

# STANDARDS FOR STD/HIV PREVENTION CURRICULA IN SECONDARY SCHOOLS

**William L. Yarber, H.S.D.**

Professor of Applied Health Science  
Senior Director, Rural Center for AIDS/STD Prevention  
Indiana University  
Bloomington, IN

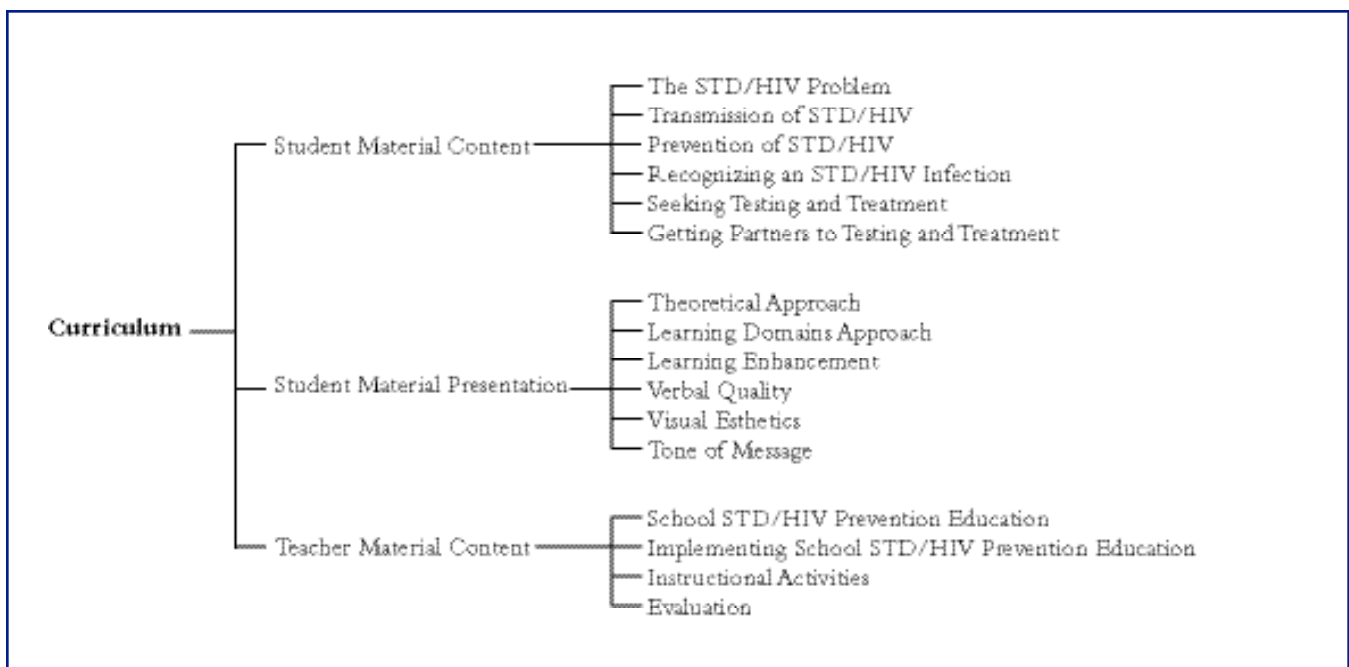
This is a checklist of 63 standards that school officials and educators can use to evaluate their existing STD/HIV prevention education programs or to develop new curricula and materials.

These standards include topics, messages, and learning approaches. They emphasize health-enhancing behaviors as opposed to biomedical information. They also reflect a teaching approach that is based on the common characteristics of sexual risk-prevention programs that have proven effective over the years.

