

A Teacher's Guide

Here are a few activities and discussion points that can help your 9th-12th grade students get the most out the sensitive topics covered in *TeenZine: Issue 3*.

Class Discussion Questions:

1. Which birth control methods reduce the risk of pregnancy and the risk of contracting an STI? Why?
2. Which STIs are curable, and which are not?
3. Which behaviors are most risky for contracting an STI? Which are least risky?

Birth Control Activity (from Teenwire)

The goal of this activity is to make teens aware of their birth control options. You will need 45-60 minutes for this activity. For materials, you will need paper, pens, newsprint, makers, copies of the attached article “Condoms and Diaphragms and Pills – Oh My!” and copies of the attached handouts “Behavioral Methods,” “Barrier Methods,” and “Hormonal Methods.”

- Separate teens into three groups: behavioral methods, barrier methods, and hormonal methods. In each group, distribute copies of their respective handouts. Ask all teens to read the handouts silently to themselves.
- Tell all groups that they are advertising executives and that they have been hired to make a campaign for different birth control methods. Each group must develop two elements for their ad campaign: a poster and a commercial (in the form of a skit). Each group should try to include as many facts about their method as possible, using the handouts as reference material.
- Give groups time to develop their campaigns. If there is only one facilitator, walk around to check on each group's progress.
- Bring groups back together, and have each one present its campaign.
- Lead a discussion about the campaigns. Distribute copies of “Condoms and Diaphragms and Pills – Oh My!” and have teens read the article. Lead a brief discussion to summarize major points.



Group #1: Behavioral Methods

Abstinence – The only 100% effective way to prevent pregnancy and sexually transmitted infections is abstinence – which is defined by Planned Parenthood as not having any type of sex play with your partner. Some people may choose to be sexually abstinent in certain circumstances. A person who just broke up with someone might abstain from dating and sex because being close to another person might not feel right yet. Others may choose to be abstinent during certain periods of their lives, regardless of what circumstances arise.

There is no expiration on the option to abstain! Some teens and adults talk about being “secondary” virgins, meaning that they are choosing not to have sex now, even though they have had sexual experiences in the past. The right to choose abstinence is not reserved exclusively for someone who has never had sexual intercourse. Abstinence is a choice that anyone can exercise anytime! Abstinence has no medical or hormonal side effects.

Outercourse – Planned Parenthood defines outercourse as sex play without vaginal intercourse. Body rubbing, mutual masturbation, and oral sex are nearly 100% effective in preventing pregnancy if ejaculate or pre-ejaculate isn't spilled in the vagina or on the vulva. Like abstinence, these have no medical or hormonal side effects. They can also prolong sex play and enhance orgasm.

Group #2: Barrier Methods

The barrier method puts a physical wall between sperm and egg so they can't join. Examples of barrier methods available in the U.S. include:

- **Condom** – A sheath made of thin latex or plastic that covers the penis to keep sperm from joining the egg.
- **Female Condom** – A polyurethane sheath with a flexible ring at each end that is inserted deep into the vagina. It collects pre-ejaculate and semen to keep sperm from entering the vagina.
- **Diaphragms, Caps, and Shields** – Diaphragms, cervical caps, Lea's Shield®, and FemCap® are cups/caps coated with spermicide and placed inside the vagina to cover the cervix and keep sperm from joining the egg.

Condoms have a low risk of failure to prevent pregnancy – that is, if they're used correctly. And latex and female condoms protect against pregnancy and sexually transmitted infections. Other barriers like diaphragms, caps, and shields may have a higher risk of failure than condoms, but they provide good contraception for women who do not want to use more effective hormonal methods.

Group #3: Hormonal Methods

Couples that decide to use hormonal methods have several different choices. U.S. teens and young adults can choose from these methods:

- **The Shot, Depo-Provera®** – This method involves getting a shot of the hormone progestin every 12 weeks. Each injection protects against pregnancy for 12 weeks.
- **The Pill** – Oral contraceptives contain hormones that work in different ways. A clinician will prescribe the right Pill for clients. Pills need to be taken once a day and a pack is completed every month.
- **The Ring, NuvaRing®** – The Ring is a soft, flexible hormone-releasing ring that a woman inserts deep inside her vagina. A Ring is inserted into the vagina for three weeks and taken out for the fourth week. It releases synthetic hormones to protect against pregnancy for one month.
- **The Patch, Ortho Evra®** – A thin hormone-releasing patch is applied to the body once a week for three weeks. During the fourth week no patch is applied and menstruation occurs. The Patch should be applied on the same day of the week for three consecutive weeks.

