Instructional Sample:

# **Testing for Sexually Transmitted Infections**

Grade 8, Physical and Health Education

**Overview:** Students gain an understanding of testing for Sexually Transmitted Infections (STIs), including who should get tested, what testing entails, and where and when to get tested.

**Big Ideas:**

* Healthy choices influence our physical, emotional, and mental well-being.

**Curricular Competencies:**

* Assess factors that influence healthy choices and their potential health effects
* Create strategies for promoting the health and well-being of the school and community
* Create and assess strategies for managing physical, emotional, and social changes during puberty and adolescence

**Content**

* Healthy sexual decision making
* Potential short-term and long-term consequences of health decisions, including those involving nutrition, protection from sexually transmitted infections, and sleep routines

**Core Competencies:**

* Communication: Acquire, interpret and present information (includes inquiries)
* Critical Thinking: Question and Investigate
* Personal Awareness and Responsibility: Well-being
* Social Responsibility: Contributing to community and caring for the environment

**First Peoples Principles of Learning:**

* Learning ultimately supports the well-being of the self, the family, the community, the land, the spirits, and the ancestors.
* Learning involves recognizing the consequences of one’s actions.

Learning Activity:

**Time**: 10-15 mins

Pre-activity questions/discussion

Use the questions and information below to engage students in a discussion about testing for Sexually Transmitted Infections (STIs):

* Does anyone know the most common symptom of most STIs? Any guesses?
  + Validate group’s responses (ex. Yes, painful urination might be a symptom for some STIs. If we experience any of these symptoms, it’s a great idea to go to a clinic!)
  + **The most common symptom is actually *no symptoms at all*. Most STIs go unnoticed by most people.**
* Q: If this is the case – if we’re not experiencing any symptoms – how do we know if we have an STI or not? A: Get tested!
* We can use the Five Ws to talk about testing: *who, when, where, what and why*! (*Write on white-board or flipchart*)
* **WHO** do we think should get tested?
  + Anyone having sex
  + Everyone has the right to get tested
  + *To address stigma: Getting tested doesn’t mean anything about us or who we are having sex with. It means we are choosing to be super responsible and take care of ourselves and partners.*
* **WHAT** does testing entail?
  + All STI in BC is ***free*** and **confidential**
    - *A note on confidentiality for youth >19:* even if we are under 19, we can get confidential health care if the health care provider we are talking to considers us old enough to make our own decisions
  + Blood samples, urine samples, and swabs are used to test for STIs
    - Testing for HIV, syphilis and hepatitis is done with a blood sample
    - Testing for chlamydia and gonorrhea is done with a urine sample, and/or a swab of genitals, throat or anus
* Everyone who gets tested will get **pre-counselling** where a health care provider will explain the test, give info about STI transmission and make sure you are prepared for whatever the result will be. **Post-counselling** is when the results are shared with you and discussed as needed. If the test is negative, they will discuss the “window period” (the time between getting an STI and when a positive result will show up on a test*)* and re-testing if necessary, as well as options for safer sex.
* If the result is positive, they will discuss the next steps including a confirmatory test, prevention of transmission to others, community resources (*like YouthCO)* and partner notification— the process of letting past partners know that they might have been exposed to an STI, which a nurse can do anonymously or can support you to do yourself.
* **WHERE** can we get tested?
  + **Family Doctor/GP or Walk-in Clinics:** This can bring up issues if we are uncomfortable talking about sex with a doctor we’ve known for a long time, and sometimes we need to advocate for ourselves to get the test if the doctor thinks we are “not at risk”. We may also be given a lab requisition and need to get the test done somewhere else.
  + **Youth Clinics**: These are great places to get tested. The doctors and nurses and staff there deal with sexual health for youth (in most cases, up to 24 years old) all the time. Often there is an age limit so it’s good to check before you show up. It’s a good idea to let participants know the nearest youth sexual health clinic, which can be found online at <http://smartsexresource.com/get-tested/clinic-finder>.
  + **STI and sexual health clinics:** Also recommended for those over the age limit for youth clinics
* **WHEN?** 
  + If we have any symptoms,
  + If a partner has been diagnosed,
  + If we feel we’re engaged in higher risk activities,
  + If we’ve started a new relationship,
  + If we or our partner/s haven’t been tested in the last year

**It is a great idea to get tested regularly!** This might mean every year, every 6 months, or every 3 months, depending on what kinds of risks we are engaging in. We can talk to our health care provider to figure out how frequently we might want to get tested. Another option is getting reminders from <http://smartsexresource.com/get-tested/testing-reminders> once we figure out how often to get tested.

