

**VINELAND HIGH SCHOOL**

**SOUTH**

**HEALTH AND PHYSICAL EDUCATION**

**DEPARTMENT**

**Health Curriculum  
Grade 12**

Revised  
July 2004

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## Health Education Grade 12 OVERVIEW

This health curriculum is designed to help students develop the knowledge and skills they need to be healthy and achieve academically. Students today face many health challenges which vary greatly from past generations. Information is presented to students to enable them to make informed choices. The message to them is that decisions made as students impacts their lives as young adults.

The curriculum committee looked at each objective and made the necessary changes. Each objective was then tied to one or more of the New Jersey Core Curriculum Content Standards for Health and Physical Education. These standards are noted in bold type following each objective. They also ensured that content specific mandates were met.

Students will explore Family Life issues. Each unit begins with objectives followed by more descriptive content and, finally, teaching materials available for the units.

## NJ CORE CURRICULUM CONTENT STANDARDS FOR HEALTH AND PHYSICAL EDUCATION

**Standard 2.1 (WELLNESS)** All students will learn and apply health promotion concepts and skills to support a healthy active lifestyle.

- A. Personal Health
- B. Growth and Development
- C. Nutrition
- D. Diseases and Health Conditions
- E. Safety
- F. Social and Emotional Health

**Standard 2.2 (INTEGRATED SKILLS)** All students will use health-enhancing personal, interpersonal, and life skills to support a health, active lifestyle.

- A. Communication
- B. Decision Making
- C. Planning and Goal Setting
- D. Character Development
- E. Leadership, Advocacy, and Service
- F. Health Services and Careers

**Standard 2.3 (DRUGS AND MEDICINES)** All students will learn and apply information about alcohol, tobacco, other drugs and medicines to make decisions that support a healthy, active lifestyle.

- A. Medicines
- B. Alcohol, Tobacco, and Other Drugs
- C. Dependency/ Addiction and Treatment

**Standard 2.4 (HUMAN RELATIONSHIPS AND SEXUALITY)** All students will learn the physical, emotional, and social aspects of human relationships and sexuality and apply these concepts to support a healthy, active lifestyle.

- A. Relationships
- B. Sexuality
- C. Pregnancy and Parenting

**STANDARD 2.5 (MOTOR SKILL DEVELOPMENT)** All students will utilize safe, efficient, and effective movement to develop and maintain a healthy, active lifestyle.

- A. Movement Skills
- B. Movement Concepts
- C. Strategy
- D. Sportsmanship, Rules, and Safety
- E. Sport Psychology

**STANDARD 2.6 (FITNESS)** All students will apply health-related and skill-related fitness concepts and skills to develop and maintain a healthy, active lifestyle.

- A. Fitness and Physical Activity
- B. Training
- C. Achieving and Assessing Fitness

Welcome,

This handbook has been compiled to help you understand the requirements of our HEALTH program. You are reminded that successful participation and completion of these programs is a requirement for graduation. Please discuss the contents of this handbook with your parents or guardians.

Have a productive and happy school year!

Mr. Pierantozzi

#### HEALTH AND PHYSICAL EDUCATION STAFF MEMBERS

VHS SOUTH (11-12)

Mr. John Pierantozzi, Department Chairman

Mr. Edward Belfi

Mrs. Kathy Dilks

Mr. Jim Hague

Mrs. Julie Mazzola

Mrs. Margie Procaccino

Mr. Tom Ryder

Mr. Charlie Sheftall

Mrs. Beverly Smith

Program: Allocation of Time

The school year is divided into four quarters. One quarter will be assigned to you for HEALTH EDUCATION and the remaining three quarters will comprise your PHYSICAL EDUCATION schedule. Each Physical Education quarter will be divided to accommodate elective activities and required physical wellness activities.

## HEALTH EDUCATION - GRADE 12

### FAMILY LIFE

#### PURPOSE

Family Life Education refers to a broad program designed to impart knowledge regarding practices and attitudes that will encourage the individual to develop values necessary for successful relationships with his/her social environment. The program is designed to supplement and reinforce training provided by the family, church and community, in coping with life, finding happiness and fulfilling one's potential to benefit society now and ultimately, as a member of a family unit.

#### GOALS

The program will:

1. stimulate growth in self-understanding and personal responsibility.
2. encourage the development of ethical, moral and spiritual values which will serve as a guide and resource to the individual in personal and family relationships.
3. suggest methods of seeking solutions to personal and family problems.
4. develop an understanding of the values of money and its relationship to family life.
5. provide knowledge that will help young people approach marriage and establish homes with something more than good intentions and unrealistic expectations.
6. provide sound information about, and wholesome understanding of personal growth and development and human reproduction.
7. promote a wholesome understanding of sexual behavior, develop a respect for a mature and responsible sexual life within marriage and discuss the personal and social difficulties that are inherent in the use of sex for exploitation or solely for self-gratification, without regard to other parties or social consequences.
8. provide sound information about alcohol and other drugs abuse, its various personal and social implications and possible solutions.
9. provide current information about HIV/AIDS and explore possible personal, medical and social solutions to this world plague.

