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Health Promotion Partner



# Reducing the Risk

Building Skills to Prevent Pregnancy, STD & HIV

Research, Evidence, Results

**An Evidence-Based Program**

# What Is RTR?

*Reducing the Risk (RTR)* is a skills-based curriculum designed to help teens prevent pregnancy and the transmission of STD, including HIV.

RTR delivers and reinforces these clear messages:

- Abstinence is the best and safest choice.
- Youth should avoid unprotected sex.
- Youth should always use protection if they have sex.



# What Is RTR?

- RTR was developed for high school (9<sup>th</sup> & 10<sup>th</sup> grades).
- It also has been successfully implemented with middle school youth, particularly where there are high rates of pregnancy, drug use and STD.
- RTR teaches risk-assessment, communication, decision-making and planning skills, as well as refusal strategies and delay tactics.



# How Effective Is RTR?

**RTR is one of the first rigorously evaluated sexuality education curricula to have a measurable impact on behavior.**

Rigorous evaluation of RTR has shown significant effects:

- Delayed the onset of intercourse among abstinent students.
- Reduced the rate of unprotected intercourse.
- Increased knowledge about abstinence, contraception, pregnancy risk and STD prevention.
- Increased parent-child communication about abstinence and contraception.
- Both parents and students reported that the curriculum made this communication easier.

# U.S. Youth Sexual Risk Behaviors

## 2011 Youth Risk Behavior Survey (YRBS)

Among high school students (grades 9 – 12):

- 47.4% have had sexual intercourse
- 6.2% had sexual intercourse before age 13
- 15.3% have had four or more partners
- 33.7% were currently sexually active\*

\*Had sexual intercourse in the 3 months preceding the survey.

# Why RTR Works

## Activities are based on solid health behavior theories:

- Social Learning Theory
- Social Influence Theory
- Cognitive-Behavioral Theory

## According to these theories, to reduce risk-taking behavior, people need to:

- Learn and personalize relevant information.
- Recognize social pressures and anticipate risky situations.
- Establish norms for positive behaviors.
- Learn and practice skills to act on information and cope with social pressures.

# RTR Program Objectives

## Students participating in RTR will be able to:

- Evaluate the risks and lasting consequences of becoming a teen parent or getting HIV or another STD.
- Recognize that abstaining from sex or using protection are the only ways to avoid pregnancy, HIV and other STD.
- Demonstrate effective communication skills for remaining abstinent or avoiding unprotected sex.

# Skills and Information Taught in RTR

- Abstinence—not having sex
  - Avoiding high-risk situations
  - Knowing about, getting and using protection
  - Preventing HIV and other STD
  - HIV risk behaviors
  - Sticking with abstinence and protection
  - Refusal skills and delay tactics, practiced through roleplays
- \* The more students effectively say no to sex, or to unprotected sex, the more likely they will be to use these skills in real life

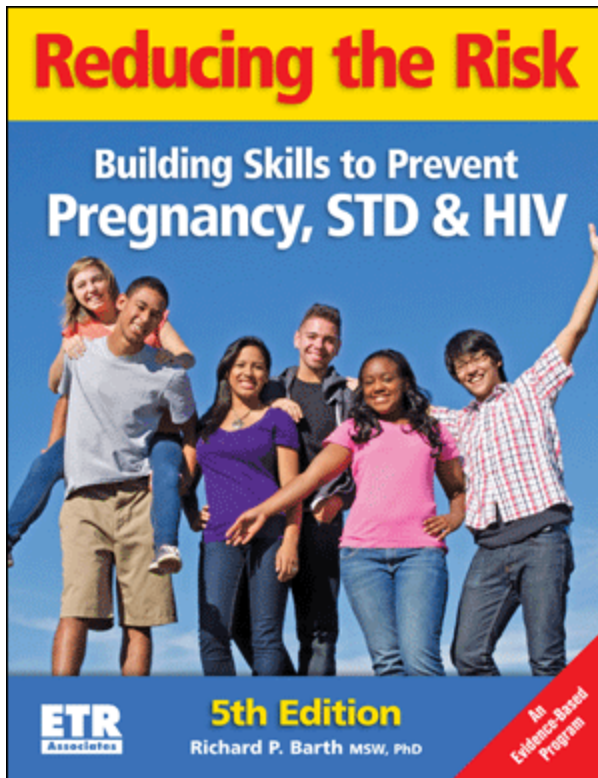


# How RTR Works

- RTR has 16 classes, lasting 45 minutes each.
- Classes are designed to be taught over a 3-week period.
- Ideally, RTR should be included in a comprehensive health education program.

