LEARNER OUTCOME P12¹:
Examine aspects of healthy sexuality and responsible sexual behaviour.

MATERIALS:
1. HANDOUT: Drinking, A Love Story
2. HANDOUT: Making the Connection-Team Challenge

INTRODUCTION:
Adolescents are faced with many pressures and decisions regarding drugs, alcohol, and sexual activity. Often, these decisions occur simultaneously. Research suggests that adolescent substance use may lead to unprotected sexual intercourse, premature sexual initiation, and multiple sexual partners. Additionally, substance use may place adolescents at risk for unintended pregnancy, sexually transmitted infections (STIs), and sexual assault². This lesson plan is the first in a series of two, and examines the relationship between substance use and sexual decision-making. This lesson will help students to consider the relationship between substance use and sexual decision-making; examine why students choose to use substances before engaging in sexual activity; and understand the consequences of combining alcohol, drugs and sex.

APPROACHES/STRATEGIES:
A. GROUND RULES (5 min)
Ensure ground rules are established before beginning this lesson. For classes that have already established ground rules, quickly reviewing them can promote a successful lesson.
During the lesson on substance use and sexual decision-making, the topic of sexual assault may arise. Addressing the topic of sexual assault may cause some students to be distressed or show other signs they are, or have somehow been involved in an abusive situation. Dealing with controversial issues encourages students to examine their own beliefs and experiences. Teachers need to act with sensitivity and discretion when handling individual student information that is sensitive or could cause embarrassment or distress to the student or family. Respect confidentiality in the classroom and anticipate where discussions will lead in order to protect students from revealing inappropriate personal information. Reinforce confidentiality and sensitivity when discussing this topic. Refer to your school division’s guidelines about disclosures and reporting.

B. Drinking, a love Story (15-20 min)

Students consider influences of substances on sexual decision making, and the reasons and consequences for using substances during the sexual decision-making process.

1. Distribute a copy of Drinking, a Love Story to each student.
2. Ask students to read the story individually.
3. Ask for reactions to the excerpt.
   - **What is the message of the story?**
     - The uses of substances, such as alcohol, affect a person’s ability to make healthy decisions.
     - The use of substances may cause a person to act impulsively in the moment, and question the consequences of those actions later.
   - **How did using alcohol influence the person’s decisions?**
     - The person had sexual activity with a person she or he may not know.
     - Perhaps the person did not use condoms and/or other safer sex methods.
     - The person’s inhibitions were lowered.
   - **What are possible reasons why this person chose to drink? Are those reasons different if you are male or female?**
     - An adolescent’s emotional and mental health

Prior to completing the lesson on substance use and sexuality, consider completing the lesson: Decision-Making. This lesson discusses the concept of decision-making in detail.

It is important to note that the effect of any drug depends on the specific drug, the amount, how it is taken, what the person expects, previous exposure of the body to this and other drugs, the setting or location, the user’s mental state and other drugs being used.
difficulties as indicated by a lack of coping skills increases their likelihood of engaging in substance use which is associated with early initiation of sexual experiences.

- Lack of positive parental communication, role modelling, and trust of the adolescent has been related to depression and risky sexual behaviour among teens.
- Adolescent interaction with peers and their perceptions of these interactions will reflect in their sexual behaviour.
- Males may be more likely than females to use alcohol or drugs before their last intercourse. In one Canadian study, 40% of grade 11 males, compared to 20% of females used alcohol before their last intercourse. Whereas in grade 9, 40% of males compared to 30% of females used alcohol before their last intercourse. Adolescents who drink alcohol or use drugs before engaging in sexual intercourse are less likely to use protection such as condoms and therefore increase their risk of pregnancy or developing STIs/HIV.

**What are the consequences of the person’s decision to drink alcohol?**

- Emotional consequences may include anxiety or stress related to the possibility of unintended pregnancy or STI, as well as regret and embarrassment.
- Physical consequences may include a hangover, unintended pregnancy, STI including HIV, or sexual assault.