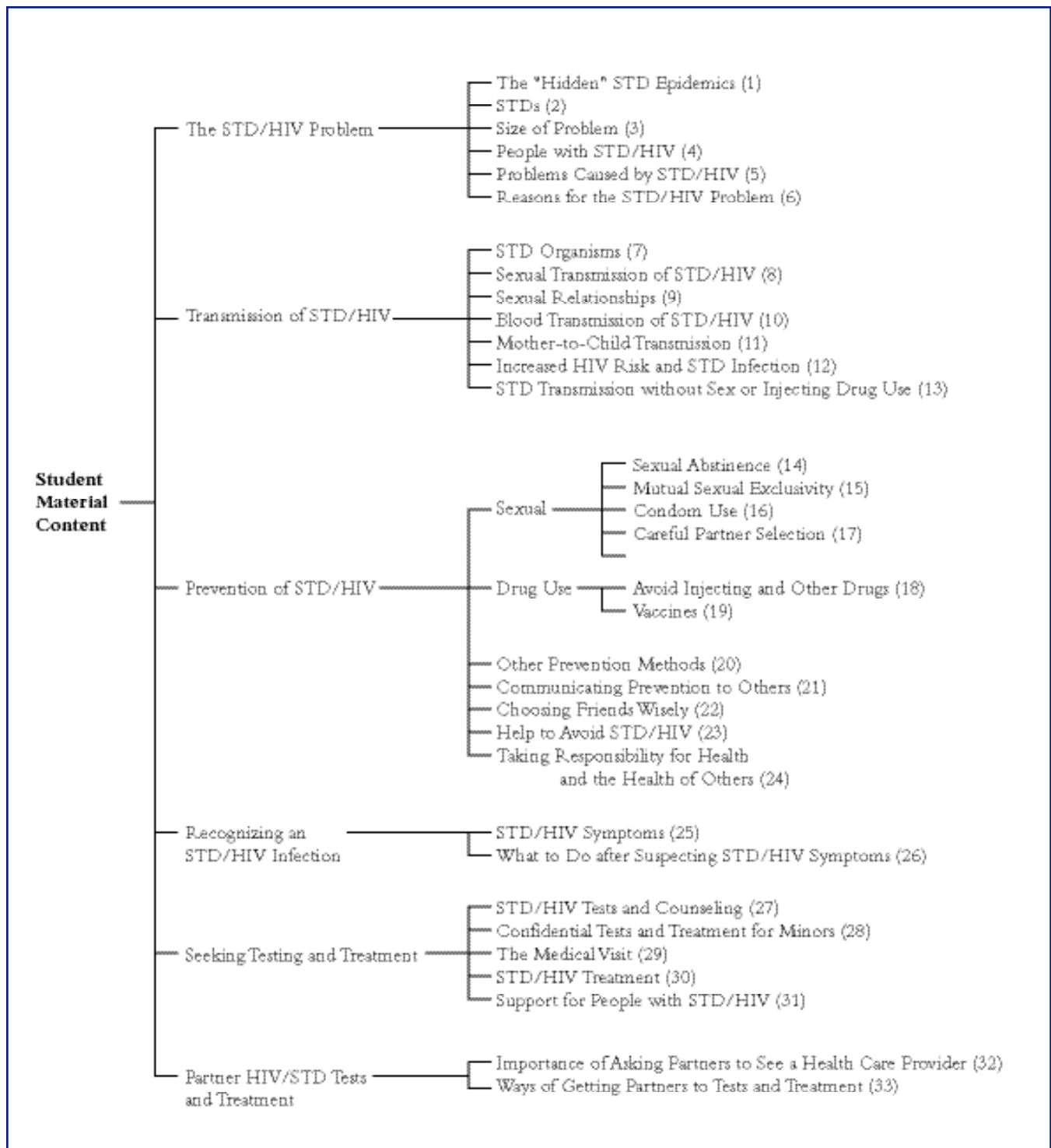
These standards reflect current information about the epidemic and disease as well as the philosophies, goals, and methodologies of current school-based STD/HIV prevention education programs. They are based on an analysis of professional literature as well as interviews with health scientists and STD/HIV prevention educators.

The standards were originally published in the August/September 1989 *SIECUS Report*, at the close of first decade of the HIV/AIDS pandemic. This is the first update.

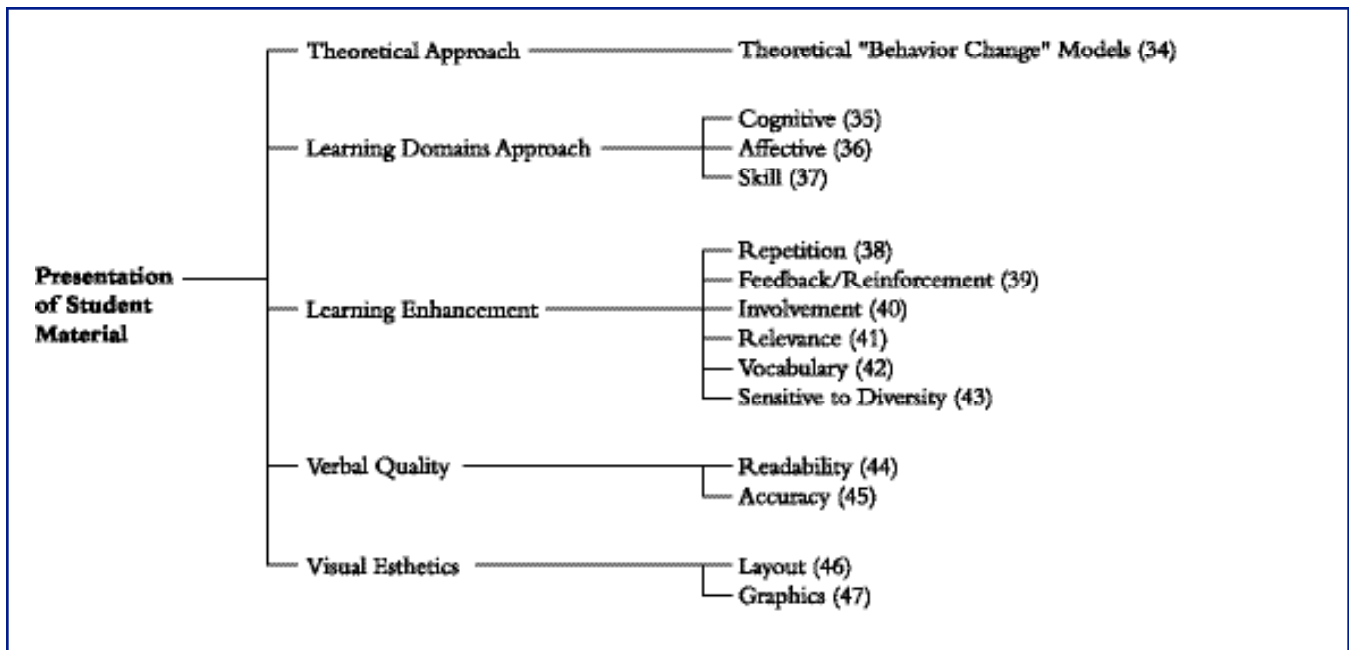
**FIGURE 1**  
**MAJOR HIERARCHICAL COMPONENTS**  
**OF SCHOOL STD/HIV PREVENTION EDUCATION CURRICULA FOR TEEN AGERS**



