

Sexual Health Teaching Kit Information Sheet

The *Sexual Health Teaching Kit* is a resource containing samples of various contraceptive methods, barriers methods to prevent against sexually transmitted infections (STIs), and teaching aids to assist in the education of students. Not all items listed are appropriate for all ages/grades/developmental levels. The products shown in the Sexual Health Kit are examples of products available.

The Kit Contains:

- Male Condoms
- Female Condoms
- Dental Dam
- Vaginal Contraceptive Ring
- Transdermal Patch (picture)
- Intrauterine Device/System (IUD/IUS)
- Birth Control Pills (picture)
- Emergency Contraceptive Pill (picture)
- Vaginal Model
- Penis Model
- Sexual Health Clinic Tear off sheets

Contents of this kit are for educational purposes only and are not to be used outside of the classroom. Durham Region Health Department does not endorse the use of any particular brand, although some products are limited in brand availability.

A description of each product and instructions on use is provided below. Links to demonstration videos on the aids are also provided.

Please refer to our Sexual Health Clinic for funded services that are available, such as information on contraceptive methods, free condoms, free STI testing and pregnancy options counselling. <https://www.durham.ca/en/health-and-wellness/sexual-health.aspx#Services-available>

Male Condom

Acts as a barrier to prevent pregnancy and STIs. Never use two condoms together (male-male; female-male; latex-poly etc.) as friction between materials breaks them down. Dual protection using hormonal contraceptives and a male condom is recommended for prevention of pregnancy. Only condoms are effective in preventing both unintended pregnancy and STIs. Male condoms are 95-98% effective at preventing pregnancy with PERFECT use, and 82% effective with TYPICAL use.

How to Use a Male Condom:

1. Obtain consent from partner
2. Check expiration date (do not use if expired)
3. Check for air bubbles or holes in the package by squeezing gently and see if there is a small pocket of air indicating there are no holes
4. Open package carefully as to not tear condom inside
5. Pinch tip of condom to prevent air and pressure from breaking the condom. This space at the tip of the condoms allows space for semen
6. While pinching the tip, place on penis, and roll condom down the shaft on erect penis
7. Intercourse
8. Ejaculation/orgasm
9. While penis is still erect, hold base of condom and pull out
10. Remove condom from penis and carefully tie in a knot
11. Throw condom in garbage (do not flush down toilet)

Video Demonstration: <https://teachingsexualhealth.ca/teachers/resource/condom-demonstration-video/>

Penis Model

This model illustrates the correct anatomy of the male penis and testes. This model can be used to demonstrate how to apply a male condom as described above.

Female Condom

Acts as a barrier to prevent pregnancy and STIs. Never use two condoms together (male-male; female-male; latex-poly etc.) as friction between materials breaks them down. Dual protection using hormonal contraceptives and a female condom is recommended for prevention of pregnancy. Only condoms are effective in preventing both unintended pregnancy and STIs. Female condoms are 95% effective in preventing pregnancy with PERFECT use and 79% effective with TYPICAL use.

How to Use a Female Condom:

1. Check expiration date (do not use if expired)
2. Tear condom package carefully as to not tear condom inside
3. Squeeze flexible ring at the closed end of condom and insert the closed end of the condom into the vagina. One end of the condom will have an opening for the penis to enter
4. Place a clean index finger inside the condom and gently push the inner ring into the vagina as far as it will go. Do not twist the condom. The external ring at the open end of the condom sits outside the vagina providing some protection
5. Guide the penis inside the center of the condom
6. After intercourse, twist the outer ring so that no semen leaks out during removal
7. Throw condom in garbage (do not flush down toilet)

Note: Condom can be placed in vagina up to 8 hours before intercourse

Video demonstration: <https://teachingsexualhealth.ca/teachers/resource/using-a-vaginal-condom/>

Vaginal Model

The vaginal model illustrates the correct anatomy of the female reproductive system and surrounding anatomy. This model can be used to demonstrate how to insert a female condom as described above.

Dental Dam

Acts as a barrier between mouth/tongue and a partner's vagina or anus. A dental dam can protect against STIs during oral sex (mouth to vagina) and for rimming (mouth to anus).

