



Resource Guide

This kit was funded in part by the State Section 510 Abstinence Education Grant Program, a program of the U.S. Department of Health and Human Services (HHS), Administration for Children and Families (ACF), Family and Youth Services Bureau (FYSB).

The Program defines abstinence education as an educational or motivational program that:

- (A) **Has as its exclusive purpose, teaching the social, psychological and health gains** to be realized by abstaining from sexual activity;
- (B) **Teaches abstinence** from sexual activity outside marriage as the expected standard for all school age children;
- (C) **Teaches that abstinence from sexual activity is the only certain way** to avoid out-of-wedlock pregnancy, sexually transmitted diseases, and other associated health problems;
- (D) **Teaches that a mutually faithful monogamous relationship in context of marriage** is the expected standard of human sexual activity;
- (E) **Teaches that sexual activity outside the context of marriage** is likely to have harmful psychological and physical effects;
- (F) **Teaches that bearing children out-of-wedlock** is likely to have harmful consequences for the child, the child's parents, and society;
- (G) **Teaches young people how to reject sexual advances** and how alcohol and drug use increases vulnerability to sexual advances; and
- (H) **Teaches the importance of attaining self-sufficiency** before engaging in sexual activity.

Source: Section 510 Abstinence Education Fact Sheet, Human Resources and Services Administration, US Department of Health and Human Services, April 2002.

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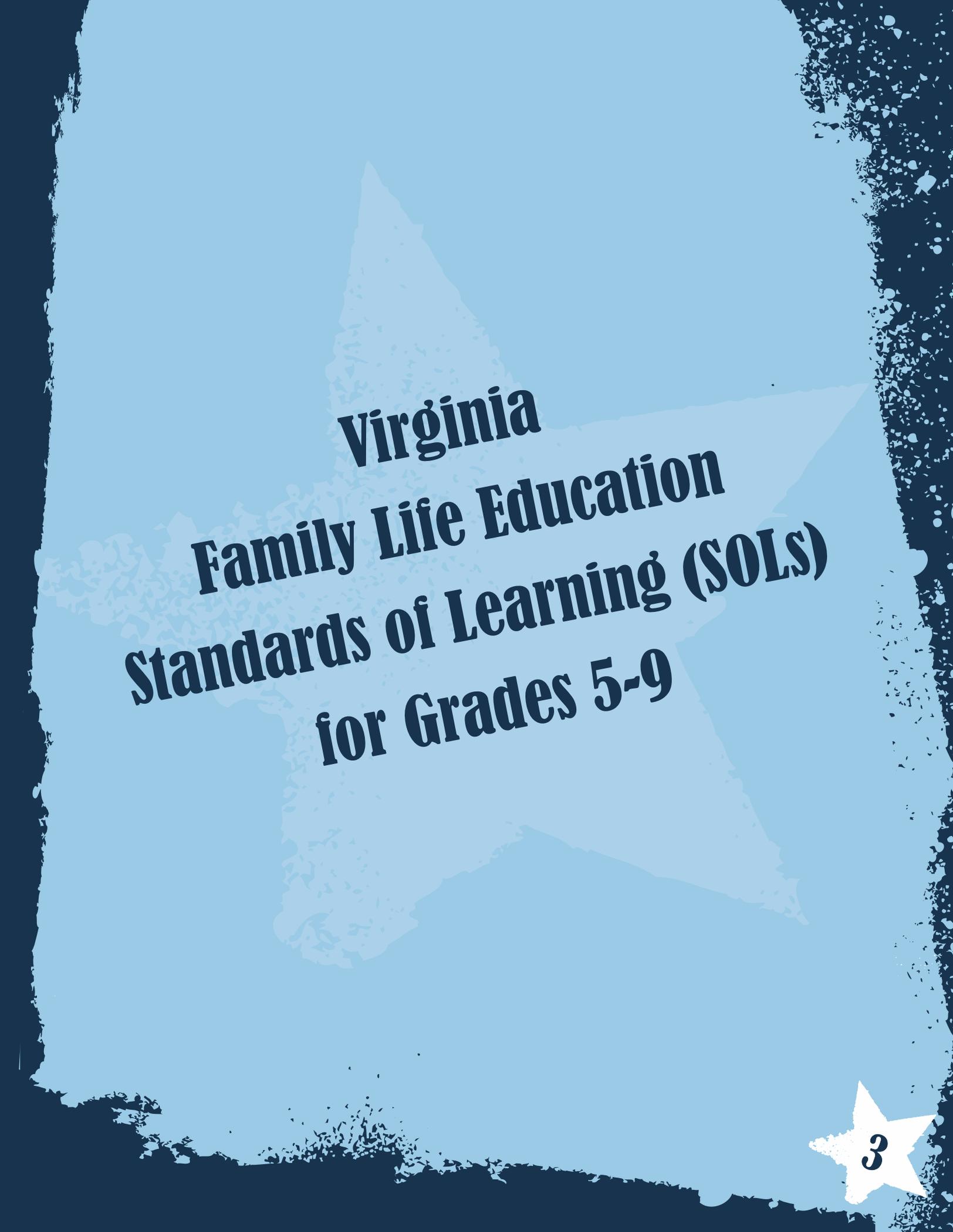
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**HOW TO
USE THIS
RESOURCE GUIDE**

How To Use This Resource Guide

In pretesting the contents of this kit with other Virginia parents of children ages 10-14, several parents requested additional reference materials, such as web sites and a glossary of terms, to help them talk to their kids about these sometimes difficult topics in “kid-friendly” language. Parents were also interested in what topics were taught in school at each grade level, so that they would have a better understanding of where their child was at educationally as well as developmentally. This resource guide provides the following such tools:

- ★ **Family Life Education Standards of Learning (SOLs):** Developed by Virginia's Board of Education, the SOLs are guidelines for the curriculum that should be taught in grades K-12. The Family Life Education SOLs cover a variety of topics, including abstinence education, human sexuality, and reproduction. Because this kit is aimed at the parents of children ages 10-14, we have provided the complete Family Life Education SOLs for grades 5-9 as well as some information on how they might be useful to you.
- ★ **Glossary:** The glossary provides nontechnical, “kid-friendly” definitions for many terms related to sexuality and abstinence. You may find a review of these definitions helpful prior to playing the **Talk 2 Me** card game with your child. Feel free to adapt them as you wish or to use a completely different definition that you feel is more appropriate. (Please note that these definitions should not be considered “official” definitions and may be different than the definitions used by your child's school.)
- ★ **Additional Resources for Parents:** This list features contact information for a number of relevant organizations that have developed materials for or conducted programs with children ages 10-14.



Virginia
Family Life Education
Standards of Learning (SOLs)
for Grades 5-9

Virginia Family Life Education Standards of Learning (SOLs) for Grades 5-9

How might the SOLs be helpful to me as I use this kit?

In the Commonwealth of Virginia, the Board of Education has developed Family Life Education SOLs for Grades K-12. These SOLs are guidelines for the curriculum that is taught at each grade level. The Family Life Education SOLs cover a variety of topics, including abstinence education, human sexuality and reproduction.