## OBJECTIVES:

The student will:

1. be able to identify the changing activities and responsibilities at different stages of life. **(2.1 B, 2.2 B D, 2.3 C, 2.4 A)**
2. be able to identify trends of socialization which influence psychological development. **( 2.1 F, 2.3 C, 2.2 A B, 2.4 A C)**
3. understand how, from a diversity of influences, individual patterns of psychological maturity might be modified. **(2.4 A B)**
4. become acquainted with available resource people who can explain causes of problems and frustrations. **(2.2 F)**
5. develop an understanding of the capacity to relate to other people in a constant manner with mutual satisfaction and helpfulness. **(2.4 A)**
6. develop the ability to examine some of the qualities that are important in making and keeping relationships, individually or within a group. **(2.4 A B)**
7. learn that good human relationships are important. **(2.4 A)**
8. be able to distinguish cause and effect relationships contributing to the disruption of harmonious family life. **(2.4 A)**
9. recognize unemployment, delinquency, desertion, divorce, childlessness, infidelity, addiction and/or alcoholism as factors that may contribute to the disruption of harmonious family life. **(2.4 A C, 2.3 C)**
10. evaluate remedies such as personal friends or counselors, spiritual guidance, legal assistance or community agencies in dealing with disruptive family life situations. **(2.4 A)**
11. be able to formulate an effective plan for the solution of a family life problem. **(2.4 A)**
12. interpret the significance of the family cycle in the evolution of values, standards and attitudes. **(2.4 A)**

13. analyze characteristics that contribute to the successful marriage, such as:
  - self-understanding of strengths and weaknesses
  - understanding of strengths
  - tolerance and consideration of one's mate
  - mutual respect
  - importance of continuing expressions of affection
  - willingness to strive for common goals
  - development of spiritual and moral values. **(2.4 A C)**
14. examine responsibilities and privileges inherent in a marriage relationship. **(2.4 A C)**
15. discuss the unity of parents in guidance and discipline of children. **(2.4 C)**
16. be able to interpret the influence of order of birth on inter-family relationships and development. **(2.4 A C)**
17. become aware of current legislation in New Jersey declaring the 18-year-old an adult and the inherent responsibilities. **(2.4 C B)**
18. identify various health careers in the areas of maternal and child health. **(2.2 F, 2.4 C)**
19. become acquainted with areas of adjustment in marriage. **(2.4 A)**
20. become aware of alternative lifestyles from single hood through various forms of cohabitation. **(2.4 A)**
21. become aware of marriage customs and laws, past and present, state and federal. **(2.4 A)**
22. be enlightened on the various means of having a family or being unable to have children. **(2.4 C, 2.4 B)**
23. discuss divorce and the impact of divorce on the lives of the individuals involved. **(2.1 F)**
24. examine the methods of family planning (methods of contraception). **(2.1 F, 2.4 B)**
25. examine the problems that result from alcohol and other drugs use and abuse. **(2.3 B, C)**

26. become aware of possible personal and social problems inherent to alcohol and other drugs use. **(2.3 B, C)**
27. identify the factors that influence decision making. **(2.2 B)**
28. discuss the value of abstinence and reborn (born again) abstinence as a viable sexual life style. **(2.4 B)**
29. discuss HIV/ AIDS information and its personal and social implications. **(2.3 B, 2.1 D)**
30. develop a budget and a plan to manage one's life style. **(2.4 A, 2.2 B, C)**
31. describe how chemical substances used during pregnancy can effect growth and development. **(2.4 C, 2.3B)**
32. identify resources pertaining to successful parenting skills. **(2.4 A, 2.4 C)**
33. discuss and define the issues regarding sexual harassment and sexual assault. **(2.1 F, 2.4 A, 2.2 D)**
34. discuss issues relating to sexual reproduction and legal aspects of health care agencies. **(2.4 C, 2.2 F)**

**All are in correlation with one or more core proficiency.**

## **AIDS UNIT - To be taught in conjunction with Family Life**

### **OBJECTIVES:**

The student will be able to:

1. discuss the acronyms HIV, AIDS and PWA. **(2.4B)**
2. describe the routes of transmission of HIV infection. **(2.4 B)**
3. explain why abstinence is the best prevention of HIV infection. **(2.4 B)**
4. discuss other methods of prevention of HIV infection. **(2.4 B)**
5. describe the high risk behaviors associated with HIV infection. **(2.4 B)**
6. rank risky behaviors as to probability of HIV infection. **(2.4 B)**
7. understand that **People With AIDS** come from all economic, racial, religious and ethnic backgrounds. **(2.4 B)**
8. develop an understanding of the economic and emotional impact of AIDS on community and family. **(2.4 B)**
9. compare new information to that known from previous years. **(2.4 B)**
10. discuss the ongoing search for a cure for AIDS and quackery involved. **(2.4 B)**
11. identify the drugs used to prolong the life of a Person with AIDS. **(2.4 B)**
12. understand how opportunistic diseases cause the death of a Person With AIDS. **(2.4 B)**
13. recognize the needs of a Person With AIDS for support and comfort from friends and relatives. **(2.4 B)**
14. discuss the careers of individuals who work with Persons with AIDS and their contribution to the community. **(2.4 B)**

**All correlates with one or more core proficiency.**

## CONTENT:

A.DEFINING YOURSELF: Life is dynamic and changes all the time. You are a part of this process. The nature of the process and our society makes the search for the answers to the questions below very important.

