Contraception
Supplemental Unit #1

CA Education Codes:
● 51934(a)(3) Information that abstinence from sexual activity and injection drug use is the only certain way to prevent HIV and other sexually transmitted infections and abstinence from sexual intercourse is the only certain way to prevent unintended pregnancy. This instruction shall provide information about the value of delaying sexual activity while also providing medically accurate information on other methods of preventing HIV and other sexually transmitted infections and pregnancy.
● 51934(a)(4) Information about the effectiveness and safety of all federal Food and Drug Administration (FDA) approved methods that prevent or reduce the risk of contracting HIV and other sexually transmitted infections, including use of antiretroviral medication, consistent with the federal Centers for Disease Control and Prevention.
● 51934(a)(9) Information about the effectiveness and safety of all FDA-approved contraceptive methods in preventing pregnancy, including, but not limited to, emergency contraception. Instruction on pregnancy shall include an objective discussion of all legally available pregnancy outcomes.

Ask a question at bit.ly/CVUSDHealthQuestions
Contraception

- Birth Control
- Protection against pregnancy
- May fail if not used correctly
- Protection against some STIs
- Abstinence offers 100% protection

CA Education Code 51934(a)(3); 51934(a)(9)
## FDA Approved Contraceptive Methods

Click to view handout: [https://www.fda.gov/media/135111/download](https://www.fda.gov/media/135111/download)

<table>
<thead>
<tr>
<th>Method</th>
<th>Number of pregnancies prevented per 100 Women-Years</th>
<th>Time</th>
<th>Some Risks of Use/Diffs</th>
</tr>
</thead>
<tbody>
<tr>
<td>Condom</td>
<td>&lt; 1</td>
<td>12</td>
<td>Early use: incorrect or incomplete use, condom can slip or break.</td>
</tr>
<tr>
<td>Male Sterilization</td>
<td>&lt; 5</td>
<td>17</td>
<td>Skin reaction or other complications after surgery.</td>
</tr>
<tr>
<td>Vaginal Contraceptives: Diaphragm or Spermicides</td>
<td>&lt; 5</td>
<td>17</td>
<td>Common: vaginal discharge, abdominal pain, headache, nausea, dizziness.</td>
</tr>
<tr>
<td>Intrauterine Devices</td>
<td>&lt; 5</td>
<td>17</td>
<td>Common: vaginal discharge, abdominal pain, headache, nausea, dizziness.</td>
</tr>
<tr>
<td>Oral Contraceptives</td>
<td>&lt; 2</td>
<td>21</td>
<td>Common: nausea, vomiting, breast tenderness, weight gain, mood changes.</td>
</tr>
<tr>
<td>Implanon Rod</td>
<td>&lt; 2</td>
<td>30</td>
<td>Common: nausea, vomiting, breast tenderness, weight gain, mood changes.</td>
</tr>
<tr>
<td>Male Contraceptives (surgical: vasectomy)</td>
<td>&lt; 2</td>
<td>30</td>
<td>Common: pain, blood clots, infection.</td>
</tr>
</tbody>
</table>

### Other Contraception

- **Contraceptive Injections:**
  - Long-acting reversible contraception
  - Common: nausea, vomiting, breast tenderness, weight gain, mood changes.

- **Contraceptive Rings:**
  - Common: nausea, vomiting, breast tenderness, weight gain, mood changes.

- **Contraceptive Tablets:**
  - Common: nausea, vomiting, breast tenderness, weight gain, mood changes.

- **Contraceptive Vaginal Contraceptives:**
  - Common: nausea, vomiting, breast tenderness, weight gain, mood changes.

- **Contraceptive Capsules:**
  - Common: nausea, vomiting, breast tenderness, weight gain, mood changes.

- **Contraceptive Foams:**
  - Common: nausea, vomiting, breast tenderness, weight gain, mood changes.

- **Contraceptive Spermicides:**
  - Common: nausea, vomiting, breast tenderness, weight gain, mood changes.

- **Contraceptive Pessaries:**
  - Common: nausea, vomiting, breast tenderness, weight gain, mood changes.

- **Contraceptive Strips:**
  - Common: nausea, vomiting, breast tenderness, weight gain, mood changes.

- **Contraceptive Pocket Suppositories:**
  - Common: nausea, vomiting, breast tenderness, weight gain, mood changes.

- **Contraceptive Pocket Tampons:**
  - Common: nausea, vomiting, breast tenderness, weight gain, mood changes.

- **Contraceptive Pocket Tablets:**
  - Common: nausea, vomiting, breast tenderness, weight gain, mood changes.
Hormonal contraceptives do not protect against STIs, including HIV

- **Implant**—The implant is a single, thin rod that is inserted under the skin of a woman’s upper arm. The rod contains a progestin that is released into the body over 3 years. Typical use failure rate: 0.01%.

- **Injection or “shot”**—Women get shots of the hormone progestin in the buttocks or arm every three months from their doctor. Typical use failure rate: 4%.

- **Patch**—Worn on the lower abdomen, buttocks, or upper body (but not on the breasts). This method is prescribed by a doctor. It releases hormones progestin and estrogen into the bloodstream. You put on a new patch once a week for three weeks. During the fourth week, you do not wear a patch, so you can have a menstrual period. Typical use failure rate: 7%.