# RTR Components

## Teacher Guide



# RTR Components

## Teacher Guide

- Includes a synopsis of each activity, as well as approximate time and materials needed

### **CLASS 1A** **Abstinence, Sex and Protection: Pregnancy Prevention Emphasis**

#### Synopsis

Class 1 is an introduction to *Reducing the Risk*. The teacher models 2 versions of a role play to demonstrate refusal skills. Students participate in a 2-part “pregnancy risk” activity to personalize their vulnerability to pregnancy.

#### Preparation and Materials

- ▶ Review Introduction and Prior to Class 1 and assure yourself that the parent notification and permission is complete.
- ▶ Review Appendix A, “How to Use Role Plays.”
- ▶ For ease of “performance,” copy **Lee and Lee #1A** and **#2A** (Teacher Role Plays 1.1A and 1.4A) so that they are separate from the book.
- ▶ Cut out 6 paper squares, number them 1 to 6 and place them in a hat or other container.
- ▶ Make a copy of the **Pregnancy Risk Chart** (Teacher Reference 1.3A). Cut the chart into the 6 numbered strips as marked.
- ▶ Refer to Student Workbook for **My Risks** (Worksheet 1.2A).

#### Outline of Activities

Activity	Time	Materials
Introduce Curriculum and Model Role Play, Version 1	10 min.	□ <b>Lee and Lee #1A</b> (Teacher Role Play 1.1A)
Pregnancy Risk Activity, Parts 1 and 2	25 min.	□ <b>My Risks</b> (Worksheet 1.2A) □ <b>Pregnancy Risk Chart</b> (Teacher Reference 1.3A)
Model Role Play, Version 2	10 min.	□ <b>Lee and Lee #2A</b> (Teacher Role Play 1.4A)
Lesson Summary	5 min.	□ None

# RTR Components

## Teacher Guide

- Detailed steps for each activity

Class 1A • Abstinence, Sex and Protection: Pregnancy Prevention Emphasis

### Activities

#### Introduce Curriculum and Model Role Play, Version 1

1. Tell students that today is the beginning of a program that will give them skills to keep from getting pregnant or from getting someone pregnant. To introduce the skills they'll be learning, you're going to do a 1-person play. The dialogue of the play might now, or in time, be familiar to them.

The play is called **Lee and Lee**. Tell students you'll be playing Lee and also her boyfriend—who is, amazingly, also named Lee. (Ask students to hold their applause until the end!) See **Lee and Lee #1A** (Teacher Role Play 1.1A). As necessary, change the names of the characters or the language in this role play to work for your students.

2. After performing the role play, resume your role as teacher and ask students their reaction to the way Lee and Lee discussed having sex and the risk of pregnancy.

#### Include the following questions in the discussion:

- Is this the way many couples decide whether or not to have sex?
  - Why didn't Lee stick to the decision not to have sex?
  - What makes it difficult to say no?
3. Tell students that even though they may know how to avoid pregnancy, and want to, it's not always easy to say no to sex or use protection. It takes *knowledge* and *skills*. The story of Lee and Lee shows that many young people don't have either the knowledge or the skills.

Every year, almost 800,000 teens become pregnant.

Yet, pregnancy is preventable. Tell students this unit helps them do something about the problem of unplanned teen pregnancies. They will learn they can avoid pregnancy by practicing the skills to abstain or use protection.

In the next few weeks, students will act out situations that they may face outside the classroom. After role-playing in class and completing assignments as homework, they will be better prepared to be sure that real-life encounters do not lead to unwanted sex or pregnancy.

This program uses a specific definition of abstinence: abstinence means choosing not to do any sexual activity that carries a risk for pregnancy or STD/HIV.

# RTR Components

## Teacher Guide

- Student worksheets

Class 5 • Delay Tactics

Quiz 5.4

Name: \_\_\_\_\_

**Refusal or Delay Quiz**

1. Write 3 delay actions you could use or alternatives you could suggest if you were alone with your boyfriend or girlfriend and wanted to avoid sex.

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Read the situations below and write the refusal or delay response you would use to handle the situation. Decide whether to use a refusal or a delay statement and include an alternative action.

2. Your girlfriend or boyfriend has been drinking and tries to talk you into going for a ride. You don't think you should go but you don't want to get into an argument. You say and do:

Refusal or delay: \_\_\_\_\_

\_\_\_\_\_

Alternative action: \_\_\_\_\_

\_\_\_\_\_

3. You're at home with your girlfriend or boyfriend. Your parents will be gone for several hours. You don't want to have sex, but your girlfriend or boyfriend begins to kiss you and tries to take off your clothes. You say and do:

Refusal or delay: \_\_\_\_\_

\_\_\_\_\_

Alternative action: \_\_\_\_\_

\_\_\_\_\_

# RTR Components

## Teacher Guide

Class 9 • Knowing and Talking About Protection: Skills Integration I

Role Play 9.2

- Roleplay scripts

### An Important Discussion

**Setting the Stage:**

Two friends are leaving campus at the end of the day, discussing their feelings about using condoms.