Because this kit is aimed at the parents of children ages 10-14, we have provided the complete Family Life Education SOLs for grades 5-9. The SOLs that are related to topics covered in the materials of this kit are boxed. Here is how they might be useful to you:

- ★ Turn to the SOLs for your child's grade level.
- ★ At the bottom of the page, you will find a box that lists the names of the scenarios in the **Talk to Me** card game that relate to one or more SOLs for that grade level.
- ★ With your child's developmental and maturity levels in mind, review the list of scenarios for your child's grade level, as well as those above and below that grade level, to determine if there are any cards that you feel may not be appropriate for your child at this time.
- ★ If you are interested in reviewing the complete list of the Family Life Education SOLs for grades K-12, go to:
www.doe.virginia.gov/testing/sol/standards_docs/family_life/comparison_fle_health_sol.pdf.

Why are the Talk 2 Me card game scenarios not categorized according to my child's age?

Because children of different ages may be in the same grade level, the scenarios have been organized by grade level, rather than age.

In addition, a number of factors determine a child's maturity level, including age and grade level, and parents are in the best position to determine what topics their children are or are not ready to discuss and understand. While the goal is to have a game that is interesting and challenging for all, including those who are mature for their age, special care should be taken with children who may be less advanced so that they are not confused or frustrated by topics or experiences that are outside their realm of experience. If you find that your child is in the latter category, simply remove those scenarios that you feel are out of his or her grasp.

Why are more of the Talk 2 Me card game scenarios listed under some grade levels than others?

The SOLs vary quite a bit from year to year in response to the developmental and educational changes that occur as children get older. As a result, a **Talk 2 Me** card game scenario may be related to one or more SOLs for the 6th grade, but not to any of the SOLs for the 7th grade, for example. This doesn't necessarily mean that the scenario is inappropriate for a 7th grader, but rather that the topic on the card may have been already covered in school a year or two ago. If you decide to choose which scenarios to include in the card game based on the listing of scenarios related to the SOLs, you may want to consider cards that are from below and above your child's grade level.

Are schools required to teach Family Life Education?

Localities are not mandated to teach Family Life Education, but most localities do so voluntarily. Those localities that do decide to teach Family Life Education are required to follow the Board of Education guidelines and SOLs according to the following State law, which was updated in 2011.

VIRGINIA ACTS OF ASSEMBLY-CHAPTER

An Act to amend or reenact §22.1-207.1 of the Code of Virginia, relating to family life education.
[H 1015]

Approved

Be it enacted by the General Assembly of Virginia:

1. That §22.1-207.1 of the Code of Virginia is amended and reenacted as follows:

§22.1-207.1. Family life education.

The Board of Education shall develop by December 1, 1987, standards of learning and curriculum guidelines for a comprehensive, sequential family life education curriculum in grades K through 12. Such curriculum guidelines shall include instruction as appropriate for the age of the student in family living and community relationships; abstinence education; the value of postponing sexual activity; the benefits of adoption as a positive choice in the event of an unwanted pregnancy; human sexuality; human reproduction; steps to take to avoid sexual assault, and the availability of counseling and legal resources, and, in the event of such sexual assault, the importance of immediate medical attention and advice, as well as the requirements of the law; and the etiology, prevention and effects of sexually transmitted diseases.

All such instruction shall be designed to promote parental involvement, foster positive self concepts, and provide mechanisms for coping with peer pressure and the stresses of modern living according to the students' developmental stages and abilities. The Board shall also establish requirements for appropriate training for teachers of family life education, which shall include training in instructional elements to support the various curriculum components.

For the purposes of this section, "abstinence education" means an educational or motivational component which has as its exclusive purpose teaching the social, psychological, and health gains to be realized by teenagers' abstaining from sexual activity before marriage.

Virginia Family Life Education Standards of Learning (SOLs) for Grades 5-9 Fifth Grade

The following WHAT'S GOING ON? cards are appropriate for this grade level:

Amanda	Bryant	Emily	Justin	Pat	Sanjay
Jacob	Carlos	Felicia	Kayla	Rachel	Sarah
Andre	Charlise	Heather	Liz	Ramond	Sean
Ashley	Chris	Hector	Marcus	Raquel	Tyra
Ben	Derrick	Jasmine	Megan	Rebecca	Devin
Brandon	Miguel	Ryan	Drew	Jessie	Nicole
Jessica					

5.1 The student will define the structure and function of the endocrine system.

Descriptive Statement: The basic parts of the endocrine system (pituitary gland and adrenal glands) and their functions are introduced.

5.2 The student will identify the human reproductive organs in relation to the total anatomy.

Descriptive Statement: Emphasis is placed on the male reproductive organs: penis, testicles, scrotum, and urethra; and on the female reproductive organs: uterus, ovaries, vagina, and fallopian tubes. The reproductive organs are explained in relation to total human anatomy.

5.3 The student will explain how human beings reproduce.

Descriptive Statement: Instruction includes the uniting of the sperm and the egg and the development of the unborn child inside the uterus. The development of the baby at different stages is illustrated. Emphasis is placed on the need to avoid premarital sexual activity. The importance of prenatal care is discussed also, as well as the profound effects of drugs on the mother and developing child.

5.4 The student will recognize the relationship between the physical changes that occur during puberty and the developing capacity for reproduction.

Descriptive Statement: Physical changes that occur during puberty are summarized. Topics included are nocturnal emissions and erections; menstruation; instability of emotions, such as mood swings during puberty; development of a positive attitude toward one's sexuality; and the relationship between changes during puberty and one's ability to conceive and bear children.

5.5 The student will realize the importance of nutrition for himself or herself and for pregnant women who need to eat nutritious foods and avoid dangerous substances while the baby is growing inside the uterus.

Descriptive Statement: This objective is incorporated into the nutrition component for the fifth-grade health curriculum.

5.6 The student will identify reasons for avoiding sexual activity prior to marriage.

Descriptive Statement: The psychological, social, and physical consequences of premarital sexual relations are discussed, as well as the benefits of postponing sexual intercourse until one is physically and emotionally mature and has a positive, committed marital relationship. The detrimental effects of premarital sex, including teenage pregnancy, infant mortality, and sexually transmitted diseases, are emphasized, as well as the impact on one's reputation and self-esteem.

5.7 The student will describe the effects of personal hygiene on one's self-concept.

Descriptive Statement: Discussion focuses on those bodily changes in puberty that require special attention and cleanliness and their relationship to a positive self-concept and acceptance from peers. Toxic shock syndrome and its relation to cleanliness are included.

5.8 The student will recognize the importance of contributing to a constructive group activity.

Descriptive Statement: The teacher emphasizes the individual's contribution to accepting responsibility, how this relates to group success or failure, and how opportunities for leadership may be presented.