- **Combined oral contraceptives**—Also called “the pill,” combined oral contraceptives contain the hormones estrogen and progestin. Prescribed by a doctor. A pill is taken at the same time each day. Typical use failure rate: 7%

- **Progestin only pill**—Unlike the combined pill, the progestin-only pill (sometimes called the mini-pill) only has one hormone, progestin, instead of both estrogen and progestin. It is prescribed by a doctor. It is taken at the same time each day. Typical use failure rate: 7%.

- **Hormonal vaginal contraceptive ring**—The ring releases the hormones progestin and estrogen. You wear the ring for three weeks, take it out for the week you have your period, and then put in a new ring. Typical use failure rate: 7%.
**IUD**

- T-shaped device
- Inserted by doctor into uterus
- Coated with progestin or wrapped with copper wire
- Progestin thickens mucus and copper is toxic to sperm
- May reduce menstrual flow and cramping over time
- Mood swings
- Chance of infection
- The LNG IUD stays in a woman’s uterus for up to 3 to 6 years, depending on the device. Typical use failure rate: 0.1-0.4%

- **IUDs do not protect against STIs, including HIV**
Barrier

<table>
<thead>
<tr>
<th>Male</th>
<th>Female</th>
</tr>
</thead>
<tbody>
<tr>
<td>Blocks sperm from getting into uterus</td>
<td>Male Condoms: 13% failure rate. Latex and synthetic condoms protect against STIs including HIV. “Natural” or “lambskin” condoms may not protect against STIs including HIV.</td>
</tr>
<tr>
<td>Used with spermicides (to kill sperm)</td>
<td>Female Condom: 21% failure rate. Reduces some risks of STIs</td>
</tr>
<tr>
<td>Least amount of side effects</td>
<td>Sponge: Failure rate of 14% for women who never had a baby, and 27% for women who had a baby. No protection from STIs</td>
</tr>
<tr>
<td>Least effective</td>
<td>Diaphragm or cervical cap - Failure rate 17%. Neither have protection against STIs</td>
</tr>
<tr>
<td>No protection from STIs including HIV</td>
<td></td>
</tr>
</tbody>
</table>

CA Education Code 51934(a)(4); 51934(a)(9)
Spermicidies

- Placed in female or used with barriers
- Several forms—foam, gel, cream, film, suppository, or tablet
- You can use a spermicide in addition to a male condom, diaphragm, or cervical cap.
- Over the counter
- Spermicides alone do not protect against STIs including HIV
- Typical use failure rate: 21%

CA Education Code 51934(a)(4); 51934(a)(9)

Ask a question at bit.ly/CVUSDHealthQuestions
Permanent

**Male Sterilization—Vasectomy**

- Surgical
- Cut and cauterize vas deferens
- Recovery time is less than one week
- Typical use failure rate: 0.15%.

**Female Sterilization—Tubal ligation or “tying tubes”**

- Surgical
- Fallopian tubes cut, tied and/or Blocked.
- This method is effective immediately.
- Typical use failure rate: 0.5%

CA Education Code 51934(a)(9)

Centers for Disease Control and Prevention
**Natural Birth Control**

- **Astinence** - Don’t engage in any sexual activity. 100% effective against pregnancies and STIs
- **Natural Family Planning** - Identify woman’s ovulation and abstain or use other forms of birth control. -76% effective
- **No method** - No protection against STIs
  - 50% effective for 19-26 year olds
  - 40% effective for 27-34 year olds

*CA Education Code 51934(a)(3); 51934(a)(4)*
Emergency Contraception

- Emergency contraception is not a regular method of birth control.
- Emergency contraception can be used after no birth control was used during sex, or if the birth control method failed, such as if a condom broke. Prevents about 55% to 85% of predicted pregnancies.
  - Copper IUD—Women can have the copper T IUD inserted within five days of unprotected sex.
  - Emergency contraceptive pills—Women can take emergency contraceptive pills up to 5 days after unprotected sex, but the sooner the pills are taken, the better they will work. There are three different types of emergency contraceptive pills available in the United States. Some emergency contraceptive pills are available over the counter.
Gender Identity and Sexual Orientation
Supplemental Unit #2

CA Education Code:
- 51933(d)(5) Instruction and materials shall affirmatively recognize that people have different sexual orientations and, when discussing or providing examples of relationships and couples, shall be inclusive of same-sex relationships.
- 51933(d)(6) Instruction and materials shall teach pupils about gender, gender expression, gender identity, and explore the harm of negative gender stereotypes.
Gender Expression

Gender Expression- Refers to an individual’s presentation- including physical appearance, clothing choice and accessories - and behavior that communicates aspects of gender or gender role. Gender expression may or may not conform to a person’s gender identity.

American Psychological Association: Guidelines for Psychological Practice with Transgender and Gender Nonconforming People (2015)
Definitions

Sex- The physical and biological traits that distinguish between males and females. Sex refers especially to physical and biological traits, whereas GENDER refers especially to social or cultural traits.

Gender- The condition of being male, female, or neuter. Gender implies the psychological, behavioral, social, and cultural aspects of being male or female (i.e., masculinity or femininity.)

Transgender- Is an umbrella term that incorporates differences in gender identity wherein one’s assigned biological sex doesn’t match their felt identity.

