

PERSONAL SOCIAL HEALTH ECONOMIC EDUCATION

PERSONAL WELL-BEING – SEX AND RELATIONSHIP EDUCATION

YEAR 10 LESSON 2 TITLE Healthy Lifestyles

KEY CONCEPTS

- ◆ Recognising that healthy lifestyles, and the well-being of self and others, depend on being able to make responsible choices
 - ◆ Understanding that our physical, mental, sexual and emotional health affects our ability to lead fulfilling lives
 - ◆ Recognising that there is help and support available when needed
 - ◆ Dealing with growth and change as normal parts of growing up
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KEY PROCESSES

- ◆ Develop self-awareness by reflecting critically on their behaviour and its impact on others
 - ◆ Assess and manage the element of risk in personal choices and situations, helping others to minimise risk when necessary
 - ◆ Use knowledge and understanding to make informed choices about safety, health and well-being – evaluating personal choices and making changes if necessary
 - ◆ Use the social skill of negotiation within relationships
 - ◆ Recognise their rights and responsibilities and learn that their actions have consequences
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CONTENT

- ◆ The benefits and risks of health and lifestyle choices - including choices relating to sexual activity and substance use/misuse and their short and long-term effects on individuals, families and communities
 - ◆ The effect of diverse and conflicting values on individuals, families and communities and ways of responding to them
 - ◆ Characteristics of positive relationships
 - ◆ Awareness of exploitation in relationships and statutory/voluntary organisations which offer support during relationship crises
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LEARNING OUTCOMES

by the end of the lesson, pupils will be able to:

- ◆ Understand more about how STIs are transmitted
- ◆ Understand more about the signs and symptoms of STIs
- ◆ Understand how to carry out testicular and breast examination health checks

RESOURCES

- 'Role' cards
- Plastic beakers (one per pupil)
- Skimmed milk
- Water
- Starch solution
- Iodine solution
- Handout – 'The Six Most Common STIs'
- STI quiz and answer sheet
- Testicular model
- Breast model

LESSON PLAN

Activity 1 – Mixing Fluids

Timing

45-50 mins.
approx

Resources

'Role' cards; Plastic beakers (one per pupil); Skimmed milk; Water; Starch solution; Iodine solution

Pre-Knowledge

Students need a basic knowledge of:

- ❖ How women get pregnant
- ❖ How HIV (or any other STI you are focusing on) is transmitted
- ❖ Differences between safer and unsafe sex

Group Size

There are eleven roles, so you will need eleven students in each group. With more than one group, give the students separate areas (a large space for walking around in is necessary) to avoid confusion.

Before the Lesson

- ❖ Hand out the 'Role' cards – eleven per group, photocopied to give one card per student. There are five male and six female cards, which should be photocopied onto different colours to assist in identification.
- ❖ Give each group eleven plastic beakers, and label each one with the name of a role. Line the beakers up, and then add the same amount of tap water (roughly half of each beaker) to ten for each group. Then add a few drops of skimmed milk (which works better than the full or semi-skimmed types) to each one to match the depth of colour found in the starch solution (see below). This will represent body fluids.
- ❖ Fill the remaining beaker for each group with starch solution – matching the level found in the other beakers. This will represent infected body fluids or an unwanted pregnancy. To make the solution, mix one teaspoonful of cornflour (maize starch) with a little cold water, and then make the volume up to one litre with boiling water whilst stirring well. A slightly-milky, opalescent colour should appear. When everything is well-mixed, allow the solution to cool. Once the beakers have been filled, keep a little starch solution for the iodine test (see below).
- ❖ Add a few drops of tincture of iodine (available cheaply from most chemists) to the leftover starch solution. It should turn dark blue or black.
- ❖ Decide which 'Role' card and student will be associated with the beaker containing the starch solution, but do not tell the designated student. Those with the more sexually-active roles (e.g. Katie or Salman) are ideal.
- ❖ If possible, create 'role badges' to help the students keep their own identities separate from those of their roles.