5.9 The student will develop an increased understanding of the roles, duties, and responsibilities of family members.

Descriptive Statement: The student can achieve this by defining the traditional and changing roles, duties and responsibilities of family members; by preparing for the life-long adjustments required for his or her changing roles; and by describing the emotional interactions involved in being a family member. Non-traditional career roles of males and females are discussed, and options for the life-long goals of women are presented.

5.10 The student will examine the messages from mass media related to sexuality.

Descriptive Statement: Printed materials, advertising, television, wearing apparel, movies, and music are discussed in relation to gender stereotyping and to the avoidance of sexual exploitation.

5.11 The student will develop skill in saying "no" to any social behavior or activity that he or she perceives as wrong for himself or herself.

Descriptive Statement: Discussion focuses on alternatives to situations such as rude behavior, smoking, alcohol or drug use, theft, vandalism, and premarital sexual relationships.

5.12 The student will recognize threatening or uncomfortable situations and how to react to them.

Descriptive Statement: These situations may include walking alone, opening doors for strangers, experiencing sexual abuse or incest, receiving obscene telephone calls, and facing dangers found in shopping malls. Ways of protecting oneself and recognizing and reporting such threats are stressed. The point is made, however, that most life situations are not threatening.

5.13 The student will explain the effects of substance abuse on the body.

Descriptive Statement: Emphasis is placed on the adverse effects of alcohol, drugs, and tobacco on the body. This information is related to physical and emotional growth during adolescence, including sexual development; to fetal development; and to any adverse effects upon the family unit.

5.14 The student will become aware of the existence of sexually transmitted diseases.

Descriptive Statement: The nature and myths regarding sexually transmitted diseases, including acquired immune deficiency syndrome (AIDS), is introduced. AIDS is explained as a deadly disease. Other diseases referred to include syphilis, gonorrhea, Chlamydia, and genital herpes.

Virginia Family Life Education Standards of Learning (SOLs) for Grades 5-9 Sixth Grade

The following WHAT'S GOING ON? cards are appropriate for this grade level:

Amanda	Bryant	Felicia	Justin	Ramond
Andre	Carlos	Heather	Liz	Raquel
Makayla	Charlise	Hector	Marcus	Ryan
Ashley	Derrick	Isabel	Megan	Sanjay
Ben	Devin	Jasmine	Nicole	Tyra
Brandon	Drew	Jessica	Pat	
	Emily	Jessie	Rachel	

6.1 The student will relate personal hygiene to the physical changes that occur during puberty.

Descriptive Statement: Changes during puberty are discussed in relation to the increased need for personal hygiene, for proper dental care, for frequent showering and shampooing, for the use of deodorants, for the use and disposal of pads and tampons, and for clean clothing.

6.2 The student will explain the effects of growth on development, attitudes and interests.

Descriptive Statement: The teacher provides opportunities for discussion of physical changes during puberty, group and nongroup relations (cliques and loners), peer pressure, and boy/girl relationships. Emphasis is on the positive and normal aspects of differences among individuals.

6.3 The student will continue to identify physical and emotional changes that occur during puberty and their effects on growth and development.

Descriptive Statement: The following topics are discussed in relation to male and female changes during puberty: nocturnal emissions and erections; menstruation, masturbation; instability of emotions and ways of expressing these emotions appropriately; and approaches to developing a positive attitude toward one's sexuality.

6.4 The student will recall basic facts about sexually transmitted diseases.

Descriptive Statement: Factual information is presented regarding sexually transmitted diseases, including syphilis, gonorrhea, chlamydia, and genital herpes. Diseases of the genitalia common to adolescents that are not sexually transmitted are described so as to allay unnecessary fears (such as vaginitis, urethritis, etc.).

6.5 The student will be able to describe the etiology, effects, and transmission of the AIDS virus.

Descriptive Statement: Instruction includes factual information regarding the AIDS virus and its transmission. The medical profession should be involved in teaching this objective (and other health-related topics) to include the most up-to-date facts.

6.6 The student will summarize the process of human reproduction and the benefits of postponing premarital sexual activity.

Descriptive Statement: This is a review of the reproductive process and the advantages of delaying sexual involvement. The possible detrimental effects of premarital sexual activity for both males and females are emphasized. They include sexually transmitted diseases, unwanted pregnancy, infant mortality, and psychological (reputation, self-esteem, etc.), social, economic, and physical consequences.

6.7 The student will describe personal characteristics that can contribute to happiness for self and others.

Descriptive Statement: This includes self-discipline, self-esteem, independence, acceptance of reality, acceptance of others, tolerance, concern for the needs of handicapped persons, loyalty, honesty, cooperation, diligence, respect for proper authority, and acceptance of responsibility for self in relation to others.

6.8 The student will demonstrate increased understanding of child abuse and neglect, including emotional and sexual abuse.

Descriptive Statement: This is accomplished by defining the types of abuse and explaining the need to report such situations to a trusted adult such as a parent, teacher, minister, grandparent, or guardian. The teacher helps students identify resources for the reporting and treatment of child abuse and family violence.

6.9 The student will become aware of community health-care and safety agencies and their functions.

Descriptive Statement: Instruction includes the availability of community agencies providing the following services: child abuse prevention; treatment of abuse victims; mental health counseling; teenage pregnancy prevention and counseling; family planning counseling; prenatal care; substance abuse prevention and treatment and support groups; suicide prevention; prevention and treatment of sexually transmitted diseases, including AIDS; other general and specialized medical service, including the role of the family physician or local health department; police department, fire department, and other safety services; and community services provided by religious organization. Parents are encouraged to learn about these agencies and to use their services when needed.

6.10 The student will explain the effects of substance abuse on the individual, family, school, and society.

Descriptive Statement: The effects of alcohol, tobacco, and other drugs on the individual, family, school, and society are presented with emphasis on genetic risks and fetal development, the nature of addictive personalities, drunk driving, physical and sexual abuse, family violence, and the hazards of "second-hand" smoking. Information on local community resources for obtaining help with these problems is included.

6.11 The student will evaluate the messages from mass media related to sexuality and gender stereotyping.

Descriptive Statement: Students progress from examining media messages in the fifth grade to evaluating messages from mass media related to sexuality and gender stereotyping in the sixth grade. The avoidance of sexual exploitation and stereotyping is stressed.

6.12 The student will apply decision-making skills in solving specific problems and in determining the possible outcomes of his or her decisions.

Descriptive Statement: Instruction includes the steps in the decision-making process, problem solving, and assertive communication skills. Students relate decision-making and problem solving skills to actual adolescent problems – their own or situations presented in case problems. The effects of decisions on life-long goals are emphasized, and the students predict the possible outcomes of decisions made. Career and other options available to women are stressed as choices and identified in the decision-making process.