Cisgender- Having or relating to a gender identity that corresponds with the culturally determined gender roles for one’s birth sex (i.e., the biological sex one was born with).
Definitions

Sexual Orientation- One's enduring sexual attraction to male, female partners or both. Sexual Orientation may be heterosexual, same sex (gay or lesbian), or bisexual.

LGBTQ+ - Stands for lesbian, gay, bisexual, transgender, and questioning or queer: an inclusive term used to refer to the homosexual population in all of its diverse forms, to those with LGBTQ+ both homosexual and heterosexual preferences, and to those whose gender identity differs from the culturally determined gender from their birth sex.

Lesbian- Female-female sexual orientation or behavior.

Gay- Denoting individuals, especially males, who are sexually attracted to and aroused by members of their own sex

Bisexual- A person who experiences emotional, romantic, and/or sexual attraction to, or engages in romantic or sexual relationships with, more than one sex or gender.
Negative Gender Stereotyping

Stereotyping Lesson:

What are some common stereotypes people have about the men and women?

CA Education Code 51933(d)(6)
HIV and AIDS
Supplemental Unit #3

CA Education Codes:

- 51934(a)(1) Information on the nature of HIV, as well as other sexually transmitted infections, and their effects on the human body.
- 51934(a)(2) Information on the manner in which HIV and other sexually transmitted infections are and are not transmitted, including information on the relative risk of infection according to specific behaviors, including sexual activities and injection drug use.
- 51934(a)(4) Information about the effectiveness and safety of all federal Food and Drug Administration (FDA) approved methods that prevent or reduce the risk of contracting HIV and other sexually transmitted infections, including use of antiretroviral medication, consistent with the federal Centers for Disease Control and Prevention.
- 51934(a)(5) Information about the effectiveness and safety of reducing the risk of HIV transmission as a result of injection drug use by decreasing needle use and needle sharing.
- 51934(a)(6) Information about the treatment of HIV and other sexually transmitted infections, including how antiretroviral therapy can dramatically prolong the lives of many people living with HIV and reduce the likelihood of transmitting HIV to others.
- 51934(a)(7) Discussion about social views on HIV and AIDS, including addressing unfounded stereotypes and myths regarding HIV and AIDS and people living with HIV. This instruction shall emphasize that successfully treated HIV-positive individuals have a normal life expectancy, all people are at some risk of contracting HIV, and the only way to know if one is HIV-positive is to get tested.
- 51934(a)(8) Information about local resources, how to access local resources, and pupils’ legal rights to access local resources for sexual and reproductive health care such as testing and medical care for HIV and other sexually transmitted infections and pregnancy prevention and care, as well as local resources for assistance with sexual assault and intimate partner violence.
HIV True or False

- All people who get HIV will die.
- People only contract HIV from same-sex relationships.
- HIV can be passed through saliva

ALL ARE FALSE!
## Differences

<table>
<thead>
<tr>
<th>HIV</th>
<th>AIDS</th>
</tr>
</thead>
<tbody>
<tr>
<td>- Human Immunodeficiency Virus</td>
<td>- Acquired Immune Deficiency Syndrome</td>
</tr>
<tr>
<td>- Attacks T cells</td>
<td>- “Disease” caused by virus</td>
</tr>
<tr>
<td>- Have to have the virus first</td>
<td></td>
</tr>
</tbody>
</table>

**CA Education Code 51934(a)(1)**

[Ask a question at bit.ly/CVUSDHealthQuestions](bit.ly/CVUSDHealthQuestions)
HIV Transmission

HIV FLUIDS Activities

BLOOD
- Sharing needles
- Blood-blood contact
- Transfusion

SEmen
PRE EJACULATION
- Sexual Activity

VAGINAL FLUIDS
- Birth
- Sexual Activity

BREAST MILK
- Mother-Child Feeding

CA Education Code 51934(a)(2)
Signs and Symptoms

- Night sweats
- Fever
- Flu-like symptoms
- Weight loss
- Diarrhea
- Enlarged lymph glands
- Oral Thrush (white spots)
- Fatigue

CA Education Code 51934(a)(1)
Diagnosis

- HIV: Human Immunodeficiency Virus
- Less than 200 T cells
- Opportunistic infection (23 variations)

Stages

Stage 1: Acute HIV infection
- Within 2 to 4 weeks after infection with HIV, people may experience a flu-like illness
- But people with acute infection are often unaware that they're infected because they may not feel sick right away or at all.

Stage 2: Clinical latency (HIV inactivity or dormancy)
- People may not have any symptoms or get sick during this time.
- For people who aren't taking medicine to treat HIV, this period can last a decade or longer, but some may progress through this phase faster.

Stage 3: Acquired immunodeficiency syndrome (AIDS)
- AIDS is the most severe phase of HIV infection.
- People with AIDS have such badly damaged immune systems that they get an increasing number of severe illnesses, called opportunistic illnesses.

