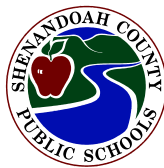




SHENANDOAH COUNTY
PUBLIC SCHOOLS

FAMILY LIFE EDUCATION
CURRICULUM

GRADE EIGHT



600 North Main Street, Suite 200

Woodstock, VA 22664

540-459-6750

Fax: 540-459-6222

FAMILY LIFE EDUCATION CURRICULUM NOTICE

Date _____

Dear Parent:

The Family Life Education Curriculum that has been adopted by the Shenandoah County School Board is an integral part of the Health classes. It will be taught throughout the school year. The materials that will be used during instruction have been evaluated and recommended by the Family Life Education Community Involvement Team. These materials have been adopted by the Shenandoah County School Board.

The Family Life Education curriculum is available for your preview at several locations. You may preview it on the Shenandoah County Public Schools division website (www.shenandoah.k12.va.us) or you may go to your child's school and preview it online. It is also available at the Shenandoah County Public Library.

Parents and guardians have the right to review the family life education program offered by their school division, including written and educational materials used in the program. Parents and guardians also have the right to excuse their child from all or part of family life education instruction.

Ref. - Shenandoah County Public Schools Policy IGAH.

If, after previewing the curriculum, you decide to opt your child out of specific areas of instruction, you **must** print out the Opt-Out Form for your child's grade level, complete and sign it and return it to your child's school. Copies of the forms are also available at your child's school.

You are welcome to personally preview any of our Family Life Education materials. If you wish to preview any of the materials, please make arrangements with your child's Health teacher or the principal. If you have any questions, please do not hesitate to ask your child's teacher and/or principal for clarification.

Rebecca T. Cooper, BSN RN
Chairperson
FLECIT



600 North Main Street, Suite 200

Woodstock, VA 22664

540-459-6750

Fax: 540-459-6222

Please complete this form **ONLY** if you **DO NOT** want your child to participate in the Family Life Education classes.

FAMILY LIFE EDUCATION OPT-OUT FORM

Student Name _____ School _____

Grade _____ Homeroom Teacher _____

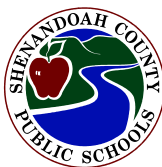
Please exempt the above named student from the following Family Life Education lessons:

- 8.1 The student will express a thorough knowledge of the meaning of adolescence, including physical and emotional changes and their impact on relationships with peers, family, and others.
- 8.2 The student will verbalize an understanding of the responsibilities related to sexual growth and development, including dating relationships, pregnancy prevention and disease control.
- 8.3 The student will express a knowledge of STDs, including causes, symptoms, transmission, treatment, and prevention.
- 8.4 The student will identify and describe the various methods to prevent pregnancy.
- 8.5 The student will verbalize an understanding of the conflicting messages society sends regarding sexuality.
- 8.6 The student will describe the process of reproduction, including conception, genetics, fetal development, and childbirth.
- 8.7 The student will verbalize an understanding of the implications of teenage pregnancy, including physical, emotional, social, financial, legal, and educational impact.
- 8.8 The student will identify options available to a pregnant teenager.
- 8.9 The student will demonstrate an understanding of developing social awareness and responsibility one has for one's own behavior and attitudes about self and others.
- 8.10 The student will demonstrate an understanding of the development of a strong sense of self worth.
- 8.11 The student will explain sexting and its consequences.
- 8.12 The student will identify the effects and prevention of the various types of sexual assault, including rape, "date rape", statutory rape, incestuous behavior, and molestation.