Think about the **“window period”**

* + There is a period between when an STI gets into our bodies and when the STI shows up on tests. There are many factors that impact the window period, including whether the STI is a virus or a bacteria, and how our immune system responds to it.
    - For a list of STIs and window periods, see <http://smartsexresource.com/about-stis/types-stis>
  + It can take as long as three months for an HIV+ status to show up on tests. That’s three months from the time someone gets the virus to the time that it takes to show up on a test that they have it.
  + This is because the test doesn’t look for the virus itself, but rather for antibodies, the body’s reaction to the virus. Our body needs time to create enough antibodies for the test to actually detect that we are HIV+
  + Some people create enough antibodies by 3 weeks, but for some of us it takes up to 3 months. There’s no way to know if we’re a 3-weeker or a 3-monther.
* During pre-test and post-test counselling, our health care provider will help us figure out the window period.
* **We can go and get tested during the window period** – if this is the case, our health care provider will make a note of that. They may ask us to come back after window period has passed – or they might test us and if the test is negative, we might be asked to get re-tested at the end of the window period just to make sure we are actually negative. During this time, we can choose to be as safe as possible!   
    
  **WHY?**
  + Getting tested is the only way to know our status.
  + Knowing if we have an STI or not is important because it means if we do test positive, we can access health care
    - Most STIs are curable (ex. Gonorrhea, chlamydia) and the rest are treatable with medication (ex. Herpes, HIV)
    - There’s lots of fear and stigma around STIs, but in reality they are no different from other types of infections.
    - Building tools to look after our sexual health (like getting tested regularly) can be a great way to reduce fear and stigma!
  + We can use the knowledge to take care of ourselves and our partners! As we continue to learn more about STIs and how they are passed, we are learning more strategies we can use – whether or not we have an STI or HIV – to take care of ourselves and prevent passing these to our partners.

Optional Activities:

* Have students reflect on strategies they can use to prevent giving or getting STIs
  + Communication with partners about sexual health needs, wants and behaviours
  + Using condoms, dental dams, and lube (reduces the amount of friction during sex) with partners - how to use these tools, and their strengths and limitations in preventing STIs from being passed
  + Choosing sexual activities that do not involve skin to skin contact and/or passing body fluids, e.g. using sanitized sex toys and/or sex toys with condoms instead of body parts
  + Regular HIV/STI testing so we know our own status, can get treatment as needed, and have accurate information for our partners
  + Getting treatment when needed, and taking it as prescribed as best as possible
  + Sexual health education – having the right information about how STIs can – and cannot – be passed

The chart below provides additional information on specific STIs, including symptoms, treatment and prevention strategies:



* Have students generate strategies around STI prevention and safety for their school and/or their community
  + How might they raise broad awareness of STIs, testing, and available supports, without generating fear and stigma?

*© YouthCO. This resource is licensed under the Creative Commons Attribution-NonCommercial–ShareAlike 4.0 International License.* [*http://creativecommons.org/licenses/by-nc-sa/4.0/*](http://creativecommons.org/licenses/by-nc-sa/4.0/)

*YouthCO is a youth-led, [values-based](http://www.youthco.org/about_us" \t "_blank), HIV and Hep C organization that seeks to reduce stigma related to HIV and Hep C throughout BC. We've been around since 1994 providing peer education and support to communities most affected by HIV and Hep C. We offer peer-facilitated workshops on a variety of topics, including sexual wellbeing, HIV, and Hep C.*

*To book a workshop, visit us online at* [*www.youthco.org*](http://www.youthco.org)*.*

Sexual and Reproductive Health Education Resources

* **Websites/Phonelines**

The following websites and phonelines provide information and resources on various sexual and reproductive health topics:

* + <http://teachers.teachingsexualhealth.ca/>
  + <http://www.sexualityandu.ca>
  + <http://www.scarleteen.com/>
  + Sex Sense Line #1-800-SEX-SENSE
  + Kids Help Phone #1-800-668-6868 (KidsHelpPhone.ca)
* **Services**

The following organizations/individuals provide sexual and reproductive health education and other supports for teachers and/or parents:

* + [Native Youth Sexual Health Network](http://www.nativeyouthsexualhealth.com)
  + [Options for Sexual Health](https://www.optionsforsexualhealth.org/)
  + [Saleema Noon Sexual Health Educators](http://www.saleemanoon.com/)
  + [Sexplainer](http://www.sexplainer.com/)
  + [YouthCO](http://www.youthco.org/)

Sexual Orientation and Gender Identity Resources

* **Websites & Tools**

The following websites and tools provide information and resources on various sexual orientation and gender identity topics:

* + [Pride Education Network](http://pridenet.ca/resources)
  + [Questions & Answers: Gender Identity in Schools](http://librarypdf.catie.ca/pdf/ATI-20000s/26289E.pdf)
  + [Questions & Answers: Sexual Orientation in Schools](http://librarypdf.catie.ca/pdf/ATI-20000s/26288E.pdf)
* **Services**

The following organizations provide supports for teachers, parents and/or students:

* + [C.A.L.L. Out!](http://www.vch.ca/your-health/lesbian-gay-bisexual-transgender-twospirit/c.a.l.l.-out-/call-out)
  + [The Trevor Project](http://www.thetrevorproject.org/)