

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 H.

Classroom Activities & Timing

- A. Ground Rules (5-10 minutes)
- B. Defining STBBIs (10-15 minutes)
- C. Studying STBBIs (30-35 minutes)
- D. STBBI Autograph Game (20-30 minutes)
- E. Assessing the Risk (25-30 minutes)

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

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- F. STIs Kahoot! Quiz (10 minutes)
- G. Health Services Detective Homework
- H. Question Box (5-10 minutes)

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. It also helps to prevent fertility problems associated with having an STBBI or allowing an STBBI to go untreated.

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 50% of chlamydia cases reported in 2016 were in Albertans ages 15-24. This lesson shows the progression in the spread of an STBBI, prompts thinking about the reasons many people do not protect themselves and encourages students to assess risk and make personal decisions concerning sexual behaviour that may prevent STBBIs.

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 the most up-to-date 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.

Inclusive Language

Language is complex, evolving and powerful. In these lessons, [gender-neutral language](#) is used to be inclusive of all students, including those with diverse gender identities and sexual orientations. This includes the use of ‘they’ as a singular gender-neutral pronoun. The lesson plans use the terms ‘male’ and ‘female’ when referring to biological sex (sex assigned at birth), such as when discussing reproductive anatomy. A person’s reproductive system can be male, female or intersex (not clearly defined as either male or female).

People are assigned a sex at birth based on their reproductive anatomy. Sex assigned at birth is independent of gender identity. Gender identity is a person’s internal sense of identity as female, male, both or neither, regardless of their biological sex assigned at birth.

For many people, their gender matches the sex they were assigned at birth (cisgender). Others may identify as being transgender or gender diverse if their gender identity does not match the sex they were assigned at birth. A person’s gender identity can be girl, woman, boy, man, transgender, gender fluid, gender queer, agender or others. The intention in this material is to use language that reflects these many possibilities.

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 the definition of STI?

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

What are some STIs you have heard of?

- List student suggestions on the board.

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

- 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.

STIs 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 and it is possible to pass it to another person without either person knowing it. 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.

Why is it important to learn about STIs and BBIs?

- It helps a person be able to take care of their own body.
- It helps a person to discuss STBBIs with a partner.
- Untreated STBBIs can jeopardize a person's health and future ability to have children.
- BBIs and some untreated STIs can be passed from mothers to babies.
- It helps us recognize myths like "It's easy to tell if a person has an STBBI because they will look sick" that could stop a person from using effective prevention methods or seeking needed treatments.

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

- Encourage students to share feelings and reactions.

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- 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.
- Identify common themes throughout the discussion.

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 is also transmitted through breastmilk.
- Although hepatitis B can be found in saliva, it is uncommon to transmit through saliva that is not visibly contaminated with blood.
- BBIs can be transmitted from an infected mother to a baby during pregnancy or birth, by helping someone who is bleeding without using gloves, by sexual intercourse and by reusing drug, tattooing or piercing equipment that have traces of infected blood. Hepatitis B and C can also be spread by sharing razors, nail clippers or toothbrushes with an infected person.
- 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 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 intercourse.

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

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, 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
 - Gonorrhea
 - 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 2-3 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 the many people with STBBIs have no symptoms.

How would you know if you had an STBBI?

- If you have no symptoms, testing is the only way to know.

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](#), [vaginal condoms](#) and [dental dams](#) correctly

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- 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

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 sexual intercourse/sexual activity if there are any symptoms present or you think you are infected
- Using condoms and latex barriers 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 ethically consent to sexual activity with someone if they do not know about that person's STI.

D. STI Autograph Game

Students become aware of how rapidly an STI can spread with unprotected intercourse and identify different protective measures.

1. Gather enough index cards to have one per student. On the back of one card, write a letter 'i'. On the backs of five other cards, write the letter 'c'. On the backs of six other cards, write the letter 'a'. On the rest of the cards, write random numbers or letters to disguise the meaning of the 'a', 'i' and 'c'.
2. Distribute one card to each student. It is very important for the teacher to ensure that the 'i' card discretely goes to a confident student in the class as opposed to one of the shyest students who may not be able to handle being 'the one' who 'had' an STI. Do not tell the students anything about the letters on the back of their cards at this stage in the game.
3. Ask students to stand and mingle, then find a partner. Partners cannot be repeated during the game. It is important that the students mix well between each round and choose partners from throughout the room.
4. With the first partner, students sign their name to their partner's card and then discuss some names and characteristics of common STIs.