Virginia Family Life Education Standards of Learning (SOLs) for Grades 5-9 Seventh Grade

The following **WHAT'S GOING ON?** cards are appropriate for this grade level:

Amanda	Carlos	Heather	Marcus	Ryan
Ashley	Chris	Hector	Miguel	Sanjay
Ben	Derrick	Isabel	Nicole	Sarah
Brandon	Devin	Jasmine	Pat	Sean
Brittany	Drew	Jessica	Rachel	Tyra
Bryant	Emily	Jessie	Ramond	
	Felicia	Kendra	Raquel	
	Hailey	Liz	Rebecca	

7.1 The student will identify his or her role and relationships within the family.

Descriptive Statement: Content includes identification of personal interactions; communication skills; ways of meeting emotional, physical, and intellectual needs; and the student's contribution to the family unit. Students learn the positive benefits of personal sacrifice to support family goals and needs when such a decision is indicated.

7.2 The student will recognize the physical development of his or her sex characteristics and how they affect emotional and social growth.

Descriptive Statement: Emphasis is placed on the biological and physiological changes of early adolescence. Attention is given to such secondary sex characteristics as body growth, genital changes, hormonal secretions, the onset of menstruation, and sex-response feelings. Instruction promotes self-awareness and alleviates anxiety through factual information regarding spontaneous erections, nocturnal emissions, masturbation, and differences in growth rates and development.

7.3 The student will realize that physical affection is not all sexual, but that it also can be an expression of friendship, of celebration, or of a loving family.

Descriptive Statement: The student learns that appropriate expressions of affection are essential for emotional, physical, and psychological health. Factual information about personal anxieties encountered frequently by adolescents. Such anxiety has led to increased dropout and teen suicide problems.

7.4 The student will recognize that sexual behaviors are conscious decisions; that it is important to say "no" to premarital and inappropriate sexual relationships; and that appropriate relationships are based on mutual respect, trust, and caring.

Descriptive Statement: Sexual feelings are interpreted as normal and to be expected, but not always to be manifested in behavior. Instruction includes explanation of the differences between needs and desires, assertive skills, problem solving or conflict resolution, and alternatives. Ways to say "no" to premarital sexual relations and ways that students can support each other in saying "no" are presented. In addition, the detrimental effects of teenage pregnancy, the nature of sexually transmitted diseases, and the benefits of delaying sexual activity until marriage is reviewed.

7.5 The student will identify messages in society related to sexuality.

Descriptive Statement: The teacher guides the student in discovering and analyzing messages about sexuality found in advertising media, music and videos, television, films, printed materials, and graffiti. Messages conveyed by adults also are addressed. Students learn to recognize gender stereotyping and sexual exploitation. They are encouraged to evaluate and counteract any negative effects identified and to engage in a variety of positive activities, rather than spending too much time viewing media programs containing negative components.

7.6 The student will be aware of the consequences of preteen and teenage sexual intercourse.

Descriptive Statement: Instruction focuses on updated, factual information regarding sexually transmitted diseases, including AIDS; pelvic inflammatory disease (PID); cervical cancer; unwanted pregnancy; and discussion about reputation, guilt, and anxiety. Discussion includes also the emotional and financial implications of sexual activity and parenting before marriage. Students are guided in identifying positive aspects about themselves as reasons for avoiding risk-taking behavior. They learn also about the positive results and freedoms associated with abstinence during the preteen and teenage years.

7.7 The student will list the adverse consequences of a pregnancy early in adolescence, as well as the positive benefits of postponing pregnancy until marriage.

Descriptive Statement: Instruction includes a review of pregnancy and childbirth from previous grade levels, as well as discussion of responsibilities involved and adverse consequences encompassing the emotional, physical, social, and economic impact on young parents, on their families, and on society. The nutritional implications of high-risk infants and teenage mothers also are included. The effects of an adolescent pregnancy on the student's life-long goals and potential achievements are emphasized, particularly in view of the many personal and career options available to women.

7.8 The student will describe the signs and symptoms of pregnancy.

Descriptive Statement: Instruction involves physical and psychological changes and the need for early detection of pregnancy through medical testing to ensure a healthy and successful pregnancy. Community resources for testing and/or further information are identified.

7.9 The student will develop an understanding of and responsibility for family planning.

Descriptive Statement: Content includes reasons for family planning, factors to be considered when planning a family, the role of the family physician, community resources, and methods of contraception.

7.10 The student will explain techniques for preventing and reporting sexual assault and molestation.

Descriptive Statement: Methods of handling assault and molestation, as well as prevention methods, are presented. Emphasis is placed on the importance of avoiding situations which could provide opportunities for molestation, including the homes and cars of acquaintances when no appropriate supervision is available. Key terms are defined, and approaches used by molesters are identified and explained. Community resources for victims of molestation and assault are identified.

7.11 The student will identify causes, symptoms, treatment, prevention, and transmission of sexually transmitted diseases, including AIDS.

Descriptive Statement: Topics include the nature, symptoms, treatment, transmission, and diagnosis of the following diseases in addition to AIDS; syphilis, gonorrhea, chlamydia, and genital herpes. In addition, myths are dispelled; for example, students learn that one cannot contract a sexually transmitted disease from dirty dishes or clothing. High-risk activities, such as needle sharing, intravenous drug abuse, are discussed. Community resources for the testing and treatment of sexually transmitted diseases are identified.

7.12 The student will identify the issues associated with friendships.

Descriptive Statement: The student accomplishes this by identifying characteristics of each type of friendship and by relating these characteristics to changes as one advances through the growth and developmental process.

7.13 The student will realize the role of peers and the peer group during adolescence, and the nature and purpose of dating.

Descriptive Statement: Discussion focuses on the qualities of friendship, the importance of participating in peer groups that encourage the development of positive personal traits, and the nature of dating. Group dating is presented as a positive first step in developing romantic relationships, demonstrating appropriate dating behavior, and fulfilling dating responsibilities.

7.14 The student will recognize contributions of various racial and ethnic groups to family life and society.

Descriptive Statement: Topics include the importance of racial and ethnic identity for families and the effects of negative stereotypes on families and individuals. Emphasis is placed on the appreciation of racial and ethnic differences.

7.15 The student will increase his or her ability to listen to different points of view and to accept the rights of others to a differing point of view.

Descriptive Statement: Positive communication skills are developed to enhance relationships and to increase recognition of various points of view existing within families and society.

Virginia Family Life Education Standards of Learning (SOLs) for Grades 5-9 Eight Grade

The following WHAT'S GOING ON? cards are appropriate for this grade level:

Amanda	Carlos	Jasmine	Megan	Sanjay
Ben	Derrick	Jessica	Miguel	Sarah
Brandon	Devin	Jessie	Nicole	Sean
Brittany	Drew	Justin	Rachel	Tyra
Bryant	Emily	Kayla	Raquel	
	Hailey	Kendra	Rebecca	
	Isabel	Marcus	Ryan	

8.1 The student will relate stages of human development to his or her own developmental level.

Descriptive Statement: The student learns that people change as they age, according to their developmental level—physically, mentally, and emotionally. Physical development and human anatomy are reviewed. Stages of mental and emotional development are presented in relation to the student's present developmental level with the goal of increasing his or her self-understanding and self-acceptance – now and in the future. Commonly accepted theories of personal development are presented as they relate to the student's own development.