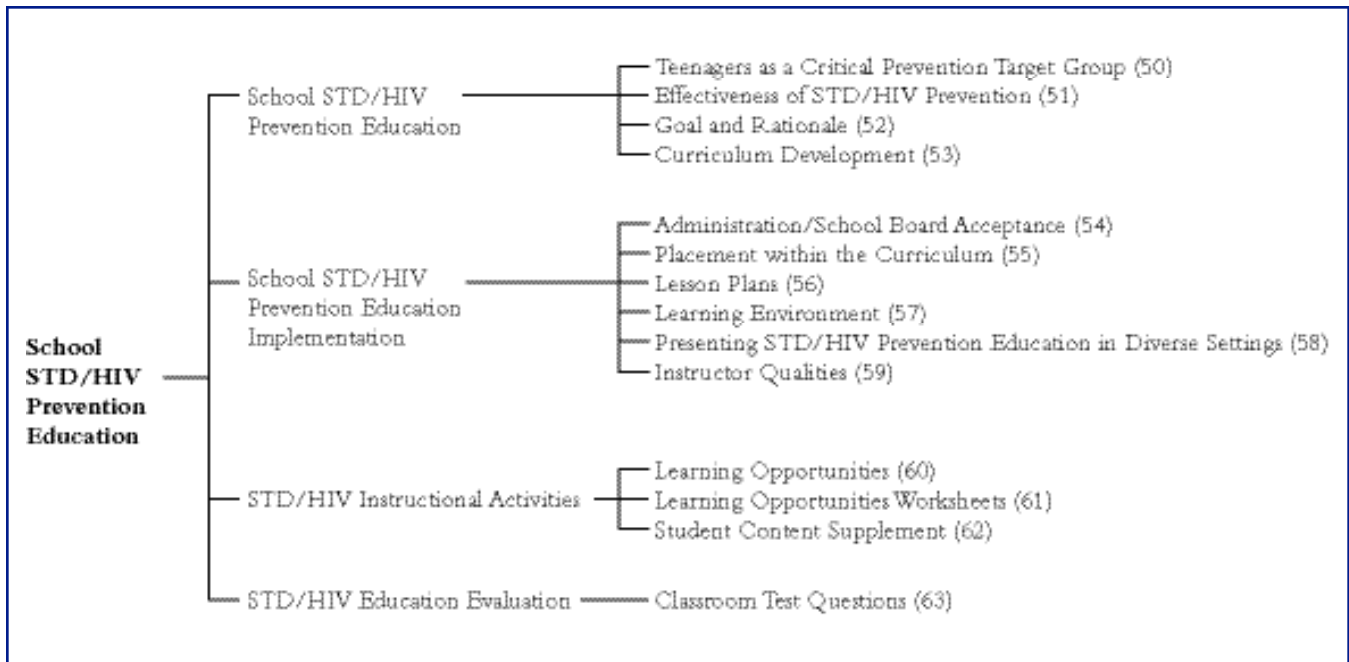
**FIGURE 2**  
**SPECIFIC HIERARCHICAL COMPONENTS**  
**OF THE STUDENT MATERIAL CONTENT**



**FIGURE 3**  
**SPECIFIC HIERARCHICAL COMPONENTS**  
**OF THE STUDENT MATERIAL PRESENTATION**



**FIGURE 4**  
**BACKGROUND FOR TEACHERS**



## CHECKLIST TO EVALUATE CURRICULA

This checklist to evaluate curricula includes 63 specific criteria/performance standards. It presents essential topics and components to include in the curriculum (regular typeface) as well as health-enhancing behaviors that curricula should promote and encourage (italic typeface).

### STUDENT CONTENT

#### The STD/HIV Problem

##### 1. The “Hidden” STD Epidemics

\_\_\_ STDs are the most commonly reported infectious diseases in the United States

\_\_\_ STDs are hidden for many reasons

\_\_\_ There are negative outcomes as a result of the hidden nature of STDs

\_\_\_ The STD/HIV risk for sexually active teenagers is underestimated

\_\_\_ The STD prevalence among teenagers is underestimated

\_\_\_ Sexually transmitted infections (STIs) is a new term used to describe STDs

##### 2. STDs

\_\_\_ Over 25 STDs, including HIV/AIDS, currently exist

\_\_\_ Certain STDs have a particular impact on teenagers

\_\_\_ Teenagers have a greater chance of contracting STDs, other than HIV

\_\_\_ Teenagers are concerned about STDs and HIV

##### 3. Size of Problem

\_\_\_ The prevalence of STDs

\_\_\_ The estimated number of new STD/HIV cases annually

\_\_\_ The number of people in the United States infected with STD/HIV

\_\_\_ The increase or decrease of STD prevalence

\_\_\_ The status of HIV/AIDS in the United States and around the world

##### 4. People with STD/HIV

\_\_\_ Behavior, not sexual orientation, is a risk factor for STDs

\_\_\_ Infections occur in all communities and population groups

\_\_\_ Teens and young adults account for two-thirds of STD cases

\_\_\_ Teenagers and young adults are at great risk for specific reasons

\_\_\_ STDs have a greater impact on heterosexual men and women, as well as men who have sex with men, than on women who have sex with women