CA Education Code 51934(a)(1)
Treatments

**PrEP**
- Pre-exposure prophylaxis (or PrEP) is when people at risk for HIV take daily medicine to prevent HIV
- Daily oral pill
  - Protects from HIV
  - Up to 99% effective if taken daily
  - Must follow instructions
  - Stops virus from establishing

**Antiretroviral Therapy**
- HIV medicine slows down virus
Although a cure for HIV does not yet exist, ART can keep someone healthy for many years
- Reduces chances of transmission
- Must be taken consistently and correctly

---

CA Education Code 51934(a)(4); 51934(a)(5)
Testing

**Antibody Testing**
- Detects the presence of antibodies (proteins) that a person's body makes to fight against HIV
- 3-12 weeks to make enough antibodies for an antibody test to detect HIV

**Combination or Fourth-Generation Tests**
- Detects both antibodies and antigens
- Antigens are a part of the virus itself
- 2-6 weeks to make enough antigens to be detected

**NATS (Nucleic Acid Amplification)**
- Detects HIV in blood
- 7-28 days to be detected
- Not routinely used
- Costs a lot of money

---

CA Education Code 51934(a)(8)
### Community Resources

#### CVUSD Community Resources List

You have a right to get tested!

<table>
<thead>
<tr>
<th>Category</th>
<th>Resources</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Grief and Loss</strong></td>
<td>Community Counseling &lt;br&gt; 861-3930 &lt;br&gt; Suicide Prevention &lt;br&gt; 861-3930</td>
</tr>
<tr>
<td><strong>Housing and Food</strong></td>
<td>Housing Authority &lt;br&gt; 605-680-80 &lt;br&gt; Food Share &lt;br&gt; 605-680-3636</td>
</tr>
<tr>
<td><strong>LGBTQ</strong></td>
<td>FSLUG &lt;br&gt; 605-585-4797 x 27 &lt;br&gt; National LGBT Center &lt;br&gt; 605-680-3069</td>
</tr>
<tr>
<td><strong>Medical</strong></td>
<td>Community Health Center &lt;br&gt; 605-680-3069 &lt;br&gt; STD Clinic &lt;br&gt; 605-680-3069</td>
</tr>
<tr>
<td><strong>Mental Health</strong></td>
<td>Community Counseling &lt;br&gt; 605-680-3069 &lt;br&gt; Behavioral Health &lt;br&gt; 605-680-3069</td>
</tr>
<tr>
<td><strong>Substance Abuse</strong></td>
<td>Ventura County &lt;br&gt; 605-680-3069 &lt;br&gt; Drug &amp; Alcohol Program &lt;br&gt; 605-680-3069</td>
</tr>
<tr>
<td><strong>Social Services</strong></td>
<td>Community Services &lt;br&gt; 605-680-3069 &lt;br&gt; Human Services Agency &lt;br&gt; 605-680-3069</td>
</tr>
</tbody>
</table>

#### CA Education Code

51934(a)(8)

#### HIV & AIDS #3

HIV Prevalence

**Globally**

There were approximately 37.9 million people living with HIV at the end of 2018.

**In US**

- In 2018, 37,832 people received an HIV diagnosis in the United States (US)
- In 2016, an estimated 1.1 million people had HIV in the US.
HIV/AIDS Epidemic

California Highlights
- Prevalence
  - Living with HIV in 2013: 119,845
- New Diagnoses
  - New HIV diagnoses in 2014: 5,533
- Mortality
  - Number of deaths of people with diagnosed HIV in 2013: 1,635

CA Education Code 51934(a)(1)
Ventura County Cases 2015

- Rate of AIDS in Ventura County has doubled
- PrEP and ART have allowed individuals to live longer with an HIV/AIDS diagnosis but the risk of contraction is still very high
Relationships
Supplemental Unit #4

CA Education Codes:

- 51933(d)(5) Instruction and materials shall affirmatively recognize that people have different sexual orientations and, when discussing or providing examples of relationships and couples, shall be inclusive of same-sex relationships.
- 51933(f) Instruction and materials shall teach the value of and prepare pupils to have and maintain committed relationships such as marriage.
- 51933(g) Instruction and materials shall provide pupils with knowledge and skills they need to form healthy relationships that are based on mutual respect and affection, and are free from violence, coercion, and intimidation.
- 51933(h) Instruction and materials shall provide pupils with knowledge and skills for making and implementing healthy decisions about sexuality, including negotiation and refusal skills to assist pupils in overcoming peer pressure and using effective decision making skills to avoid high-risk activities.

Ask a question at bit.ly/CVUSDHealthQuestions
# Types of Relationships

<table>
<thead>
<tr>
<th>Platonic</th>
<th>Romantic</th>
</tr>
</thead>
<tbody>
<tr>
<td>Family Members</td>
<td>- Boyfriend</td>
</tr>
<tr>
<td>Peers</td>
<td>- Girlfriend</td>
</tr>
<tr>
<td>Coworkers</td>
<td>- Spouse</td>
</tr>
<tr>
<td>Friends</td>
<td></td>
</tr>
<tr>
<td>Teammates</td>
<td></td>
</tr>
<tr>
<td>Pets</td>
<td></td>
</tr>
</tbody>
</table>

CA Education Code: EC 51933(d)(5)
Healthy Characteristics

- Respect
- Compromise
- Honesty
- Caring
- Dependability
- Commitment
- Trust
- Cooperation

CA Education Code 51933(f), 51933(g)

Ask a question at bit.ly/CVUSDHealthQuestions
Three Types of Love

EROS:
- Love for an object
- Newborn love for mom
- Most prevalent type of love in our society
- Selfish: All about me! How can you make me feel good. I don’t really care about how you feel.

AGAPE:
- Highest form of love you can give
- Parents love for a child and a child’s love for its parent
- Unconditional: No matter what!