**Friend:** You know, I just hate using condoms!

**You:** Shhh. People can hear us.

**Friend:** Do you want me to use the word "rubber" instead?

**You:** You can use the word "condom." I just get embarrassed talking about those things...I don't like them either.

**Friend:** I just don't like to stop what's going on. You lose something. And...I like the way it feels without it. It feels more...well, natural.

**You:** Yeah, I know what you mean. But you know what we've learned in class. If you're having sex, condoms are the best protection against pregnancy and STD.

**Friend:** I guess you're right. I'll just have to change my attitude and be sure we use them. My life's pretty good now. I want to keep it that way.

**You:** That's how I feel. This way, we can do everything we're planning to do in high school and then afterward.

# RTR Components

## Teacher Guide

- Teacher background on birth control methods, HIV risk behaviors and prevention

Class 7 • Getting and Using Protection—I

### Information for Teachers

#### Ways to Prevent Pregnancy Teacher Notes

##### Categories of Birth Control Methods

**Methods that aren't reliable or don't work at all:** withdrawal, douching, hoping and rhythm do not work as birth control methods.

- **Withdrawal:** When a couple has sex, the man takes his penis out of the woman's vagina before he ejaculates (comes) so that his sperm doesn't go into her body. Withdrawal can't be counted on to prevent pregnancy because the man has a few drops of semen on the end of his penis as soon as it becomes erect. Even if he withdraws before he ejaculates, sperm can get into the woman's body and make her pregnant or transmit an STD, including HIV. Additionally, couples shouldn't rely on withdrawal since it requires them to interrupt sex exactly when they don't want to.
- **Douching:** After having sex, the woman immediately washes out her vagina hoping to wash out and kill the sperm. Sperm travel very quickly and some will already have moved through the cervix and into the uterus by the time the woman is able to douche. Once the sperm are inside, it's too late.
- **Hoping:** Hoping you won't get pregnant or believing that "It can't happen to me" doesn't work. Sometimes people think that if they have sex once and don't get pregnant, they can't get pregnant. However, just because a woman doesn't get pregnant the first time, or the twentieth time, doesn't mean she won't get pregnant the next time.
- **Rhythm:** A woman keeps track of her past menstrual cycles and tries to figure out the days when she is least likely to become pregnant—the "safe" days to have sex.  
  
The rhythm method may give a woman the sense she is "safe" when she is not. Since sperm live from 3 to 5 days, it can be easy for girls to get pregnant when they think they are safe—even during the menstrual period. No woman can really know what will happen in her next cycle. Illness, stress or fatigue can upset the hormone system and cause ovulation to occur at an irregular time. Young women are especially likely to have irregular cycles.

# RTR Basic Set Components

The *Reducing the Risk* basic set includes everything required for one classroom of 30 students.

- 1 Teachers Guide
- 1 Activity Kit
- 30 Student Workbooks\*
- 50 *STD Facts for Teens* pamphlet
- 50 *HIV Facts* pamphlet
- 50 *Birth Control Choices* pamphlet

**\*Also available:**

- Spanish Student Workbooks
- Custom site licenses to reprint student workbooks
- Additional classroom sets of student workbooks