\_\_\_ Individuals in underserved communities and communities of color are disproportionately affected by STD/HIV

##### 5. Problems Caused by STD/HIV

\_\_\_ Untreated and incurable STDs have health consequences

\_\_\_ Health damage is more serious for women and infants

\_\_\_ STD/HIV impact lives and relationships, finances, research and health care priorities, and prevention efforts

##### 6. Reasons for the STD/HIV Problem

\_\_\_ Risky behaviors

\_\_\_ STDs are often incurable and difficult to treat

\_\_\_ Emotional factors, such as guilt and shame, prevent people from getting treatment

\_\_\_ Social and economic barriers prevent people from getting treatment

\_\_\_ Public silence

\_\_\_ Inadequate education, health care, and support

#### STD/HIV Transmission

##### 7. STD Organisms

\_\_\_ STD/HIV are usually found in body fluids

\_\_\_ An individual can have more than one STD infection at a time

##### 8. Sexual Transmission of STD/HIV

\_\_\_ STDs are most often transmitted through sexual intercourse

\_\_\_ STD/HIV are contracted during contact with an infected person

\_\_\_ Sex is defined in a variety of ways

\_\_\_ STD/HIV are more easily transmitted from men to women than from women to men

\_\_\_ Vaginal intercourse involves risk

\_\_\_ Anal intercourse involves risk

\_\_\_ Oral sex involves risk

## 9. Sexual Relationships

- \_\_\_ People with one partner can be at risk
- \_\_\_ People who do not know if their partner is sexually exclusive are at increased risk
- \_\_\_ People who have multiple partners are at increased risk
- \_\_\_ People with certain types of partners are at increased risk
- \_\_\_ Teenagers with much older partners are at increased risk
- \_\_\_ People who have an early sexual initiation are at increased risk

## 10. Blood Transmission of STD/HIV

- \_\_\_ Blood-to-blood transmission is the second-most common way STD/HIV are contracted
- \_\_\_ People who share injection drug needles and equipment are at increased risk
- \_\_\_ Health care workers handling HIV-infected blood are at increased risk
- \_\_\_ People who have their bodies tattooed and pierced are at increased risk

## 11. Mother-to-Child Transmission

- \_\_\_ STD/HIV are sometimes passed from mother to child
- \_\_\_ The child of a pregnant HIV-infected mother is at increased risk
- \_\_\_ A child who is breast fed by an HIV-infected mother is at increased risk
- \_\_\_ Medical treatment is available to reduce such a child's risk for contracting HIV

## 12. Increased HIV Risk with STD Infection

- \_\_\_ People with an STD are at increased risk of contracting HIV
- \_\_\_ People with HIV and an STD are at increased risk of transmitting HIV

## 13. STD Transmission without Sex or Injecting Drug Use

- \_\_\_ STD/HIV are not transmitted in certain ways
- \_\_\_ HIV-infected individuals should not donate blood, bone marrow, organs, semen, or tissues.
- \_\_\_ STD/HIV are not transmitted through casual, non-sexual contact
- \_\_\_ Family members caring for a person with HIV/AIDS are not at risk
- \_\_\_ Unreasonable fear exists about STD/HIV transmission

## STD/HIV Prevention

### 14. Sexual Abstinence

- \_\_\_ Definitions of sexual abstinence
- \_\_\_ Normalcy of sexual abstinence
- \_\_\_ Benefits of sexual abstinence
- \_\_\_ Risks of early sexual involvement
- \_\_\_ Naturalness of sexual feelings
- \_\_\_ Religious and societal support for sexual abstinence
- \_\_\_ Factors to consider prior to sexual intercourse
- \_\_\_ The value of delaying sexual intercourse
- \_\_\_ There are intimate behaviors other than vaginal intercourse, anal intercourse, or oral sex
  - \_\_\_ *People desiring to abstain from sexual contact are encouraged to adhere to their decision*
  - \_\_\_ *People are encouraged to support peers who choose to abstain from sexual contact*
  - \_\_\_ *People are encouraged to consider all factors when deciding to have sexual contact with someone*

### 15. Mutual Sexual Exclusivity

- \_\_\_ Definitions of mutual sexual exclusivity
- \_\_\_ Benefits of mutual sexual exclusivity
- \_\_\_ Risks involved in having multiple partners
- \_\_\_ Exclusive relationships other than marriage do exist
- \_\_\_ A partner who is not sexually exclusive or uses injection drugs puts the other partner at risk
  - \_\_\_ *People are encouraged to avoid multiple sex partners*
  - \_\_\_ *People are encouraged to delay sexual contact until they are able to form a long-term, mutually exclusive relationship*
  - \_\_\_ *People who are sexually involved and want to remain so are encouraged to establish and/or maintain a mutually exclusive relationship*
  - \_\_\_ *People are encouraged not to have sexual contact with partners who do not agree to remain sexually exclusive*