**Do you think this “Love Story” is an unusual experience for students your age? Why or why not?**

**How do you think the media influences people’s decision making around substance use and safer sex?**

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**Drug-facilitated sexual assault is when someone gives “drugs” to another person in order to make it easier to sexually assault them. “Drugs” refers to any substance that inhibits a person’s ability to understand what is happening to them and to say no. Alcohol is the most commonly used drug that slows responses, impairs judgment, and can increase risk for sexual assault to occur.**

**As a supplementary activity, teachers may consider inviting the school constable to class to discuss the legal consequences of drugs and underage drinking and drug-facilitated sexual assault.**
C. Making the Connection – Team Challenge (30 min)

*Students consider the long-term and short-term effects of substances on sexual decision-making.*

1. Divide the class into two teams.
2. Team one is in competition with team two.
3. Explain that questions will be asked to each group one at a time. When a question is answered correctly, the team is awarded one point. If the team answers incorrectly, the team is awarded no points.
4. Ask each team questions from the **Making the Connection - Team Challenge Teacher** handout.
5. The teacher handout provides detailed answers to the questions. After each question, encourage discussion, if necessary.
6. After all the questions are read, tally up the score and announce the winner.

Other drugs commonly referred to as “date rape” drugs include Rohypnol (roofies), Ketamine (Special K), and Gamma hydroxyl butyrate (GHB). Rohypnol is a tasteless, odourless, tablet or powder that can be easily dissolved in a drink. Common effects of the drug include: memory loss, drowsiness; dizziness; and confusion. GHB is often distributed as a colourless, odourless liquid. Effects of GHB are similar to alcohol and can make the user feel relaxed, happy and sociable. Other effects include: drowsiness, dizziness, disorientation, loss of coordination, loss of bladder control, nausea and vomiting. For more info on these and other drugs visit [http://www.albertahealthservices.ca/2461.asp](http://www.albertahealthservices.ca/2461.asp)

**QUESTION BOX (10 min)**

Introduce the question box. You could have students fill out questions every lesson, or have students begin to think about questions that they might ask next lesson.

After each lesson, encourage students who are feeling confused or upset to talk to a teacher or counsellor.
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:

- Indicate how substances influence sexual decision-making?
- Determine the reasons why students use substances during the sexual decision making process?
- List the consequences for using substances during the sexual decision-making process?

Attitudes:

- Clarify their beliefs about alcohol, drugs and sexual decision-making?

You’re slipping back into consciousness. You’re vaguely aware of the wave of nausea washing over you. Your stomach convulses, and suddenly you can’t hold it—you roll over to vomit over the edge of the bed. The thump, thump, thump of the surging bass at the party is now the pain in your head. Your head feels heavy, with a searing pain so strong it almost hurts to move. But you manage to shift towards the middle of the bed and — there’s someone beside you. Perhaps you know this person, perhaps you don’t. Did they sit behind you in Math class? Are they a friend of a friend, the person you just started dating, or someone you just met last night? You feel panic, a tightness wrenching the pit of your gut. What the…? You take a quick inventory: are you naked? Where’s your underwear? Wait. Did you actually have sex? Is that an empty condom wrapper on the floor? Did you even use a condom? What time is it? You should’ve been home by now…

You close your eyes; you want to pretend to be sleeping just in case the person next to you stirs. You try to collect your thoughts and patch the evening back together… Bits and pieces come to you. You remember the early part of the evening clearly, the first few drinks, the way you started to loosen up. You remember talking to people you were too shy to talk to before, you remember dancing, perhaps sitting in a corner with this person…then things started to get a little blurred. You remember laughing, making jokes, laughing at the jokes…

You wish THIS was a joke…The sex, if you remember it, was disconnected and surreal. Your body did what it was supposed to do, or at least you think it did. You threw your head back in pleasure, even though you didn’t really feel pleasure. You didn’t really feel much at all. And then your mind goes blank. You don’t really remember the rest…

You lie there with your eyes closed. All you want to do is go home and take a shower and get all of this out of your mind. Shove it straight back into history. But what will you tell your parents when you get home? Did your friends have any idea what happened? Will the whole school know by Monday?
MAKING THE CONNECTION—TEAM CHALLENGE

1. Q: True or False? Larger amounts of alcohol help women to achieve orgasm.
A: FALSE. Alcohol is a depressant (downer) that slows down the central nervous system and impairs reflexes and muscle coordination making it difficult to maintain sexual arousal for both men and women.

2. Q: True or False? Higher amounts of alcohol (two or more drinks) can help men get and keep erections.
A: FALSE. Alcohol is a depressant (downer) that slows down the central nervous system and impairs reflexes and muscle coordination making it difficult to maintain sexual arousal for both men and women.