1. Searching for the real ME:
  - a. a sense of identity is a feeling of being at home in one's body
    - 1) who am I?
  - b. knowing where one is going
    - 1) what will I become?
    - 2) what do I want to do with my life?
  - c. recognition from those who count
2. Recognizing one's potential and factors that effect the development of your potential:
  - a. age and maturity
  - b. emotional well-being
  - c. physical health
  - d. desire to achieve
  - e. alternatives you perceive
  - f. family and cultural background
  - g. quality of education
3. Positive thinkers direct their attention mainly towards achieving success.
  - a. alcohol and other drug use effects personality.
4. Less confident people are more concerned about avoiding failure
5. Roles and Relationships - as you interact with people, your behavior alters with each role you play
  - a. family group (son-daughter-brother-sister)
  - b. student
  - c. team member
  - d. job
6. Life cycles:
  - a. infancy
  - b. childhood (stages)
  - c. adolescence
  - d. young adulthood
  - e. middle age
  - f. old age

## 7. Sexuality

- a. sexuality includes the way you act as a male or female (behavior as seen by society).
- b. the sex drive obeys the brain. Each person can control his/her sexual urges.
- c. when used safely and responsibly, the human sex drive improves the quality of life. When abused, it can cause personal disaster.

## B. DATING AND MATE SELECTION    Selecting a marriage partner and establishing the best type of relationship for both partners and children is one of life's most important choices.

### 1. Reasons for marrying:

- a. desire to share one's life, both work and pleasure, with the one you love.
- b. desire to establish a home and to raise a family.
- c. others:
  - 1) companionship
  - 2) lack of affection at home
  - 3) to escape unhappy home situation
  - 4) sympathy for another
  - 5) fear of not ever getting married
  - 6) pregnancy
  - 7) financial security
  - 8) prestige
  - 9) because parents want you to
  - 10) curiosity

### 2. Teenage marriage:

- a. numbers
- b. reasons
- c. divorce rate
- d. hazards

### 3. Signs of incompatibility:

- a. frequent quarrels
  - 1) basic differences in values
  - 2) different moral or ethical standards
  - 3) personality conflicts
  - 4) other: conflict of values over alcohol and other drug use
- b. differences which may be difficult to resolve
  - 1) dislike of partner's family
  - 2) lack of companionship

- 3) religion
- c. refusal of one or both partners to resolve differences

4. Engagement:

a. Purpose

- 1) marks the beginning of the public declaration of the intention to marry
- 2) a mutual relationship in which final agreements are made

b. areas of concern and resolve during engagement period:

- 1) future goals and attitudes toward life
- 2) where couple will live
- 3) attitude toward money (refer to Budget and Money Management)
- 4) attitude toward children and raising children
- 5) attitude toward planned parenthood (refer to Contraceptives)
- 6) wife working outside of the home
- 7) religious differences

c. factors that enhance a marriage:

- 1) parental approval of the marriage
- 2) both partners understand the responsibilities of marriage and are able to assume them
- 3) similar backgrounds and interests
- 4) good physical and mental health
- 5) both partners come from families with successful marriages
- 6) both partners understand their respective roles

d. factors contributing to failure in marriage:

- 1) unrealistic expectations
  - a) partner has no faults and there will be no conflict
  - b) partner will change
  - c) the marriage will solve personal problems that predate the marriage
  - d) unwillingness to recognize the destructive nature of addiction to alcohol and other drugs.
- 2) taking marriage vows with significant mental reservations
  - a) if it doesn't work, we will quit
- 3) adult-infantilism
  - a) wants to be catered to
  - b) partner throws tantrums or sulks
  - c) partner unable to accept responsibility
- 4) inadequate preparation relating to age and experience
- 5) parental influence
- 6) economic problems
- 7) lack of a mature love relationship
- 8) conflict regarding children

5. Enduring qualities desirable in a successful marriage:

- a. Mature love - unselfishness and thoughtfulness, patience, sympathy and a

capacity to accept faults of partner

- 1) age of marriage partners not always a matter of years but of readiness for marriage
  - b. mutual trust
  - c. ability to deal with emergencies, illness, etc.
  - d. sense of unity "over money, over car"
  - e. satisfaction of personal needs: someone to need you, appreciate you, admire you, and someone to give you confidence
  - f. the capacity to communicate anger
  - g. tolerance
  - h. sense of humor
6. Factors to consider:
- a. financial independence or reasonable expectations of same
  - b. emotional independence of parents
  - c. courtship has been over a period of sufficient time - longer for young people
  - d. both partners have dated several others to gain sufficient knowledge of the opposite sex in general
  - e. both partners are ready to settle down
  - f. boy is ready to assume the responsibility of a family
  - \*\* g. girl is ready to take on the responsibility for the routine of housework, cooking and caring for the children
  - h. non-traditional roles (house-husband, etc.)
7. The argument for abstinence
- a. the satisfaction of taking charge of a major life decision
  - b. no concern about with whom, where or when to have sex
  - c. no concern about contraceptives, their purchase or proper use
  - d. no concern about causing a pregnancy
  - e. no concern about catching a sexually-transmitted disease
8. Disadvantages of abstaining
- a. may wonder what you are missing
  - b. may feel pressured to give reasons for your decision
  - c. may lose your boy/girl friend
  - d. may be teased or shunned for being "straight" or "out of it"

C. MARRIAGE CUSTOMS AND LAWS - Marriage forms and customs are outgrowths of social and economic conditions as well as religious beliefs. (To some degree, marriage in the future will feel the shock waves of the great social changes of the 1700's: the increase in women's rights, more effective contraception control, easily obtained abortions, changing roles of both husband and wife, and easily obtained divorces. On June 12, 1967, the U.S. Supreme Court stated that under our Constitution, the freedom to marry a person of another race resides with the individual and cannot be infringed upon by the State.)