8.2 The student will recognize the development of sexuality as an aspect of the total personality.

Descriptive Statement: The primary factor to be presented is the development of one's own sexual identity.

8.3 The student will become aware of the need to think through decisions and to take responsibility for them.

Descriptive Statement: The impact of present decisions on future opportunities and personal development is stressed. Instruction includes also support skills for the decision-making process – assertive communication, identification of personal conflicts, and conflict resolution. Life-long educational, career, and personal development goals are examined in relation to present decisions and to options available to males and females at various stages of their lives.

8.4 The student will identify the issues associated with friendships.

Descriptive Statement: The student accomplishes this by reviewing the characteristics of friendships, by discussing the qualities of a good friend, and by relating the characteristics to changes as one continues to advance through the growth and development process.

8.5 The student will recognize the nature of dating during adolescence.

Descriptive Statement: Content includes the need for belonging, love, and affection, and the search for one's own identity. In addition, students examine the difference between love and infatuation and become aware that one learns about oneself from every relationship.

8.6 The student will interpret the messages in society related to sexuality.

Descriptive Statement: Students continue to discover and analyze messages about sexuality found in advertising media, music and videos, television, films, printed materials, and graffiti. Students also determine the impact of these messages on themselves and others and review how to counteract negative effects. Positive alternatives to media immersion are discussed.

8.7 The student will describe strategies for saying “no” to premarital sexual relations.

Descriptive Statement: The emphasis is on strengthening self-confidence and reinforcing assertive skills and decision-making skills. Students learn why and how to say “no” to premarital sexual relations and to situations that challenge their own values, how to manage peer pressure, and how to manage their own sexual feelings.

8.8 The student will develop the coping skills needed to deal with stress.

Descriptive Statement: Students identify possible sources of stress (for example, parental, peer, and school pressures; teenage pregnancy; and fear of AIDS); and the positive and negative ways in which individuals deal with these sources of stress. The point is made, however, that stress cannot be avoided and this it is not all negative. Information is provided to counteract negative approaches to dealing with stress, such as alcohol, drugs, and suicide. Students learn positive techniques for coping with stress (for example, exercise and sports, creative arts, religious activities and youth groups, and career-development and life-management activities).

8.9 The student will identify the stresses related to changing relationships in the home, school, and community.

Descriptive Statement: Emphasis is placed on the grief and adjustment processes associated with loss or change resulting from such circumstances as illness, a disabling condition, death, separation, divorce, loss of friendship, loss of income, or coping with substance abuse. The point is made, however, that changes may bring new opportunities to form friendships and to engage in new activities; that some relationships contain normal amounts of stress, especially in adolescents; and that stress is usually only temporary.

8.10 The student will analyze the issues related to teenage pregnancy.

Descriptive Statement: Issues such as the role of the teenage father and the adverse impact of pregnancy on both families are identified. The physical, social, emotional, legal, financial, educational, and nutritional implications of teenage pregnancy also are discussed.

8.11 The student will review facts about pregnancy prevention and disease control.

Descriptive Statement: Methods of contraception are analyzed in terms of their effectiveness in preventing pregnancy and the spread of the disease. Abstinence is emphasized as the only method that is 100% effective in preventing pregnancy and the most effective method of minimizing the possibility of contracting sexually transmitted diseases.

8.12 The student will describe the effects of alcohol and drug abuse on families and peer relationships.

Descriptive Statement: The effects of substance abuse on judgment within the peer group in terms of social and sexual behavior are analyzed. The effects of such abuse within the family also are emphasized, including family violence.

8.13 The student will identify the effects and prevention of sexual assault, rape (including “date rape”), incestuous behavior, and molestation.

Descriptive Statement: Content includes developing assertive skills, resolving conflict, avoiding risk situations and provocative behavior and dress, saying “no”, and identifying other alternatives. Information on referral services also is provided.

8.14 The student will recall the ways in which the AIDS virus is transmitted, and techniques for preventing this disease.

Descriptive Statement: This involves describing behaviors, including homosexuality that put one at risk; dispelling myths regarding the transmission of the disease; and stressing abstinence and the rejection of the use of illegal, intravenous drugs. The use of condoms in preventing the spread of AIDS is discussed.

Virginia Family Life Education Standards of Learning (SOLs) for Grades 5-9 Ninth Grade

The following **WHAT'S GOING ON?** cards are appropriate for this grade level:

Amanda	Bryant	Jasmine	Miguel	Ryan
Ben	Carlos	Jessica	Rachel	Sanjay
Brittany	Emily	Kayla	Ramond	Sarah
	Hailey	Kendra	Raquel	
	Isabel	Marcus	Rebecca	

9.1 The student will trace the human growth cycle in relation to parenting skills from the prenatal period through the elderly stage.

Descriptive Statement: Information about developmental levels throughout the life cycle-prenatal, infant, toddler, pre-kindergarten, school-age, adolescent, young adult, middle-age, and elderly-is related to the complexity of child-rearing and to the need for maturity before parenthood. Life-stage development is presented also to help students gain appreciation of their own development.

9.2 The student will explain the importance of the family as a basic unit of society and his or her responsibility as a member of the family.

Descriptive Statement: Topics include the function of the family, family forms, family strengths and family influences on society.

9.3 The students will recognize the development of sexuality as an aspect of the total personality.

Descriptive Statement: Discussion focuses on the development of one's sexual identity. Internal and external conflicts associated with problems of sexual identity are addressed.

9.4 The student will review and apply the decision-making process.

Descriptive Statement: Students practice methods of gathering information and applying the decision-making process in practical situations. Emphasis is placed on the need for parental guidance, family and personal values, knowledge, and reason as bases for decision-making.

9.5 The student will review the nature and purposes of dating.

Descriptive Statement: Topics include understanding family guidelines, the functions of dating and coping with the pressures experienced in dating situations. Discussion also focuses on the importance of group dating, rather than dating as a couple, in early adolescence.

9.6 The student will realize the importance of settings standards for controlling sexual behavior and of postponing sexual relations until marriage.

Descriptive Statement: The physical, emotional, social, and economic consequences of premarital sexual relations continue to be emphasized along with reinforcement of assertive skills and ways to say “no” in terms that will enable the student to resist pressure from other teenagers and manager his or her own feelings and behavior.

9.7 The student will interpret the effects and prevention of sexual assault, rape (including “date rape”), incestuous behavior, and molestation.

Descriptive Statement: This is a review of the use of assertive skills, conflict resolution, avoidance of risk situations, and referral services in the community. In addition to identifying such factors, the student explains or interprets them to others.

9.8 The student will relate specific information on substance abuse to each stage of the life cycle.

Descriptive Statement: Emphasis is on substance use and abuse during pregnancy, puberty, and adolescence and its general effect on daily functioning.

9.9 The student will be able to explain the process of reproduction.

Descriptive Statement: Instructional components include anatomy, physiology, conception, fertility, fetal development, childbirth, and prenatal care.

