

The Choice Game™

Teacher Guide





The Choice Game™

The Choice Game™ is fun, serious fun. Because it is fun, youth like to play the game. In making their own choices they don't feel "they are being talked down to." Instead, the interactive quality of The Choice Game™ Curriculum gives youth a sense of empowerment in determining what direction their learning will take. This kind of participation optimizes learning because it is motivated by individual desire and personal interest. We think you and your students will truly enjoy The Choice Game™.

Focus group experiences have made abundantly clear The Choice Game's™ ability to initiate lively and meaningful discussions on the subjects it contains. Many possibilities are presented by the game; however, it's potential far outreaches the confines of classroom time, as we often experienced long after a student focus group. This gives individual teachers the opportunity to carefully select and guide what issues are most appropriate for their classes without ever worrying about exhausting the material.

More About Bandura's Social Cognitive Learning Theory

The Choice Game™ is based on Albert Bandura's Social Cognitive Learning Theory, which emphasizes the importance of learners observing and internalizing the behaviors, attitudes, and emotional reactions modeled to them. The theory can be summarized in four segments:

1. **Attention.** If our students are going to learn something, they must be paying attention to it. The Choice Game™ actors, music, and scripts make it easy for students to pay attention.
2. **Retention.** Our students must be able to retain and remember what they have paid attention to. Learning takes place when we store what we have seen modeled to us in the form of mental images or verbal descriptions.
3. **Reproduction:** Learners must translate the images or descriptions into actual behavior by internalizing what has been modeled to them. The Choice Game™ settings and situations are from the real world experiences and challenges of the youth in our focus groups; therefore, they can be easily duplicated by all students.
4. **Motivation.** Effective learning will not take place unless students are motivated to imitate the models they have observed. By engaging students in an interactive mode, The Choice Game™ inspires this motivation.



Choice Game Applications and Educational Strategies

The Choice Game™ was designed as a highly flexible instrument that has many possible applications. These range from a highly structured course meant for the classroom setting to less formal group settings and even for private individual use. For your convenience a sampling of possible applications follows, in the introduction section.

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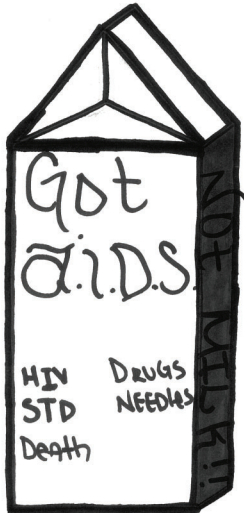
Closing Comments from
Stephen Baldwin - Our Narrator

Acknowledgements

Several Sources Foundation History

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The Choice Game™

Chapter 3

Sexually Transmitted Diseases (STDs)

STDs and AIDS – CD-ROM Segment Choices: The sexually transmitted Diseases and AIDS segment provides statistics and information that the only guaranteed protection is abstinence from sex, intravenous drug use and alcohol.

Objectives:

- Sibling role model
- STDs and “safe sex”
- Specific STD statistics and information
- Warnings for any “sexual” contact
- STDs can work together
- Peer Pressure
- The part alcohol and drugs can play
- Self-determination vs. sexual pressure
- Abstinence and the “Wait Ring” concept
- Teen Pregnancy
- Decision-making skills
- Peer pressure involving drugs, alcohol, parties, etc.
- Long-term consequences of today’s choices
- Rumors, promiscuity and your future
- Need for parental communication – marriage, sex and love
- “Second Chance” Club

The story:

In this part of The Choice Game™ Tommy is a typical high school freshman. He doesn't have a lot of friends. Today at school some kids were teasing him about things he didn't seem to know about sex. His sister, Kim, is a very popular senior at the same school. Her friend, Alicia, told her about Tommy's situation. So Kim's not surprised when Tommy comes to speak with her. They have a good relationship and Tommy looks up to his “cool” sister.

Kim and Tommy have a heart-to-heart conversation in which Kim tries to explain the consequences of premarital sex and risky behaviors. At the end Tommy has a serious choice to make which impacts the outcome of this segment. Will he go to an unsupervised party or not?

Sexually Transmitted Diseases: The Issues

Many youth are astonished to learn that sexually transmitted diseases are also spread through oral contact, “You mean, you don’t have to have sex to get an STD?” is a typical remark. This response underscores the false perception that oral sex isn’t really sex, and therefore “safe.”

The “safe sex” message has reached a remarkable percentage of teens, but not the whole story. That is, the safe sex approach has a considerable failure rate, especially in the transmission of most sexual diseases. Abstinence offers the only 100% protection available is an eye-opener for many.

Youth are earnestly interested in learning about STDs and appreciate including them in an appropriate discussion of this topic. Even in a culture saturated with sexual messages, youth still look to their parents as the lead educators on sexual behavior.