### 16. Condom Use

- \_\_\_ When an individual should use a condom
- \_\_\_ Types of condoms people should use
- \_\_\_ How to use a condom
- \_\_\_ Effectiveness of condoms in preventing the spread of STDs
- \_\_\_ Condoms are FDA approved
- \_\_\_ How to discuss condom use with a partner

- \_\_\_ How and where to acquire condoms
- \_\_\_ The dangers of nonoxynol-9
- \_\_\_ Research is needed on the female condom for STD/HIV prevention
- \_\_\_ *People are encouraged to use latex or polyurethane condoms consistently and correctly*
- \_\_\_ *People are encouraged not to use nonoxynol-9 with condoms*
- \_\_\_ *When couples cannot use a male condom, they should consider using a female condom*

#### 17. Careful Partner Selection

- \_\_\_ Value exists in the careful selection of a partner
- \_\_\_ Value exists in knowing if a partner is at risk for STD/HIV
- \_\_\_ A partner's STD/HIV status is not certain as a result of appearance, familiarity, or reputation
- \_\_\_ Certain people are at increased risk for STD/HIV
- \_\_\_ Some STD/HIV-infected people are dishonest about their infection status and sexual history
- \_\_\_ *People are encouraged to carefully select partners and to avoid sexual contact with people who might be at high risk for STD/HIV*
- \_\_\_ *People are encouraged to seek STD/HIV testing of their partners and themselves*
- \_\_\_ *People are encouraged to look for STD/HIV symptoms on their partners as one, but not a completely accurate, way of judging possible infection*
- \_\_\_ *People are encouraged to get contact information from partners they do not know well*

#### 18. Avoid Injecting and Other Drugs

- \_\_\_ Injection drug use involves risk for STD/HIV
- \_\_\_ Mixing alcohol, drugs, and sex involves risk for STD/HIV
- \_\_\_ "Date-rape" drugs involve risk for STD/HIV
- \_\_\_ *People are encouraged to identify and resist the pressure to use drugs*
- \_\_\_ *People are encouraged not to use injection drugs*
- \_\_\_ *People using injection drugs should not share needles, syringes, and other equipment*
- \_\_\_ *People addicted to drugs are encouraged to seek professional help*

#### 19. Vaccines

- \_\_\_ Hepatitis B is the only STD with a vaccine
- \_\_\_ Efforts are underway to create an HIV vaccine

#### 20. Other Prevention Methods

- \_\_\_ Alternatives to intercourse, such as masturbation and massage, significantly minimize the chance of contracting STD/HIV
- \_\_\_ Laws require the disclosure of STD/HIV infection to sex and injection drug partners
- \_\_\_ Laws require the screening of donated blood, semen, tissues, and organs
- \_\_\_ Donation of a person's own blood for his/her own surgery will prevent the risk of contracting an STD or HIV
- \_\_\_ *People infected with STD/HIV are encouraged to avoid exposing others*
- \_\_\_ *People are encouraged to limit partner affection to such activities as hugging, massaging, and/or masturbating until criteria are met for more intimate sexual behavior*
- \_\_\_ *People are encouraged not to allow blood, semen, or vaginal fluids to touch their genitals, mouth, or anus*
- \_\_\_ *People are encouraged not to engage in open-mouth kissing of an HIV-infected person*
- \_\_\_ *People who are infected with STD/HIV are encouraged not to use injection drugs and not to share injection equipment*
- \_\_\_ *People at high risk for HIV are encouraged not to donate blood, bone marrow, organs, semen, and tissues*
- \_\_\_ *Pregnant women are encouraged to get tested for HIV*
- \_\_\_ *HIV-infected women are encouraged to seek medical care before and during pregnancy; they should not breast feed*
- \_\_\_ *Women thinking about becoming pregnant should know if their partner has an STD or HIV*
- \_\_\_ *Women planning to become pregnant should avoid sexual contact with anyone who has practiced risky sexual behavior or used injection drugs*

- \_\_\_ *Pregnant women are encouraged to insist that male partners use a condom if they have practiced high-risk behavior or have an uncertain STD/HIV-infection status*

- \_\_\_ *People seeking body tattoos and piercing are encouraged to ask the parlor staff people about their license and if they follow regulations, such as sterilizing their equipment*

- \_\_\_ *People who bleed during sports are encouraged to stop participating until the wound stops bleeding and until it is properly cleaned and securely bandaged*

#### 21. Communicating Prevention to Others

- \_\_\_ There is a need for and a value to communication
- \_\_\_ There is a need to communicate values
- \_\_\_ There is a need to be certain of beliefs and values
- \_\_\_ People should suggest ways to improve communication about sexuality-related issues

- \_\_\_ People should avoid negative peer pressure
- \_\_\_ People should suggest ways for others to resist negative peer pressure
- \_\_\_ *People are encouraged to clarify their values and stand by the health-enhancing ones*
- \_\_\_ *People are encouraged to learn how to resist negative peer pressure*
- \_\_\_ *People are encouraged to avoid and/or leave situations involving negative peer pressure*
- \_\_\_ *People are encouraged to rehearse good communication skills*
- \_\_\_ *People are encouraged to talk about STD/HIV prevention with possible partners*
- \_\_\_ *People are encouraged to seek the sexual and injecting drug history as well as the STD/HIV infection testing and status of a possible partner*
- \_\_\_ *People are encouraged to be honest with possible sex and drug injecting partners about their past sexual behavior, injecting drug use, and STD/HIV testing and status*
- \_\_\_ *People are encouraged not to have sex with a person who will not talk about STD/HIV prevention*
- \_\_\_ *People are encouraged to talk with their parents or other adults about good communication skills relating to HIV/AIDS prevention*