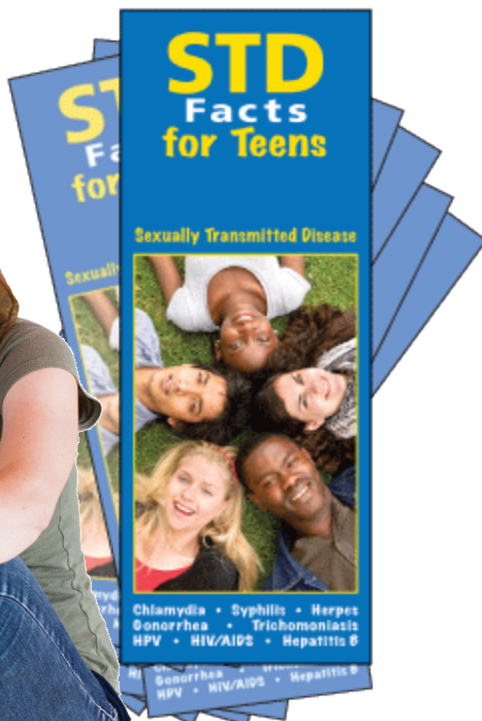




# RTR Components

## 50 Pamphlets

### STD Facts for Teens



STD	What to Watch For	How You Get It	If You Don't Get Treated
<b>Chlamydia</b>	<ul style="list-style-type: none"> <li>Symptoms show up 1-28 days after having sex.</li> <li>Chlamydia affects women and men.</li> <li>Most women and some men have no symptoms.</li> </ul> <p><b>Women:</b></p> <ul style="list-style-type: none"> <li>Discharge from the vagina.</li> <li>Bleeding from the vagina between periods.</li> <li>Burning or pain when you urinate.</li> <li>Pain in abdomen, sometimes with fever and nausea.</li> </ul> <p><b>Men:</b></p> <ul style="list-style-type: none"> <li>White, yellow, or green discharge from the penis.</li> <li>Burning or pain when you urinate.</li> <li>Need to urinate more often.</li> <li>Swollen or tender testicles.</li> </ul>	<ul style="list-style-type: none"> <li>Spread during vaginal, anal or oral sex with someone who has chlamydia.</li> </ul>	<ul style="list-style-type: none"> <li>You can give chlamydia to your sex partner(s).</li> <li>Can lead to more serious infections. Reproductive organs can be damaged.</li> <li>Women and possibly men may no longer be able to have children.</li> <li>A mother with chlamydia can give it to her baby during childbirth.</li> </ul>
<b>Gonorrhea</b>	<ul style="list-style-type: none"> <li>Symptoms show up 1-21 days after having sex.</li> <li>Most women and some men have no symptoms.</li> </ul> <p><b>Women:</b></p> <ul style="list-style-type: none"> <li>Thin yellow or gray discharge from the vagina.</li> <li>Burning or pain when you urinate or have a bowel movement.</li> <li>Abnormal genital or bleeding between periods.</li> <li>Cramps and pain in the lower abdomen/belly.</li> </ul> <p><b>Men:</b></p> <ul style="list-style-type: none"> <li>Thick yellow or greenish drip from the penis.</li> <li>Burning or pain when you urinate or have a bowel movement.</li> <li>Need to urinate more often.</li> <li>Swollen or tender testicles.</li> </ul>	<ul style="list-style-type: none"> <li>Spread during vaginal, anal or oral sex with someone who has gonorrhea.</li> </ul>	<ul style="list-style-type: none"> <li>You can give gonorrhea to your sex partner(s).</li> <li>Can lead to more serious infections. Reproductive organs can be damaged.</li> <li>Both men and women may no longer be able to have children.</li> <li>Can cause heart trouble, skin disease, arthritis and blindness.</li> <li>A mother with gonorrhea can give it to her baby in the womb or during childbirth.</li> </ul>
<b>Hepatitis B</b>	<ul style="list-style-type: none"> <li>Symptoms show up 1-6 months after contact with the hepatitis B virus.</li> <li>Many people have no symptoms or mild symptoms.</li> <li>Flu-like feelings that don't go away.</li> <li>Dark urine, light-colored bowel movements.</li> </ul>	<ul style="list-style-type: none"> <li>Spread during vaginal, anal or oral sex with someone who has hepatitis B.</li> <li>Spread by sharing needles to inject drugs, or for any other reason.</li> <li>Spread by contact with infected blood.</li> </ul>	<ul style="list-style-type: none"> <li>You can give hepatitis B to your sex partner(s) or someone you share a needle with.</li> <li>Some people recover completely.</li> <li>Some people cannot be cured. Symptoms go away, but they can still give hepatitis B to others.</li> <li>Can cause permanent liver damage or liver cancer.</li> <li>A mother with hepatitis B can give it to her baby during childbirth.</li> </ul>
<b>Herpes</b>	<ul style="list-style-type: none"> <li>Symptoms show up 1-36 days or longer after having sex.</li> <li>Most people have no symptoms.</li> <li>Flu-like feelings.</li> <li>Small, painful blisters on the sex organs or mouth.</li> <li>Itching or burning before the blisters appear.</li> <li>Blister last 1-2 weeks.</li> <li>Blister go away, but you will have herpes. Blister can come back.</li> </ul>	<ul style="list-style-type: none"> <li>Spread during vaginal, anal or oral sex, and sometimes by genital-to-genital touching, with someone who has herpes.</li> </ul>	<ul style="list-style-type: none"> <li>You can give herpes to your sex partner(s).</li> <li>Herpes cannot be cured, but medicine can control it.</li> <li>A mother with herpes can give it to her baby during childbirth.</li> </ul>