How to Use a Dental Dam

1. Check expiration date (do not use if expired)
2. Tear package carefully and remove dental dam
3. Place the barrier over the vagina or anal opening (put a few drops of water-based, latex-friendly lubricant between the dam and vagina/anus. It will make it more sensitive and will likely hold in place better)
4. Make sure to keep one side towards you and the other towards your partner (do not reuse or flip the dam over)
5. Use your hands to hold the dam in place or ask your partner to hold it in place
6. A new barrier should be used for each sexual act
7. Carefully fold the dental dam up to remove it, only touching your own side
8. Use each barrier once only and throw away in the garbage (do not flush down the toilet)

Note: A condom can be turned into a dental dam as well. While the condom is still rolled up, cut the tip off. Then cut through one side of the rolled condom. Unroll the condom and you will now have a rectangular piece of material that can be spread out over a vagina or anus to act as a barrier.

Video Demonstration: <https://teachingsexualhealth.ca/teachers/resource/using-a-dental-dam/>

Vaginal Model

The vaginal model illustrates the correct anatomy of the female reproductive system and surrounding anatomy. This model can be used to demonstrate how to insert a female condom as described above.

Vaginal Ring (VR)

This produce requires a prescription. Please consult your HCP or sexual health clinic nurse prior to using this method of contraception. VR contains estrogen and progestin hormones that stops the release of an egg, changes the lining of the uterus and thickens vaginal secretions to prevent pregnancy. The ring is inserted into the vagina against the cervix, where it releases hormones into the bloodstream through mucous membranes. The VR is 91%-99.7% effective at preventing pregnancy. The ring must be inserted far enough into the vagina that it should not be felt by the women anytime or bother either partner during sex. Side effects tend to be minor and usually go away after a couple of months. The ring can be used in combination with barrier methods or spermicides, but not other hormonal methods and does not protect against STIs. **Nicotine consumption (i.e., smoking or vaping) increases risk of serious heart and blood vessel problems from combination hormonal contraceptives (CHCs) including heart attack, blood clots, or stroke which can be fatal.**

How to Use Vaginal Contraceptive Ring (NuvaRing):

1. Check the expiry date (do not use if expired)
2. Wash and dry your hands
3. Carefully tear package open and remove ring
4. Grasp ring between your thumb and index finger and squeeze sides to make to a narrow oval shape
5. Insert into vagina as high as possible using your index finger to push it further up (find a comfortable position to do this in, such as lying down, squatting or standing with one leg up)
6. The ring may move around slightly within your vagina. This is normal
7. Keep ring in vagina for 3 weeks. After 3 weeks, remove ring by inserting clean finger into vagina and hooking finger around ring and pulling out
8. Throw away the ring by placing it back into the re-sealable foil pouch it came out of and put it in the garbage (do not flush down the toilet)
9. After 1 week of no ring (this is when your period will come), restart with step 1

Additional Information: <https://www.nuvaring.com/how-to-use-nuvaring/>

<https://www.teensource.org/birth-control/ring>

Transdermal Patch

This product requires a prescription. Please consult your HCP or sexual health clinic nurse prior to using this method of contraception. A transdermal patch contains estrogen and progestin hormones that stop the release of an egg, change the lining of the uterus, and thicken vaginal secretions to prevent pregnancy. The patch is a sticker that is applied sticky side down to skin. Estrogen and progestin are absorbed through the skin and blood stream to prevent pregnancy. The patch will stay on during showers, swimming, exercise etc., and is between 91%-99% effective in preventing pregnancy if used correctly. The patch does not protect against STIs. Side effects tend to be minor and usually go away after a couple of months. The patch can be used in combination with barrier methods and spermicides, but not other hormonal methods. **Nicotine consumption (i.e., smoking or vaping) increases risk of serious heart and blood vessel problems from combination hormonal contraceptives (CHCs) including heart attack, blood clots, or stroke which can be fatal.** To be fully effective at preventing pregnancy, the patch must be worn for a full menstrual cycle before intercourse. The patch may reduce period symptoms such as cramping. The patch is reversible, when someone stops using it they can get pregnant.