Students may embarrass easily when identified as 'having' an STI. It is important to remind students that this is a game and reinforce the need for them to be sensitive to one another's feelings.

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5. With a second partner, students sign their name to their partner's card, then discuss one reason people do not protect themselves from STIs.
6. With a third partner, students sign their name to their partner's card, then discuss two ways people can protect themselves from STIs.
7. Have students sit back down in their seats, holding onto their own cards (each card should have three different names on it). Ask students to look at the back of their card. Ask the person with the 'i' on their card to stand. Explain that for the purpose of the game, this person has an STI.
8. Ask the person with the 'i' to read out the names of people written on their card. Explain that these people have had contact with the infected person and now have the potential to be infected with an STI.
9. These people now stand and read out the names written on their cards. Continue this procedure until everyone whose name is read is standing. (It will be most of the class).
10. Ask those students who are standing to examine the back of their cards. Those standing with an 'a' may sit. The 'a' indicates that although they have had relationships, they were 'abstinent' (did not have sexual contact).
11. Those standing with a 'c' may also sit. The 'c' indicates that the person used a condom or latex barrier during all sexual contact, thereby reducing their risk of an STI.
12. Before the students who remain standing take their seats, discuss the fact that here are many bright, healthy, intelligent, students who have been exposed to an STI. They didn't know until the 'contact' let them know that they had been infected.
13. Debrief this activity using the following questions:

How does this activity relate to the spread of infection?

 - You can't always tell who (including you) has an infection and who doesn't.
 - You can protect yourself from STIs by remaining abstinent.
 - You can reduce your risk of getting an STI by limiting your sexual partners and always using condoms/latex barriers.

How did it feel to find out you had been exposed to an STI?

How did it feel to find out you had exposed others to an STI?

For those of you who were able to sit down because you were abstinent, how did it feel to be able to sit down again?

For those of you who were able to sit down because you and your partner always used a condom/latex barrier, how did it feel to be able to sit down again?

E. 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.
 - Green means virtually no risk.
 - Yellow means some risk.
 - Red means definite risk.
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 a condom and 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.
7. When all cards have been placed along the wall, review each behaviour and its place along the continuum. 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?

- Abstain from sexual intercourse and intimate sexual contact
- Use condoms/latex barriers
- Limit the number of sexual partners
- Go for STI testing

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

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

- Go for STI testing and treatment if required
- Choose lower risk behaviours in the future if they wish to have lower risk of contracting or spreading 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 • Abstaining from all sexual activity • Fantasizing • Masturbating • Hugging • Flirting 	<ul style="list-style-type: none"> • Using a condom/latex barrier with an uninfected partner • Using a condom/latex barrier with an infected partner • Using a condom/latex barrier for all sexual activity • Mutual masturbation 	<ul style="list-style-type: none"> • Unprotected oral, vaginal or anal sex • Using the same condom/latex barrier twice • Sharing needles • Sharing sex toys • Using two condoms at the same time • Having oral, vaginal or anal sex with multiple partners

F. 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 getkahoot.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.

G. Health Services Detective

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

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 symptoms, effects, treatments and prevention for common STBBIs?
- identify community-based resources where they could go for information and STBBI testing?

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?
- become aware of how rapidly an STBBI can spread with unprotected sexual intercourse (oral, anal and vaginal)?

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
Chlamydia			
Genital Herpes			

Name: _____

Infection	Bacteria or Virus?	Transmission	Symptoms
HPV			
Gonorrhea			
HIV			

STBBI Chart

Prevention and Treatment

Infection	Prevention	Treatment	Consequences if left untreated
Chlamydia			
Genital Herpes			

Name: _____

Infection	Prevention	Treatment	Consequences if left untreated
HPV			
Gonorrhea			
HIV			