<b>HIV/AIDS</b>	<ul style="list-style-type: none"> <li>Symptoms show up several months to several years after contact with HIV, the virus that causes AIDS.</li> <li>Can be present for many years with no symptoms.</li> <li>Unexplained weight loss or weakness.</li> <li>Flu-like feelings that don't go away.</li> <li>Diarrhea.</li> <li>Memory lapses or mood.</li> <li>In women, yeast infections that don't go away.</li> </ul>	<ul style="list-style-type: none"> <li>Spread during vaginal, anal or oral sex with someone who has HIV.</li> <li>Spread by sharing needles to inject drugs, or for any other reason.</li> <li>Spread by contact with infected blood.</li> </ul>	<ul style="list-style-type: none"> <li>You can give HIV to your sex partner(s) or someone you share a needle with.</li> <li>HIV cannot be cured. Can cause flu and death, but medicine can control it.</li> <li>A mother with HIV can give it to her baby in the womb, during birth or while breastfeeding.</li> </ul>
<b>HPV/Genital Warts</b>	<ul style="list-style-type: none"> <li>Symptoms show up weeks, months or years after contact with HPV.</li> <li>Many people have no symptoms.</li> <li>Some types cause genital warts: <ul style="list-style-type: none"> <li>Small, bumpy warts on the sex organs and anus.</li> <li>Flu-like feelings that don't go away.</li> <li>After warts go away, the virus sometimes stays in the body. The warts can come back.</li> </ul> </li> <li>Some types cause cervical cancer in women: <ul style="list-style-type: none"> <li>Can change on the cervix can only be detected by a Pap test from a health care provider.</li> </ul> </li> </ul>	<ul style="list-style-type: none"> <li>Spread during vaginal, anal or oral sex, and sometimes by genital-to-genital touching, with someone who has HPV.</li> </ul>	<ul style="list-style-type: none"> <li>You can give HPV to your sex partner(s).</li> <li>Most HPV goes away on its own in about 2 years. Warts may go away on their own, when warts change, or grow and spread.</li> <li>A mother with warts can give them to her baby during childbirth.</li> <li>Some types can lead to cervical cancer if not found and treated.</li> </ul>
<b>Syphilis</b>	<ul style="list-style-type: none"> <li>1st Stage: <ul style="list-style-type: none"> <li>Symptoms show up 1-12 weeks after having sex.</li> <li>A painless sore or sores on the mouth or sex organs.</li> <li>Sore lasts 2-4 weeks.</li> <li>Sore goes away, but you still have syphilis.</li> </ul> </li> <li>2nd Stage: <ul style="list-style-type: none"> <li>Symptoms show up as the sore heals or after.</li> <li>A rash anywhere on the body.</li> <li>Flu-like feelings.</li> <li>Rash and flu-like feelings go away, but you still have syphilis.</li> </ul> </li> </ul>	<ul style="list-style-type: none"> <li>Spread during vaginal, anal or oral sex, and sometimes by genital-to-genital touching, with someone who has syphilis.</li> </ul>	<ul style="list-style-type: none"> <li>You can give syphilis to your sex partner(s).</li> <li>A mother with syphilis can give it to her baby during pregnancy or have a miscarriage.</li> <li>Can cause heart disease, brain damage, blindness, and death.</li> </ul>
<b>Trichomoniasis ("Trich")</b>	<ul style="list-style-type: none"> <li>Symptoms show up 1-28 days after having sex.</li> <li>Most women and some men have no symptoms.</li> <li>Many people have no symptoms.</li> </ul> <p><b>Women:</b></p> <ul style="list-style-type: none"> <li>Itching, burning or irritation in the vagina.</li> <li>Yellow, greenish or gray discharge from the vagina.</li> </ul> <p><b>Men:</b></p> <ul style="list-style-type: none"> <li>White, yellow, or green discharge from the penis.</li> <li>Burning or pain when you urinate.</li> <li>Need to urinate more often.</li> </ul>	<ul style="list-style-type: none"> <li>Spread during vaginal sex.</li> </ul>	<ul style="list-style-type: none"> <li>You can give trich to your sex partner(s).</li> <li>Trichomoniasis symptoms will control.</li> <li>Men can get infections in the prostate gland.</li> </ul>