I understand that my child will be given an alternate assignment(s) in place of the lesson(s) being taught and that I will be responsible for my child's completion of his/her assignments. **I understand if my child does not participate in this program, I am assuming full responsibility for providing the appropriate education.**

Date

Parent Signature



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La Noticia del Plan de la Educación de la Vida doméstica

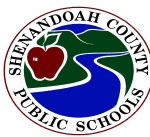
El Plan de la Educación de la Vida doméstica que ha sido adoptado por la Tabla de la Escuela de Condado de Shenandoah es una parte esencial de las clases de la Salud. Será enseñado a través del año escolar. Los materiales audiovisuales que serán utilizados durante instrucción han sido evaluados y han sido recomendados por el Equipo de Participación de Comunidad de Educación de Vida doméstica. Estos materiales han sido adoptados por la Tabla de la Escuela de Condado de Shenandoah.

El plan de la Educación de la Vida doméstica está disponible para su presentación en varios lugares. Usted puede verlo en el sitio de Internet (www.shenandoah.k12.va.us) o puede ir a la escuela de su niño y verlo en la computadora allí. Está también disponible en la biblioteca pública de Condado de Shenandoah.

“Los padres y los guardianes tienen el derecho de revisar el programa de la educación de la vida doméstica ofrecido por su escuela, incluye: los materiales escritos y audiovisuales que usen en el programa. Los padres también tienen el derecho de dispensar a su niño de toda o parte de la instrucción de educación de vida doméstica.” *Ref. La política de las escuelas de Condado de Shenandoah IGAH.*

Si, después de ver el plan, decidió optar su niño fuera de áreas específicas de instrucción, puede imprimir la Forma Autónoma (Opt-Out Form) para el nivel del grado de su niño, completar y firmar y regresarlo a la escuela de su niño. Las copias de las formas están también disponibles en la escuela de su niño.

Puede ver personalmente cualquiera de nuestros materiales de Educación de Vida doméstica. Si desea ver los materiales audiovisuales, hace por favor una cita con el maestro de Salud de su niño o el director de la escuela. Si tiene preguntas, por favor preguntar el maestro de su niño o el director.



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Complete por favor esta forma **SÓLO** si usted **NO QUIERE** que su niño tome parte en las clases de la educación de la vida doméstica.

EDUCACIÓN DE LA VIDA DOMÉSTICA FORMA AUTÓNOMA (OPT-OUT FORM)

Nombre de estudiante _____

Escuela _____

Grado _____ Maestra/o _____

Completa por favor este formulario **SÓLO** si usted **NO QUIERE** que su hijo/a participe en las clases de Educación de Vida Familiar.

- 8.1 El estudiante expresará un conocimiento profundo del significado de la adolescencia, incluyendo cambios físico y emocional y su impacto en relaciones con compañeros, padres, y otras.
- 8.2 El estudiante expresará verbalmente una comprensión de las responsabilidades relacionadas a crecimiento y desarrollo sexual, incluyendo relaciones del saliendo, la prevención de embarazo, y el control de enfermedad.
- 8.3 El estudiante expresará un conocimiento de las enfermedades de transmisión sexual, incluyendo las causas, de los síntomas, de la transmisión, del tratamiento, y de la prevención.
- 8.4 El estudiante identificará y describirá los varios métodos para la prevención de embarazo.
- 8.5 El estudiante expresará verbalmente una comprensión de los mensajes contradictorios acerca de sexualidad de sociedad.
- 8.6 El estudiante describirá el proceso de reproducción, incluyendo la concepción, la genética, el desarrollo fetal, y el parto.
- 8.7 El estudiante expresará verbalmente una comprensión de las implicaciones de embarazo adolescente, incluyendo impacto físico, emocional, social, financiero, legal, y educacional.
- 8.8 El estudiante identificará las opciones disponibles para una adolescente embarazada.
- 8.9 El estudiante demostrará una comprensión del desarrollo de la conciencia social y el responsabilidad para su propia conducta y actitudes acerca de sí mismo y otras.
- 8.10 El estudiante demostrará una comprensión del desarrollo un fuerte sentido de autoestima.
- 8.11 El estudiante explicará mensajes de texto sexual (sexting) y las consecuencias de esta.
- 8.12 El estudiante identificará los efectos y prevención de los varios tipos de asalto sexual, incluyendo la violación, "la violación del saliendo," la violación de menores, conducta incestuosa, y abuso sexual.