1. Types of Marriages

- a. Interracial-Interethnic-International and Interfaith
    - 1) acceptance by immediate families
    - 2) adjustment by friends
    - 3) job security
    - 4) society
    - 5) identity of children
    - 6) living area (housing)
  - b. Marriage of affinity
    - 1) in-law relationship
    - 2) society
  - c. Monogamy - one man and one woman
    - 1) nuclear family
    - 2) bigamy
  - d. Polygamy - having more than one mate at a time
    - 1) mistress
    - 2) group marriages (group living together, not necessarily related)
    - 3) polyandry (one woman, several men)
    - 4) polygyny (one man, several women)
    - 5) concubine (woman that cohabitates with a man)
  - e. consanguinous
    - 1) biological point of view
    - 2) incest
  - f. partnership unions - no marriage
    - 1) trial marriage
    - 2) common-law
    - 3) same sex marriage
  - g. Serial marriage - "if it doesn't work out, we call it quits."
  - h. Homosexual
  - i. Convenience or cooperative household
  - j. Open marriage - partners permit each other the freedom of having sex with others
  - k. Contract marriage - obligations put down in writing
  - l. Arranged marriage - partner chosen by parent or professional match maker
  - m. Alternative to cohabitation
2. Marriage laws and customs - society has special ceremonies and laws to mark the change from courtship to married life. Marriage is a social institution in which the government has an interest. Recognizing that cultural and personal differences exist, lawmakers create rules to regulate marriage and to protect the interests of the partners and the children who may be born to them. The marriage certificate protects property rights, inheritance and the rights of children

- a. License
  - 1) obtained in municipality or town where bride resides, or if female is non-resident, where male resides.
  - 2) may be issued where ceremony is to be performed
  - 3) may not be issued until 72 hours after application (3 days) is made (except in case of emergency where requirement may be invalid)
  - 4) valid for a period of 30 days during which the marriage must occur
  - 5) fee - \$28.00 (cash) circa 1995
- b. Marriage ceremony
  - 1) if male is under 18, parent or guardian must give written consent
  - 2) if female is under 15, judicial approval is also required (must have two witnesses)
  - 3) 18 years of age - without consent (1 witness present must be 18 years of age)
  - 4) marriages between parent and child or blood relations nearer than cousins are void
  - 5) foreign marriage deemed valid in New Jersey if it meets requirements of place where marriage was contracted.
  - 6) common-law marriages are not recognized (since 1939)
  - 7) no provision for proxy marriages
- c. Sexual fitness- ability for a person to enter into a sexual relationship
  - 1) men and women may suffer from physical and emotional disabilities which affect their sexual fitness
    - a) potency - ability to have sexual relations
    - b) fertility - ability to reproduce
  - 2) lack of sufficient potency on the part of the man is more frequent condition
  - 3) a man suffering from above may be unable to consummate the physical union in marriage
  - 4) serious mistake for anyone who is sexually inadequate to marry without first having the disability corrected

## D. MARRIAGE AND THE FAMILY

### 1. Emotional fitness

- a. Some people are mentally and temperamentally grown-up or mature enough to be able to make a satisfactory adjustment to marriage (even under difficult circumstances).
- b. Others, because of their temperament, their disposition and lack of maturity, are unable to make a successful marriage under any circumstances.
- c. personality plays a very important role in the ability to establish a stable and

## happy relationship

2. Areas of adjustment
  - a. money
  - b. in-law relationships
  - c. sexual relationship
  - d. social activities and recreation
  - e. association with friends
  - f. religious life
  - g. training and disciplining of children
  - h. sharing of household tasks
  - i. health
  - j. jealousy
  - k. personal habits
  
3. Common types of adjustment
  - a. understanding each other
  - b. compromise
  - c. agreements
  - d. cooperation instead of competition
  
4. Characteristics of a family - the family is the basic unit with the responsibility for many things
  - a. functions
  - b. present trends
  - c. types of families
    - 1) the chemically dependent family
  - d. advantages of joint planning
  - e. size of family
  
5. Rules
  - a. Husband
  - b. Wife
  - c. Children
  - d. Developing satisfactory relations between husband, wife and children
  - e. Ways to solve problems
    - 1) compromise
    - 2) substitute solutions
    - 3) marriage clinics
  
6. Parental responsibility - parenting
  - a. helping satisfy children's fundamental needs
    - 1) love

- 2) security
- 3) recognition
- b. avoid spoiling
- c. education
- d. influence attitude toward sex
- e. influence attitude toward religion

7. Major crises in Family Life

- a. child abuse
- b. loss of financial security
- c. health
- d. bereavement (death)
- e. divorce
- f. separation
- g. infidelity
- h. rape
- i. battered wives/husbands
- j. alcohol and/or drug addictions
  - 1) effects of alcohol, tobacco and other drugs on pregnancy and early childhood
  - 2) need to develop a plan to prevent children from being involved with alcohol and/or drug use