Instructions - Role Play

1. Invite students to take part in the role play. Explain that they will pretend that they are the person in their role and that they will meet the other students who will also be in character.
2. Select the person who will have the 'infected' role (the one with the starch solution) but do not tell them or the other students. Make sure that this student is fairly robust and unlikely to be upset by the responsibility. Also ensure that they fully 'de-role' when the activity is complete.
3. Give out all the cards, assigning roles randomly – apart from for the 'infected' role. This will ensure that you do not unintentionally stereotype (or 'de-stereotype') students. To further this, give male roles to females and vice-versa.
4. Give out all the beakers which you have labelled with the different roles. The students will not know that one beaker is different. Explain that the solution in the beakers represents body fluids such as

blood, semen and vaginal fluid.

5. Give students enough time to read through their roles and imagine what it would be like to be the person described.
6. Explain that they have three options whenever they encounter someone with another role:
 - No sex – move on to the next encounter
 - Safer sex – touch beakers and move on to the next encounter
 - Unsafe sex – pour the contents of one beaker into the other, dividing the contents equally between the two beakers again before moving on to the next encounter

Explain that each time they meet someone, they should fill in the 'contact record' on their card so as to review the decisions they made at the end of the session. The encounters continue until each person has met all the other ten roles.

7. If you have music, start playing it. Then ask the students to walk round in their roles – chatting and getting to know each other, and then deciding whether to have no sex, safer sex or unsafe sex by considering the nature of both their own role and that of the other person. Give a maximum of 15-20 minutes to meet all the other roles. Every role must meet with every other one, or the activity will be considerably less effective.
8. Line the beakers up. Ask each student to briefly describe their role, the decisions they made and why they made them.
9. Briefly explain that one role had a 'marker' in its 'body fluid' and was therefore able to transmit an infection or cause an unwanted pregnancy by exchanging liquids during 'unsafe sex'. Ask each student to think about whether their own role might have been infected or responsible for an unwanted pregnancy.
10. Explain that you can find out who had an unwanted pregnancy or an STI by adding iodine solution to each beaker. Put a few drops of iodine solution in each beaker in turn. The solution in the beakers whose roles have had unsafe sex with the 'infected' role will turn dark blue or black. This can be quite dramatic!
11. Ask the students if they can work out who the 'infected' role was. Then tell them who the role was.
12. 'De-role' all the students thoroughly, giving extra time to reassure the one with the 'infected' role if necessary. You may also need to give extra support to students who chose 'no sex', as they may be seen as 'boring' and so be ridiculed by the other students.

It may be helpful to get the students to each reaffirm who they are, using statements such as:

'I am <real name>...'

'I am different from <role name> because...'

Give everyone an opportunity to say how they feel about their role, the encounters they had and the end results. Use questions such as:

- ❖ Who had sexual contact with the person with the 'infected' beaker and who had an unwanted pregnancy or was infected?
- ❖ Who did not have direct sexual contact with this person but still had an unwanted pregnancy or was infected?
- ❖ Who had a lifestyle which could have given them an infection and so could have had the 'infected' beaker at the start?
- ❖ Did anyone manage to avoid an unwanted pregnancy/infection? If so, how did they do this?
- ❖ How was the role play different from real life?
- ❖ Were the students surprised by what happened to their roles? What have they learned about the way in which an unwanted pregnancy or transmission of an STI can happen? Do they feel differently about safer sex and unsafe sex now? Does delaying sex seem a good option? What skills might be needed to keep to this choice? What is meant by 'assertiveness'?

Lead on to a discussion about the relationship between risky behaviours and the possible consequences of unwanted pregnancy or the transmission of an STI. Highlight the fact that all the beakers appeared identical at the start – as in real life, you can't necessarily tell whether you or someone else has an STI because there

may not be any symptoms. This makes these events truly 'no blame' situations. Also emphasise that although pregnancy can be prevented by being on the pill, there is still a risk of STI transmission unless a condom is used as well.