PHILEO:
- Highest form of love you can mutually experience
- Marriage, family, friendships
- Platonic or romantic
- Should be unconditional, most satisfying type of love and the least understood
- “Soul mates”
Communication

- Don’t just speak, listen too

- **Passive**- Unable to express views or stand up for self

- **Aggressive**- Bullying, attacking and angry

- **Assertive**- Expressing thoughts in polite, respectful manner, clearly stating what they mean

**How:**
- Assertively
- “I” messages
- Eye contact
- Body gestures match verbal message

**With Whom:**
- Trusted adults: Parents, guardians or teachers
- Medical Professional: Private, personal, preventative
- Social Services: Community resource

[Ask a question at bit.ly/CVUSDHealthQuestions]

CA Education Code 51933(g)
Refusal Strategies

- Say “NO” in a firm voice
- Explain why
- Use appropriate body language
- Leave if necessary

Be assertive and protect yourself

CA Education Code 51933(h)
Reproduction
Supplemental Unit #5

CA Education Codes:

- 51934(a)(9) Information about the effectiveness and safety of all FDA-approved contraceptive methods in preventing pregnancy, including, but not limited to, emergency contraception. Instruction on pregnancy shall include an objective discussion of all legally available pregnancy outcomes, including, but not limited to, all of the following:
  - 51934(a)(9)(A) Parenting, adoption, and abortion.
  - 51934(a)(9)(B) Information on the law on surrendering physical custody of a minor child 72 hours of age or younger, pursuant to Section 1255.7 of the Health and Safety Code and Section 271.5 of the Penal Code.
  - 51934(a)(9)(C) The importance of prenatal care.
Overview: Reproduction Slides

- Male Reproduction
  - Key Terms
  - Problems of the Male Reproductive System

- Female Reproduction
  - Key Terms
  - Menstrual Cycle
  - Endocrine System
  - Problems of the Female Reproductive System
  - Fetal Development/Birth
  - Pregnancy Choices

Ask a question at bit.ly/CVUSDHealthQuestions
Male Reproductive System

Key Terms
- Testes
- Testosterone
- Scrotum
- Semen
- Urethra
- Penis
- Sterility
Male Reproductive System Cont.

Key Terms
-Epididymis
-Vas Deferens
-Sperms
-Prostate Gland
-Urinary Bladder

Ask a question at bit.ly/CVUSDHealthQuestions
Problems of the Male Reproductive System

-Hernia

-Sterility

-Enlarged Prostate

-Cancer of the Prostate Testes
Female Reproductive System

Key Terms:
- Ovaries
- Ovulation
- Fallopian Tubes
- Fertilization
- Uterus
- Cervix
- Menstrual Cycle
Female Reproductive System Cont.

Key Terms:
- Vagina
- Estrogen
- Zygote
- Vulva
- Ovum
- Endometrium

Younger female reproductive system

adam.com
Menstrual Cycle

- **Ovulation**: Often considered the most fertile period, typically around day 14 of the cycle.
- **Most Fertile**: 80% chance of conception.
- **Semi Fertile**: 40-60% chance of conception.
- **Infertile**: 0-5% chance of conception.

The cycle typically lasts 28 days, with variations in length and phases.

- **Menstruation**: Days 1-7: Uterine lining breaks down, menstruation occurs.
- **Uterine Lining Continues to Thicken**: Days 8-12.
- **Ovulation Occurs (usually on Day 14)**: Uterine lining thickens again.

Hormone and Endocrine Systems

**Hormones** - Chemical substances produced in glands that help regulate body function.

**Pituitary Gland** - Master gland regulates all other endocrine glands
- Produces HGH (Human Growth Hormone)
- TSH (Thyroid Stimulating Hormone)
- FSH (Follicle Stimulating Hormone)
- LH (Luteinizing Hormone)

**Adrenal Glands** - Adrenaline to respond to emergencies

**Problems:**
- **Graves Disease** (Hyperthyroidism)
- **Diabetes** (Insulin)
- **Growth Disorders**
Fertilization

- Fertilization - The union of two cells or gametes
- An egg from a woman
- A sperm from a man
- A Zygote is formed
Implantation

-The Zygote divides into many cells

-It travels down the fallopian tube, dividing as it goes (3 days)

-Becomes a blastocyst at the uterus

-Once implanted, it becomes an embryo
Fetal Stages

Zygote- The first cell at conception

Blastocyst- Ball of cells that divide as they travel down the fallopian tube

Embryo- After implantation on the uterine wall and development of the placenta and umbilical cord (2-8 weeks)