Entiendo que mi niño será dado tareas alternativas en lugar de las lecciones ser enseñado y seré responsable de mi niño a completar su tarea. **Entiendo si mi niño no participará en este programa, soy completamente responsable de dar a mi niño educación apropiada.**

Fecha

Firma del Padre/Guardian

This is a copy of the abstinence definition as developed by FLECIT in October, 1997. It was written to clarify the confusion about what abstinence means and how it is to be defined to students. This definition forms the basis for our program and is the guideline for answering questions. It is a critical piece of our classroom teaching and may be used as a teaching tool within the classroom setting.

Shenandoah County Public Schools use an abstinence-based Family Life Education curriculum. Abstinence is emphasized as the ideal choice when teens are faced with decisions regarding any risky behavior, including decisions involving sexual activity and alcohol and substance use. Shenandoah County Public Schools recognizes that some students have already chosen risky sexual behavior, and, in accordance, teachers present classroom instruction about responsibility for behavior and the use of contraceptives.

Definition of ABSTINENCE . . . A Report from FLECIT

Abstinence is voluntarily doing without any act which would place anyone at risk or jeopardize his/her physical, mental, emotional, spiritual, or social well-being and health.

Abstinence is voluntarily doing without. . .

... illegal drug/alcohol. or tobacco use or any substance that may hurt the individual.

... behaving in irresponsible ways.

... or not causing, allowing, or accenting mental, physical, or emotional abuse.

As it relates to sexuality, abstinence education will teach:

.....abstinence from sexual activity as the only certain way to avoid out-of-wedlock pregnancy, sexually transmitted diseases, and other associated health problems.*(Guttmacher Institute)

.....a mutually faithful monogamous relationship within the context of marriage as the expected standard of human sexual activity.*(Guttmacher Institute)

.....bearing children out-of-wedlock as likely to have harmful consequences for the child, the child's parents, and society.*(Guttmacher Institute)

.....young people to reject sexual advances and information on how alcohol and drug use increases vulnerability to sexual advances.*(Guttmacher Institute)

.....the importance of attaining self-sufficiency before engaging in sexual activity.*(Guttmacher Institute)

Kaeser, Lisa, JD, Senior Public Policy Associate. The Alan Guttmacher Institute, Washington, DC

*Abstinence Guidelines, What should you expect? (See enclosed copy)

*Approved for use by the Shenandoah County Family Life Education Community Involvement Team; October 14, 1999

Family Life Education Curriculum Grade 8

8.1. The student will express a thorough knowledge of the meaning of adolescence, including physical and emotional changes and their impact on relationships with peers, family, and others.

- A. Review of the anatomy and physiology of the reproductive systems of males and females
 - 1. Male reproductive organs and functions
 - 2. Female reproductive organs and functions
 - 3. Menstrual cycle

- B. Review of the emotional changes occurring during adolescence
 - 1. Emphasis is placed on:
 - a. Self-esteem
 - b. Respect for self and others
 - c. Independence
 - d. Acceptance of reality
 - e. Respect for authority
 - f. Acceptance of responsibility for self in relation to others
 - 2. Emphasis is placed on the importance of saying “No” to any social behavior or activity that is perceived as wrong for self or others
 - a. Recognizing risky behaviors and unsafe situations
 - b. Assertiveness skills
 - c. Problem solving skills
 - d. Refusal skills

Resources

- Posters and transparencies
- Guidance counselors

8.2 The student will verbalize an understanding of the responsibilities related to sexual growth and development, including dating relationships, pregnancy prevention, and disease control.