# RTR Components

## 50 Pamphlets

### HIV Facts



## How Do People Get HIV?

<p><b>Sex</b></p>  <p><small>I can't have sex without a condom. My life is too important to gamble with.</small></p>	<p><b>How It Happens</b></p> <ul style="list-style-type: none"> <li>HIV in semen, blood or vaginal fluids passes between partners through the thin mucous membranes of the penis, vagina, rectum or mouth, or through tiny cuts or open sores on these organs.</li> <li>This can happen during vaginal, anal or oral sex.</li> </ul>	<p><b>Protect Yourself</b></p> <ul style="list-style-type: none"> <li><b>Don't have sex.</b> This is called abstinence. Abstinence is the best way to prevent sexual transmission of HIV.</li> <li><b>Be monogamous.</b> This means have sex only with a lifetime partner who does not have HIV and who only has sex with you.</li> <li><b>Practice safer sex.</b> This means don't allow a sex partner's semen, blood, menstrual blood or vaginal secretions to enter your body. (See back panel for safer sex guidelines.)</li> </ul>
<p><b>Sharing Needles</b></p>  <p><small>I want to get a tattoo, but the artist didn't even clean so I changed my mind. I just don't want the risk.</small></p>	<p><b>How It Happens</b></p> <ul style="list-style-type: none"> <li>Needle is shared to inject drugs, vitamins or steroids, or for tattoos or piercing.</li> <li>Blood with HIV in it is left in the needle or syringe.</li> <li>When the equipment is used again, HIV in blood is injected directly into the next person's body.</li> </ul>	<p><b>Protect Yourself</b></p> <ul style="list-style-type: none"> <li><b>Don't share needles</b> for any reason.</li> <li><b>Don't inject drugs.</b></li> <li>If you inject drugs, <b>don't share needles</b> or works.</li> <li>If you share, <b>clean works</b> at least 3 times with water, 3 times with bleach and 3 times again with water before and after each use.</li> </ul>
<p><b>From Mother to Fetus or Newborn</b></p>  <p><small>I got tested when I found out I was pregnant. Since I don't worry about my baby getting sick.</small></p>	<p><b>How It Happens</b></p> <ul style="list-style-type: none"> <li>Blood with HIV in it may pass from mother to fetus in the womb or to baby at birth.</li> <li>HIV may pass to baby in breast milk.</li> </ul>	<p><b>Protect Yourself</b></p> <ul style="list-style-type: none"> <li><b>Consider taking the HIV test</b> if you are pregnant or thinking about getting pregnant, and you, a sex partner or someone you share needles with might be at risk.</li> <li>Pregnant women who test positive can <b>take medication</b> to greatly reduce the risk to the fetus.</li> </ul>
<p><b>Blood-to-Blood Contact</b></p>  <p><small>I went to a movie dance at the school and I saw people using their blood. We tested ourselves and followed the protocol.</small></p>	<p><b>How It Happens</b></p> <ul style="list-style-type: none"> <li>Blood with HIV in it comes into contact with blood or mucous membranes of another person.</li> <li>Very rarely, this could happen from a blood transfusion or organ transplant.</li> </ul>	<p><b>Protect Yourself</b></p> <ul style="list-style-type: none"> <li><b>Avoid contact with someone else's blood.</b></li> <li>Blood and organs donated for transplant and semen at sperm banks are all <b>tested for HIV.</b></li> <li>You may be able to <b>donate your own blood</b> ahead of time for any planned surgeries.</li> </ul>