Fetus- 8 weeks until birth
Embryonic and Fetal Development

### Fetal Development and Prospective Survival

<table>
<thead>
<tr>
<th>Developmental progress</th>
<th>Chance of survival outside womb and related difficulties</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>FIRST TRIMESTER</strong></td>
<td></td>
</tr>
<tr>
<td>Body segments appear</td>
<td>None</td>
</tr>
<tr>
<td>Primitive external heart beats and lung buds develop</td>
<td></td>
</tr>
<tr>
<td>First bone cells develop, body features become apparent</td>
<td></td>
</tr>
<tr>
<td>Some organs function</td>
<td></td>
</tr>
<tr>
<td>Lungs begin primitive breathing motion</td>
<td></td>
</tr>
<tr>
<td><strong>SECOND TRIMESTER</strong></td>
<td></td>
</tr>
<tr>
<td>Blood vessels develop, organs and structures form</td>
<td>Minimal, though improving with medical advances</td>
</tr>
<tr>
<td>Hair grows, eyelids blink</td>
<td>1 in 5 infants who do survive suffer serious disabilities, including blindness, deafness or cerebral palsy</td>
</tr>
<tr>
<td>Skin's loses transparency</td>
<td></td>
</tr>
<tr>
<td>Skeleton forms rapidly</td>
<td></td>
</tr>
<tr>
<td>Eyes form, fetus can swallow</td>
<td>50% survive with intensive care</td>
</tr>
<tr>
<td>Fetus reaches 1–1 1/2 pounds</td>
<td>Disabilities are likely, including neurosensorial impairment and blindness</td>
</tr>
<tr>
<td><strong>THIRD TRIMESTER</strong></td>
<td></td>
</tr>
<tr>
<td>Surfactant forms to prepare lungs for breathing</td>
<td>Good with intensive care</td>
</tr>
<tr>
<td>Fetus reaches 3 pounds, can suck thumb</td>
<td>Infant remains at risk for subnormal or deficient intelligence and respiratory distress syndrome</td>
</tr>
<tr>
<td>Fat deposits are stored in preparation for birth</td>
<td>Respiratory difficulties are common</td>
</tr>
<tr>
<td>Digestive track and lungs mature</td>
<td>Respiratory difficulties at birth but generally good long-term outcomes</td>
</tr>
<tr>
<td>Body begins to grow plump</td>
<td><strong>Excellent</strong></td>
</tr>
<tr>
<td>Brain grows rapidly</td>
<td>Full term</td>
</tr>
<tr>
<td>Lungs mature, mother's antibodies are transferred</td>
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Fetal Development
Stages of Birth

Dilation- Contractions of the uterus causes cervix to dilate to 10cm or 4 inches

Passage through the birth canal- Cervix is fully dilated- takes first breath, cries to clear lungs of any fluid

Afterbirth- After a few more contractions the placenta attached to the umbilical cord is delivered
Fetal Alcohol Syndrome (FAS)

-A series of birth defects that occur when a mother uses alcohol during pregnancy

-Birth defects include:
  - Learning difficulties
  - Cognitive impairment
  - Slowed growth
  - Physical deformities
  - Heart defects
  - Abnormal facial features
Testing

Amniocentesis - A procedure with a large needle to sample amniotic fluid to test for genetic disorders

Chorionic Villus Sampling - Tissue examined for genetic disorders

PKU (Phenylketonuria) - An inborn error that results in decreased metabolism of the amino acid phenylalanine.
Pregnancy Choices

- Parenting
- Adoption/Safe Surrender
- Abortion

CA Education Code 51934(a)(9)(A)
Pregnancy Choices

Safe Surrender

- Mother or father can surrender the baby within 72 hours of birth, without penalty
- Hospitals, fire stations and police stations are safe surrender sites
- Baby may be claimed back within 14 days
- Each parent is given a bracelet that can be used to claim the baby
- Ventura County locations

CA Education Code 51934(a)(9)(B)
CA Penal Code 271.5 & https://babysafevc.org/
Pregnancy Choices

Abortion

A legal induced abortion is defined as an intervention performed by a licensed clinician (e.g., a physician, nurse-midwife, nurse practitioner, physician assistant) within the limits of state regulations that is intended to terminate a suspected or known ongoing intrauterine pregnancy and that does not result in a live birth.

CA Education Code 51934(a)(9)(A)
CA Education Codes

- 51933(h) Instruction and materials shall provide pupils with knowledge and skills for making and implementing healthy decisions about sexuality, including negotiation and refusal skills to assist pupils in overcoming peer pressure and using effective decision making skills to avoid high-risk activities.
- 51934(a)(1) Information on the nature of HIV, as well as other sexually transmitted infections, and their effects on the human body.
- 51934(a)(2) Information on the manner in which HIV and other sexually transmitted infections are and are not transmitted, including information on the relative risk of infection according to specific behaviors, including sexual activities and injection drug use.
- 51934(a)(3) Information that abstinence from sexual activity and injection drug use is the only certain way to prevent HIV and other sexually transmitted infections and abstinence from sexual intercourse is the only certain way to prevent unintended pregnancy. This instruction shall provide information about the value of delaying sexual activity while also providing medically accurate information on other methods of preventing HIV and other sexually transmitted infections and pregnancy.
- 51934(a)(9) Information about the effectiveness and safety of all FDA-approved contraceptive methods in preventing pregnancy, including, but not limited to, emergency contraception. Instruction on pregnancy shall include an objective discussion of all legally available pregnancy outcomes, including, but not limited to, all of the following:
  - 51934(a)(9)(A) Parenting, adoption, and abortion.
  - 51934(a)(9)(B) Information on the law on surrendering physical custody of a minor child 72 hours of age or younger, pursuant to Section 1255.7 of the Health and Safety Code and Section 271.5 of the Penal Code.
Risks of Teen Sexuality

Mental:

Social:

Physical:

CA Education Code 51933(h)
Teens and Sex Statistics (2011-2015)

- Nationally an estimated 55% of male and female teens have had sexual intercourse by age 18 and approximately 80% of teens used some form of contraception at first sex.*

- Nationally, among teen females aged 15-19, 42% reported to have had sex. In the same study, 44% of teen males reported to have had sex. These percentages have gradually declined since 1988 from 51% of females who reported to have had sex and 60% of male teens.*

- Among those teens who reported as not having sex, the most common reasons for abstaining were: “it was against religion or morals,” “haven’t found the right person yet,” and “don’t want to get (a female) pregnant.”*

- Birth rates: 22.3 per 1,000 females aged 15–19 in 2015, U.S. rates are still higher than those in other developed countries. (National Health Statistics Report)

*The data represent all teens in the U.S. and were derived from interviews with 4,134 male and female teens 15-19 years of age over the period 2011 through 2015.