9.10 The student will demonstrate understanding of specific health issues, including the ability to conduct particular self-examinations.

Descriptive Statement: The focus is on factual information about menstruation, toxic shock syndrome, pre-menstrual syndrome, menopause, and male and female specific concerns. Disease prevention through self-assessment and self-examination is reinforced with emphasis on breast and testicular self-examination.

9.11 The student will demonstrate knowledge of pregnancy prevention and disease control.

Descriptive Statement: Topics including planning for adult relationships, a review of factors to consider in planning for a family, misconceptions about contraception, a review of methods of contraception in relation to effectiveness in pregnancy prevention and disease control, and the decisions associated with contraception. Abortion is not presented as a method of birth control, but spontaneous abortion or miscarriage is explained and the risks of induced abortion are analyzed.

9.12 The student will explain the transmission and prevention of the AIDS virus.

Descriptive Statement: This is a review of the ways in which the AIDS virus is transmitted, and the techniques of preventing this disease.

9.13 The student will identify the effects of discrimination.

Descriptive Statement: The teacher helps students identify forms of discrimination including ageism, racism, and sexism and the consequences of discrimination on individual and family life. Discussion focuses on the value and importance of differences among individuals and families.

9.14 The student will begin to identify educational and career goals.

Descriptive Statement: Students formulate educational and career objectives. A “life goals” project provides the structure for achieving this objective and students complete activities that enable them to gain insight into the variety of personal and career options available to males and females.

Glossary

Glossary

This kit is designed to help you and your child discuss some of the difficult decisions we must make as we grow into healthy adults. As you explore the kit together, and as you play the **Talk 2 Me** card game in particular, you may come across several words that are unfamiliar to your child. The following list of definitions explains many of these terms in a basic, “kid-friendly” way. Of course, you may have a different definition that you’re more comfortable using, but feel free to borrow from this list if you need a little help! (NOTE: Occasionally, words within a definition are used that are also contained within the glossary. These words have been placed in bold italics for easy identification.)

Abstinence – Avoiding *sexual intercourse* and any other activity involving *genital* contact or *genital* stimulation (e.g. touching someone’s private parts).

Abstinence Pledge – A promise not to have *sex* before marriage. This is usually done as a part of an abstinence program.

AIDS (Acquired Immunodeficiency Syndrome) – AIDS is a condition that can develop after someone has had *HIV* for a long time, because it weakens the body’s ability to fight off other germs. People with AIDS get many different diseases and illnesses. There is no cure for AIDS.

Birth Control – See *Contraception*.

Casual Contact – Everyday things that we might do with other people. Hugging, holding hands, talking to someone, kissing with a closed mouth, or drinking from the same glass are examples of casual contact. People cannot get *pregnant* or *HIV/STDs* through casual contact.

Condom – A cover for a male’s *penis* used while having *sex*. A condom looks like a rolled-up balloon. Condoms are used to prevent *pregnancy*. Condoms can be made from different materials, but only latex condoms can help prevent HIV and some STDs.

Contraception – Methods and devices that prevent *pregnancy* by preventing a male’s *sperm* from fertilizing a female’s *egg*. Some people call these methods and devices *birth control*.

Double Standard – A rule or expectation that is different for one group than for another group. It can be based on gender, age, race, or other factors.

Egg – The cell in a female responsible for making a baby. A female becomes *pregnant* when one of her eggs joins with a male’s *sperm*. This can happen when people have *sex*. Eggs are very, very small and cannot be seen by the naked eye. Females have millions of eggs stored in their body, but it only takes one egg to make a baby.

Ejaculation – When *semen* squirts out from a male’s *penis*. Each time a male ejaculates, he releases about 500 million *sperm*.

Erection – The hardening of the *penis*. This might happen because someone is sexually excited. It can also happen at other times, such as when a male is sleeping, when his bladder is full, or even when he is nervous.

Genitals – The *sex* organs on the outside of the body. These are sometimes called private parts.

Growth Spurt – A quick increase in height and weight. This usually happens during *puberty*.

HIV (Human Immunodeficiency Virus) – HIV is the virus that causes **AIDS (Acquired Immunodeficiency Syndrome)**. A virus is a germ that can make someone sick. People can get HIV from exchanging bodily fluids with someone who is already infected with HIV. This can happen during sexual contact. Or it can happen if someone's infected blood enters someone else's blood stream, such as when people injecting drugs share needles. HIV can weaken the body's ability to fight off other germs, so they are more likely to get sick. You cannot tell if a person has HIV just by looking at them. The only way to know if a person has HIV is to do a test at a doctor's office, hospital, or clinic.

Hormones – Chemicals produced in the body that helps the body function. Some hormones cause changes in the body during **puberty**.

Love – A feeling of strong caring for someone else. A person can have love for anyone – close friends, a partner, a boyfriend or girlfriend, for parents or for children. Love is not the same as **sexual desire**.

Menstruation – Menstruation is often called a **period**. It is when a female sheds a little bit of blood and tissue from her uterus out through the **vagina**. It does not mean she is cut or hurt. Menstruation is a normal part of being a female that makes the body ready for having a baby someday. When a female becomes **pregnant**, her **periods** usually stop, and they start up again after her baby is born. **Periods** typically happen for 3 to 5 days each month. They generally start when females are between 8 and 16. It is important to note that females who have sex before their first **period** can still get **pregnant**.

Nocturnal Emission – When a male **ejaculates** during sleep. These occurrences may happen after a **sexual** dream, which the male may or may not remember. Some people call these **wet dreams**. They are common and normal occurrences for many males, particularly during **puberty**.

Ovaries – Small organs in a female's body that hold tiny **eggs**. After a female reaches puberty, the ovaries usually push one **egg** out each month. The ovaries also make **hormones** so that females get their **periods**.

Penis – The organ on a male that is used for urinating, having **sex**, and making babies.

Period – See **Menstruation**.

Pornography – Magazines, movies, web sites, and books that usually include pictures of naked males and females.

Pregnant – When a male and a female have **sexual contact**, the female may become pregnant. This means a male's **sperm** have moved through the female's **vagina** to where her **eggs** are. Pregnancy begins when a **sperm** and an **egg** join and a baby begins to grow inside the female. A female is usually pregnant for about 9 months before having a baby. A female can get pregnant even if:

- ★ She has sex while she is having her **period**
- ★ She has not yet had her first **period**
- ★ She is under age 12
- ★ It is her first time having **sexual intercourse**
- ★ The male only touches the outside of her **vagina** with his **penis**
- ★ A male pulls his **penis** out of her **vagina** before he **ejaculates**

Puberty – A time of life when a young person starts to change into a man or a woman. It is a time when people become physically capable of having babies. **Hormones** cause the changes in puberty. For example, boys' voices become deeper and girls' breasts grow larger. Both boys and girls begin to grow more body hair. **Note to parents:** It is important to discuss with your child that being physically able to have babies does not mean they are emotionally or financially prepared to have a child.