# Contraceptive Methods



### CONTRACEPTION METHODS NOT REQUIRING CONSULTATION WITH A PHYSICIAN

METHOD	WHAT IT IS/HOW IT WORKS	EFFECTIVENESS & ACCEPTABILITY
1. Condom-Male & Female	Thin, strong sheath or cover made of rubber (latex) or similar material, worn by the male.	Offers a high degree of protection if male will use it correctly. Failures are due to tearing of sheath or its slipping off after climax.
2. Chemical	Products inserted into vagina. Purpose is to coat vaginal surfaces and cervical opening and to destroy sperm cells.	The effectiveness of chemical contraceptives, when used alone, is believed to be lower than the effectiveness of the chemical preparations used in combination with a diaphragm or a condom.
a. Vaginal Foams	Cream pushed under pressure (like shaving cream), inserted with an applicator.	Among the various forms of chemical contraceptives, the vaginal foams appear to be more effective followed by jellies and creams.
b. Vaginal Jellies and Creams	Inserted into vagina with applicator.	Foaming tablets and suppositories are the least effective of the chemical methods.
c. Vaginal Suppositories	Small, cone shaped objects that melt in the vagina. Must be inserted in time to melt before sex act.	Drainage of the chemical material from the vagina is objectionable.
d. Vaginal Tablets	Moistened slightly and inserted into vagina. Foam is produced.	To some couples, foaming tablets may cause a temporary burning sensation.

<p>e. Sponge &amp; Foam</p>	<p>Must be inserted in sufficient time for table to disintegrate before sex act.</p> <p>Sperimicidal power in fluid is placed on small moistened sponge which is squeezed to develop a foam. Sponge is placed in vagina. Must remain in place 6 hours after intercourse.</p>	<p>Used successfully by some women. Bulkiness of sponge &amp; drainage from vagina is sometimes objectionable to husband and/or wife.</p>
<p>3. Coitus Interruptus</p>	<p>Male withdraws sex organ from woman's vagina before emission of semen.</p>	<p>Coitus Interrptus has been responsible for many Family Planning failures probably because semen may be deposited without the man being aware. It requires that the husband practice great self-control. Even then, some sperm may escape before climax.</p>
<p>4. Douche</p>	<p>Flushing vagina immediately after intercourse to remove or destroy sperm.</p>	<p>Considered to be a poor method of contraception because sperm enter the cervical canal within seconds after ejaculation.</p>

## CONTRACEPTIVE METHODS REQUIRING CONSULTATION WITH A PHYSICIAN

METHOD	WHAT IT IS/HOW IT WORKS	EFFECTIVENESS & ACCEPTABILITY
1. Oral (The Pill)	<p>A combination of synthetic hormones (progestin &amp; estrogen) which mimics the action of the body's natural hormones and inhibits ovulation. With no egg cells released, a woman cannot get pregnant. Most usual schedules call for pills to be taken on 20 consecutive days beginning 5 days after menstruation starts; pill cycle repeated each month; discontinued when a woman wishes to conceive.</p>	<p>Taken according to instruction, true method failures are extremely rare. Studies have shown that most women, including those with little education, can be taught to follow the pill schedule consistently.</p>
2. Intrauterine Device	<p>Small objects (coils, rings, loops) made of plastic or other material, inserted into uterus by physician; may be left in place indefinitely. How this device prevents pregnancy is not completely understood. It may speed descent of the egg so that the sperm cannot fertilize it, or the egg may reach the uterus at a time when it cannot nest there.</p>	<p>The level of protection offered is probably not greater than with such "traditional" methods as the diaphragm or condom, if these methods are used with perfect regularity. Since the devices do not require constant attention, this method is especially effective in situation where sustained motivation is lacking.</p>



F. SEXUALLY TRANSMITTED DISEASES - new name for very old sexually transmitted infections - long known as VD (venereal disease)

1. Some causes of the spread of STD's include:
  - a. more young adolescents are having sexual intercourse
  - b. less social disapproval of premarital sex
  - c. wide use of the Pill, which does not prevent STD infections
2. Venereal diseases may or may not produce visible symptoms in the infected individual. It is possible for the disease to pass from the early to the late stage and yet the individual will suffer no ill effects.
3. Syphilis and gonorrhea organisms can survive for an extremely brief period of time outside of the human body. The germs must depend on quick entry into the body through a break in the skin, through a body opening or through the softer, less exposed tissue. Spread by direct contact the contact occurs almost without exception as a result of sexual relations. New born babies are an exception - they acquire the disease - not inherit it.
4. Syphilis is caused by the spirochete - *Treponema pallidum* (resembles a cork screw shape). Syphilis is characterized by a four-stage development:
  - a. primary
  - b. secondary
  - c. latent
  - d. lateCommunicability is limited mainly to the primary and secondary stages. Treatment is most effective in the early stages. There is no natural immunity to syphilis and no effective means of producing immunity with vaccines or other immunizing agents.
5. Gonorrhea is caused by a gonococcus organism - *Neisseria Gonorrhoea*. Symptoms may or may not be noticeable if one has the disease. However, because of the nature of the disease, it is easier to recognize in the male organs. Treatment should be obtained early in the course of the disease. Eyes of newly born infants are treated soon after birth to prevent damage by the gonorrhea organism, if present.
6. Both pre-marital and pre-natal tests to check for the presence of the diseases are required in most states.
7. Herpes simplex genitalis
  - a. A virus that is generally spread through sexual contact. Incubation is 2 days to 20 days.
  - b. Symptoms: minor genital rash or itching, at first. Painful blister-like sores then develop internally or externally, often along with swollen glands in the groin and symptoms similar to those of influenza. Eventually symptoms disappear, but

may re-appear throughout lifetime. The disease is most communicable when sores are present.