# RTR Components

## 50 Pamphlets

### Birth Control Choices

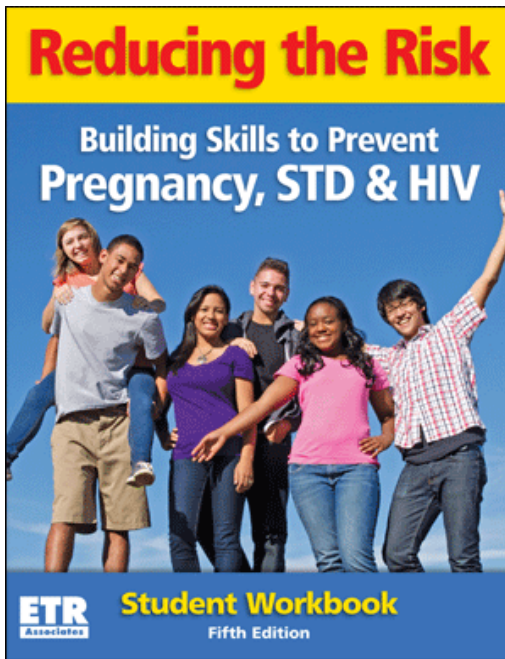


Method	What is it?	Chances of Not Getting Pregnant*	Health Concerns	Strong Points	Weak Points
<b>Abstinence</b>	<ul style="list-style-type: none"> <li>It's not having sex.</li> <li>Can range from no sexual touching at all to everything except intercourse.</li> </ul>	100% (if no semen enters vagina)	None.	<ul style="list-style-type: none"> <li>Easy to use.</li> <li>Reduces (but not eliminates) HIV and other sexually transmitted diseases (STDs) if no blood, semen or vaginal fluids are exchanged and if there is no genital touching.</li> </ul>	<ul style="list-style-type: none"> <li>May feel restricted by friends, boyfriend or girlfriend.</li> <li>May be hard not to act on sexual feelings.</li> </ul>
<b>Condoms</b>	<ul style="list-style-type: none"> <li>Thin, clear, stretchy latex and synthetic nitrone when the man "comes."</li> <li>Also known as "rubbers."</li> </ul>	<ul style="list-style-type: none"> <li>If you are very careful each time: 98%.</li> <li>If you are not very careful: each time: 85%.</li> </ul>	<ul style="list-style-type: none"> <li>Some people are allergic to latex.</li> </ul>	<ul style="list-style-type: none"> <li>Can be used in emergencies.</li> <li>Easy to use, easy to carry.</li> <li>Latex condoms help protect you from HIV and other STDs.</li> </ul>	<ul style="list-style-type: none"> <li>Must be put on during sex.</li> <li>Condoms may irritate vagina or penis.</li> </ul>
<b>Foam Film Suppositories</b>	<ul style="list-style-type: none"> <li>Made of chemicals that kill sperm.</li> <li>Put into vagina before sex.</li> </ul>	<ul style="list-style-type: none"> <li>If you are very careful each time: 82%.</li> <li>If you are not very careful: each time: 71%.</li> </ul>	None.	<ul style="list-style-type: none"> <li>Can be used in emergencies.</li> <li>Easy to use, easy to carry.</li> <li>Latex only when needed.</li> </ul>	<ul style="list-style-type: none"> <li>Must be put in shortly before sex.</li> <li>Can be messy.</li> <li>May irritate vagina or penis.</li> <li>No protection from HIV/STD.</li> </ul>
<b>Pill, Patch, Vaginal Ring</b>	<ul style="list-style-type: none"> <li>Pills: a tiny pill or a vaginal ring that releases artificial hormones.</li> <li>Stays outside from releasing eggs.</li> <li>This hormone makes it harder for sperm to enter womb.</li> <li>Must be prescribed by a health care provider.</li> </ul>	<ul style="list-style-type: none"> <li>If you are very careful each time: 99%.</li> <li>If you are not very careful: each time: 92%.</li> </ul>	<ul style="list-style-type: none"> <li>Few serious problems for young women.</li> <li>May cause changes of blood clots, heart attacks and strokes.</li> <li>Also cause high blood pressure.</li> </ul>	<ul style="list-style-type: none"> <li>Simple and easy to use.</li> <li>Doesn't interfere with sex.</li> <li>Less bleeding and cramping during pill use.</li> <li>Less chance of STD with pill.</li> <li>Less chance of ovarian cysts with vaginal ring.</li> <li>Some pills can reduce number of periods in a year.</li> </ul>	<ul style="list-style-type: none"> <li>May cause weight changes, moodiness, spotting.</li> <li>May not be a good method for women over 35 who smoke.</li> <li>No protection from HIV/STD.</li> </ul>
<b>Depo-Provera</b>	<ul style="list-style-type: none"> <li>A shot of artificial hormones given by a health care provider.</li> <li>Stays outside from releasing eggs.</li> <li>This hormone makes it harder for sperm to enter womb.</li> </ul>	More than 99%.	<ul style="list-style-type: none"> <li>Few serious problems for most women.</li> <li>Long-term use may temporarily reduce bone density in some women.</li> <li>Less chance of osteoporosis.</li> </ul>	<ul style="list-style-type: none"> <li>Doesn't interfere with sex.</li> <li>Lasts 3 months.</li> <li>Often decreases bleeding and cramping associated with periods.</li> <li>Safe to use while breastfeeding.</li> <li>Less chance of osteoporosis.</li> </ul>	<ul style="list-style-type: none"> <li>Must get shot from a health care provider.</li> <li>May cause heavy, irregular or light periods, or no periods at all.</li> <li>May not be able to get pregnant for several months after stopping.</li> <li>May have weight changes, moodiness, headache or dizziness.</li> <li>No protection from HIV/STD.</li> </ul>
<b>Implant</b>	<ul style="list-style-type: none"> <li>Tiny rod put under skin of arm by health care provider.</li> <li>Releases artificial hormones into bloodstream.</li> <li>Stays outside from releasing an egg each month.</li> <li>This hormone makes it harder for sperm to enter womb.</li> </ul>	More than 99%.	<ul style="list-style-type: none"> <li>Few serious problems for most women.</li> <li>Should not be used for women with liver disease, breast cancer or blood clots.</li> </ul>	<ul style="list-style-type: none"> <li>Can stay in for 3 years.</li> <li>Doesn't interfere with sex.</li> <li>Doesn't interfere with sex.</li> </ul>	<ul style="list-style-type: none"> <li>May have some spotting between periods, light periods, longer periods or no periods at all.</li> <li>Beginning costs are high (\$800-\$900).</li> <li>Minor surgery required to insert or remove rod.</li> <li>No protection from HIV/STD.</li> </ul>
<b>IUD</b>	<ul style="list-style-type: none"> <li>Small device put inside womb by a health care provider.</li> <li>Two types: Copper-T and Mirena.</li> <li>Parents open "tube" facilitating egg.</li> <li>Mirena: releases hormone in womb (opposite to Mirena), so it's hard for sperm to enter womb.</li> </ul>	More than 99%.	None.	<ul style="list-style-type: none"> <li>Doesn't interfere with sex.</li> <li>Doesn't interfere with sex.</li> <li>Lasts 5-10 years.</li> <li>Mirena may cause light periods or eventually no periods at all.</li> </ul>	<ul style="list-style-type: none"> <li>Copper-T may cause more bleeding and cramping during period or spotting between periods.</li> <li>No protection from HIV/STD.</li> </ul>
<b>Diaphragm</b>	<ul style="list-style-type: none"> <li>Small rubber cup for inside vagina, over the cervix (opening to the womb).</li> <li>Used with spermicide to keep sperm from entering.</li> <li>Must be fitted by a health care provider.</li> </ul>	<ul style="list-style-type: none"> <li>If you are very careful each time: 91%.</li> <li>If you are not very careful: each time: 64%.</li> </ul>	<ul style="list-style-type: none"> <li>Few health problems.</li> <li>Some women have infections for some women.</li> <li>May irritate vagina or penis.</li> <li>May irritate vagina or penis.</li> </ul>	<ul style="list-style-type: none"> <li>Can be put in 6 hours before sex.</li> <li>Latex only when needed.</li> </ul>	<ul style="list-style-type: none"> <li>Some women say it's hard to put in and take out.</li> <li>Can be messy.</li> <li>Copper or pills may irritate vagina or penis.</li> <li>Must be left in place 6 hours after sex.</li> <li>No protection from HIV/STD.</li> </ul>

