

EXERCISE 10 "STIs – Risks and Choices" 20mi



Using the Five Os

TEACHER GUIDELINES



Outcome

Takes: 1 min; 19 left

- " In this exercise we are going to be exploring the ideas of freedom, risk and responsibility.
- " We are going to do an exercise to give you some idea of how the commonest STI around can quickly spread through a group of people. By the end you should have a better understanding of:
 - what behaviours increase the chance of a young person catching an STI,
 - what strategies a young person might use to avoid them,
 - what a young person should do if they think they might have one.
- " You will need to listen carefully to the instructions I give you and be prepared to share your ideas at the end.



Organise

Takes: 2min; 17 left

(Each student will need a piece of paper about the size of a playing card. This is their 'score card'. If you give each table or group a sheet of A4, it can be folded and torn into eight score cards.)

- " You will all need something to write with, so make sure you have a pen and a small piece of paper. The piece of paper is your score card and you will need one each.
- " I am going to come round and give you each a laminated card. On the front side is a letter and on the back a number. Please copy the letter from your laminated card onto one side of your score card. The letter side is the front. Copy the number on to the back of your score card.

(The laminated cards are designed to be used in multiple sets of nine. Distribute the first set of nine before moving on to distribute the second. Continue to give out the cards using one set at a time. Work your way through the sets until every student has a laminated card. If there is an odd number of students, you or a classroom assistant will also need one.)

- " Please make sure you have a letter on the front and a number on the back of your score cards. *(Collect up all the laminated cards in envelopes as sets.)*

Travelling and meeting

- " One of the things many young teenagers look forward to about growing older is greater independence - having the freedom to move around, travel and meet new people and explore personal relationships.
- " For this exercise we are going to imagine that you are a character in their late teens or early twenties and enjoying moving around and meeting new people. Your character could be going to college or university, visiting different countries or just living and working away from their parents.
- " Each of your score cards, represents a young person aged between 18 and 24.



On-task

Takes: 4 mins; 13 left

- " You are going to be moving around the room, so make sure your bags and coats are out of the way. In a moment I am going to ask you to move around the room.
- " As you travel around could you make sure you meet another person and greet them. Take your pen and score card with you.
- " OK start your journey now. *(After about 10 seconds ask them to stop)*

- " **FREEZE!**. Everyone should be with a partner. On the front of your own card write the letter that is on your partner's card. You should now have two letters on the front of your card.
 - " OK start your journey again and find a different partner *(After about 10 seconds ask them to stop)* **FREEZE!**. *(Make sure all are partnered with a 'new' person)*
 - " From now on when you exchange letters you collect the FURTHEST letter of the alphabet they have on their card. For example if they have an A and a B, you write down B, or if they have a C and a B you write down C.
 - " So, move around again, find a different partner and when I say freeze and again collect **their** furthest letter of the alphabet and write it on your score card.
- (Continue with this sequence until they have met five partners and exchanged letters so they have six letters on their cards. i.e. Repeat for Partners 3, 4 and 5)*
- " Now hold on to your score cards and go back to your places.
 - " Thank you.



Out-loud

Takes: 2 mins; 11 left

- " I want you to imagine that every person your character met was someone they had a relationship with, so this whole process may have taken months or years, not a few minutes.
- " If you either **started off with a C** or **collected a C** could you please stand up. Would you say it is more or less than half of the class?
 - ☛ **It should be more than half - around 70%.**
- " The C stands for our commonest STI. What is the name of a common STI beginning with C?
 - ☛ **Chlamydia**
- " If your character has a C it means that your character has had contact with an infected person. If your character had unprotected sexual intercourse what are their chances of catching Chlamydia?
 - ☛ **they have almost certainly caught Chlamydia.**
- " We started with about 10 percent of this group having a C because out of a group of about twenty-five young people age 18- 24 years that is roughly how many have had Chlamydia – this is like real life.
- " There is a second part to what we know about your character. This is the number on the back of your score card - either 1, 2 or 3. The number represents the amount of risk your character takes.
- " **Number 1 means** that your character has some sexual contact but it **did not involve penetration**. What are the chances of your character being safe from Chlamydia?
 - ☛ **they are almost certainly safe from Chlamydia.**
- " If you have a number **1** on the back of your card, **you can sit down**. That's a good number of you because a lot of 18 year olds do not have sexual intercourse in their relationships.
- " If you have a number **2** it means that your character had sex but always uses a condom.
- " What are the chances of your character being safe from Chlamydia?
 - ☛ **they are safe from Chlamydia - though not as safe as a 1.**
- " If you have a number **2** on your card, **you can sit down**. That's about half of the characters who are having intercourse because 50% of young people today are not very good at using a condom every time.
- " **Number 3 means** that your character has sex but often does not use a condom.
- " What are the chances of your character being safe from Chlamydia?
 - ☛ **They almost definitely have Chlamydia.**