CA Education Code 51933(h)

Centers for Disease Control and Prevention and National Health Statistics Report

Risk of Teen Sexuality #6 (3 of 23)
Teens and STI Statistics

- 20 million new cases of STIs or STDs were reported in 2018

- 50% of those new STI cases were in the 15-24 age group.

- CDC estimates that youth ages 15-24 make up just over one quarter of the sexually active population
“Affirmative consent” means affirmative, conscious, and voluntary agreement to engage in sexual activity. It is the responsibility of each person involved in the sexual activity to ensure that the person has the affirmative consent of the other or others to engage in the sexual activity. Lack of protest or resistance does not mean consent, nor does silence mean consent. Affirmative consent must be ongoing throughout a sexual activity and can be revoked at any time. The existence of a dating relationship between the persons involved, or the fact of past sexual relations between them, should never by itself be assumed to be an indicator of consent. (CA Education Code 67386 and 51225.36)

- Not saying “NO” can no longer be interpreted as “YES.”
- Consent cannot be given by a substance-impaired individual.

To report sexual assault:
- Contact law enforcement
- Contact school counselor, nurse or social worker

CA Education Code 51225.36 & 67386
The State of STDs in the United States in 2018

STDs surge for the fifth straight year, reaching an all-time high.

- 1.8 million cases of chlamydia, 19% rate increase since 2014
- 583,405 cases of gonorrhea, 63% rate increase since 2014
- 115,045 cases of syphilis, 71% rate increase of infectious syphilis since 2014
- 1,306 cases of syphilis among newborns, 185% rate increase since 2014

Ask a question at bit.ly/CVUSDHealthQuestions
LEFT UNTREATED, STDs CAN CAUSE:

- INCREASED RISK OF GIVING OR GETTING HIV
- LONG-TERM PELVIC/ABDOMINAL PAIN
- INABILITY TO GET PREGNANT OR PREGNANCY COMPLICATIONS

PREVENT THE SPREAD OF STDs WITH THREE SIMPLE STEPS:

- TALK
- TEST
- TREAT
STDs or STIs

- Parasites
- Trichomonas or trichomoniasis
- 222,000 cases per year
- Vaginitis, burning urination, discharge, odor
- Crabs- Pubic Lice

CA Education Code 51934(a)(1)
Viral STIs: Human Papillomavirus

- HPV infections are so common that nearly all men and women will get at least one type of HPV at some point in their lives.
- Nearly 80 million Americans are currently infected with some type of HPV.
- About 14 million Americans, including teens, become infected each year.
- Every year in the United States, HPV is estimated to cause nearly 35,000 cases of cancer in men and women.
- HPV is spread through intimate skin-to-skin contact. You can get HPV by having vaginal, anal, or oral sex with someone who has the virus.
- There is no treatment
- Causes cervical, throat, anus, penile cancer
- HPV vaccine—Gardasil® 9, Gardasil®, and Cervarix®
Viral STIs: Genital Herpes

Genital herpes is an STI caused by two types of viruses. The viruses are called herpes simplex virus type 1 (HSV-1) and herpes simplex virus type 2 (HSV-2).

More than one out of every six people aged 14 to 49 years have genital herpes.

Oral herpes is usually caused by HSV-1 and can result in cold sores or fever blisters on or around the mouth.

If you do not have herpes, you can get infected if you come into contact with the herpes virus in:

a. A herpes sore;

b. Saliva (if your partner has an oral herpes infection) or genital secretions (if your partner has a genital herpes infection);

c. Skin in the oral area if your partner has an oral herpes infection, or skin in the genital area if your partner has a genital herpes infection.

Medication can relieve the symptoms but cannot cure herpes infection.
Hepatitis B, C

- Most common among drug abusers
- Can be transmitted sexually
- Destroys liver
- Jaundice (turning yellow) and eventual death can result
- May require liver transplant

CA Education Code 51934(a)(1)

Glencoe (2005) p. 637-638

Ask a question at bit.ly/CVUSDHealthQuestions
Chlamydia

- Symptoms: Discharge from genitals, burning while urinating or asymptomatic

- Consequences: PID (pelvic inflammatory disease), chronic (long-term) pelvic pain or infertility, premature birth

- Having an STI that causes sores, including chlamydia, genital herpes, gonorrhea, or syphilis, increases the risk of HIV.
Chlamydia Consequences

Chlamydia Throat Infections Are Very Similar To Normal Throat Infections

Please Click The Link Below

CA Education Code 51934(a)(1)
Pelvic Inflammatory Disease (PID) Consequences

CA Education Code 51934(a)(1)
Gonorrhea

- Affects mucous membranes, similar to chlamydia
- Discharge from genitals, burning urination, often asymptomatic
- You can get gonorrhea by having vaginal, anal, or oral sex with someone who has gonorrhea. A pregnant woman with gonorrhea can give the infection to her baby during childbirth.
- Antibiotic cure, although some strains are antibiotic resistant

CA Education Code 51934(a)(1)

Glencoe (2005) p. 655; Centers For Disease Control and Prevention
Gonorrhea Consequences

CA Education Code 51934(a)(1)

Risk of Teen Sexuality #6 (17 of 23)
Syphilis is an STI that attacks many parts of the body and is caused by a small bacterium called spirochete.