Rape/Sexual Assault – When a person has **sexual intercourse** through physical force or without giving consent. Rape is against the law. It is also against the law for people aged 18 and over to have **sex** with people under age 18.

Reproduction – When a new baby is made. The complete process includes **sexual intercourse**, **pregnancy**, and giving birth to the baby.

Semen – A clear, whitish liquid that contains *sperm* in a male's body. When a male *ejaculates*, he releases semen that contains millions of *sperm*.

Sex – Sex can be another word for gender (male/female). Some people also use the word sex to refer to *sexual intercourse*. **Note to parents:** Adults and children may have different definitions of what sex is. You may want to discuss it with your child to make sure you all have a common understanding of how you interpret the meaning.

Sexting - is the act of sending sexually explicit messages or pictures over a cell phone or other mobile communication device. Because the laws have not caught up with technology, sexting is a federal offense for teens as it is child pornography when one teen sends a nude picture of another teen or themselves to friends. Teens experimenting with this behavior could be labeled a sex offender legally for the rest of their lives.

Sexual Contact – When a male and a female touch each others' *genitals* or private parts, with or without wearing clothes. It can include *sexual intercourse*.

Sexual Desire – A feeling of attraction. It involves wanting to have *sex* or *sexual contact* with someone. It may or may not include being in love with that person.

Sexual Intercourse – When a male's erect *penis* enters the female's *vagina*. The female may become *pregnant* from doing this. Some people refer to sexual intercourse as *sex*, having sex, or making love.

Sexually Transmitted Diseases (STD) – An infection from germs that is passed from one person to another through *sexual contact*. People who have an STD can pass it on to others, even if there are no symptoms. Some STDs have serious permanent effects, including women not being able to have children. Abstinence is the only sure way to not get an STD. Sexually transmitted disease is also known as *sexually transmitted infection (STI)* or *venereal disease (VD)*.

Sperm – The cells in males that are needed to make a baby. Sperm are made in a male's *testicles*. A male's body makes millions of tiny sperm each day. If a male *ejaculates semen* (that contains sperm) in or near a female's vagina, she may become *pregnant*.

Testicles – The part of the male's body that makes *sperm* and other *hormones*. Testicles are sometimes called *balls*.

Uterus – A small organ inside a female's body. It is the place where a baby grows when a female is pregnant. It is also the place from where females *menstruate* (have their period). A uterus is also called a womb.

Vagina – The place inside a female's body that leads from the *uterus* to the outside of her body. It is where *sexual intercourse* happens and where blood comes out during a female's *period*. This is also where a baby comes out. Germs that cause *STDs* can get inside a female's body through her vagina.

Virgin – A person who has never had *sex*. Because *STDs* can be passed on in different ways, being a virgin does not always mean that someone does not have an *STD*. **Note to parents:** Different people define being a virgin in different ways. Talk to your child about what it means to be a virgin, based on your values.

Wet Dream – See *Nocturnal Emission*.

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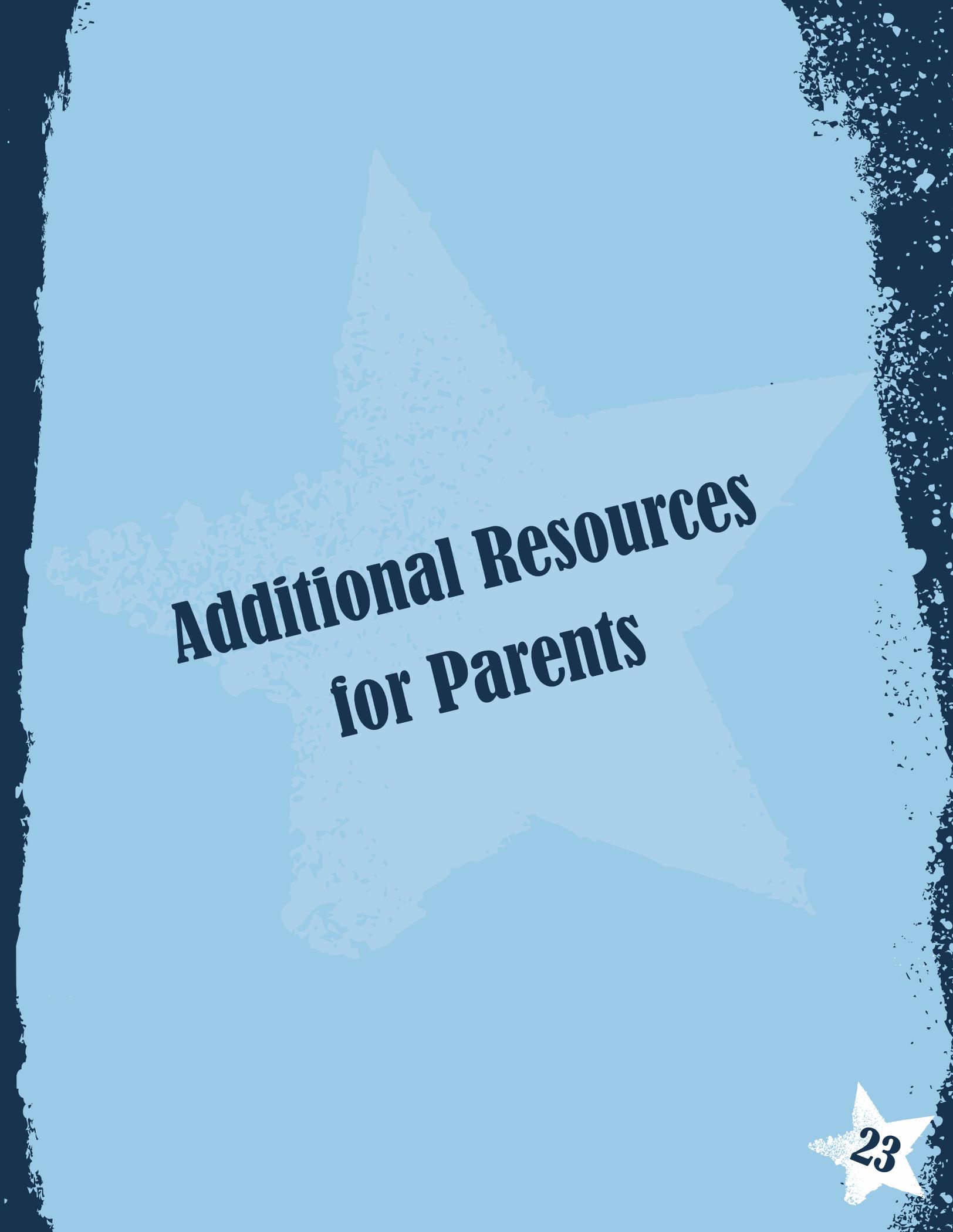
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**Additional Resources
for Parents**

Additional Resources for Parents

Abstinence Educators' Network – <http://abednet.tripod.com>

ABSTINENCE EDUCATORS' NETWORK (AEN) Inc. is a non-profit statewide organization composed of individuals and agencies who are deeply concerned about the sexual health of young people. Through Character Based/Premarital Abstinence Education and support, our mission is to assist youth in avoiding untimely pregnancies, sexually transmitted diseases, and emotional trauma.