## 22. Choosing Friends Wisely

- \_\_\_ Influence of peer norms and friends is important
- \_\_\_ Friends who support preventive and risk-reduction behaviors are important
- \_\_\_ *People are encouraged to choose friends who are supportive of avoiding STD/HIV risk behavior*

## 23. Help to Avoid STD/HIV

- \_\_\_ Value exists in the encouragement and support of others
- \_\_\_ People need to know who might help them avoid STD/HIV
- \_\_\_ *Teens are encouraged to talk with their parents or other supportive adults about sexuality, growing up, and STD/HIV prevention*

## 24. Taking Responsibility for Health and the Health of Others

- \_\_\_ There is a value in individual efforts to control STD/HIV
- \_\_\_ People should serve as responsible role models
- \_\_\_ People should serve as accurate information sources
- \_\_\_ People should support STD/HIV control efforts
- \_\_\_ People should support friends with STD/HIV

- \_\_\_ People should keep informed about STD/HIV
- \_\_\_ *People are encouraged, in taking responsibility for their own health, to avoid STD/HIV, pay close attention to their own bodies, seek medical care if STD/HIV are suspected, avoid spreading STD/HIV if they are infected, and get partners to treatment*
- \_\_\_ *People are encouraged to practice STD/HIV prevention to be a healthy role model as well as for personal safety*
- \_\_\_ *People are encouraged to create an HIV/AIDS resource center in their school or town*
- \_\_\_ *People are encouraged to continue being friends with those having STD/HIV*
- \_\_\_ *People are encouraged to organize fund-raising drives or to contact a local STD/AIDS agency to see what they can do*
- \_\_\_ *People are encouraged to serve as STD/HIV volunteers*
- \_\_\_ *People are encouraged to stay alert to proposed legislation related to STD/HIV and to voice opinions to officials and legislators*
- \_\_\_ *People are encouraged to keep up-to-date about STD/HIV*
- \_\_\_ *People are encouraged to inform their friends that they know the latest STD/HIV facts and are willing to share them*
- \_\_\_ *People are encouraged to correct fallacies when talking with others*

## Recognizing STD/HIV Infections

### 25. STD/HIV Symptoms

- \_\_\_ Value exists in seeing a health care provider promptly if a person suspects having STD/HIV
- \_\_\_ STD/HIV symptoms are often similar to other infections
- \_\_\_ STDs frequently have no early symptoms
- \_\_\_ People should know the symptoms of STD/HIV
- \_\_\_ People can have an STD or HIV without symptoms
- \_\_\_ People can transmit STD/HIV when they have no symptoms
- \_\_\_ Males have STD symptoms earlier than females even though they have fewer
- \_\_\_ *People should become aware of their bodies*
- \_\_\_ *People are encouraged to become alert to the symptoms of STD/HIV, especially those people having sex with more than one partner, those who share injection drug needles and equipment, and those having sex with partners at risk for STD/HIV*

### 26. What to Do After Suspecting STD/HIV Symptoms

- \_\_\_ Value exists in deciding to stop having sexual contact
- \_\_\_ Value exists in prompt medical treatment

- \_\_\_ Value exists in getting a partner to treatment
- \_\_\_ *People are encouraged, after suspecting STD/HIV symptoms, to stop having sexual contact, to stop using and sharing injection drugs and their equipment, to go to a doctor or clinic promptly, and to get a partner to treatment*
- \_\_\_ *People who have no symptoms of an STD but still suspect an infection are encouraged to see a health care provider*

### **Seeking STD/HIV Tests and Treatment**

#### 27. STD/HIV Tests and Counseling

- \_\_\_ Who should receive tests
- \_\_\_ Benefits and limitations of tests
- \_\_\_ How an STD/HIV is detected
- \_\_\_ There is an HIV “home test kit”
- \_\_\_ There are confidential and anonymous tests
- \_\_\_ Local resources for tests and counseling
- \_\_\_ National hotlines and Internet resources
- \_\_\_ How a person can remember sources of help
- \_\_\_ What people can do when they have no money for tests
- \_\_\_ *People who have practiced high-risk behaviors are encouraged to seek counseling/tests*
- \_\_\_ *People who have multiple partners are encouraged to check regularly for STD/HIV*
- \_\_\_ *People are encouraged not to try to diagnose their own STD/HIV status*
- \_\_\_ *People are encouraged not to donate blood to determine their HIV infection status*
- \_\_\_ *People are encouraged to call their local health department to find STD/HIV medical care in their community*
- \_\_\_ *People are encouraged to seek STD/HIV health care even if they have no or little money*
- \_\_\_ *People are encouraged not to take frequent HIV tests in place of prevention and risk-reduction methods*

#### 28. Confidential Tests and Treatment for Minors

- \_\_\_ For young people facing health issues, value exists in talking to parents and guardians
- \_\_\_ Some teens experience difficulty talking to their parents about having STD/HIV
- \_\_\_ There are laws that permit minors to get STD/HIV treatment without parental consent
- \_\_\_ *Teenagers are encouraged to talk with their parents or guardians about having STD/HIV*
- \_\_\_ *If teenagers cannot talk to their parents about having STD/HIV, they are encouraged to see a health care provider*