Key Points

- ❖ We all have choices about our sexual behaviour
- ❖ Delaying sex is a sensible and realistic option which is chosen by many young people
- ❖ All our actions have consequences – some of these are unexpected
- ❖ Everyone must decide how far to trust a partner
- ❖ Someone may not know they are infected
- ❖ Being on the pill does not protect against STIs – a condom must be used as well

Activity 2 – STIs – The Facts

Timing	Resources
45-50 mins. approx	'The six most common STIs' handout'; 'STIs Jigsaw Pieces'; 'STIs and why it's important not to get them'

Explain that this lesson will look at six sexually transmitted infections (STIs). Write them on the white board or a flipchart sheet and, if necessary, tell students how to pronounce them. Also explain that these have been selected because they are either the most common or the most serious. The list should be made up of:

- ❖ Chlamydia (pronounced clam-id-ear)
- ❖ Genital warts
- ❖ Gonorrhoea
- ❖ Herpes
- ❖ Hepatitis B
- ❖ HIV

Give each student a copy of the 'The six most common STIs' handout and ask them to divide into six groups. Each group will represent one STI. Next, put all the STI names from the 'STIs Jigsaw Pieces' handout into a hat, bag or box, and ask a member from each group to take any four pieces without looking.

Ask two members of each group to gather pieces from the other groups which apply to their STI. Use the 'The six most common STIs' handout as a reference, and ask them to continue until they have five pieces which fit together. If a fact applied to more than one STI, they should refer to the puzzle shapes to complete the jigsaws.

The other members sit at the 'base' and look after the other four pieces until they have all been claimed by other groups. While they wait, ask them to compile a list of questions about STIs which they don't have answers to. Give help and advice to any groups which seem to be struggling with any aspect of the activity.

When all of the puzzles have been completed, ask the students to think about what they learnt about STIs. To help stress why they should be avoided, give each student a copy of the 'STIs and why it's important not to get them' handout. Then re-separate them into their groups to agree on answers for their STIs. Finally, bring all of the groups together once more and write their answers on the white board or flipchart sheets.

Activity 3 – STI Quiz

Timing	Resources
15 mins. approx	'STI quiz' and answer sheets

- ❖ Give each student copy of the 'STI quiz', and then divide them into groups to complete the sheets
- ❖ Go through their answers as a class, and discuss any unresolved issues

(Extension) Activity 4 – Breast and Testicular Examination

Timing	Resources
20 mins. approx	Testicular and/or breast model (available from KRIS at Southmead Hospital)

- ❖ Ask for volunteers to use the testicular and/or breast model to search for lumps which should not be present
- ❖ Correct any misinformation and demonstrate the correct method of testicular and breast self-examination

Name: Anita

You are Anita. You don't get on with your parents and are desperate to show that you're grown up enough for someone to love you.

You've got a crush on a boy at school, Salman. He's cool and all the girls want to go out with him.

You think the best way to get him interested is to let him have sex with you.

The thrill would be that your parents don't like him and would not approve of you having sex.

What to do

You will need:

- this role card
- a beaker with fluid in it and the name of your role on it

Keep these with you all the time

This role card tells you who you are. Try to put yourself into the role of this person and behave how you think they would behave.

You will meet all the other roles. Take a few minutes to get to know each one. Then together decide whether your role would have:

- **no sex** – move on to the next encounter
- **safer sex** – touch beakers and move on to the next encounter
- **unsafe sex** – mix the fluids from your two beakers before moving on to the next encounter

After each contact, fill in your contact record (giving the reasons for your decision) and then move on to the next person

You must meet all the other roles

Contact record: who I met

Name of Contact	No Sex	Safer Sex	Unsafe Sex	Reasons
1				
2				
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Name: Nicola

You are Nicola. You have never had sex and really want to wait until you meet someone you love and care for, but all your friends say they've had sex and laugh at you for being a virgin.

Recently, this teasing has been upsetting you. You've decided that if there's an opportunity for sex, you'll take it – just so you can stop being a virgin and be the same as your friends.

What to do

You will need:

- this role card
- a beaker with fluid in it and the name of your role on it

Keep these with you all the time

This role card tells you who you are. Try to put yourself into the role of this person and behave how you think they would behave.

You will meet all the other roles. Take a few minutes to get to know each one. Then together decide whether your role would have:

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Name: Yasmin

You are Yasmin. You are very popular, have lots of interests and enjoy seeing your friends. But right now, you just want to be friends with boys.

You are not interested in having sex until you get married. You are good at making this clear to boys without offending them.

What to do

You will need:

- this role card
- a beaker with fluid in it and the name of your role on it

Keep these with you all the time

This role card tells you who you are. Try to put yourself into the role of this person and behave how you think they would behave.