3. Q: True or False? In men, long-term abuse of alcohol may cause enlarged testicles.
A: FALSE. In men, chronic abuse of alcohol may cause shrinking of the testicles. Other long-term effects of alcohol may include: lower levels of testosterone; lower sperm count; and impotence (the inability to obtain or maintain an erection).

4. Q: True or False? In women, long-term abuse of alcohol may cause infertility.
A: TRUE. Drinking heavily over a long period of time can lead to serious health problems including sexual and reproductive health problems such as: ovarian shrinkage or abnormal function, endometriosis, infertility, and sexual dysfunction.

5. Q: True or False? When a person drinks or uses drugs, they are asking for trouble and deserve to be sexually assaulted.
A: FALSE. Although sexual assault is a potential consequence of alcohol or drug use, the survivor is NEVER to blame and NEVER deserves to be assaulted. Offenders are 100% responsible for their actions. It doesn’t matter if you or your partner have been using drugs or alcohol. Being drunk or high does not excuse criminal behaviour and is not an acceptable excuse.

6. Q: True or False? Cocaine use can increase arousal.
A: TRUE. Cocaine can make you feel intense pleasure. You can feel alert, energetic, and a sense of euphoria and well-being. These short term effects are only temporary and disappear within a few minutes or hours. When users “crash”, they may feel very depressed, anxious and irritable.

7. Q: True or False? Women become more sexually aroused with increasing amounts of alcohol.
A: FALSE. Alcohol is a depressant (downer) that slows down the central nervous system and impairs reflexes and muscle coordination making it difficult to maintain sexual arousal for both men and women.
8. **Q:** True or False? Alcohol gives you energy.
   **A:** FALSE. Alcohol is often thought of as a stimulant because it lowers inhibitions, which may mean that you take chances you wouldn’t otherwise take. However, alcohol actually acts as a depressant on your central nervous system, slowing down brain function.

9. **Q:** True or False? If you have sex with a person who was high on drugs or had too much to drink, it is considered sexual assault.
   **A:** TRUE. If a person is high on drugs or had too much to drink, they cannot consent to having sex. Therefore, having sex with a drunk or high individual is legally sexual assault. Drug-facilitated sexual assault (also known as date rape) is when someone gives “drugs” to another person in order to make it easier to sexually assault them. “Drugs” refers to any substance that inhibits a person’s ability to understand what is happening to them and to say no.

10. **Q:** True or False? Rohypnol, also known as “Roofies” is the most common “date rape” drug out there.
    **A:** FALSE. Alcohol is more closely linked to crimes of sexual violence when compared to any other drug. Other drugs commonly linked include:
        - Rohypnol, which is a tasteless, odorless, and colorless pill that is a sedative/depressant. Common effects of the drug include: memory loss or impairment; disinhibition; drowsiness; dizziness; and confusion.
        - Gamma Hydroxylbutyrate (GHB), which is a colorless and odorless liquid that is a depressant/anesthetic. Common effects of the drug include drowsiness; dizziness; intoxication; nausea; and memory loss.

11. **Q:** True or False? The use of alcohol and drugs may place a person at risk for sexual violence.
    **A:** TRUE. Both drugs and alcohol can affect a person’s ability to assess risk but NO actions or behaviours EVER justify sexual violence. If a person is drunk or high they cannot consent to sexual activity. Sexual activity without consent is sexual assault and is against the law. The offender is 100% responsible for acts of sexual violence regardless of whether or not they were under the influence of drugs or alcohol. Being drunk or high does not excuse the actions of the offender and is not an acceptable defence.

12. **Q:** True or False? Ecstasy can make people feel more trusting, loving, and warm towards each other.
    **A:** BOTH TRUE AND FALSE.
    **TRUE:** Ecstasy is labelled the “Love Drug” and short terms effects can include increased feelings of love, trust, and even heightened sensation.
    **FALSE:** Long term effects of using ecstasy may cause permanent chemical changes in the brain. This can result in mood changes and disrupted sleep patterns. These long term effects often result in serious personal problems.
13. Q: True or False? Teens who use drugs and alcohol are less likely to use condoms.
   A: TRUE. Research indicates that the use of alcohol and drugs increases the likelihood of having unprotected sex.

14. Q: True or False? It is not a big deal for teens to make decisions about sexual intercourse while under the influence of drugs or alcohol.
   A: FALSE. Alcohol and drugs can make it harder to stick to your decision about sexual intercourse. Try to stay out of situations that will test your limits, such as using alcohol and drugs when you are alone with your partner.