Syphilis is divided into stages with different signs and symptoms:

- A person with **primary syphilis** generally has a sore or sores at the original site of infection. These sores usually occur on or around the genitals, around the anus or in the rectum, or in or around the mouth.
- Symptoms of **secondary syphilis** include skin rash, swollen lymph nodes, and fever. The signs and symptoms of primary and secondary syphilis can be mild, and they might not be noticed.
- During the **latent stage**, there are no signs or symptoms.
- **Tertiary syphilis** is associated with severe medical problems. A doctor can usually diagnose tertiary syphilis with the help of multiple tests. It can affect the heart, brain, and other organs of the body.
HIV/AIDS

STAGES

- Flu like symptoms, fever, chills, body aches
- Asymptomatic- no symptoms, but all the while dividing in the body’s cells- up to 15 yrs.
- Symptomatic- swollen glands, weight loss, infections
- AIDS- less than 100 to 200 T-cells – opportunistic infections take over- pneumonia, Kaposi’s sarcoma, brain infections- Immune system no longer working so death will result at this stage

TRANSMISSION

- Blood contact through shared needles- drug addicts at risk
- Sexual contact
- Mother to baby through breast milk, and sometimes childbirth

CA Education Code 51934(a)(1)
HIV/AIDS Consequences

CA Education Code 51934(a)(1)

Risk of Teen Sexuality #6 (20 of 23)
Wasting Syndrome-AIDS

CA Education Code 51934(a)(1)
HIV/AIDS

TESTING

- ELISA- Screening for antibodies
- Western Blot- Confirmation test

CA Education Code 51934(a)(1)
It’s just sex...Right?

- Mental
- Emotional
- Physical
- Spiritual
- Social
- Environmental

CA Education Code 51933(h); 51934(a)(3)
CA Education Code:

- 51933(e) Instruction and materials shall encourage a pupil to communicate with his or her parents, guardians, and other trusted adults about human sexuality and provide the knowledge and skills necessary to do so.
Journal Home Assignments: Units #1-6

JOURNAL ENTRIES: Students will be assigned the following for follow-up at home and to encourage communication. Parents/guardians are to initial once student has completed the entry and showed them.

- **Relationships:** Ask your parent/guardian what they believe the 3 most important characteristics are needed to have a healthy relationship. Record the list and ask them to elaborate.

- **Risks of Teen Sexuality:** Show and explain to your parent/guardian the slide with Mental, Social, Physical risks of teen sexuality. Write a short paragraph on the commentary they added to the conversation.

- **HIV/AIDS:** Go over the Truths & Myths slide with a parent/guardian. Discuss with them some of the information you learned today. Write a short paragraph explaining what they contributed to the discussion or how they did on the Truths & Myths slides.

- **Contraception Slides:** Discuss with parent/guardian about your family’s philosophy on birth control. Include opinions on using hormonal supplements (BC pills or Depovera) vs using a barrier (condoms, diaphragms) vs implants or surgeries (IUD, vasectomy).

- **Reproduction Slides:** Read sperm story to parents or have parents proofread and sign your sperm story.

- **Gender Expression:** Ask a trusted adult how they would define a gender stereotype? Share with them one of the gender stereotypes we discussed. Explain your discussions here in your journal.

[Ask a question at bit.ly/CVUSDHealthQuestions]
Home Assignment: Relationships (Supp. Unit #4)

Personal Values and Beliefs Journal: Please discuss with your parent, guardian, or trusted adult and have them sign off that you discussed this.

1. How do your personal values, attitudes, and beliefs influence your views about dating and sexual behaviors? What are your parent’s expectations of you in regards to dating?

2. How do the following issues influence your current dating behaviors?
   - Social conformity
   - Self-discipline
   - Impulse versus delayed gratification

3. How might your current dating behaviors affect your short-term health? Long-term health?
Home Assignment: Risk of Teen Sexuality (Supp. Unit #6)

Personal Values and Beliefs Journal: Please discuss with your parent, guardian, or trusted adult and have them sign off that you discussed this.

Question 1: Suppose you want to discuss your questions about abstinence. Think about how sexual activity could affect your health and your future. Do the expectations of others affect your choices? For each of the following, discuss how they could influence your decisions. Please discuss all questions with parent, guardian, or trusted adult.
   1. Parent
   2. Other adult family member/older sibling
   3. Friend
   4. Primary care doctor

Question 2: Suppose that someone is attempting to convince you to engage in sexual activity before you are ready. Write three statements that use refusal skills to maintain abstinence.

Question 3: Emily posts information about herself online that she thinks is safe, including the name of her school, her teachers' names, and her last name. She is talking to people she has never met. How does this pose a risk to Emily's health or safety? How could she reduce this risk?