



## Sexual Risk Taking: For Better or Worse

Tammy Wyatt

### ABSTRACT

*Risk assessment can be an effective pedagogical strategy for sexuality education. Objectives: After learning about the modes of transmission and prevention strategies of sexually transmitted infections (STIs), students engaged in this teaching technique will define sexual intercourse and sexual activity, assess the level of STI risk associated with eight sexual behaviors, and identify positive alternatives to each sexual behavior. Target Audience: This activity is designed for use with adolescents in high school and youth group settings, and it can be used in teacher preparation programs.*

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### INTRODUCTION

Definitions of sexual behaviors vary widely among educational programs, and adolescents' definition of sexual activity most often does not include oral or anal sex, both of which may contribute to misinformation about sexually transmitted infections' (STIs) transmission.<sup>1</sup> Risk assessment involves examining the level of risk associated with a particular behavior. Assisting a young person in understanding and defining his or her perceptions of risk taking, to include opportunities for success as well as potential for negative outcomes, is essential to risk assessment.<sup>2,3</sup> The purpose of this activity is for young people, in a group setting, to assess the degree of risk in, and effectively communicate their opinions related to, sexual behaviors. This lesson is designed to serve

as an extension activity to an in-depth and medically accurate discussion on STIs and effective sexual health promotion strategies. After learning about the various STIs, modes of transmission, and prevention strategies, students should be able to apply and evaluate the learned information to "real-life" scenarios. This instructional strategy is unique in that it provides a clear set of risk assessment discussion items while promoting healthy and safer alternative behaviors to sexual intercourse and sexual activity. This activity may be replicated with other forms of health risk behaviors such as negative dietary patterns to include ranking snack or menu choices from less healthy to more healthy. Other health risk behaviors suitable for this type of lesson include violence and alcohol abuse. In this lesson, students could

rank different behaviors in these categories from less risky to more risky.

### OBJECTIVES

Upon completion of this lesson, students will be able to:

- Define sexual intercourse and sexual activity.
- Through the process of risk assessment, review eight sexual risk behaviors and assess the degree of STI transmission risk for each behavior.
- Through the process of risk assessment,

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*Tammy Wyatt is an associate professor in the Department of Health and Kinesiology, University of Texas San Antonio, San Antonio, TX 78249; E-mail: tammy.wyatt@utsa.edu*



**Figure 1**

**I: Glossary of Sexual Behavior Terminology (For Instructor/Facilitator Use Only)**

- Anal sex – sexual intercourse that involves penetration of the anus
- Anilingus – oral stimulation of a partner’s anus
- Cunnilingus – oral stimulation of a female’s genitals (vulva)
- Fellatio – oral stimulation of a male’s penis
- Fondling – to handle, stroke, or caress one’s genitals for sexual pleasure
- Masturbation – stimulation of one’s own genitals for sexual pleasure
- Mutual masturbation – two individuals masturbating one another simultaneously
- Oral sex – stimulation of a partner’s genitals or anus with one’s mouth and tongue
- Outercourse – genital stimulation without penetration; rubbing of genitals without penetration
- Sexual activity involves behaviors of a sexual nature that do not include intercourse such as fondling, masturbation, and/or outercourse
- Sexual intercourse involves vaginal penetration, anal penetration, or oral stimulation (fellatio, cunnilingus, or anilingus) between two individuals
- Vaginal sex – sexual intercourse that involves penetration of the vagina

**II: STI Transmission Matrix**

Sexually Transmitted Infection (STI)	Mode of Transmission Due to Sexual Behaviors <sup>6</sup>
Chlamydia	Sexual intercourse and activity; exchange of sexual fluids (semen/vaginal secretions)
Gonorrhea	Sexual intercourse and activity; exchange of sexual fluids (semen/vaginal secretions)
Herpes	Sexual contact with infected area (external genitals, vagina, anus); skin to skin contact
HIV/AIDS	Sexual intercourse and activities in which blood or sexual fluids (semen/vaginal secretions) are able to enter the bloodstream
Human Papillomavirus (HPV)	Sexual contact with infected area (external genitals, vagina, anus; cervix); skin to skin contact
Syphilis	Sexual intercourse and activity; contact with sexual fluids (semen/vaginal secretions); direct contact with fluid from chancre

identify positive alternative behaviors and/or ways to practice safer sexual behaviors.