#### 29. The Medical Visit

- \_\_\_ People should receive counseling about tests
- \_\_\_ Different types of treatment exist
- \_\_\_ Hotline information is available on HIV/AIDS treatment
- \_\_\_ *People are encouraged to refer their sex and drug-using partners to counseling and treatment*
- \_\_\_ *People are encouraged to tell health care providers why they suspect they have STD/HIV, what parts of their bodies they think were exposed, and when they think the contact took place*
- \_\_\_ *People are encouraged to ask health care providers when they can resume having sex and ways they can protect their partner if they have an incurable STD*
- \_\_\_ *People infected with STD/HIV are encouraged to practice sexual abstinence or low-risk behavior and never to share injecting drug needles and equipment*
- \_\_\_ *People diagnosed with STD/HIV are encouraged to communicate their infection status to past, current, and possible future sex or injecting drug partners*
- \_\_\_ *People with negative test results are encouraged to practice behaviors that prevent or reduce their chances of infection*

#### 30. STD/HIV Treatment

- \_\_\_ A number of STD treatments exist
- \_\_\_ HIV/AIDS has no cure
- \_\_\_ New HIV treatments exist
- \_\_\_ Treatments for AIDS are available
- \_\_\_ The future outlook for HIV/AIDS treatment is improving
- \_\_\_ *People who are infected are encouraged to follow medical advice and seek support/counseling*
- \_\_\_ *People are encouraged not to use home remedies, mail/Internet-order products, or drugs from friends*

#### 31. Support for People with STD/HIV

- \_\_\_ Value and need exists for the support of family and friends
- \_\_\_ Support groups and Internet chat rooms can help people infected with STD/HIV
- \_\_\_ Other sources exist for finding support groups

### **Partner HIV/STD Tests and Treatment**

#### 32. Importance of Asking Partners to See a Health Care Provider

- \_\_\_ It can prevent serious illness in the partner
- \_\_\_ It can prevent re-infection

- \_\_\_ It can control the spread of STD/HIV
- \_\_\_ *People having sexual contact with infected partners should not resume sexual contact until all people have been cured or should practice risk-reduction if sexual contact does resume*

33. Ways of Getting Partners to Tests and Treatment

- \_\_\_ Take the partner to the clinic
- \_\_\_ Inform the partner of the infection
- \_\_\_ Seek the help of an STD/HIV public health specialist
- \_\_\_ *People who are infected are encouraged to make certain that their sex and needle-sharing partner(s) have tests/counseling*
- \_\_\_ *People who suspect they are infected are encouraged to take their sex or injecting drug use partner with them to the health care provider*
- \_\_\_ *People who suspect they are infected are encouraged to be honest with their partner, to not blame anyone, to be supportive, and to remain calm and positive*
- \_\_\_ *People are encouraged to cooperate with public health specialists in locating partners*

**PRESENT ATION  
OF STUDENT MA TERIAL**

**Theoretical Approach**

34. Theoretical “behavior change” models
- \_\_\_ Several constructs of empirically tested “behavior change” models are used in determining content and learning opportunities

**Learning Domains Approach**

35. Cognitive
- \_\_\_ The major emphasis is on health-enhancing behaviors related to avoiding STD/HIV, recognizing STD/HIV symptoms, finding STD/HIV medical help, following treatment directions, getting partners to treatment, and individual efforts to help control STD/HIV
  - \_\_\_ The STD and HIV messages are integrated
  - \_\_\_ There is minimal emphasis on biomedical/technical information

36. Affective

- \_\_\_ Health-enhancing attitudes are reinforced and supported
- \_\_\_ Learning opportunities related to attitudes are provided

37. Skill

- \_\_\_ Learning opportunities that require rehearsal of skills related to STD/HIV prevention and risk-reduction are provided

**Learning Enhancement**

38. Repetition

- \_\_\_ Major concepts are presented several times

39. Feedback/Reinforcement

- \_\_\_ Opportunities are provided for students to test their learning with prompt feedback and reinforcement

40. Involvement

- \_\_\_ Learning opportunities are provided that require a student’s involvement and use of major concepts

41. Relevance

- \_\_\_ Information is specifically geared to teenagers based on developmental principles

42. Vocabulary

- \_\_\_ Definitions and pronunciations of technical and possible unknown/unfamiliar terms are provided
- \_\_\_ Terminology familiar to teenagers is used

43. Sensitive to Diversity

- \_\_\_ Material is congruent with cultural diversity
- \_\_\_ Material is not condescending or prejudicial toward diverse groups

**Verbal Quality**

44. Readability

- \_\_\_ Reading level is junior high school level; this includes minimal use of words with more than three syllables as well as minimal use of long and complex sentences
- \_\_\_ Syntax is sound, with precise and simple presentation of concepts

45. Accuracy

- \_\_\_ Information is accurate according to contemporary understanding

## Visual Esthetics

### 46. Layout

- \_\_\_Pages have ample “white space”
- \_\_\_Print is an adequate size;layout has a logical,natural flow; and a variety of typeface fonts and colors are used

### 47. Graphics

- \_\_\_Photos, graphs, and illustrations are used to enhance student interest and understanding
- \_\_\_No negative, confusing, or prejudicial effects are produced