- c. Associated with cancer of the cervix, miscarriage, premature birth. Baby may be infected at birth.
  - d. No known cure at this time. Discomfort and pain associated with this disease can be treated.
8. Other sexually transmitted diseases (STD)
- a. Candidiasis (fungus)
  - b. trichomoniasis (one-celled animal)
  - c. condyloma acuminata (virus)
  - d. pediculosis pubis (louse)
  - e. scabies (mite)

## 9. HIV/AIDS

## G. STRESS AND MENTAL HEALTH

Mental health (according to Dr. Karl Menninger) is the adjustment of human beings to each other and to the world about them with a maximum of effectiveness and happiness. It is the ability to maintain an even temper, an alert intelligence, socially considerate behavior and a happy disposition. A suicidal person becomes so overwhelmed by his feelings that he loses his sense of perspective and can not entertain the possibility that things can be better. Most suicides can be prevented if people recognize that the individual is disturbed, take action to protect the individual against himself, and assist him in understanding and solving the situation.

1. Extreme and severe stress, deep depression and a feeling of hopelessness are thought to be leading factors. Some possible indicators:
  - a. alcoholism
  - b. narcotic addiction
  - c. exaggerated feelings
  - d. marked feelings or persecution
  - e. asocial or antisocial attitude
  - f. highly suspicious
  - g. overly sensitive
  - h. impulsive
  - i. overly emotional
  - j. unable to obtain self-gratification through the normal avenues of life

## H. MONEY AND HOUSEHOLD MANAGEMENT

Good management is using our resources to get as much as possible of what we want and need. Money management requires adequate records of spending as a basis of making a spending plan and as a means of control and evaluation.

1. Money management is a skill, an art as well as a service, learned through information and study, acquired through experience and improved by practice.
2. The purpose of financial planning is to help one achieve wishes or goals.
3. Wants and needs, values and goals differ among individuals and families.
4. Personal or family values and goals are the points of a financial plan.
  - a. what a family has, what it does with it, plus added things it wants, is called its *standard of living*.
5. A family expense record may include headings such as:
  - a. fixed expenses
    - 1) rent or mortgage payments
    - 2) household utilities - heat, telephone, electric, taxes and insurance
    - 3) general maintenance of home
  - b. variable expenses
    - 1) clothing, food, household furnishings

- 2) medical and dental care
  - 3) contributions and gifts
  - 4) savings
  - 5) recreation and educational advancement
  - 6) transportation
  - c. Income from all sources
    - 1) wages or salaries
    - 2) interest and dividends
    - 3) sales and commissions
    - 4) rents
    - 5) bonuses and gifts
6. Family records will reveal
- a. balances between income and expenditures
  - b. variability of income and expenses during the year
7. A successful family financial plan provides for:
- a. attainment of family goals
  - b. individual needs and wants of family members
  - c. security resulting from adequate reserves
  - d. liquidation of debt
  - e. insurance for protection
  - f. investments
  - g. feeling of achievement by all family members
  - h. some free choice by all family members
8. Credit gives you the ability to buy things now in return for a promise to pay for them in the future. Credit means either an advance (or loan) of money with which to purchase goods and services, or an advance of goods and services in exchange for a promise to pay at a later time.
- Three forms of credit:
- a. charge account
  - b. installment plan
  - c. cash loan
9. Sources of credit
- a. retailers who sell on charge accounts
  - b. retailers who sell on installment plans
  - c. lenders who make cash loans
10. Establishing credit
- a. character
  - b. capacity
  - c. net worth

## I. APPROACHING PARENTHOOD

1. Emotional maturity involves:
  - a. attitudes toward having children
  - b. parents' responsibility for the child
  - c. adjustments required by parents and other members of the family
2. Possible effects of smoking during pregnancy
  - a. low birth weight of new born child
  - b. reduces oxygen to the fetus
  - c. reduces the amount of blood that can enter the placenta (vasoconstriction caused by nicotine)
3. Possible effects of alcohol use during pregnancy
  - a. interferes with fetal nutrition
  - b. low birth weight
  - c. fetal alcohol syndrome or fetal alcohol affect
4. Possible effects of drug use/abuse during pregnancy
  - a. birth defects - mental and/or physical
  - b. crack babies
5. Various stages of family life cycle require new adjustment
  - a. adjustments between husband and wife
  - b. role of mother
  - c. role of father
6. Each stage of the family poses its own potentialities and problems
7. The economic aspects of rearing children
  - a. Surroundings suitable for the growth and development of healthy personalities
8. Household planning for children
  - a. Infant care - shared parental responsibilities for essential need of the newborn infant
    - 1) adjustments when baby arrives. Additional responsibilities when there are other children
    - 2) Essential needs and how they can be met:
      - a) food - introducing new foods to child
      - b) sleep and/or rest
      - c) love
    - 3) Preventative health practices
      - a) regular check-up for infant with doctor
      - b) immunizations