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Name: **Cherelle**

You are Cherelle. You are deeply in love with your boyfriend, Earl, and want to settle down with him eventually and have a family.

You have sex with Earl and no-one else. You are on the pill because Earl won't use condoms – he says they come between true lovers. And anyway, you trust him completely.

What to do

You will need:

- this role card
- a beaker with fluid in it and the name of your role on it

Keep these with you all the time

This role card tells you who you are. Try to put yourself into the role of this person and behave how you think they would behave.

You will meet all the other roles. Take a few minutes to get to know each one. Then together decide whether your role would have:

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Name: **Katie**

You are Katie. You would describe yourself as fun-loving. You go out most weeks drinking and clubbing.

Your parents are often away so you occasionally bring a boy home for the night to keep you company. Sometimes you have sex. You usually make sure he uses a condom, but you don't always bother – especially if he seems like a really nice person or you know him quite well.

What to do

You will need:

- this role card
- a beaker with fluid in it and the name of your role on it

Keep these with you all the time

This role card tells you who you are. Try to put yourself into the role of this person and behave how you think they would behave.

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Name: Alice

You are Alice. You have just split up with your boyfriend of two years. This has made you very unhappy. Your friends say you should find someone else to help you get over him. You hope to meet someone nice who you feel you can trust.

If you do meet someone new, you think you'll have sex with him because you miss the closeness – and you're still on the pill. Your ex-boyfriend never used a condom because you didn't particularly like the feel of them.

What to do

You will need:

- this role card
- a beaker with fluid in it and the name of your role on it

Keep these with you all the time

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Name: Salman

You are Salman. You think sex is fun. You are tall and good-looking and you have no trouble attracting girlfriends.

You expect a girlfriend to sleep with you but you won't wear condoms because you say it ruins sex for you. You expect to settle down and get married eventually, and would then definitely want your wife to be a virgin.

What to do

You will need:

- this role card
- a beaker with fluid in it and the name of your role on it

Keep these with you all the time

This role card tells you who you are. Try to put yourself into the role of this person and behave how you think they would behave.

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Name: Earl

You are Earl. You sleep with Cherelle, your regular girlfriend. You don't use a condom because Cherelle is on the pill. Cherelle wants to get engaged but you think that you're too young to settle down.

Once or twice, when Cherelle has been away, you've had unprotected sex with Katie when you've both had a few drinks and are in the mood. You've felt a bit guilty afterwards because you knew it didn't mean anything to you, but you didn't confess to Cherelle because you knew that it would upset her.

What to do

You will need:

- this role card
- a beaker with fluid in it and the name of your role on it

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Name: Hussain

You are Hussain. You are in the school first team and you're passionate about football. You follow your local team avidly and so do all your friends – boys and girls.

You've kissed and smooched with some of the girls at parties, but you don't want to have sex yet. You just don't want the responsibility of a steady relationship.

What to do

You will need:

- this role card
- a beaker with fluid in it and the name of your role on it

Keep these with you all the time

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Name: Mikey

You are Mikey. You are bisexual. You have had sex a few times with both boys and girls in England and on holiday abroad, but you're not really interested in having a regular partner at the moment. You always use a condom if you have sex – except once or twice when you were on holiday and had none left.

What to do

You will need:

- this role card
- a beaker with fluid in it and the name of your role on it

Keep these with you all the time

This role card tells you who you are. Try to put yourself into the role of this person and behave how you think they would behave.

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Name: Jason

You are Jason. At the moment you are more interested in your exams and playing in a local band in your spare time. You are the lead singer and you all have high hopes for the success of the band. You are smaller than your friends at the moment, but you are confident that you will have a growth spurt fairly soon like they did.

You've never kissed a girl and don't want to, really. You have a couple of friends who feel the same way as you, so you spend most of your free time with them, talking and listening to music and practising for the band.