- A. Dating
 - 1. Purpose
 - 2. Types-casual, group, double, single
 - 3. Love versus infatuation
 - 4. Etiquette-Sex is Not a Requirement of a Date
 - 5. Activities “instead of”
 - 6. Peer pressure
 - 7. Values and “standing your ground”
 - 8. Dating safety—refusal skills, emergency plan

- B. Abstinence is the only certain way to prevent pregnancy

- C. Abstinence is the only certain way to prevent STDs

Resources

- Abstinence definition
- “Mature vs. Immature Love” fact sheet; may be used as teacher or student resource
- “Is it Love or Infatuation?” handout.; may be used as teacher or student resource
- www.stayteen.org
- “Sex Is Not a Game”- short, icebreaker video addressing consequence of sexual activity in adolescence

8.3 The student will express a knowledge of STDs, including causes, symptoms, transmission, treatment, and prevention.

- A. Abstinence definition. SCPS has an abstinence-based program
- B. STD definition - diseases spread by sexual contact, including genital to genital contact, oral-genital contact, vaginal/anal intercourse, or, by blood exchange
- C. Emphasis is placed on:
1. Types
 - a. Viral diseases
 1. HPV
 2. Herpes
 3. Hepatitis B
 4. HIV
 - b. Bacterial diseases
 1. Chlamydia
 2. Gonorrhea
 3. Syphilis
 2. Symptoms
 - a. Asymptomatic versus symptomatic
 - b. Important to note most are asymptomatic
 3. Transmission
 - a. Genital to genital contact
 - b. Exchange of semen, vaginal fluids through vaginal/anal intercourse
 - c. Oral - genital contact
 - d. Blood exchange - especially through illegal drug use/dirty needle exchange, also nonsterile equipment used in body piercings, tattooing
- D. Treatment
1. Viral diseases
 - a. No cure-treatment is management only
 - b. Damage is permanent, more severe in females
 - c. Disease can return during lifetime
 2. Bacterial diseases
 - a. Antibiotics kill bacteria
 - b. Damage is permanent, more severe in females
 3. Diagnosis and treatment are available at local Health Departments, and through private physicians
 4. Confidentiality - adolescents have the right to seek diagnosis and treatment of STDs without parent notification or permission

E. Prevention

1. Diseases transmitted through behaviors
2. Choosing to avoid certain high risk behaviors
3. Gardasil - vaccine given to protect against certain strands of HPV which can cause cervical cancer and possibly end in death
4. Hepatitis B - vaccine given at birth to protect against Hepatitis B
5. Condoms provide partial protection against some STDs

Resources

- Posters and transparencies
- Shenandoah County Health Department - clinics and educational materials
- School nurse
- Power point presentation
- www.medicalinstituteforsexualhealth.org
- www.vdh.state.va.us
- www.cdc.gov/reproductivehealth/adolescent

8.4 The student will identify and describe the various methods to prevent pregnancy.

- A. Abstinence is the only certain way to prevent pregnancy
- B. Variety of products in place to help parents plan the number and spacing of their children.
 1. Types
 - a. Barrier - condoms, diaphragm
 - b. Chemical - spermicides, sponges
 - c. Hormonal - pills, Depo-provera injections, rings, patches, implants
 - d. Other - IUD, rhythm method
 2. Prescription versus non-prescription methods
 - a. Prescription methods require a physical exam
 - b. Explanation of pelvic exams, Pap smears
 - c. Personal responsibility in using prescription medications
 - d. Side effects - especially the dangerous impact of smoking and contraceptive use
 - e. Availability and cost
 - f. Confidentiality - illegal to notify parents or other persons
 - g. Adolescents have the right to seek medical care for pregnancy prevention without parent permission, including examinations and prescriptions
 3. Misconceptions - methods that are ineffective
 4. Sterilizations – permanent - 99.9%
 - a. Tubal ligation-illegal before the age of 21
 - b. Vasectomy-illegal before the age of 21
 - c. Reversal possible-not always successful
 - d. Choice for parents who have completed their family
 5. Community resources - local Health Department, private physicians