- " Could they have another STI? **☛ Yes. This is quite likely**
- " What are the consequences of not having Chlamydia treated? **☛ Chlamydia is a common cause infertility and could mean they can't have children when they want them.**



Organise

Takes: 15 min; 10 left

"Organise yourselves into groups of threes and fours. I will give each group an STI information sheet.

(Give each group a laminated STI information sheet. (E10 S3))

" Take turns to carefully read aloud to the rest of the group the information about each STI. When you have done that, work as a group and decide on your answer to the first three questions on the back of the information sheet.



On-task

Takes: 2 mins; 8 left

(They should be reading aloud in their groups and discussing the first two questions)



Out-loud

Takes: 2 mins; 6 left

(The questions below correspond to the first three questions on their worksheets.

- " **Lets look at Question 1** Which of the STIs in the list have obvious symptoms soon after sex – symptoms which are easy to notice and would alert someone that they might have caught a disease from having sex?
 - ☛ Probably only Gonorrhoea has symptoms you couldn't miss soon after sex**
 - ☛ Genital warts take months and often more than a year to show and can easily go unnoticed**
 - ☛ Syphilis is not common and once the first spot has disappeared, symptoms can be difficult to notice.**
- " **What about Question 2 ?** Do the commonest and most serious STIs generally have symptoms to alert you? **☛ No**
- " So what do you think? How useful is it to know the symptoms of STIs – would they be reliable in helping a person to diagnose an STI if they've had unprotected sex – ie sex without a condom?
 - ☛ No. Even if they have zero symptoms they could easily have an STI because there are often no symptoms**
 - ☛ If someone has obvious symptoms, then they probably do have some kind of STI.**
- " **Question 3 :** If you were a Health Professional or counsellor, what three pieces of advice would you give to someone who said that they were going away to college to have a good time which including having different boy or girl friends?
 - ☛ i) Don't have penetrative sex BUT IF you do**
 - ☛ ii) ALWAYS use a condom.**
 - ☛ iii) Only have one sexual partner and no new ones, or very few.**
- " Who has the choice and is in control of these risk factors?
 - ☛ I do / I have the right to decide how far I go / who with / whether a condom is used**
- " These are your rights / USE them to protect yourself / don't just live in hope / get real
- " Everyone - Do you think we should change the situation where young people having sex often don't bother with condoms? Should we decide as a group that we will use condoms whenever we have sex even though it will probably not be for some years yet? Votes in favour?
- " What would you say to someone who said you can't have an enjoyable and serious relationship without sexual intercourse?
- " Can you have exciting and rewarding intimacy without penetration?

If you want to take more time over this exercise, this is the place. Allow a further 6 minutes for overview

Optional expansions

+3-5mins **Teacher led focus:** (Use the question 3-9 on the back of the worksheet as a focus for a whole class discussion.)

+5-8 mins **Group work focus:** (Distribute plain A5 sheets, one per group. Allocate one or more of questions 3-9 per group. Students write their answers on their plain A5 paper and get prepared to read back their answers.)



On-task

(Students complete worksheet)



Out-loud

(Use worksheet as basis for question and answer discussion about STIs)

☛ **Q4** a): Flu symptoms b) None because it could be several other viruses c) They would only know they were infected if they had tests **Q5:** a) Warts b) could cause cancer **Q6** a) Herpes b) get a test **Q7:** No, the symptoms are obvious **Q8:** Change/increase in discharge and pain when passing urine **Q9:** They is possible the have Hepatitis B, they should see their doctor **Q10:** a) They may have caught syphilis, b) It is important they get treatment-. The long term consequences are very serious

(Messages / Summary - as for overview: know when you are taking a risk, if you have taken a risk always seek medical advice, know what is normal for you.)