What to do

You will need:

- this role card
- a beaker with fluid in it and the name of your role on it

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The Six Most Common STIs

Chlamydia

Symptoms: Most women and some men don't have any symptoms. If there are symptoms, they might include:

Women

- Unusual vaginal discharge
- Pain when passing urine (peeing)
- Heavy periods or bleeding between periods
- Lower abdominal pain
- Abdominal pain during vaginal sex

Men

- White/cloudy and watery discharge from penis
- Pain when passing urine (peeing)
- Painful swelling of testicles

Caused by: Bacteria

Treatment: It's easily treated with antibiotics. Someone receiving treatment must not have sex again until seven days after treatment is completed – to make sure the infection has cleared up. New methods of testing for Chlamydia are now available which will allow for easier and more widespread screening of the infection.

Effect on health/complications: Left untreated in women, Chlamydia can spread to the womb and fallopian tubes and lead to pelvic inflammatory disease (PID) which can lead to infertility – the inability to have a child.

Genital Warts

Symptoms: Growths or warts in the genital area. These can take a year or more to appear after infection with the wart virus. Warts are not always visible, especially if they occur inside the vagina – particularly on the cervix – or in the anus. If warts are not present, tests cannot be made for the virus.

Caused by: Certain strains of the human papilloma virus (or wart virus).

Treatment: Warts can be treated by applying special ointments or paints, by freezing, or by surgical removal under local anaesthetic.

Effect on health/complications: It used to be thought that genital warts were associated with cervical cancer. Some variants of the papilloma virus are still linked with cervical cancer, but not the one which causes genital warts.

Gonorrhoea

Symptoms: The symptoms are different for men and women. Most women don't have any symptoms.

Men

- Discharge from the penis
- Burning feeling when passing urine (peeing)
- In homosexual men, anal gonorrhoea is more common and this may cause an irritation or discharge from the anus

Women

Most women do not have symptoms, but could have:

- Unusual discharge from the vagina
- Burning feeling when passing urine (peeing)
- Painful lower abdomen
- Heavy periods

Caused by: Bacteria

Treatment: Antibiotics can cure gonorrhoea completely

Effect on health/complications: None if treated. If left untreated, it can cause serious problems such as arthritis or make women infertile (unable to have a child).

Herpes (Simplex II)

Symptoms:

- Tingling or itching on or around the genital area, followed by:
- Appearance of small, painful blisters
- General flu-like symptoms such as headache, backache and/or a temperature
- Burning sensation when passing urine (peeing)

Caused by: Herpes Simplex II virus. The Herpes Simplex I virus, which causes cold sores, can also cause some infection.

Treatment: No cure is available, but an anti-viral drug (Acyclovir) can reduce the severity of the first and recurrent episodes as well as the length of the first episode.

Effect on health/complications: A pregnant woman might infect her baby, although this is very rare.

Hepatitis B

Symptoms: There may be no symptoms, but when they do occur, symptoms come in two stages – starting between one and six months after infection.

First stage:

- Feeling as though you've got flu with a cough and sore throat
- Feeling very tired
- No appetite
- Painful joints, e.g. knees, elbows, etc.

Second stage:

- Jaundice for between two and eight weeks
- Yellowish skin and whites of the eyes
- Darkish brown urine
- Light and clay-coloured faeces
- Sore abdomen
- Weight loss

Caused by: A virus

Treatment: There is no treatment for Hepatitis B apart from plenty of rest and healthy food. It usually takes several months to recover. There is a vaccine for people who know that they are at risk of catching the infection.

Effect on health/complications: Hepatitis B can cause liver cancer and other liver damage.

HIV (Human Immunodeficiency Virus)

Symptoms: People with HIV may have no symptoms for ten years or more, but the vast majority will eventually develop AIDS (Acquired Immune Deficiency Syndrome).

Caused by: Human Immunodeficiency Virus

Treatment: There is no cure for HIV or AIDS. Current treatment consists of a combination of three or more antiviral drugs. This combination treatment has enabled people with HIV to maintain good health. However, 25% of new HIV cases are found to be resistant to one or more of the antiviral drugs, and the long-term outcome for people treated with combination therapies is still unclear.

Effect on health/complications: The Human Immunodeficiency Virus damages the body's immune system so that most people with HIV develop AIDS. People with AIDS get serious infections and/or cancer which eventually lead to death.

**Name of STI:****Chlamydia****Treatment:**

It's easily treated with antibiotics. Someone receiving treatment must not have sex again until seven days after treatment is completed – to make sure the infection has cleared up. New methods of testing for Chlamydia are now available which will allow for easier and more widespread screening of the infection.