Resources

- “Contraceptives” overheads
- Posters, transparencies

- Shenandoah County Health Department - clinics, educational materials
- Samples of some types of contraceptives for demonstration purposes ONLY
- www.vdh.state.va.us
- www.cdc.gov/reproductivehealth/adolescent

8.5 The student will verbalize an understanding of the conflicting messages society sends regarding sexuality.

A. Emphasis is placed on messages found in:

1. Music
2. Music videos
3. Internet
4. Movies
5. Television
6. Audio, visual, and print advertising
7. Books and magazines
8. Fashion

B. Impact of messages on:

1. Fashion
2. Values
3. Attitudes
4. Behavior
5. Health

C. Adults can send mixed message about sexuality to teens.

D. Gender stereotyping

1. Double standards for some behaviors
2. Role models

E. Sexual Exploitation

1. Social media
2. Sexual predators - Internet crime
3. “Grooming”
4. Older males “dating” young females
5. Talking online to a person you have never met is like inviting a stranger into your home
6. Recognizing danger signals
7. Protecting yourself

Resources

- Law enforcement official specializing in Internet crime
- Guidance counselors

8.6 The student will describe the process of reproduction, including conception, role of genetics, fetal development, and childbirth.

A. Conception includes emphasis on:

1. Sperm - characteristics, life span
2. Egg - characteristics, life span
3. Fertilization process - in Fallopian tube
4. Implantation in uterus - takes about one week, missed periods
5. Twins, (identical, fraternal, conjoined)
6. Gestation - forty weeks

B. Role of genetics includes emphasis on:

1. DNA - chromosomes, genes
2. Genome - ongoing research, much that we do not know
3. Virtually all physical characteristics are inherited, also many aspects of our personality
4. Link between genetics and diseases (hypertension, diabetes, some types of cancer, etc.)
5. x and y chromosomes and gender determination (xx=female, xy= male, father determines)
6. Some birth defects due to chromosomal anomalies (Down's Syndrome)

C. Fetal Development

1. First trimester

- a. Development takes place every minute of every hour of every day
- b. Genes trigger cells to develop in certain ways with specific functions
- c. If a trigger is missed, inadequate, or malfunctions, the body does not go back and repair the problem
- d. Results are "congenital birth defects"; some are very minor, others major
- e. Baby enclosed in an amniotic sac, filled with fluid; primary purpose is protection
- f. Heart beats at 21 days
- g. Four weeks - beginnings of circulatory, nervous, skin, skeletal systems in place
- h. Eight weeks - basic cells for all organs in all systems are present
- i. At end of twelve weeks, baby is about four to six inches long; weighs about the same as one stick of butter
- j. Placenta develops - new organ that attaches to the inside of the uterus; serves as the baby's respiratory, digestive, and excretory systems
- k. Oxygen and nutrients come from mother through the placenta to the baby
- l. Placenta also allows some dangerous products through to baby, such as viruses and bacteria
- m. Viruses and bacteria are responsible for many congenital birth defects
- n. Pregnancy tests - show positive as early as five weeks
- o. Prenatal care is very important - private physicians, some Health Departments, the Pregnancy Center
- p. Early symptoms can include nausea and fatigue
- q. Miscarriage - spontaneous loss of pregnancy; usually linked to abnormal fetal development or inadequate hormonal support

2. Second trimester

- a. Cells in each organ become more specialized to their function
- b. Ultrasound shows baby moving limbs
- c. Mother feels movement between sixteen and twenty weeks of gestation
- d. Placenta serves as baby's respiratory, digestive, excretory systems
- e. Baby is totally dependent on the mother for oxygen and nutrients