Overview

Takes: 6 mins; 0 left

- " This exercise is a deliberate over-simplification of some of the risks surrounding having sexual intercourse, for example we have assumed that using a condom will always give protection and that you will always catch Chlamydia from someone who has got it if you are not protected – both are nearly always true. It is a realistic model of how a group of perhaps 30 people aged between 18 and 24 might behave.
- " The model is only a generalisation, how might real life be different for individual people? (Give them time to think and offer answers)
 - ☛ Most people don't have new sexual partners every six months. ☛ People might get tested and treated in between sexual partners. ☛ People would probably have sexual partners from outside the group of 30. " If someone has been drinking before having sex what difference might that make to taking risks? ☛ Might take things further than intended
 - ☛ they might find it harder to ask to use a condom
- " We have chosen to concentrate on Chlamydia because it is the commonest STI and often has no symptoms. It does have a serious long term health risk – infertility. Chlamydia is a common cause of infertility.
- " Another very common STI is Genital warts (Human Papillomavirus or HPV). This is the commonest cause of Cancer of the Cervix in women and/or mouth Cancer for both men and women. A person can catch this virus and not have any symptoms for some time. It is very rare for it to be passed on by kissing.
- " HIV/AIDs which everyone has heard of, again, has no immediate symptoms, but cannot be cured and although drugs can nowadays prolong life, for almost everyone with HIV it causes death.
- " Can condoms give protection against these STIs? ☛ Yes
- " You have already got most of the really important general information about the risks of STIs.
- " If a person from around here knew they had taken a risk but hadn't noticed any symptoms, what would your advice be? ☛ They should ask for medical advice from:
 - ☛ their doctor ☛ a sexual health clinic ☛ school nurse

- " Where could they get help around here? (*teacher / nurse needs to have info*)
- " If someone had had several partners and not used condoms, but decided they were not going to risk it any more and start to use condoms from now on, how safe from STIs would they be? ☹
They could already have an STI
- " What would your advice be? ☹ **They should ask for medical advice from: -☹ their doctor ☹ a sexual health clinic ☹ school nurse**
- " **This exercise can be summarised in three sentences.**
 1. Know when you are taking a risk.
 ☹ **and avoid or minimise it - ☹ don't have sex ☹ if you do - use a condom**
 2. Know what is normal for your body. ☹ **any changes should be checked**
 3. Know where you can get help if you have any concerns ☹ **or just need to chat - get help**
- " Finally the exercise has shown that the fewer sexual partners a person has, the less chance they have of catching an STI. Only have sex if you have talked about it together, decided it is right for you both and have agreed on ways of keeping the risks to a minimum.

Just before we go (or 'move on' if another exercise) How was it for you? (15-30 secs)

(Both students and professional(s) work in silence They may either write down or simply consider what their response is to the following assessment texts).

For students: " How might this exercise change the way I deal with pressure to get sexually involved?"

For professional(s): To what extent did the students express any surprise or concern about the findings they made during the exercise- did it have any recognisable impact"

EXERCISE 10 "STIs – Risks and Choices"



Using the Five Os

– *PLAN*

Mins
Takes Left



Outcome

(Brief explanation of intended learning outcomes)

1 19

- As teenagers get older they expect to enjoy more freedoms; this also brings more risks and responsibilities. The exercise will help you to understand:
- what behaviours increase the chance of catching STIs
- what strategies might be used to avoid them
- what to do if you think you are at risk



Organise

(Set up and run)

2 17

- Give out codes using laminated cards provided (E10 S1) **making sure you finish one set of 9 before starting next** and make up to an even number by joining in yourself if necessary.
- Give out A4 sheets which are folded and torn into 8 score cards– one per student
- Students copy their codes from the laminated cards onto their own score cards.



On-task

(Active learning processes)

4 13

- Students travel around room, on cue from teacher exchange Code Names and write them on their individual score cards
- Students return to seats and sit.



Out-loud

(Feedback to class)

2 11

- Class informed that if they have a 'C' on their score card they have had a relationship with a person infected with Chlamydia.
- All those with a 'C' stand up. (approx. $\frac{3}{4}$ of class will stand)
- Those with a '1' on the back of their cards did not have penetrative intercourse, they are safe and can sit down (approx. $\frac{1}{3}$ now sit). Those with '2' on their cards always use a condom and are safe and can sit down (approx. $\frac{1}{2}$ now sit). Those with a '3' on their cards don't always use a condom and have almost certainly caught Chlamydia. Approximately 20% of the class would be still standing. This is double the number who started off with Chlamydia
- Through discussion class demonstrates to itself how quickly/effectively the spread of Chlamydia could be controlled once people use a condom or practise non-penetrative sex.
- Class discuss the possible consequences of untreated Chlamydia – infertility.