How to Use a Transdermal Patch (Evra):

1. Check expiry date (do not use if expired)
2. Tear one package open carefully (there should be 3 packages of patches in each package grouping. Use one patch per week)
3. Remove patch from packaging and remove plastic covering over sticky side of patch
4. Apply sticky side of patch to clean, dry, hairless area of the body (upper arms, buttocks, abdomen or torso, not the breast) as per manufacturer's instructions
5. Remove patch and replace with a new patch after 7 days (place new patch in a different spot on the body to reduce skin irritation)
6. After 3 weeks and 3 patches have been used, discontinue use of patch for 1 week (this is when your period will come)
7. After menstruation week, repeat instructions

Additional Information: <https://www.sexandu.ca/contraception/hormonal-contraception/#tc2>

Birth Control Pill (Contraceptive Pills)

This produce requires a prescription. Please consult your HCP or sexual health clinic nurse prior to using this method of contraception. The birth control pill contains estrogen and progestin (or progestin only hormones) that stop the release of an egg, change the lining of the uterus and thicken vaginal secretions to prevent pregnancy. The pill is taken orally at the same time every day, releasing hormones into the blood stream through the digestive system. Birth control pills are between 91% to 99% effective at preventing pregnancy when used correctly. Birth control pills do not prevent STIs and can be used in combination with barrier methods and spermicides, but not other hormonal methods. **Nicotine consumption (i.e., smoking or vaping) increases risk of serious heart and blood vessel problems including heart attack, blood clots, or stroke which can be deadly.** To be fully effective at preventing pregnancy, the pill needs to be taken at the same time very day for a full cycle (28 days) before intercourse.

How to Use Birth Control Pills or Contraceptive Pills:

1. Check expiry date of the package (do not use if expired)
2. Take ONE PILL EVERY DAY AT THE SAME TIME starting at the beginning of the package (from left to right). Traditional pills are set up with pills for 3 weeks (21 days), followed by a pill-free week or week of placebo pills (sugar pills) which contain no hormones. While taking the placebo or sugar pills you will get your period. Some oral contraceptive brands can include options with lower doses of hormones and as little as two days of placebo pills to minimize hormone fluctuation and side effects.
3. Refer to your HCP, the sexual health clinic, or the manufacturers website package insert to answer questions about when to start your pills and what to do if a pill is missed or taken late.

Additional Information: <https://www.sexandu.ca/contraception/hormonal-contraception/#tc1>

Intrauterine Device/System (IUD)

This product requires a prescription. Please consult your HCP or sexual health clinic nurse prior to using this method of contraception. An IUD is inserted by a physician in a clinical setting through the vagina and cervix into the uterus, where it protects against pregnancy. Prior to insertion, a health care provider (HCP) may test for pregnancy and vaginal infections/STIs; presence of either will postpone insertion until resolved. IUDs may be copper or hormonal. Both the copper and hormonal IUDs change the lining, consistency, and thickness of the uterus; this helps prevent implantation in uterus. IUDs also prevent fertilization of the egg by damaging or killing sperm. Hormonal IUDs may also prevent ovulation. The IUD strings need to be checked monthly to ensure continued correct placement. An IUD can remain in place for up to 3-5 years or be removed by a physician at any time. IUDs do not prevent against STIs. IUDs are 99.9% effective at preventing pregnancy. IUDs are reversible; pregnancy can occur if IUD is removed.

Note: This method of contraception may lead to absence of period or irregular periods.

Additional Information: <https://www.sexandu.ca/contraception/hormonal-contraception/#tc4>

Emergency Contraceptive Pill (ECP)

No prescription is needed for ECP (sometimes referred to as the “morning after pill”). ECP is taken by a person with a vulva to prevent pregnancy after unprotected sex, or another method fails. ECP contained progestin hormone that stops the release of an egg and changes the lining of the uterus to prevent implantation. It is most effective when taken within 24 hours of intercourse, but somewhat effective up to 5 days after. ECP has an 89% overall effective rate. ECP does not end a pregnancy that has already occurred. ECP does not prevent against STIs.

Additional information: <https://www.sexandu.ca/contraception/emergency-contraception/>