NO PREP

STI Myth-Busters

Healthy Choices for Valentine's Day and Beyond

Includes: Student reading, case study, differentiated questions, teacher key

Name: Period: Date:

STI Myth-Busters: Healthy Choices for Valentine's Day and Beyond

Valentine Pressure vs. Real Health: Why This Topic Matters

Valentine's Day can be fun, but it can also create pressure—pressure to date, to impress someone, or to "go along" with things you're not ready for. Health class is the place where we get practical and honest: your body, your boundaries, and your future matter more than a holiday. One reason this lesson is important is that many STIs (sexually transmitted infections) spread when people assume, "It's probably fine," or "They look healthy." In reality, many infections are asymptomatic, meaning a person can feel totally normal and still pass an infection to someone else. That doesn't make anyone "dirty" or "bad." It simply means symptoms are not a reliable test. You may hear both STD and STI. "STI" is often used because "infection" is broader and

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How STIs Spread: Transmission Basics Without the Rumors

STIs spread through sexual contact (including vaginal, oral, or anal sex), and some can spread through skin-to-skin contact in the genital area. That's why prevention is more than "don't share drinks" or "don't sit on toilet seats." Those are common myths. Most STIs require direct contact with bodily fluids or skin contact in

specific areas. Understanding transmission helps you focus on actions that matter. Protection methods work best when students understand what they do and what they can't do. Barrier methods (like condoms and dental dams) can significantly reduce risk by blocking fluids and lowering direct contact. However, they don't eliminate risk completely, especially for infections that spread through skin-to-skin contact in areas not covered by a barrier. That's why prevention is layered: safer choices, consistent protection, and honest conversations all matter. Testing is another layer. Because many STIs are asymptomatic, the only way to know your status is testing. People sometimes avoid testing because they assume only "risky" people need it. That's not how infections work. Infection risk depends on behaviors and exposure, not personality. If someone is sexually active, testing is a responsible health routine (like dental checkups), not a moral judgment. Finally, remember that consent is part of prevention. Consent means you get to choose what you're comfortable with, and you get to ask questions. "Have you been tested?" and "What protection are we using?" are health questions, not insults. The healthier the relationship, the easier these conversations become.

Protection and Prevention: The Layered Safety Approach

Students sometimes want a single perfect rule, but real health is about stacking protections. First is decision-making: delaying sexual activity, choosing lower-risk behaviors, and avoiding situations where judgment is impaired (like pressure, substances, or fear of losing someone). Second is consistent protection: barriers used correctly every time. "Most of the time" isn't a strong plan because infections don't wait for convenient timing. Third is vaccination. Vaccines can prevent certain infections before exposure. The best-known examples are vaccines that protect against HPV (human papillomavirus) and hepatitis B. Vaccines are a prevention tool that doesn't depend on someone remembering something in the moment. Students don't need to memorize a medical schedule to understand the concept: prevention can happen before risk exists. Fourth is routine testing and honesty. In healthy relationships, partners can talk about testing history, protection preferences, and boundaries. This is where stigma becomes the enemy. Shame makes people hide information; honesty protects people. A respectful conversation might sound like: "I care about both of us, so I want to be safe. What protection are you comfortable with? When was your last test?" Valentine's Day is a good time to practice one life

skill: separating affection from pressure. Someone who respects you will respect your boundaries, your pace, and your health decisions. That is a major green flag.

Stigma, Myths, and the "It Won't Happen to Me" Problem

A lot of STI spread is fueled by myths. Myth: "If someone has an STI, you can tell." Fact: many are asymptomatic. Myth: "Only certain 'types' of people get STIs." Fact: infections spread through exposure, not identity. Myth: "Talking about protection ruins the mood." Fact: clear communication prevents panic later and builds trust. Stigma also harms people who are already dealing with health issues. If students treat STIs like a joke or a character flaw, peers become afraid to get tested or ask questions. From a public health perspective, that increases spread. From a relationship perspective, it destroys trust. The healthier approach is simple: treat health information as normal, and treat people with dignity. Students should also recognize "pressure language," especially around Valentine's Day. Pressure sounds like: "If you loved me, you would," or "Everyone else is doing it," or "Don't be dramatic." Healthy language sounds like: "What are you comfortable with?" and "We can slow down." Pressure increases risk because it pushes people to make choices without thinking or planning. If you remember one thing, remember this: prevention is not about fear—it's about control. Knowledge gives you control. Communication gives you control. Boundaries give you control.