- f. Baby's lungs do not function yet - cannot 'breathe' inside mother
 - g. Umbilical cord - two umbilical veins, one umbilical artery - deliver nutrients and oxygen and remove waste products
 - h. Negative impact of certain substances - alcohol, cigarettes, illegal drugs, also misuse of certain OTC and prescription medications
 - i. At the end of twenty four weeks, baby is over twelve inches long, weighs a pound or more
 - j. Can kick, roll, flip, hiccup, swallow, urinate, responds to sound; beginning to suck (elbow, foot, hand, etc) in preparation for feeding after birth
 - k. Most of the early symptoms of pregnancy are gone
 - l. Mother begins to gain weight, pregnancy begins to show
 - m. Regular prenatal care remains very important
 - n. Stillbirth - death of baby after mother has felt movement; caused by diseases, substance abuse, umbilical cord wrapped around neck may cause stillbirth
3. Third trimester
- a. Cells/organs continue to become more specialized to their function
 - b. Baby grows rapidly now - as much as one-half pound a week
 - c. If baby born now (as early as 25 weeks), can survive in many circumstances
 - d. The longer the baby stays inside of mother, the better the chances of a healthy outcome
4. Childbirth
- a. At term, average baby weighs 7 to 7 1/2 pounds, is between 18-22 inches long
 - b. Emphasis is placed on: labor, contractions, cervix, delivery, delivery of the placenta, Cesearean section
 - c. Trigger of labor is unknown
 - d. Contractions cause cervix to dilate
 - e. Once cervix is fully dilated, mother pushes the baby through the birth canal
 - f. Process usually takes average of 12-16 hours in first time mother
 - g. Cesearean section - not an elective; must have a medical rational such as:
 - 1. Labor not progressing
 - 2. Baby experiencing circulatory problems
 - 3. Baby too large to move out of the pelvic outlet
 - 4. Mother experience life threatening health problems
 - 5. Multiple births
 - h. At birth, baby can hear, see, kick, grip, hiccup, swallow, blink, suck, and cry

Resources

- Childbirth Graphics - series of transparencies showing fetal development
- DVD "In the Womb" - covers all of the objectives
- The Pregnancy Center - speaker
- Local Health Department - educational resources
- Local physicians or nurse midwives or school nurse as speakers

8.7 The student will verbalize an understanding of the implications of a teenage pregnancy, including physical, emotional, social, financial, legal and educational consequences.

A. Physical

- 1. Teenagers may be at risk for preterm labor and birth if they:
 - a. Avoid prenatal care
 - b. Are noncompliant with instructions
 - c. Continue with poor nutritional habits

- B. Emotional
 1. Response and level of support from parents and extended family
 2. Response and level of support from father of baby
 3. Response and level of support from friends
 4. Lack of maturity in mother/father can result in frustration and resentment towards baby

- C. Social
 1. Response and level of support from peers
 2. Response and level of support from school, faith, and local
 3. Loss of participation in normal social activities of adolescence, both in and out of school

- D. Financial
 1. Financial obligation of parents - insurance coverage and impact on Medicaid
 2. Financial obligation of father of baby
 - a. None until baby is born
 - b. Mother can pursue DNA testing to determine paternity
 - c. Child support attached/based on non-custodial parent's income
 - d. Child support continues until the child is eighteen
 3. Financial obligation of mother of baby
 - a. Applying for Medicaid, WIC, food stamps, etc.
 4. Costs of physical needs of baby (food, clothing, diapers, doctor appointments, medication, equipment, childcare, etc.)
 5. Costs of perterm labor, preterm birth, hospitalizations of mother, baby

- E. Legal
 1. Father has NO legal rights to any decisions mother makes about the baby during pregnancy
 2. Father has FULL legal rights to baby after birth
 3. Custody can be awarded to mother or father depending on situation
 4. Child support, visitation are decisions set down by a judge
 5. Noncompliance to decisions may be appealed
 6. Child support enforcement:
 - a. Follows social security number of non-custodial parent
 - b. Crosses state boundaries
 - c. Includes back payments
 - d. Can include garnishment of pay check
 - e. Possibility of incarceration, loss of driver's license for non-support