# RTR Components

## Student Workbooks

- Available in both English and Spanish
- Custom site license also available



# RTR Components

## Activity Kit

- Includes posters and activity cards to support several activities
- Makes it easier and faster to prepare the lessons



**Signs of Sex, Signs of Caution**

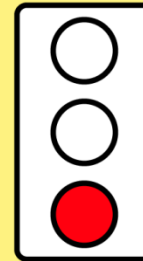
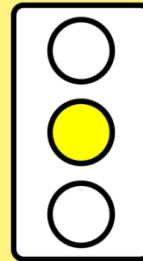
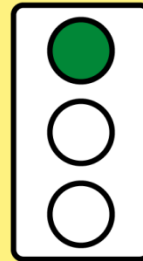
**Red Alert Signs**

- We make and take chances to touch.
- We touch more and are getting excited.
- We play sexy music.
- We go to a place to "get away from everybody."
- We're drinking and touching.
- We're alone at home.

5 posters

**Ground Rules**

- 1 Everyone has the right to pass.
- 2 Every question is a good question.
- 3 No teasing, put-downs or talking about others.
- 4 Confidentiality will be maintained if what is shared is not illegal or dangerous to you or others.
- 5 Treat role plays seriously.
- 6 \_\_\_\_\_
- 7 \_\_\_\_\_
- 8 \_\_\_\_\_



3 traffic light posters

**Donating Blood**

**Abstaining from Sex**

**Student Observer #2**

- Use the Observer Checklist to indicate behaviors used by person practicing (during or during practice)
- Give feedback to person practicing the vehicle or driving tactics. Be sure to mention the ways that the skill was or wasn't being used.
- Lead the small group discussion by reading the discussion questions on the back of the card.

**Small Group Discussion Questions**

**Directions**

After each role play:

- Discuss how each person felt in their role: Person 1, Person 2, Observer.
- Discuss any feedback or what parts of the skill were practiced using the checklist.
- Discuss any behaviors that weren't practiced and why they may have been omitted.
- Record any questions for large group discussion.

15 risk behavior cards

40 roleplay cards

# RTR Recognition and Endorsments

- OAH — Teenage Pregnancy Prevention: Replication of Evidence-Based Programs 2010
- CDC — *Compendium of HIV Prevention Interventions*
- National Campaign to Prevent Teen and Unplanned Pregnancy — *Emerging Answers 2007* and *What Works 2008*
- National Education Association (NEA) Health Information Network
- California Healthy Kids — *Research-Validated Programs*
- Promising Practices Network (PPN) — *Programs That Work ...* and more





# Reducing the Risk

## Contact Information

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