P.O. Box 531, Mason, OH 45040

★ 1-866-WORTH IT (1-866-967-8448) ★ AbEdNet@aol.com

Character Counts! – www.charactercounts.org

The purpose of the **CHARACTER COUNTS!** Coalition is to fortify the lives of America's young people with consensus ethical values called the "Six Pillars of Character". These values, which transcend divisions of race, creed, politics, gender and wealth, are: trustworthiness, respect, responsibility, fairness, caring, and citizenship.

9841 Airport Blvd. Suite 300, Los Angeles, CA 90045 ★ (310) 846-4800 or (800) 711-2670 ★ cc@jiethics.org

Educational Guidance Institute – www.educationalguidanceinstitute.com

The **EDUCATIONAL GUIDANCE INSTITUTE** provides a support system to parents, educators, community leaders and policy makers. Conducts seminars and conferences and produces "Foundations for Family Life Education," abstinence-based education.

188 Berbusse Lane, Front Royal, VA 22630

★ (540) 645-4020

Friends First – www.friendsfirst.org

FRIENDS FIRST equips youth, families, and communities to make healthy life choices by imparting relationship education and promoting the benefits of abstinence until marriage. Successfully implemented across the United States and abroad, FRIENDS FIRST is a non-profit, non-sectarian organization.

P.O. Box 270302, Littleton, CO 80421

★ 1-800-909-WAIT ★ info@friendsfirst.org

Institute for Youth Development (IYD) – www.youthdevelopment.org

IYD is a non-partisan, non-profit organization that promotes a comprehensive risk avoidance message to youth for five harmful risk behaviors that are inextricably linked: alcohol, drugs, sex, tobacco, and violence. IYD believes that children and teens, provided with consistent and sound messages, are capable of making positive choices to avoid these risk behaviors all together, especially if they are empowered by strong parent and family connections.

P.O. Box 16560, Washington, DC 20041

★ (703) 471-8750

Sexual Violence Prevention Program - www.vdh.virginia.gov/ofhs/prevention/dsvp

The Virginia Department of Health's Domestic and Violence Prevention Unit has developed PROJECT CONNECT, a groundbreaking multi-state initiative of Futures Without Violence, seeks to develop comprehensive models of public health prevention and intervention that can lead to improved health and safety for victims of sexual and domestic violence. In Virginia, one of ten Project Connect sites nationwide, the project's focus lies in family planning/reproductive health and home visiting settings. The Virginia Department of Health's Division of Prevention and Health Promotion, in partnership with the Division of Child and Adolescent Health, the Virginia Home Visiting Consortium, and the Virginia Sexual and Domestic Violence Action Alliance, has developed assessment strategies and tools, training curricula, educational materials and policy/procedure guidance to better enable family planning clinic staff and home visitors to identify and provide support and referral to individuals and families impacted by sexual and domestic violence.

Centers for Disease Control and Prevention - www.cdc.gov/TeenPregnancy/Parents.htm

Sexual development is a normal part of the teen years. Your teen needs your help in understanding his or her feelings, peer pressure, and how to say no if he or she does not want to have sex. Parents have a strong impact on whether a teenager makes healthy decisions for himself or herself. This goes for making healthy decisions about sex as well.

2-1-1 Virginia - www.211virginia.org

2-1-1 is an easy way to remember a phone number connecting people with free information on available community services. When you dial 2-1-1, a trained professional listens to your situation and suggests sources of help using one of the largest databases of health and human services in Virginia.

Project Reality – www.ampartnership.org

PROJECT REALITY has been a pioneer in the national field of adolescent health education, developing teaching and evaluating abstinence-centered programs in public schools since 1985. In addition to abstinence curricula and related materials, in-service teacher training seminars are provided for all participating schools, as well as a variety of motivational speakers for school assemblies.

411 Business Center Drive, Suite 103 Mt. Prospect, IL 60056 ★ Toll Free (877) 290-9248

Virginia Department of Education – www.doe.virginia.gov/students_parents

The **VIRGINIA DEPARTMENT OF EDUCATION** has resources for parents interested in learning more about their child's education. The resources include educational standards, enrollment, school data, child/school safety, and other resources.

P.O. Box 2120, Richmond, VA 21238 ★ (800) 292-3820 ★ instruction@mail.vak12ed.edu

VIRGINIA DEPARTMENT OF HEALTH PROGRAMS

Abstinence Education Initiative

The Virginia Department of Health **ABSTINENCE EDUCATION INITIATIVE** focuses on helping adolescents make healthy choices about their future and creating a supportive environment for abstinence education across the Commonwealth.

109 Governor St, 8th Floor, Richmond, VA 23219 ★ (804) 864-7808

Adolescent Health Programs – www.vahealth.org/adolescenthealth

ADOLESCENT HEALTH PROGRAMS are a core concern of the Virginia Department of Health and adolescent health-related programs are located within several VDH Divisions. The programs focus on health promotion and disease prevention, disease treatment, and surveillance. Adolescent health promotion recommendations are based on the Bright Futures Guidelines for Health Supervision of Infants, Children and Adolescents.

109 Governor St, 8th Floor, Richmond, VA 23219 ★ (804) 864-7725

Division of Disease Prevention – www.vdh.state.va.us

The mission of the **DIVISION of DISEASE PREVENTION** is to support health districts/departments in the prevention and treatment of HIV and other STDs, including their complications, through provision of education, information, and health care services that promote and protect the health of all Virginians.

109 Governor St, 2nd Floor, Richmond, VA 23219 ★ 1-800-533-4148 (Voice/TDD)

School Health Program – www.vahealth.org/schoolhealth/index.htm

The Virginia Department of Health's **SCHOOL HEALTH PROGRAM** works to improve young people's health and their capacity to learn through the support of families, school, and communities working together to support the establishment and enhancement of coordinated school health programs.

109 Governor Street, 8th Floor, Richmond, VA 23219 ★ (804) 864-7689

Sexual Violence Prevention Program – www.vahealth.org/civp/sexualviolence

The Virginia Department of Health's **DOMESTIC AND VIOLENCE PREVENTION UNIT** has developed several programs to end sexual violence including RELATE (Relationship Education Leading Adolescents Towards Empowerment). RELATE project teams work with seven different community services boards to train groups of local youth to implement their peer-to-peer curriculum. These youths then present the five-session curriculum to their peers in schools, after school programs, and community programs.

Family Violence & Sexual Assault Hotline: **(800) 838-8238** (v/TTY) Free, Confidential, and 24 hours a day or 109 Governor St, 8th Floor, Richmond, VA 23219 * **(804) 864-7740**

Kit Contents:

- ★ How-To Guide
- ★ Parent Brochure
- ★ Card Game
- ★ Resource Guide
- ★ Sample Conversations CD



Virginia Abstinence Education Initiative

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