STBBI Chart Answer Key

Transmission and Symptoms

Infection	Bacteria or Virus?	Transmission	Symptoms	
			Male	Female
The majority of STBBIs are asymptomatic. There are often no symptoms!				
Chlamydia	Bacteria	<ul style="list-style-type: none"> By having unprotected vaginal, anal, or oral sex with a person who has Chlamydia Childbirth-from an infected mother to an unborn baby Infected fluid contact with the eye 	<ul style="list-style-type: none"> Watery or milky discharge from penis Discharge, bleeding or itching from the rectum Redness and/or discharge from one or both eyes Pain or burning when urinating Pain or swelling of the testicles Itchy urethra 	<ul style="list-style-type: none"> Discharge, bleeding or itching from the rectum Redness and/or discharge from one or both eyes Unusual discharge from the vagina Bleeding/spotting between periods Bleeding or pain during or after sex Lower abdominal pain Pain or burning when urinating
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 spread by people who have oral or genital herpes but don't have sores at the time of contact If a mother has genital sores during childbirth, herpes can be passed to the baby 	<ul style="list-style-type: none"> Same for males and females 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. 	

		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 development of genital herpes.	
HPV	Virus	Through intimate skin-to-skin contact or unprotected vaginal, oral or anal sex with a person who has HPV	<ul style="list-style-type: none"> • Some strains of HPV cause genital warts; some strains cause cancer • 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 • May feel itchy or irritated <ul style="list-style-type: none"> • See male symptoms • They can also appear on the vaginal walls and cervix (opening of the uterus)
Gonorrhea	Bacteria	<ul style="list-style-type: none"> • By having unprotected vaginal, oral or anal sex with a person who has gonorrhea • Childbirth-from an infected mother to an unborn baby • Infected fluid contact with the eye 	<ul style="list-style-type: none"> • Pain or burning when you pee • Swelling, itching, or pain in the genital area • Discharge, bleeding, or itching from the bum • Redness and/or discharge from one or both eyes • Green or yellow discharge from the penis • Irritation or itching inside the penis • Painful or swollen testicles <ul style="list-style-type: none"> • Pain or burning when you pee • 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 bleeding (often after sex) • Pain in the lower abdomen or pain during sex
HIV	Virus	<ul style="list-style-type: none"> • Contact with blood, semen, vaginal secretions, rectal fluid or breastmilk • Unprotected sex – including vaginal, anal, oral sex and sharing sex toys, etc. • Pregnancy – from an infected mother to an unborn baby, breastfeeding, childbirth 	<ul style="list-style-type: none"> • Same for males and females • HIV – infected people 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.) • AIDS occurs after the virus has damaged the immune system. People may have symptoms like extreme weight loss, unusual skin infections, pneumonias or cancers. • AIDS can be delayed with proper follow-up care

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		<ul style="list-style-type: none">• Sharing needles, syringes or other drug supplies with traces of the blood of an infected person (e.g., tattooing, sharing needles, piercing) or other blood exposure to infected blood/blood products	
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STBBI Chart Answer Key

Prevention and Treatment

Infection	Prevention	Treatment/ Management	Consequences if left untreated
Chlamydia	<ul style="list-style-type: none"> • Abstinence • Practice safer sex (condoms, dental dams, use lubricant to prevent tearing of membranes). • Limit the number of sexual partners • Regular testing • Ask you partner about their sexual history • Avoid having sex with an infected person • Tell your partner if you have an infection • Avoid sexual activity until treatment is completed 	<ul style="list-style-type: none"> • Antibiotic 	<ul style="list-style-type: none"> • Females are at risk for pelvic inflammatory disease, tubal pregnancy, infertility and arthritis • Females can pass chlamydia to their babies during childbirth causing eye or lung infections • Males are at risk for pain and swelling of the testicles, urinary tract problems, arthritis and infertility
Genital Herpes	<ul style="list-style-type: none"> • See chlamydia prevention • Do not have sexual intercourse with someone who has sores on their genitals or is known to have genital herpes • Follow recommendations from a health care provider 	<ul style="list-style-type: none"> • No cure • Medicine may help shorten or prevent outbreaks 	<ul style="list-style-type: none"> • Effects are mainly emotional due to the ongoing nature of the disease and the unpredictable occurrence of outbreaks • Increased risk for other STBBIs, including HIV