**Caused by:**

Bacteria

**Symptoms:**

Most women and some men don't have any symptoms. If there are symptoms, they might include:

Women

- Unusual vaginal discharge
- Pain when passing urine (peeing)
- Heavy periods or bleeding between periods
- Lower abdominal pain
- Abdominal pain during vaginal sex

Men

- White/cloudy and watery discharge from penis
- Pain when passing urine (peeing)
- Painful swelling of testicles

**Effect on health /complications:**

Left untreated in women, Chlamydia can spread to the womb and fallopian tubes and lead to pelvic inflammatory disease (PID) which can lead to infertility – the inability to have a child.



Name of STI:

Genital Warts



Treatment:

Warts can be treated by applying special ointments or paints, by freezing, or by surgical removal under local anaesthetic.



Caused by:

Certain strains of the human papilloma virus (or wart virus).



Symptoms:

Growths or warts in the genital area. These can take a year or more to appear after infection with the wart virus. Warts are not always visible, especially if they occur inside the vagina – particularly on the cervix – or in the anus. If warts are not present, tests cannot be made for the virus.



Effect on health /complications:

It used to be thought that genital warts were associated with cervical cancer. Some variants of the papilloma virus are still linked with cervical cancer, but not the one which causes genital warts.



Name of STI:

Gonorrhoea



Caused by:

Bacteria



Effect on health /complications:

None if treated. If left untreated, it can cause serious problems such as arthritis or make women infertile (unable to have a child).



Treatment:

Antibiotics can cure gonorrhoea completely



Symptoms:

The symptoms are different for men and women. Most women don't have any symptoms.

Men

- Discharge from the penis
- Burning feeling when passing urine (peeing)
- In homosexual men, anal gonorrhoea is more common and this may cause an irritation or discharge from the anus

Women

Most women do not have symptoms, but could have:

- Unusual discharge from the vagina
- Burning feeling when passing urine (peeing)
- Painful lower abdomen
- Heavy periods



Name of STI:

Herpes Simplex



Treatment:

No cure is available, but an anti-viral drug (Acyclovir) can reduce the severity of the first and recurrent episodes as well as the length of the first episode.



Caused by:

Herpes Simplex II virus. The Herpes Simplex I virus, which causes cold sores, can also cause some infection.



Symptoms:

- Tingling or itching on or around the genital area, followed by:
- Appearance of small, painful blisters
- General flu-like symptoms such as headache, backache and/or a temperature
- Burning sensation when passing urine (peeing)



Effect on health /complications:

A pregnant woman might infect her baby, although this is very rare.

**Name of STI:****Hepatitis B****Caused by:**

A virus

**Effect on health
/complications:**

Hepatitis B can cause liver cancer and other liver damage.

**Treatment:**

There is no treatment for Hepatitis B apart from plenty of rest and healthy food. It usually takes several months to recover. There is a vaccine for people who know that they are at risk of catching the infection.

**Symptoms:**

There may be no symptoms, but when they do occur, symptoms come in two stages – starting between one and six months after infection.

First stage:

- Feeling as though you've got flu with a cough and sore throat
- Feeling very tired
- No appetite
- Painful joints, e.g. knees, elbows, etc.

Second stage:

- Jaundice for between two and eight weeks
- Yellowish skin and whites of the eyes
- Darkish brown urine
- Light and clay-coloured faeces
- Sore abdomen
- Weight loss



Name of STI:

**HIV
(Human Immunodeficiency Virus)**



Treatment:

There is no cure for HIV or AIDS. Current treatment consists of a combination of three or more antiviral drugs. This combination treatment has enabled people with HIV to maintain good health. However, 25% of new HIV cases are found to be resistant to one or more of the antiviral drugs, and the long-term outcome for people treated with combination therapies is still unclear.



Caused by:

Human Immunodeficiency Virus



Symptoms:

People with HIV may have no symptoms for ten years or more, but the vast majority will eventually develop AIDS (Acquired Immune Deficiency Syndrome).



**Effect on health
/complications:**

The Human Immunodeficiency Virus damages the body's immune system so that most people with HIV develop AIDS. People with AIDS get serious infections and/or cancer which eventually lead to death.