5 of the 10 most common reportable infectious diseases in the U.S. are the STDs: AIDS, Chlamydia, Gonorrhea, Hepatitis B and Syphilis. When last compared in 1997, these five STDs accounted for 87% of all reported infectious diseases. ^{STD #1}

The Student Journal provides considerable information about STDs, but its main goal is to have youth determine “what the best is” and then commit to choosing “the best” for themselves. It doesn’t preach, it doesn’t tell you what to do, and it certainly doesn’t dance around the subject of sexual transmitted diseases. In a word, it is REAL. The questions are gripping and the information is so compelling, it speaks for itself. No extra incentive will be needed to get your students to read this chapter because it gives them the kind of education they want.

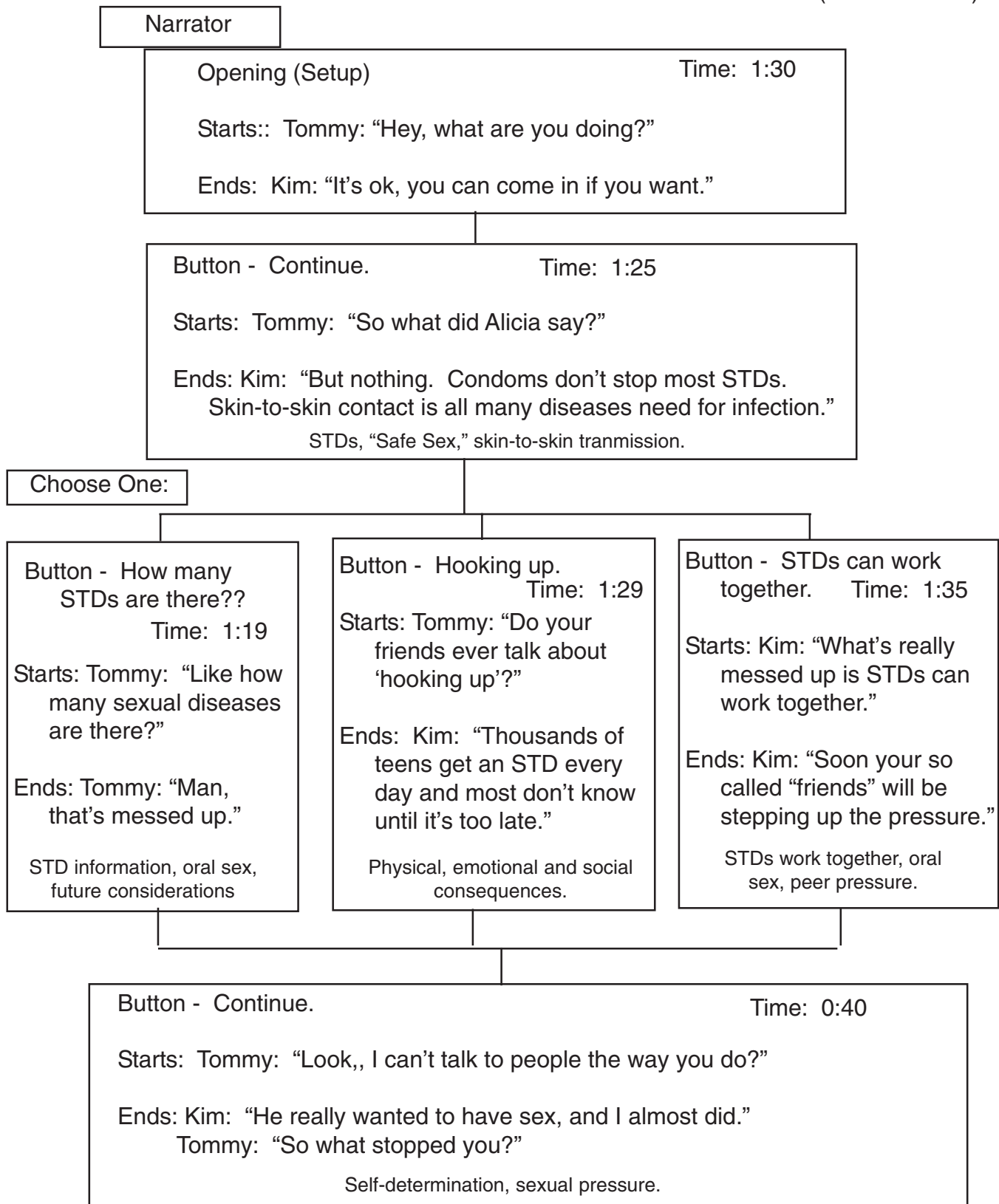
The journal reveals that sex is about life and death, health, relationships, children and the future. It is also about free choice. The chapter ends with a respectful consideration of abstinence as a positive choice.