9. Child Development and Training

a. Stages of growth:

- 1) newborn
- 2) infancy
- 3) childhood
- 4) adolescence
- 5) adulthood
- 6) middle years
- 7) menopause
- 8) old age
- 9) death

b. Differences in growth rates. Each human being has his own pattern of growth. and each person differs in his rate of growth. Growth is affected by:

- 1) hereditary influences
- 2) environmental influences
- 3) nutrition
- 4) geography, etc

c. Physical development

- 1) size, skill, proportion
- 2) walking, talking
- 3) stages of physical development
  - a) lifts head
  - b) sits before he crawls
  - c) crawls before he walks
  - d) walks before he runs

d. Emotional development

- 1) love and acceptance by others brings a feeling of self-confidence. At birth, the infant is only interested in self. A child needs to feel he is loved by parents in order to develop a basic sense of trust in others in his adult years
- 2) As the child grows in his awareness and love of others, their standards affect his behavior.
- 3) As the child grows, he becomes more interested in others and develops empathy - the ability to place himself in another's place.
- 4) As the child grows, he learns to control his feelings and solve problems.
- 5) He develops a personality - the sum total of appearance and actions as seen by others.

e. Social development - as the person matures, he learns to think and act outside himself. His interest in and concern for others determines his social growth:

- 1) Goes hand in hand with mental growth
- 2) Gradually a baby learns to recognize things and people
- 3) Developing child begins to form relationships with others
- 4) Child learns to live and get along with others
- 5) Child feels right about himself and others

f. Intellectual development - knowledge and the use of knowledge help us to grow intellectually

g. Moral and Spiritual Development - Learning to do what is right is taught by

home, school, church and the law - as opposed to doing what one wants without concern for the welfare of others.

- 1) Learning to desire that which is "good."
  - 2) Learning to see oneself as a person who relates to others with concern for them.
  - 3) Learning to love, learning to be responsible for one's acts
  - 4) Learning to help and live according to the rules at home, school and in the neighborhood.
- h. Methods of training - the purpose of training is to help one develop into an independent and responsible adult.
- 1) Children affect and are affected by their families
  - 2) Children learn by example
  - 3) A child needs to be respected for who he is and allowed to develop his own potentialities.
  - 4) The best way to develop good habits in children is by setting a good example.

### FACTS ABOUT AIDS

(For the information of teachers of HIV/ AIDS prevention)

1. Good hygienic practices prevent the spread of germs and disease.
2. Germs are microscopic organisms.
3. Germs enter the body in numerous ways.
4. A virus is a type of germ.
5. Germs cause infections.
6. Body fluids may contain germs.
7. Good nutrition, rest and exercise help keep the body healthy.
8. Feelings are a part of being a person. Expressing them is a part of keeping ourselves well.
9. The word *contagious* explains that germs may be spread by direct contact, the air or through surface contact.
10. Some infections are very common. Examples: colds, strep throat, flu, chickenpox, etc.
11. People with infections can be contagious.
12. There are facts and myths (or misunderstandings) about what makes healthy bodies.
13. Not all infections are contagious.
14. One type of infection is called AIDS, and it is not common among children.
15. The germ that caused AIDS must enter the blood. It can't be caught by hugging, kissing, touching, sharing, breathing or playing.
16. Our bodies have a natural **immune system** to protect us from disease.
17. Each person is different and unique.
18. All people are to be respected and appreciated for who and what they are.
19. Drugs can be harmful to our bodies.
20. Drugs change the natural condition of our bodies.
21. **Viruses** are very small organisms like germs that cause disease in the body.
22. A virus can pass from one person to another in many ways.
23. Germs and viruses are fought by the body's immune system - the **white blood cells**.
24. White blood cells help the body produce **antibodies**, which fight germs and viruses.

25. The immune system can be weakened and allow serious illnesses to develop.
26. AIDS is caused when the body is infected by a virus called HIV - human immunodeficiency virus.
27. The virus called HIV can be in a person's body for many years and the person may not know it.
28. People with HIV cannot easily infect other people - the other people must do something to allow the virus to enter their blood stream.
29. All types of people can be HIV infected. We cannot tell if they are infected by looking at them. They can be anyone.
30. You can control whether or not you become HIV infected. The virus can only enter your blood stream if you let it.
31. Your body does not always show signs and symptoms of viral (virus-type) infections.
32. Contagious diseases are also called *communicable* diseases.
33. AIDS is the initial name (acronym) for Acquired Immune Deficiency Syndrome.
34. HIV blocks the body's immune system.
  
35. People with HIV infection can become very sick from common germs that do not effect non-HIV infected people.
36. HIV infected people do not always show signs or symptoms of being ill. They are *asymptomatic*.
37. Family life helps develop beliefs, feelings and values. It may also influence our decisions about our health.
38. White blood cells are the germ fighters of our immune system. They attack any germ, bacteria or virus that enters our body.
39. HIV infection weakens the white blood cell and blocks its ability to fight other germs.
40. HIV is a very delicate virus away from blood. It is very easily destroyed outside of the body by good hygienic practices.
41. HIV infection starts when the virus enters the blood stream. Although the infected person has no symptoms, he/she can infect others. The infected person is an HIV carrier.
42. It may take as long as six months for the body to produce HIV antibodies, when infected by the HIV virus.
43. People do not die from AIDS. They become very ill from common germs that we breathe in every day. These germs cause disease that can kill a PWA - Person With AIDS.
44. There are several common diseases that are dangerous to an HIV infected person. They are PCP (pneumocystis carinii pneumonia), Kaposi's Sarcoma, candidiasis and toxoplasmosis.
45. There are four ways in which HIV infection can be transmitted from one person to another.
46. The most common method of HIV transmission in New Jersey is intravenous drug use. (1990)
47. Drugs are dangerous. They alter the chemical make-up of our bodies.
48. Disease can be spread through the use of unclean or shared needles and equipment, especially hepatitis and HIV infection.
49. Other common means of transmission of HIV infection are through sexual contact or

the birth of a child to an HIV infected mother.