STIs and Why it's Important Not to Get Them

Write down the name of the STI in your cut out pieces, and then say why you think it's important not to be infected with it.

Name of STI:

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Why it's important not to get it:

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STI Quiz

1. Write down six infections which can be sexually transmitted
2. Can some of these infections be transmitted other than sexually? If so, which ones?
3. Are any STIs serious? If so, why?
4. Can someone tell if they've got an STI?
5. Which STIs can be cured?
6. Can STIs be caught again if they've been cured?
7. Can someone have several STIs at the same time?
8. Who might be at risk of getting an STI?
9. What can someone do to reduce their risk of getting an STI?
10. Where can someone get help if they think they have an STI?

STI Quiz Answer Sheet

1. Write down six infections which can be sexually transmitted.

Infections which can be sexually transmitted include: Chlamydia, genital warts, gonorrhoea, herpes, HIV, hepatitis B, syphilis, trichomoniasis and pubic lice.

2. Can some of these infections be transmitted other than sexually? If so, which ones?

Yes, some STIs can be transmitted in other ways, which is why some people call them sexually transmissible. The other ways of being infected are:

- Close body contact, not necessarily sexual, e.g. herpes, pubic lice, genital warts, thrush, scabies.
- Contaminated/infected blood (from a transfusion or from sharing injection equipment), e.g. hepatitis B, HIV. This is why all blood donations in this country are checked for infection.
- Infected saliva or urine, e.g. hepatitis B.
- Mother-to-child – in the womb, e.g. syphilis or during birth, e.g. HIV. This is why infected pregnant women are treated and perhaps offered Caesarean births if necessary.
- Candidiasis (Thrush) is caused by a yeast which is present in most people but in some situations, such as after a course of antibiotics or during pregnancy, may multiply or cause a problem.

3. Are any STIs serious? If so, why?

The most serious STIs are:

- Chlamydia – left untreated in women, it can spread to the womb and fallopian tubes and eventually lead to infertility.
- Genital warts – may require months of treatment.
- Gonorrhoea – left untreated, it can cause infertility in women.
- Herpes – a pregnant woman might infect her baby during pregnancy or birth (although a Caesarean can make sure the baby isn't affected during birth).
- HIV – the vast majority of people with HIV develop AIDS and eventually die of a serious infection/certain kinds of cancer.
- Hepatitis B – liver damage, including cancer.
- Syphilis – left untreated, there may be damage to the heart, brain and other vital organs, and eventually death.

Although these STIs are serious, most of them can be treated (see Answer 5).

4. Can someone tell if they've got an STI?

Not always. Some STIs have no symptoms, especially in females. This is why it's important to always be checked at a clinic if there has been any risk of infection.

5. Which STIs can be cured?

Most STIs can be cured. There is no cure at the moment for HIV, which in the vast majority of cases eventually leads to AIDS. There are drugs which can delay the development of AIDS.

6. Can STIs be caught again if they have been cured?

Yes – all STIs can be caught again, even if they have been cured once or more.

7. Can someone have several STIs at the same time?

Yes – someone can have many STIs at the same time, sometimes without realising it. This is another reason why it's important always to be checked at a clinic if there has been any risk of infection. People may be more at risk of catching HIV if they have – or have had – one or more of the other STIs.

8. Who might be at risk of getting an STI?

Anyone who has unprotected sex is at risk of getting an STI – unless they are sure that their sexual partner has never been at risk of being infected in any way, e.g. by having unprotected sex or injecting drugs.

9. What can someone do to reduce their risk of getting an STI?

- (a) No sex
- (b) Safer sex – no intercourse or always using a condom

10. Where can someone get help if they think they have an STI?

If someone thinks they have an STI, they can get help from a GP, a Brook Centre, a young people's clinic or a doctor at a clinic that specialises in STIs (a GUM or Genito-Urinary Medicine clinic). These can all offer confidential advice and often treatment as well, even if someone is under 16. This means that they will not tell anyone else what has happened, but they may encourage a young person to talk to their parents or carers.

If a young person is in any doubt about confidentiality, they can ring the clinic or surgery first and ask whether they offer confidential appointments, e.g. 'Can you test for sexually transmitted infections, and is your service confidential?'