^{STD #1)} JAMA HIV/Aids Resource Center: *Morbidity and Mortality Weekly Report- Ten Leading Nationally Notifiable Infectious Diseases—United States, 1995*. Centers for Disease Control and Prevention, October 18, 1996, Vol. 45, No. 41.

3 STD

STDs Script - Flow Chart - Beginning

Total Time: 26:12
(All 22 choices)



Continued on Page STD 8

A common misconception held by youth is that “safe sex” makes it impossible to be infected with a STD. Tommy asks his sister, “How can this stuff happen with all this ‘safe sex’ around?” Kim’s answer is startling: “Condoms don’t stop most STDs. Skin-to-skin contact is all many diseases need for infection.”

The more Tommy explores STDs and their causes with his sister, the more he learns that “Any kind of sex, yes, even oral sex, can give you a disease like Herpes, gonorrhea or worse.”

Choose the risks of sexual involvement.

OR

Embrace the benefits of abstinent living.

The Choice Game™ Survey:

Sometimes statistics almost seem to “talk.” Consider the following:

Although 77% of the teens surveyed believed they would have sexual intercourse as a teenager, only 22% said they did not desire to wait for marriage. And 60% were sure that they would like to learn more about abstinent living.

61% believed that sex could lead to serious problems, but 51% said when it came to STDs, they “tried not to think about it.”

37% of the high school teens identified themselves as being sexually active and 80% said that they had a sexual encounter, but only 17% believed they could not change their sexual behavior if given good enough reasons to do so.

STD #2

**A fact to share,
not to scare.**

AIDS continues to be one of the leading causes of death among 15 – 24 year olds. The Centers for Disease Control estimates that half of all new HIV cases occur in those younger than 25. (The recent decline in HIV rates is not reflected in young people.)^{STD #3}

STD #2) The Choice Game™ Focus Group Data, Newark NJ, 2001.

STD #3) *Young People at Risk: HIV/AIDS Among America’s Youth*, Centers for Disease Control & Prevention, National Center for HIV, STD and TB Prevention, Divisions of HIV/AIDS Prevention, March 11, 2002.

If the saying is true, “that a little information can be dangerous,” it’s no wonder teens are at risk for contracting STDs. That danger is only multiplied by the rampant misinformation that travels in their circles. As our two teens demonstrate, when they’re interested teens can truly learn.

Discussion
1

Ugly genital warts grab their attention, but learning that STDs can be invisible makes them think.

The Trojan Horse:

Have a nicely wrapped box visible to the class. Let them beg you to open it. At your choosing, open the gift to reveal the messy – if possible, smelly - garbage wrapped inside. Compare it to an attractive man or woman carrying an unseen bacterial or an incurable viral STD.

Discussion
2

Tommy is finding out first hand how much misinformation there is when teens just come up with their own conclusions.

Any genital contact, infected skin contact or disease carrying bodily fluids can and do carry bacterial and viral pathogens.

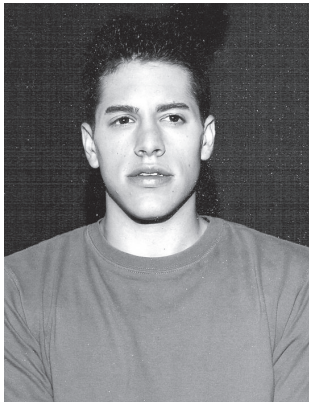
Make the announcement that “Anyone who has had sexual contact should strongly consider being tested for an STD. Your health depends on it.”

Discussion 3

“How many STDs are there?” Time: 1:19

Nobody laughs at AIDS, but plenty of people die from it, even innocent children.

Role-play one student telling another with whom he or she is involved, “I just found out that I have HIV.”
How do they react?



Discussion 4

“Do your friends ever talk about ‘hooking up’?”
Time: 1:29

As if teenage years weren’t confusing enough already, traditional dating has been largely replaced by the more ambiguous “hanging out”, and other non-committal relationships. “Hooking up”, and “buddy sex” are fairly indiscriminate forms of sexual interaction that allow sex without commitment or even affection. The terms include all of the bases, from kissing, to oral sex, to intercourse. Hookups generally involve alcohol, physical attraction and a lack of expectations when it’s over. Frequently, partners are almost strangers.

Several preliminary studies and surveys indicate that although youth, and in particular women, may settle for “hooking up”, deep down they yearn for meaningful and committed relationships.

Discussion: What do you want for your life: meaningless encounters or meaningful relationships?



Discussion 5

“STDs can work together.”
Time: 1:35

Heavy Choices:

Choose two students for a demonstration. To one, give a book to hold for every harmful emotional, economic, medical or social consequence of loose sexual contact the class identifies. To the other do the same for saving sex until marriage.

What choice weighs you down more?