Key Information: Staying Informed: Common STIs in a Simple Reference Table

Infection (Example)	How It Often Spreads	Common Reality	Strong Prevention Habit
Chlamydia/Gonorrhea	sexual contact, fluids	often asymptomatic	barriers + routine testing
HPV	skin-to-skin sexual contact	may have no symptoms	vaccination + barriers reduce risk

Infection (Example)	How It Often Spreads	Common Reality	Strong Prevention Habit
Herpes (HSV)	skin contact during outbreaks (sometimes without obvious symptoms)	symptoms can come and go	avoid contact during symptoms + barriers reduce risk
HIV	certain body fluids during sex or blood exposure	not visible by appearance	protection + testing (medical prevention options exist)
Hepatitis B	sexual contact, blood	affects liver	vaccination + protection

Case Study: The Valentine Conversation That Went Right

Before the excerpt, notice the skill: respectful communication lowers risk and lowers stress. Jordan and Casey started dating in January, and by Valentine's week, Casey felt pressure from friends to "make it official" in a big way. Casey wanted to plan a private date night, but Jordan seemed nervous and kept changing the subject. On February 13, Casey finally asked, "Is something bothering you?" Jordan admitted they were worried about moving too fast and didn't want to do anything without a clear plan for protection and boundaries. Casey felt embarrassed at first and said, "I didn't think you'd bring that up now." Jordan replied, "I care about you—that's why I'm bringing it up." They talked calmly: what they were comfortable with, what they weren't, and what protection would be used if they ever chose to be sexually active. Casey also admitted they had believed a myth that "if someone has an STI, you'd know," and Jordan explained that many infections are asymptomatic. By the end of the conversation, both felt relieved. They agreed that Valentine's Day didn't need to be a deadline, and they decided to focus on trust and communication. Casey later told a friend, "It was actually more romantic that we respected each other."

1. What myth did Casey believe, and how did Jordan correct it using a key idea from the reading?

2. Name one "pressure phrase" the couple avoided and one respectful phrase they used instead.

Multiple Choice

1. The term asymptomatic means:

    a) the infection cannot be tested

    b) the infection spreads through food only

    c) a person has no noticeable symptoms

    d) the infection is always severe

2. Which is the best example of a layered prevention approach?

    a) Avoiding any conversations about health with a new partner

    b) Only relying on "trust"

    c) Using protection sometimes

    d) Combining safer choices, consistent barriers, and testing

3. Which statement best supports reducing stigma?

    a) Only "bad" choices lead to infection, so testing is unnecessary

    b) Avoiding the topic prevents problems

    c) Treating testing as normal encourages safer behavior

    d) Shame makes people more responsible

Matching

Write the letter of the correct definition on the line next to each term.

Term	Definition
1. ___ Transmission	A) Shame that discourages honest health choices
2. ___ Barrier methods	B) Ongoing, freely given agreement and boundaries
3. ___ Vaccination	C) Protection that reduces contact with fluids/skin
4. ___ Stigma	D) How an infection spreads from person to person
5. ___ Consent	E) Prevention tool that prepares the immune system before exposure

Fill-in-the-Blank

1. Many STIs can be _____, meaning symptoms may not show.

2. Condoms and dental dams are examples of _____ methods.

3. A respectful relationship makes it safe to discuss _____ and boundaries.

Short Answer

Answer each question in 2-4 complete sentences.

1. Explain why appearance is not a reliable way to know if someone has an STI.

_____

_____

_____

2. Using the table, explain one reason vaccines can be a powerful prevention tool.

_____

_____

_____

3. Write one respectful sentence a teen could use to start a health conversation without blaming or shaming.

_____

_____

_____