Organise

(Set up and run)

1 10

- Get class into groups of 3 or 4.
- Give out worksheets (E10 S3).

2 8



On-task

(Active learning processes)

- Groups all answer at least the first three questions and more if they have time

2 6



Out-loud

(Feedback to class)

- Go through the answers confirming that knowing you have taken a risk is more important than waiting for symptoms because many STIs have no symptoms
- What would they advise someone going away to college and expecting relationships?
- Who is in control of risk taking?
- Are we agreed that we will always use barrier protection for penetrative intimacy?
- We can have good and intimate relationships without penetration.



Overview

(Review, Reflection and Evaluation)

6 0

- The exercise is critiqued by class for validity –how true to life is it?
- It is an accurate model for a group of around 30 aged between 18 – 24 years
- The various strategies available to young people for reducing chances of infection include: fewer partners, non-penetrative sex, use condoms
- Also, what to do if a young person thinks that they already have taken a risk – seek professional help



Repeat and Praise

Total time without Optional Expansion

20 minutes

Other Equipment: Plain A4 paper – to be folded and torn into 8ths by students , pens or pencils – one each.

Teacher needs:

Resource Includes :

Teacher's Booklet (E10 T)

An A4 pocket with 4 pockets, each with a set of re-useable code cards – nine cards per set (E10 S1)

An A4 pocket with 10 x A4 double-sided STI information sheets (E10 S3)

Extensions:

Plain A4 to be torn into A5 pieces

Teacher / health worker needs information about local services to hand

EXERCISE 10 “STIs – Risks and Choices”

RATIONALE

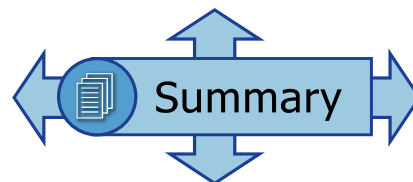
- Understanding the risks of catching STIs and how to reduce the risk is more important than knowing their names and symptoms - the most significant STIs have few if any symptoms.
- It can be very hard for anyone to grasp how STIs can infect populations and the levels of risk involved.
- The exercise allows students to demonstrate to themselves how quickly STIs may spread and is based on realistic data for older teenagers (about 2/3 are sexually active; half of these are not condom users; 10% are infected at the beginning of the exercise).
- With this current data the number infected will roughly double in five rounds.
- The key message to emerge is that catching STIs is almost entirely down to individual choice of risk-taking / prevention behaviour.
- Although their character may have had contact with an infected person, they are not automatically victims – they have some agency.
- Knowing when you’ve taken a risk rather than waiting for symptoms should be the guide for seeking medical support.
 - Revise local services.

EXPECTATIONS

- Students will have a practical understanding of the speed at which an STI can spread through a population.
- Risk can be reduced by having fewer partners, having non-penetrative sex, using condoms.
- The most important STIs have few symptoms.
- Knowing when a risk has been taken is the correct cue to seek help. The lack of symptoms does not mean a person is safe from infection(s).

METHODS

- Students are given a laminated card. A letter on one side denotes their STI status, a number on the other denotes their risk taking/avoidance behaviour. They copy these to their own Cards.
- Students in the role of 18 – 24 year olds travel around room and exchange their letter codes, recording on their score cards. Each exchange signals a new partner. After 5 exchanges class return to seats.
- Students that have a ‘C’ on their Cards stand up (around 75%). They have been intimate with someone who has Chlamydia.
- If they have ‘1’ on the back of their card they didn’t have sexual intercourse and are safe. – they sit. ‘2’ denotes they always use a condom. They are safe – they sit. The remainder have a ‘3’ and don’t always use a condom – they are probably infected.
- Group then use an STI info. sheet with questions on the back. They work on at least the first three. Class then feedback and discuss.
- Class hopefully vote to always use condoms with new sexual partners.



SYNOPSIS

- Each character’s STI infection status and that of people they have a relationship with (sexual partners) are written on cards and exchanged. We use realistic figures for the prevalence of STIs and behaviours.
- Around 10% have Chlamydia at the beginning of the exercise but after everyone has had 5 partners, around 75% have had contact with an infected person. It is their risk avoidance behaviour which determines if they have actually caught Chlamydia or not. Nevertheless, about 20% have almost definitely caught it.
- STI information sheet allows class to agree that most serious STIs are symptomless. Protection = non-penetrative sex, fewer partners, always using a condom.
- Class agree on importance of minimising partner numbers and on condom use. Extension involves extracting further STI information from worksheet.