There are currently no hormonal birth control methods available for use by men. And no hormonal method protects against sexually transmitted infections – partners must use a condom to protect against infection while using a hormonal method.

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Condoms and Diaphragms and Pills — Oh My!

by Christy Brownlee

S-E-X: it's that three-letter word that can be fun to do. But there's another three-letter word that people sometimes forget about when they want to have sex: K-I-D. That's right, baby! For heterosexual couples, pregnancy is possible if they don't use effective birth control every time they have vaginal intercourse and certain other kinds of sex play. What is effective birth control? Birth control is effective when it keeps sperm from joining an egg and causing a pregnancy.

Think you're ready to have kids? "No way — at least, not right now," said Mike, a 16-year-old from Portland, OR. If you want to be like Mike, then we've got some options to help you prevent having a K-I-D if you're having S-E-X.

The only 100% effective way to prevent pregnancy and sexually transmitted infections is abstinence — that means not having any type of sex play with your partner. But not everyone chooses to be abstinent. Some people choose to have outercourse. Outercourse is sex play without vaginal intercourse, such as body rubbing, mutual masturbation, and oral sex. And if sperm isn't spilled in the vagina or on the vulva, it's nearly 100% effective in preventing pregnancy. Many people enjoy the advantages of outercourse. It has no medical or hormonal side effects and it can prolong sex play and enhance orgasm.

But many people find it hard to abstain from vaginal intercourse. There are two types of contraception recommended for teens to keep sperm and egg from joining: barriers and hormonal methods.

The barrier method puts a physical wall between sperm and egg so they can't join. Examples of the barrier methods that are available in the U.S. include

- **Condom** — A sheath made of thin latex or plastic that covers the penis to keep sperm from joining the egg.
- **Female condom** — A polyurethane sheath with a flexible ring at each end that is inserted deep into the vagina. It collects pre-ejaculate and semen to keep sperm from entering the vagina.
- **Diaphragms, caps, and shields** — Diaphragms, cervical caps, Lea's Shield®, and FemCap® are cups/caps coated with spermicide and placed inside the vagina to cover the cervix and keep sperm from joining the egg.

Most barrier methods have a low risk of failure to prevent pregnancy — that is, if they're used correctly. However, only the condom and female condom protect against pregnancy and sexually transmitted infections.

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Couples that decide to use hormonal methods have several different choices. U.S. teens and young adults can choose from these methods:

- **The Shot** — This method involves getting a shot of the hormone progestin every 12 weeks. Each injection protects against pregnancy for 12 weeks.
- **The Pill** — Oral contraceptives contain hormones that work in different ways. A clinician will prescribe the right Pill for patients. Pills need to be taken once a day and a pack is completed every month.
- **Emergency Contraception Pills** — ECPs can reduce the risk of pregnancy if started within 120 hours of unprotected vaginal intercourse. The sooner ECPs are taken, the better. They work best when started within 72 hours — during this time they can reduce the risk of pregnancy from 75-89%.
- **NuvaRing®** — The Ring is a soft, flexible hormone-releasing ring that a woman inserts deep inside her vagina. A new Ring is inserted once a week for three out of four weeks. At the beginning of the fourth week it is removed and menstruation occurs.
- **Ortho Evra®** — Ortho Evra is a thin hormone-releasing patch that is applied to the body once a week for three weeks. During the fourth week no patch is applied and menstruation occurs. Ortho Evra should be applied on the same day of the week for three consecutive weeks.

There are currently no hormonal birth control methods available for use by men. No hormonal method protects against sexually transmitted infections — partners must use a condom while using a hormonal method to protect against infection.

Some birth control methods are NOT recommended for teens — for example, the intrauterine device (IUD), withdrawal or “pulling out,” and the rhythm method. Unless she has had a child, a young woman’s uterus may be too small to hold an IUD. Also, IUD users who get certain sexually transmitted infections can develop pelvic inflammatory disease and become unable to have children. Teenagers are at very high risk for STDs. One-out-of-four teenagers has or has had at least one sexually transmitted infection.

Both withdrawal and the rhythm method require planning and trust, which young couples can’t always count on, and both methods have relatively high rates of failure.

There’s a lot more to know about the different methods of birth control. If you’re unsure about what type of birth control is best for you and your partner, consult your clinician or make an appointment at a Planned Parenthood clinic near you by calling 1-800-230-PLAN.

You can also visit www.StoptheSilence.org for more sexual health resources for teens and young adults.