**MATERIALS AND RESOURCES**

A glossary of sexual behavior terminology and STI transmission matrix (Figure 1) is provided to assist the instructor in facilitating introductory discussion items. Each small group of 4-5 students will need Figure 2 (Sexual Behaviors), Figure 3 (Group Rankings), and one card from Figure 4 (Risk Assessment Card, which actually includes 8 cards). Additionally, a sample grading rubric

for the instructor to complete is included in Figure 5.

**TARGET AUDIENCE**

This activity is designed for use with adolescents in high school and youth group settings, and it can be used in teacher preparation programs.

**PROCEDURE**

This activity requires approximately 1-1/2 hours to complete and may be divided into multiple sessions. If, due to time

constraints, multiple sessions are needed, it is suggested that the activity be separated as follows: (1) for a two-session activity (approximately 45 minutes each), combine the Introduction and Part 1 for session one and combine Part 2 and Part 3 for session two; and (2) for a three-session activity (approximately 30 minutes each), combine the Introduction and begin Part 1 for session one, complete Part 1 and Part 2 for session two, and complete Part 3 during session three. Timing could be lengthened or shortened by adjusting group discussions.



**Figure 2. Sexual Behaviors**

Behavior	Example
SAFER SEX	Individual is sexually active and uses barrier methods correctly and consistently 100% of the time when engaging in oral, anal, and vaginal intercourse.
ANAL SEX	Individual engages in unprotected anal sex with partner at last intercourse.
ORAL SEX	Individual engages in oral sex with multiple partners without the use of barrier methods.
OUTER SEX	Individual engages in outercourse with partner without the use of barrier methods.
SAME SEX	Individual engages in same-sex behaviors with a single partner and uses barrier methods correctly 100% of the time.
SEX UNDER THE INFLUENCE	Individual, under the influence of alcohol/drugs, has sexual intercourse with an acquaintance and the use of barrier methods is unknown.
MOST SEX	Individual engages in fondling with multiple partners without the use of barrier methods but uses barrier methods most of the time during the act of oral and vaginal intercourse.
HAND SEX	Individual engages in mutual masturbation with multiple partners and never uses barrier methods.

**LESSON INTRODUCTION**

To begin the activity, the instructor should ask students to verbally define intercourse. The instructor should make sure that the discussion includes the various forms of intercourse, i.e., vaginal, anal and oral. Next, the instructor should ask students to verbally define sexual activity, making certain the discussion includes the various sexual activities that do not include intercourse behaviors such as fondling, masturbation and outercourse. This introductory discussion should take approximately 10-15 minutes. A brief review (approximately 10 minutes) of STI modes of transmission should follow wherein students examine the various types of sexual behaviors (vaginal intercourse, oral intercourse, fondling, masturbation, and so forth) and the potential for STI transmission for each sexual behavior. See Figure 1 for a glossary of sexual behavior terminology and STI transmission matrix.

**Part 1: Small Group Rankings**

The instructor should divide the class into groups of 4-5 students and distribute Figure 2 (Sexual Behaviors) and Figure 3 (Group Ranking) to each group. The in-

structor should ask each group to create a definition for the terms sexual activity and sexual intercourse based upon the previous class discussion. Next, the instructor should ask each group to rank order the behaviors listed in Figure 2 from least risky (1) to most risky (8). Similarly, the instructor should have each group indicate the reasoning behind the group ranking, i.e., what is the group’s overall definition of least risky and most risky. The instructor should inform each group that there are no right or wrong answers to the ordered ranking—just the group’s agreed upon decision. For example, one group may indicate that the most risky behavior is the behavior that is most likely to transmit HIV and the least risky behavior is the behavior that is the least likely to transmit HIV. Groups are encouraged to justify their rankings based upon input from all group members. All responses should be written on Figure 3 (Group Ranking). This phase of the activity should take approximately 20-25 minutes.

**Part 2: Large Group Discussion**

A spokesperson for each group should make a class presentation regarding their

rankings and the reasoning behind their rankings based upon their overall definition of most and least risky. Each group should be given approximately 2-3 minutes to present and justify the rankings. The instructor should write each small group’s rankings on the chalk/dry erase board, allowing the class to visually view the results. Comparisons of the small group rankings and overall definitions of most and least risky should be discussed. This phase of the activity should take approximately 25 minutes to complete.