- F. Educational
 1. Higher school drop-out rate among both teen mothers and teen fathers.
 2. Job scarcity and security - difficult without a high school diploma or GED
 3. Difficult to move out of poverty level without additional support from family
 4. Impact of lack of education on parenting skills

Resources

- "Too Young" - negative consequences of teen pregnancy
- Healthy Families - speaker
- Department of Social Services - speaker
- Health Department - speaker
- The Pregnancy Center - speaker

- School nurse
- Guidance counselor
- Legal services agency (Blue Ridge Legal Services) - speaker
- www.vdh.state.va.us
- www.cdc.gov/reproductivehealth/adolescent

8.8 The student will identify options available to a pregnant teenager.

- A. Adoption - permanent, requires written consent of birth mother and birth father unless he is unknown
1. Open
 2. Closed
 3. Private, private agency, foster child adoption choices
 4. Associated costs
 5. Emotional impact on birth parents and extended family
 6. Emotional impact on adoptive parents
- B. Abortion
1. Legal in Virginia
 2. Parental or adult caretaker notification required if the teen is under the age of eighteen
 3. 24 hour waiting period
 4. Medicaid does not pay for abortions
 5. Side effects, including long term emotional impact

Resources

- Private adoption services such as Catholic Charities, Bethany Services - speaker or educational materials
- Adoptive parent as speaker
- Department of Social Services
- Healthy Families agency
- The Pregnancy Center
- Local physician, nurse midwife, school nurse

8.9 The student will demonstrate an understanding of developing social awareness and responsibility one has for one's own behavior and attitudes about self and others through written or verbal expression.

- A. The student will explain an understanding of emotions and their impact on self and others.
1. Humans have a wide range of emotions
 2. Behavior is an outgrowth of emotions
- B. The student will explain an understanding of peer group relationships
1. Peer relationships are healthy
 2. Behavior can be influenced by peers
 3. Peer influence can affect positive choices
 4. Consequences of decisions impact our lives
 5. Learning assertiveness techniques to help students stand up for their own rights

8.10 The student will demonstrate an understanding of the development of a strong sense of self worth through written or verbal expression.

- A. The student will explain an understanding of self esteem.
 - 1. Humans are unique and individual
 - 2. Each person has valuable assets to contribute to a group and society
- B. The student will explain an understanding of appropriate/inappropriate interactions with others.
 - 1. Our bodies are private
 - 2. Media, music, fashion can heavily influence students' choices in behavior
- C. The student will explain how to respond to inappropriate behavior from others.
 - 1. Sexual harassment is inappropriate and illegal
 - 2. Bullying, including cyber-bullying, is inappropriate and illegal
 - 3. Bystander responsibility includes the steps to take if one is a witness to sexual harassment/bullying

8.11 The student will explain sexting and its consequences.

- A. The student will state the definition of sexting: the transmission of nude or semi-nude images between cell phones, computers or other electronic devices.
 - 1. Once sent, the image is considered to be on the web permanently
 - 2. It is also known as an "Electronic tattoo"
- B. The student will state an understanding of the history of this behavior and reasons youth choose to participate in it.
 - 1. It is a relatively new phenomenon, begun in 2005
 - 2. Annually, approximately 25% of preteens, teens are involved, either by sending, receiving, or viewing sexual images of other youth
 - 3. Behavior is becoming increasingly common among middle schoolers
 - 4. Youth participate in this behavior for a variety of reasons
 - a. Boyfriend/girlfriend relationships
 - b. Virtual participation in risky behavior
 - c. Parents won't find out about it
 - d. Joke or dare
 - e. Harassment
 - 5. Discuss changes in values regarding privacy/modesty and self worth.
 - a. What person hopes to gain by participating in sexting
 - b. Media, music, and fashion impact on self image
- C. The student will state the consequences of sexting including:
 - 1. Legal
 - a. State statutes and enforcement, including misdemeanor versus felony charges
 - b. Conviction, punishment, sex offender registration and implications
 - c. Age of persons sexting
 - d. Sending vs. receiving pictures
 - e. Distribution and forwarding of pictures
 - f. Sexual harassment
 - g. Images may end up being used by sexual predators

