DESCRIPTION

Lauren and Paul dated and broke up, yet continue to have unprotected sex with each other and multiple partners. They agree to "flip," and Paul becomes a teenage father, assuming care for the baby, saying "no" to a party, and possibly losing a basketball scholarship. Lauren learns she "has" AIDS and copes with medicines, funeral arrangements, and an AIDS hospice. They become convinced that protected sex is a wiser choice.

ACADEMIC STANDARDS

Subject Area: Health

- Standard: Knows how to maintain and promote personal health
  - Benchmark: Understands the short- and long-term consequences of safe, risky, and harmful behaviors (See INSTRUCTIONAL GOALS 2 and 3.)
  - Benchmark: Knows behaviors that are safe, risky, or harmful to self and others (See INSTRUCTIONAL GOALS 1.)
  - Benchmark: Knows how personal behaviors relate to health and well-being and how these behaviors can be modified if necessary to promote achievement of health goals throughout life (e.g., following a personal nutrition plan to reduce the risk of disease, periodically self-assessing physical fitness) (See INSTRUCTIONAL GOALS 4.)

INSTRUCTIONAL GOALS

1. To identify “at risk” sexual behaviors among teens.
2. To reveal the potential consequences of engaging in risky behaviors.
3. To demonstrate the impact these consequences can have on an individual’s life and health.
4. To discuss the alternatives to “at-risk” behaviors.

BACKGROUND INFORMATION

The United States continues to have one of the highest adolescent pregnancy rates among industrialized nations, although those rates have steadily declined in the past decade. Each year almost one million young women, ages 15 to 19, become pregnant. More than half of these pregnancies result in actual childbirth. Linked to
most of these pregnancies is a teenaged father who is unlikely to be in any position to provide financial, emotional, or other parental support to the child. A further troubling aspect of risky sexual behavior is its link with sexually transmitted diseases. Every year, one in four sexually experienced teenagers acquires an STD. That ratio translates to about three million teens.

**VOCABULARY**


**BEFORE SHOWING**

1. Discuss parenting.
   a. How many are ready at this time to become a parent?  
   b. How would becoming a parent change your life today and your plans for the future?  
   c. What are the chances of conceiving a child with unprotected sex? (A sexually active teen having unprotected sex has a 90% chance of becoming pregnant within one year.)

2. Discuss HIV and AIDS.
   a. What do you know about HIV and AIDS?  
   b. What are your chances of getting HIV if you are involved in unprotected sex? (Every year, one in four sexually experienced teens acquires an STD.)

**AFTER SHOWING**

**Discussion Items and Questions**

1. At the beginning of the video, what are Lauren’s and Paul’s attitudes towards sex and risky sexual behaviors?  
2. What happens to Lauren during the course of her “flipped” day? When are the turning points in her attitudes?  
3. What does Lauren learn from her experience?  
4. What are some of the things Paul must do in order to care for “his” baby?  
5. How does having the responsibility for a baby interfere with Paul’s life?  
6. What does Paul learn from his “flipped” day experience?  
7. Will Paul and Lauren change their behavior? If so, will those changes be permanent? Explain your answer.

**Applications and Activities**

1. Research and debate the advantages and disadvantages of both teen abstinence and contraception as methods to avoid unwanted pregnancy and STDs.  
2. Use current local, state, national, or international news articles to launch a discussion about HIV/AIDS. Include information on:  
b. Personal stories.
c. Legislation related to the prevention, control, or treatment of HIV/AIDS.
d. Efforts of advocate groups.
e. International efforts to deal with this disease.

3. Write a one-page fact sheet on teen HIV/AIDS and/or a one-page fact sheet on teen pregnancy. Share the fact sheets with the class.

4. Invite a guest speaker to present information to the class on HIV/AIDS and/or teen pregnancy.

5. Discuss issues related to sexually active teens.
   a. Create a list of reasons why some teens become sexually active.
   b. Discuss the social, emotional, and financial impact of risky sexual behavior that can result in pregnancy or acquisition of HIV/AIDS.
   c. Complete the statement: "I would choose not to have irresponsible or unprotected sex because . . . ."
   d. Share responses and continue the discussion.

6. Role-play scenarios involving refusal skills related to having sex or unprotected sex.

7. Research and discuss the impact unintended pregnancies and resulting births can have on both the child and society. Topics for research include:
   a. Teenage childbearing and parenting.
   b. Teenage pregnancy and adoption.
   c. Teenage pregnancy and welfare.

8. In small groups or with partners, create a list of possible advantages and disadvantages for not becoming sexually active as a teenager. Discuss as a class.

9. Discuss the use of sex and related images to sell products. Create three lists of products that are advertised with images of healthy and fit people, popular people, and sexy people.
   a. Why do advertisers use these kinds of people for these products?
   b. Are the messages realistic (i.e., if you buy the product, will you automatically become sexier, more popular, and healthy and fit, etc.)? Explain your answer.
   c. Is this type of advertising effective? Explain your answer.
   d. How do these messages influence how we think about ourselves—our lives, our appearance, our happiness, etc.?
   e. How do these messages influence you personally?

10. Write an essay explaining your personal reasons for either abstaining from sexual relations or engaging only in responsible, safer sex. Include your goals for the future.

**CMP RELATED RESOURCES**

- **AIDS: Stopping the Spread of HIV #3428**
- **Baby Blues #3005**
- **Risky Behavior: What You do Now May Have Lifetime Consequences #9688**
- **Take Charge: Managing Your Sexual Health #3302**
The following Web sites complement the contents of this guide; they were selected by professionals who have experience in teaching deaf and hard of hearing students. Every effort was made to select accurate, educationally relevant, and “kid safe” sites. However, teachers should preview them before use. The U.S. Department of Education, the National Association of the Deaf, and the Captioned Media Program do not endorse the sites and are not responsible for their content.

- **AIMS MULTIMEDIA**
  This is the Web site for the company that sells *The Teen Files Flipped* videos and accompanying teacher guides. Click on the “Teacher Guide” button to access a PDF file of the guide. The lesson guide for this video includes vocabulary and comprehension worksheets, a word search, a test, and other activities.

- **THE NATIONAL CAMPAIGN TO PREVENT TEEN PREGNANCY**
  [http://www.teenpregnancy.org](http://www.teenpregnancy.org)
  The Web site includes sections for teens, parents, and professionals. It has national and state statistics, current news articles, research, resources for further reading, a quiz, and information about effective teen pregnancy prevention programs.

- **CAMPAIGN FOR OUR CHILDREN**
  [http://www.cfoc.org](http://www.cfoc.org)
  This site, dedicated to reducing the number of teenage pregnancies, includes news and research, an educators’ and a parents’ resource section, a media campaign toolbox, and a teen guide that includes information on abstinence, a question and answer section, STD info, how to talk to your parents about sex, and test for your sex quotient.

- **AVERT**
  [http://www.avert.org/young.htm](http://www.avert.org/young.htm)
  AVERT is an international HIV and AIDS charity based in the UK and is the most accessed HIV and AIDS Web site in Europe. It has information about treatment and care, transmission and testing, statistics, history, printable resources, and more. The section for young people includes multiple pages on sexual relationships, HIV/AIDS, puberty, and gays and lesbians.