**Part 3: Closure Activity**

Lastly, the instructor should distribute one of the eight Risk Assessment Cards, presented in Figure 4, to each small group. (Alternatively, this activity could be completed as an individual assessment.) This final assessment requires that groups (or individuals) conduct a risk-benefit analysis as well as establish alternative behaviors and/or safer sex practices. Questions being examined for each sexual behavior include: What are the potential negative risks to this behavior? What are the potential benefits to engaging in this behavior? How might this behavior put others or me at risk? What are



### Figure 3. Group Ranking

Group Members Names:

_____	_____	_____
_____	_____	

Define the term sexual activity:

Define the term sexual intercourse:

Group Overall Definition of what a "Most Risky" behavior means:

Group Overall Definition of what a "Least Risky" behavior means:

Group Ranking [write the names of the behaviors below in order from least risky to most risky]:

Least Risky	1. _____
	2. _____
	3. _____
	4. _____
	5. _____
	6. _____
	7. _____
	8. _____
Most Risky	

ways to engage in this behavior that are enjoyable and safe? What are alternatives to this behavior? The responses to these questions will vary. Based upon the responses, further discussion of this topic may be needed. In-

structors may refer to the STI Transmission Matrix (located at the end of Figure 1) or the following online resources: Sexuality Information and Education Council of the United States (SIECUS) Questions and

Answers – STDs and HIV Factsheets<sup>4</sup> or the Centers for Disease Control and Prevention (CDC) – Sexually Transmitted Diseases Fact Sheets<sup>5</sup> for appropriate responses related to potential negative risk(s). The benefits



**Figure 4. Risk Assessment Card – 8 cards**

The purpose of this activity is to assess the degree of risk associated with each behavior as well as identify alternative behaviors that are safer and more health enhancing.

**Directions:** From the sexual behavior scenario provided at the top of the card, please answer the 5 questions that follow. (This information will be printed at the top of each of the 8 cards.)

SAFER SEX	Individual is sexually active and uses barrier methods correctly and consistently 100% of the time when engaging in oral, anal and vaginal intercourse.
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What are the potential negative risks of this behavior?

What are the potential benefits to engaging in this behavior?

How might this behavior put others or me at risk?

What are ways to engage in this behavior that are enjoyable and safe?

What are alternatives to this behavior?

ANAL SEX	Individual engages in unprotected anal sex with partner at last intercourse.
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What are the potential negative risks of this behavior?

What are the potential benefits to engaging in this behavior?

How might this behavior put others or me at risk?

What are ways to engage in this behavior that are enjoyable and safe?

What are alternatives to this behavior?

ORAL SEX	Individual engages in oral sex with multiple partners without the use of barrier methods.
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What are the potential negative risks of this behavior?

What are the potential benefits to engaging in this behavior?

How might this behavior put others or me at risk?

What are ways to engage in this behavior that are enjoyable and safe?

What are alternatives to this behavior?

**Figure 4. Risk Assessment Card – 8 cards (Con't)**

OUTER SEX	Individual engages in outer-course with partner without the use of barrier methods.
<p>What are the potential negative risks of this behavior?</p> <p>What are the potential benefits to engaging in this behavior?</p> <p>How might this behavior put others or me at risk?</p> <p>What are ways to engage in this behavior that are enjoyable and safe?</p> <p>What are alternatives to this behavior?</p>	
SAME SEX	Individual engages in same-sex behaviors with one partner and uses barrier methods correctly 100% of the time.
<p>What are the potential negative risks of this behavior?</p> <p>What are the potential benefits to engaging in this behavior?</p> <p>How might this behavior put others or me at risk?</p> <p>What are ways to engage in this behavior that are enjoyable and safe?</p> <p>What are alternatives to this behavior?</p>	
SEX UNDER THE INFLUENCE	Individual, under the influence of alcohol/drugs, has sexual intercourse with an acquaintance and the use of barrier methods is unknown.
<p>What are the potential negative risks of this behavior?</p> <p>What are the potential benefits to engaging in this behavior?</p> <p>How might this behavior put others or me at risk?</p> <p>What are ways to engage in this behavior that are enjoyable and safe?</p> <p>What are alternatives to this behavior?</p>	