Resources

- Refer to the Code of Virginia – pornography statutes
 - Invite the SRO to speak
2. Social
 - a. Repercussions including judgment or ostracism by peers, family, community.
 - b. Harassment
 - c. Possibility of damaging academic, social, and employment opportunities in the future
 - d. Include examples of adults whose lives have been negatively impacted by choices they made during adolescence regarding sexting.
 3. Emotional
 - a. Broken trust when image is forwarded without one's permission
 - b. Recurring embarrassment and victimization
 - c. Possibility of depression leading to self-injury
 4. Cyber-bullying and sexual harassment
 - a. Both behaviors are illegal; students can be charged with criminal activity
 - b. Sexting is a significant cause of cyber-bullying; examples include:
 1. Retaliation after a relationship break-up
 2. Bathroom pictures of a person without their permission
 3. A sibling or friend "playing a joke"
 - c. Cyber-bullying can lead to isolation, withdrawal, and depression
- D. The student will explain bystander responsibility.
1. All students have the right to be safe
 2. If a student recognizes that another student is in an unsafe situation because of cyber-bullying or sexual harassment, he/she has the responsibility to report the incident to a trusted adult
 3. It is not necessary for a student to intervene in the situation
 4. The student's report will remain anonymous

Resources

- Refer to www.bigbearcommonground.com
 - www.NetSmartz.org
 - Invite guidance counselor to speak
- E. The student will state the steps to take if he/she has sent or received a sext image.
1. If student has sent a message, talk with recipient, do your best to have pictures deleted
 2. If student has received a message, do not delete it; talk to a trusted adult about the proper steps to take
- F. The student will demonstrate, through written or verbal expression, positive choices to avoid involvement in sexting.
1. Do not assume any image sent or posted will remain private
 2. Anything sent into cyberspace is considered permanent; it is FOREVER
 3. Resist giving in to peer pressure
 4. Consider the recipient's reaction
 5. There is no such thing as truly anonymous
 6. Never take a picture of yourself that you wouldn't want your family, your teachers, or your classmates to see

Resource

- Refer to www.loveisrespect.org – teacher resource only; not for student viewing

8.12 The student will identify the effects and prevention of the various types of sexual assault, including rape, “date rape”, statutory rape, incestuous behavior, and molestation.

- A. Sexual assault
 1. Rape - sexual penetration without permission
 2. Date rape - sexual penetration without permission as part of a dating relationship
 3. Statutory rape - consensual sexual intercourse between a minor and person at least three years older
 4. Incestuous behavior - sexual activity between blood relatives (parent/grandparent to child)
 5. Molestation - fondling of breasts and/or genital areas

- B. Reporting sexual assault
 1. All reports are confidential
 2. Report to local law enforcement officials
 3. If incident involves a minor, may also be reported to Child Protective Services worker through the Department of Social Services
 4. Certain professionals are mandated reporters, including school staff, nurses, doctors, mental health counselors, clergy

- C. Legal issues
 1. Misdemeanor and felony charges
 2. Incarceration
 3. Sexual Offender Registry

- D. Prevention
 1. Recognizing and setting personal boundaries
 2. Learning to respect personal boundaries of others
 3. Recognizing unsafe situations
 4. Avoiding unsafe situations
 5. Managing oneself in an unsafe situation

Resources

- www.loveisrespect.org – teacher resource only; not for student viewing
- RESPONSE - speaker
- School Resource Officer
- Sheriff’s Department - sexual assault investigations caseworker
- Guidance counselor

Additional resources that may be used throughout the curriculum

- www.webMD.com
- www.teenhealth.org
- www.stayteen.org
- www.loveisrespect.org – teacher resource only; not for student viewing