talk with your parents, even about a difficult subject such as an STI.