## Tone of Message

### 48. Health-promoting

- \_\_\_Material emphasizes self-directed, health-enhancing behavior, including responsibility for the health of others

### 49. Objective

- \_\_\_Material does not make moral judgments, use emphatic adjectives or adverbs, contain any obtrusive style, or use offensive material
- \_\_\_Material includes anxiety-alleviating information

## BACKGROUND FOR TEACHERS

### School STD/HIV Prevention Education

#### 50. Teenagers as a Critical Prevention Target Group

- \_\_\_Prevalence of teen sexual and drug-use risk behaviors is described
- \_\_\_Teenage STD/HIV-related attitudes and knowledge are described

#### 51. Effectiveness of STD/HIV Prevention

- \_\_\_Common characteristics of most successful prevention programs are provided

#### 52. Goal and Rationale

- \_\_\_The major instructional emphasis includes preparing individuals to avoid STD/HIV; to recognize STD/HIV symptoms; to access STD medical care; to follow treatment instructions, if infected; to refer all partners to medical care; and to help control the STD/HIV problem
- \_\_\_Desired behavioral outcomes are stated
- \_\_\_The value of integrating STD/HIV prevention messages is provided

\_\_\_Teenagers’ opinions of their need for STD/HIV information and services is given

\_\_\_Parental support for school STD/HIV education and for instruction about specific topics is given

### 53. Curriculum Development

\_\_\_Material describes rationale for conducting curriculum preparation studies, process evaluations, program effectiveness assessments, and program refinements

\_\_\_Material describes local, state, and national resources that can assist in curriculum development,implementation, and evaluation

\_\_\_Material lists the traits of the most successful prevention education programs and encourages their use in curriculum development

\_\_\_Suggestions are provided for working effectively with the local community, such as with an advisory committee

\_\_\_Material describes the composition of an advisory committee and encourages the inclusion of student members from diverse communities

\_\_\_Suggestions for gaining support and resolving conflict relative to STD/HIV prevention education content are provided

\_\_\_Resources are given that can provide accurate STD/HIV information

### School STD/HIV Prevention Education Implementation

#### 54. Administration/School Board Acceptance

\_\_\_Importance and value of administrative and School Board approval and support of HIV/AIDS prevention education are stated

\_\_\_Importance and value of establishing a school policy for STD/HIV prevention education is given

\_\_\_Suggestions for securing approval and support are provided

#### 55. Placement within the Curriculum

\_\_\_Material describes the rationale for STD/HIV prevention education as part of a comprehensive, kindergarten through twelfth grade health science education program that also includes comprehensive sexuality education

\_\_\_Material provides suggestions on how to integrate STD/HIV prevention education into the curriculum

#### 56. Lesson Plans

\_\_\_A lesson plan for the curriculum that suggests daily

activities is provided

\_\_\_Materials needed to implement the curriculum are listed

#### 57. Learning Environment

\_\_\_Material describes and encourages the creation of a safe classroom environment in which students can discuss STD/HIV without the fear of censorship or ridicule

\_\_\_Material allows students to decline participation in activities that violate their personal values

#### 58. Presenting STD/HIV Prevention Education in Diverse Settings

\_\_\_Importance of instruction addressing the entire range of needs among diverse groups is stated

\_\_\_Suggestions for presenting culturally appropriate instruction are given

\_\_\_Suggestions for dealing with various religious and moral views toward STD/HIV-related issues are provided

#### 59. Instructor Qualities

\_\_\_Material describes teacher competencies required to provide quality STD/HIV instruction

\_\_\_The importance of the instructor communicating with students with ease, sensitivity, and tact in an objective, factual manner is stressed

\_\_\_Material encourages the use of a qualified classroom teacher for STD/HIV instruction as well as the use of carefully selected outside authorities only as supplemental speakers

\_\_\_Material encourages schools to provide in-service education for people assigned to provide STD/HIV instruction

### **STD/HIV Instructional Activities**

#### 60. Learning Opportunities

\_\_\_Learning opportunities provide maximum student participation, reflect theoretical behavior change models

and the three learning domains, and emphasize health-enhancing behaviors

\_\_\_Purpose, objective, and utilization procedures are included for learning opportunities

\_\_\_Cognitive learning opportunities stress major health-enhancing concepts related to STD/HIV transmission and prevention

\_\_\_Affective learning opportunities stress, for example, personal examination of attitudes, perceptions, confidence of self-efficacy, beliefs related to STD/HIV-related health behaviors and other issues

\_\_\_Directions for utilization of affective learning opportunities suggest following standard procedures for values-related activities, including optional and anonymous student participation

\_\_\_Skill-learning opportunities provide practice and simulation of STD/HIV prevention behaviors, such as decision-making, problem-solving, communication, resistance to negative peer pressure, finding help using the local health board and the Internet, and refusal skills

#### 61. Learning Opportunities Worksheets

\_\_\_Any student worksheets required for the learning opportunities are included and are printed in a format that permits easy duplication

#### 62. Student Content Supplement

\_\_\_Any material that may be determined too controversial for students (for example, directions for condom use) is given in a format which can be distributed to students based on local discretion

### **STD/HIV Education Evaluation**

#### 63. Classroom Test Questions

\_\_\_Several types of questions that evaluate cognitive learning are included

\_\_\_Questions that assess cognitive levels beyond memory are included