50. In some rare cases, health care workers have become HIV infected by not wearing protective coverings while handling HIV infected body fluids.
51. Before 1985, some people became HIV infected from untested blood or blood products. Today, the blood supply is tested for purity.
52. An HIV infected person who develops full-blown AIDS can become sick and die within two years. Because of this, HIV positive persons should seek medical treatment immediately.
53. Most people who are HIV infected are adults, but teenagers can also become HIV infected.
54. Males and females can be HIV infected.
55. Young and old people can be HIV infected.
56. People who are rich, poor or in between economically, can be HIV infected.
57. People from any race, religion or country can be HIV infected.
58. People from any lifestyle can be HIV infected.
59. AIDS is caused by the breakdown and weakening of the body's immune system.
60. Tests have been developed that can detect the presence of the HIV antibody in the blood stream.
61. There are two types of tests for HIV infection. They are the ELISA and the Western Blot.
62. We can only become HIV infected by practicing certain behaviors.
63. There are specific symptoms that develop as HIV infections progresses: fatigue, flu-like symptoms, PGL (persistent general lymphadenopathy - prolonged swelling of lymph glands), severe cough, sweating (especially at nights), diarrhea and weight loss.
64. HIV is a viral microorganism which behaves much like a parasite.
65. HIV specifically seeks out a specialized white blood cell - the T4 Helper Cell - and inactivates it by entering the cell's chemical composition.
66. When a T4 helper cell is infected by HIV, it can then be changed into a clone HIV cell when the parasite is threatened.
67. Tears and saliva do not transmit HIV infection.
68. A person develops symptoms of HIV infection when the concentration of HIV increases in the body's blood stream and nervous system.
69. HIV is easily destroyed out of the body by a fresh 1 to 10 chlorine bleach solution, 70% alcohol, strong soap or continued exposure to the air.
70. By avoiding risky behaviors, we can prevent becoming HIV infected.
71. A person with HIV infection is in greater danger from common germs that we carry than we are from getting HIV infection from the person infected with HIV.
72. There are tests that detect the HIV antibody. These tests are not conclusive, since they are easily triggered by types of contaminants.
73. A person who is HIV infected will eventually develop AIDS, but early intervention with medication can slow the process.
74. Scientists are working on new tests to detect HIV infection earlier, and on improved medical treatment of HIV infected people.
75. There are many myths surrounding the transmission of HIV. We must constantly re-educate ourselves to be aware of new information.

76. HIV attaches to the T4 helper cell at its receptor site. It blocks the immune system's ability to send chemical messages to produce antigen which triggers the creation of antibodies.
77. HIV infected T4 helper cells can remain dormant for years. They activate and produce HIV cells when another infectant enters the blood stream and triggers the antigen mechanism.
78. Each new infection triggers the growth of more HIV infected cells, which eventually destroys the body's immune system, and leads to death.
79. Abstinence from sexual intercourse and avoiding IV drug use are the safest means of avoiding HIV infection.
80. Any form of unprotected sexual contact is suspect and is an at-risk behavior to be avoided.
81. There is no known vaccine against HIV infection.
82. AZT is a drug that is recognized as sustaining the life of a PWA (person with AIDS), and has been identified as retarding the progression of the symptoms.
83. A *window period* exists from the time the HIV infection enters the body and the time that the body produces antibodies to the HIV. Testing during this *window period* will produce a negative response.

### **PROFICIENCY**

Student proficiency (satisfactory achievement) in each of the outcomes/objectives listed in this guide shall be determined by student attainment of the 70% district minimum passing standard. Such proficiency shall be measured by multiple, alternative methods of assessment techniques and instruments which include, but are not limited to the following:

1. Teacher-made tests/quizzes
2. Class participation
3. Homework Assignments
4. Research papers/reports
5. Projects
6. Performances/Exhibitions/Demonstrations

## **REFERENCES/MATERIALS**

### **Newspapers**

- A. The Daily Journal
- B. The Atlantic City Press

### **Videos**

- A. Philadelphia (1993) (Movie)
- B. Something to Live for: The Alison Gertz Story (1992) (TV)
- C. She Cried No (1996) (TV)
- D. Relationships: Knowing The Good From the Bad
- E. Personality: Getting Along With Other People
- F. The Difference Between Men and Women

### **Community Resources / Guest Speakers**

- A. Cumberland County TEEN CAP
- B. Lincoln Tech: 9191 Torresdale Avenue, Philadelphia, PA 19136
- C. Cittone Institute

### **Text:**

Leavenworth, Carol, et. al. Family Living. Englewood Cliffs: Prentice-Hall, 1991.