Name: _____

<p>HPV</p>	<ul style="list-style-type: none"> • See Chlamydia prevention • If warts return, see your doctor and do not have sexual contact until warts are treated and use safer sexual practices • Get immunized! Ask your health care provider about the vaccine • Use a condom even when no sores are present 	<ul style="list-style-type: none"> • Can be treated by health care provider with freezing • Can apply prescription liquids or creams to the wart 	<ul style="list-style-type: none"> • Some types of HPV can cause cervical cancer, other types of genital cancer, cancer of the mouth, throat, anus and penis
<p>Gonorrhea</p>	<ul style="list-style-type: none"> • See Chlamydia prevention 	<ul style="list-style-type: none"> • Antibiotic 	<ul style="list-style-type: none"> • Females are at risk for pelvic inflammatory disease, tubal pregnancy, infertility and arthritis • Gonorrhea can be passed from mother to unborn baby causing eye, blood or joint infections • Males are at risk for pain and swelling of the testicles, urinary tract problems, arthritis and infertility
<p>HIV</p>	<ul style="list-style-type: none"> • See Chlamydia prevention • Avoid sex practices that cause injury to body tissues • Don't share sex toys • Never share needles or equipment for injecting drugs • Be sure that the instruments to be used on you for tattoos and body piercing have been sterilized 	<ul style="list-style-type: none"> • No cure • Anti-retroviral drugs cannot cure HIV but can keep it under control 	<ul style="list-style-type: none"> • HIV can lead to a lowered immune system, reducing the body's ability to fight infections. Over time, symptoms develop; the end stage of infection is called AIDS. This is when opportunistic infections and cancers develop and is fatal.

5. Can anyone use this clinic? If not, who is it for?

6. 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"/> Condom distribution |
| <input type="checkbox"/> HIV testing | <input type="checkbox"/> Pregnancy tests |
| <input type="checkbox"/> HIV counselling | <input type="checkbox"/> Prenatal care |
| <input type="checkbox"/> Support groups | <input type="checkbox"/> Other agency referrals |

7. What is the clinic's policy on confidentiality?

8. Would you tell your friend to visit this clinic for an examination or consultation about safer sex? Write 2-4 sentences telling why or why not.



Massage

Dry kissing

French kissing

**Abstaining from all sexual
activity**

Fantasizing

Masturbating



Hugging

Flirting

**Using a condom/latex barrier
with an uninfected partner**

**Using a condom/latex barrier
with an infected partner**

**Using a condom/latex barrier for
all sexual activity**

Mutual masturbation



**Unprotected oral,
vaginal or anal sex**

**Using the same condom/latex
barrier twice**

Sharing needles

Sharing sex toys

**Using two condoms at the same
time**

**Having oral, vaginal or anal sex
with multiple 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. A person with herpes can be completely cured with proper medical treatment.
 - True
 - **False**
 - Unsure
 - Nobody Knows

Currently there is no medical cure for herpes. Treatment is available for the symptoms, but there is no cure for the disease, so people often have recurrences.

3. It is easier for females than males to tell if they have an STI.
 - True
 - **False**
 - Unsure
 - Nobody Knows

Most people, whether male or female, will have no symptoms. However, males are more likely than females to have symptoms. As well, females may not see symptoms as easily as males.

4. STIs are not all that serious.
 - True
 - **False**
 - Unsure
 - Nobody Knows

STIs can have a variety of very serious and even life-threatening consequences. They should not be ignored or taken lightly.

5. A person with one sex partner is less likely to get an STI than a person with ten partners.
 - **True**
 - False
 - Unsure
 - Nobody Knows

Kahoot! Quiz Answer Key

TRUE...BUT while it is possible for a person with only one sexual partner to get an STI, the chances increase with the more sexual partners a person has. Abstinence is the best way of preventing the spread of STIs.

6. If a person doesn't know if their partner has an STI, it is risky to have sex with them.
- **True**
 - False
 - Unsure
 - Nobody Knows

It would be unwise to have sexual activity with someone who has an STI since it spreads so easily. A person needs to respect themselves and take responsibility for their personal body and health care.

7. One consequence of having an STI might be the inability to have children later in life.
- **True**
 - False
 - Unsure
 - Nobody Knows

Sterility is an example of a serious consequence of some STIs. Some STIs can make it impossible to have children in the future. Most teenagers want that choice open to them later in life.

8. If you have an STI and don't tell your partner, that is fair. It is only your business.
- True
 - **False**
 - Unsure
 - Nobody Knows

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.

9. 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.

10. In Alberta, parents need to be notified if their child is treated for an STI.
- True
 - **False**
 - Unsure
 - Nobody Knows

At the Sexual & Reproductive Clinics and STI Clinics, parents are NOT notified if their child is being treated for an STI. However, it is always best to talk with your parents, even about a difficult subject such as an STI.