**Figure 4. Risk Assessment Card – 8 cards (Con't)**

MOST SEX	Individual engages in fondling with multiple partners without the use of barrier methods but uses barrier methods most of the time during the act of oral and vaginal intercourse.
<p>What are the potential negative risks of this behavior?</p> <p>What are the potential benefits to engaging in this behavior?</p> <p>How might this behavior put others or me at risk?</p> <p>What are ways to engage in this behavior that are enjoyable and safe?</p> <p>What are alternatives to this behavior?</p>	
HAND SEX	Individual engages in mutual masturbation with multiple partners and never uses barrier methods.
<p>What are the potential negative risks of this behavior?</p> <p>What are the potential benefits to engaging in this behavior?</p> <p>How might this behavior put others or me at risk?</p> <p>What are ways to engage in this behavior that are enjoyable and safe?</p> <p>What are alternatives to this behavior?</p>	

and alternatives to each behavior will vary and are determined by the adolescent(s). Possible responses related to benefits of engaging in each behavior may include intimacy with another person, physical pleasure, or pregnancy prevention. Methods of engaging in each behavior more safely may include the use of barrier methods such as condoms or dental dams, limiting the number of sexual partners, and/or getting tested for various STIs prior to becoming sexually active with a partner. Alternatives to each behavior may include other sexual behaviors such as kissing, fondling, cuddling and masturbation or non-sexual behaviors such as spending time with friends. This

closure activity should take approximately 20 minutes to complete.

**ASSESSMENT TECHNIQUE**

There are several assessment options within this teaching idea. Instructors may assess students' comprehension, applications of terms, and rankings (from their group discussions and/or oral presentations to the class) and/or assign a group participation grade. Additionally, the completion of Figure 3 and Figure 4 can be evaluated based upon the written responses for sexual activity, sexual intercourse, "most risky," "least risky," potential risks, potential benefits, safer sex practices, and/or alternative behaviors. A

sample assessment rubric for the instructor to complete is provided in Figure 5.

**REFERENCES**

1. Nicoletti A. The definition of abstinence. *J Pediatr Adolesc Gynecol.* 2005;18:57-58.
2. Ponton L. *The Romance of Risk—Why Teenagers Do the Things They Do.* New York: Basic Books; 1997.
3. Wyatt T, Peterson F. Risky business: Exploring adolescent risk-taking behaviors. *J Sch Health.* 2005;75:229-231.
4. Sexuality Information and Education Council of the United States. *Fact Sheets Questions and Answers: Sexually Transmitted Diseases and HIV/AIDS.* Available at: <http://www.siecus.org>



**Figure 5. Sample Grading Rubric**

Using the scale following each item, circle the appropriate assessment. Next, calculate a total score by summing the points associated with each item. Refer to the grade calculations at the bottom of this grading rubric to determine a final letter score.

1. The student demonstrated a clear understanding of the definitions of sexual intercourse and sexual activity, either orally or in written form.

*Strongly Agree (3pts)*      *Agree (2pts)*      *Disagree (1pt)*      *Strongly Disagree (0pts)*

2. \*\*The student/group completed a rank ordering of behaviors and provided a clear justification for the group's rankings (least to most risky) of sexual behavior.

*Strongly Agree (3pts)*      *Agree (2pts)*      *Disagree (1pt)*      *Strongly Disagree (0pts)*

3. \*\*The student/group provided a complete and clear written response to the risk assessment discussion items in Figure 3.

*Strongly Agree (3pts)*      *Agree (2pts)*      *Disagree (1pt)*      *Strongly Disagree (0pts)*

4. \*\*The student/group provided alternative behaviors and/or ways to practice safer sexual behaviors.

*Strongly Agree (3pts)*      *Agree (2pts)*      *Disagree (1pt)*      *Strongly Disagree (0pts)*

5. The student actively engaged in the group process and large group discussions.

*Strongly Agree (3pts)*      *Agree (2pts)*      *Disagree (1pt)*      *Strongly Disagree (0pts)*

**Grade Calculations:**

- Score of 14 or above = A
- Score of 12 or 13 = B
- Score of 11 = C
- Score of 9 or 10 = D
- Score of 8 or below = F

\*\*Items 2, 3 and 4 may be scored individually or as a group.

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5. Centers for Disease Control and Preven-

tion. Sexually Transmitted Diseases Fact Sheets. Available at: [http://www.cdc.gov/std/health-comm/fact\\_sheets.htm](http://www.cdc.gov/std/health-comm/fact_sheets.htm). Accessed December 17, 2009.

6. Hamann B. Disease Identification, Prevention, and Control. Boston, MA: McGraw Hill; 2007.