

LEARNING STRAND 2 SCIENTIFIC AND CRITICAL THINKING SKILLS

MODULE 6: WHY IS PREVENTION BETTER THAN CURE?

ALS Accreditation and Equivalency Program: Junior High School





WHY IS PREVENTION BETTER THAN CURE?

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MODULE 6**

ALS Accreditation and Equivalency Program: Junior High School
Learning Strand 2: Scientific and Critical Thinking Skills
Module 6: Why Is Prevention Better Than Cure?

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User's Guide

For the ALS Learner:

Welcome to this Module entitled Why Is Prevention Better Than Cure? under Learning Strand 2 Scientific and Critical Thinking Skills of the ALS K to 12 Basic Education (BEC).

This module was designed to provide you with fun and meaningful opportunities for guided and independent learning at your own pace and time. You will be able to process the contents of the learning resource while being an active learner.

This module has the following parts and corresponding icons:



Let's Get to Know

This will give you an idea of the skills or competencies you are expected to learn in the module.



Pre-assessment

This part includes an activity that aims to check what you already know about the lesson. If you get all the answers correct (100%), you may decide to skip this module.



Setting the Path

This section provides a brief discussion of the lesson. This aims to help you discover and understand new concepts and skills.



Trying This Out

This comprises activities for independent practice to solidify your understanding and skills of the topic. You may check the answers to the exercises using the Answer Key at the end of the module.



Understanding What You Did

This includes questions that process what you learned from the lesson.



Sharpening Your Skills

This section provides an activity that will help you transfer your new knowledge or skill in real-life situations or concerns.



Treading the Road to Mastery

This is a task which aims to evaluate your level of mastery in achieving the given learning competency.



Don't Forget

This part serves as a summary of the lessons in the module.



Explore More

In this portion, another activity will be given to you to enrich your knowledge or skill of the lesson learned. This also tends retention of learned concepts.



Reach the Top

This part will assess your level of mastery in achieving the learning competencies in each lesson in the module.

Answer Key

This contains answers to all activities in the module.

Glossary

This portion gives information about the meanings of the specialized words used in the module.

At the end of this module you will also find:

References

This is a list of all sources used in developing this module.

The following are some reminders in using this module:

1. Use the module with care. Do not put unnecessary mark/s on any part of the module. Use a separate sheet of paper in answering the exercises.
2. Don't forget to answer the Pre-assessment before moving on to the other activities included in the module.
3. Read the instruction carefully before doing each task.
4. Observe honesty and integrity in doing the tasks and checking your answers.
5. Finish the task at hand before proceeding to the next.
6. Return this module to your ALS Teacher/Instructional Manager/Learning Facilitator once you are through with it.

If you encounter any difficulty in answering the tasks in this module, do not hesitate to consult your ALS Teacher/Instructional Manager/Learning Facilitator. Always bear in mind that you are not alone.

We hope that through this material, you will experience meaningful learning and gain deep understanding of the relevant competencies. You can do it!

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MODULE 6

LET'S GET TO KNOW



Josh is scrolling through social media when he encounters viral posts about chlamydia, HIV, AIDS, and other reproductive health disorders. Not knowing what to believe, Josh gets more confused than enlightened. According to his media literacy class, Josh needs to be able to discern real and fake news. Let us help Josh in learning about reproductive health.



MODULE 6

PRE-ASSESSMENT

Directions: Choose the letter of the best answer. Write your answers on a separate sheet of paper.

1. Which body system consists of testicle, penis, and prostate in males, and uterus, ovary, cervix, vagina, and vulva in females?
 - a. reproductive system
 - b. circulatory system
 - c. digestive system
 - d. nervous system
2. Which of the following is a symptom of breast cancer?
 - a. pressure or pain in the pelvic area
 - b. fluid coming out of the nipple, especially if it is blood
 - c. bleeding or discharge from the vagina that is not normal
 - d. itching, bleeding, burning or sores around the opening of the vagina that do not go away
3. Which of the following best describes a mammogram?
 - a. a blood test to show signs of cancer
 - b. a collection of sample cells to check for cervical cancer
 - c. a screening of breast cancer through an x-ray test
 - d. a removal of skin tissue to examine symptoms of cancer
4. Which of the following is NOT a cause of penile cancer?
 - a. weak flow of urine
 - b. being aged 50 years old or older
 - c. undescended testicle
 - d. using tobacco products

MODULE 6

5. Which of the following is NOT a form of cancer treatment?
- a. skin biopsy
 - b. chemotherapy
 - c. hormone therapy
 - d. surgery
6. Which of the following refer to Republic Act 10354?
- a. Universal Healthcare
 - b. Responsible Parenthood and Reproductive Health
 - c. National Health Insurance
 - d. Graphic Health Warnings
7. Which of the following is NOT an element of RA 10354?
- a. family planning information and services
 - b. male responsibility and involvement
 - c. epidemiologic surveillance systems
 - d. Prevention, treatment, and management of infertility or sexual dysfunction
8. Which of the following is NOT prevented or managed by RA 10354?
- a. reproductive tract infections
 - b. HIV/AIDS
 - c. sexually-transmitted infections
 - d. violence against women and children
9. Which of the following is classified under hospital-based family planning services?
- a. intrauterine device (IUD)
 - b. emergency obstetric (childbirth) care
 - c. contraceptives
 - d. updated training on the delivery of reproductive health care services

MODULE 6

10. Which of the following is NOT an employer's responsibility towards women according to RA 10354?
- non-discrimination
 - distribution of contraceptives
 - regularization of employment status
 - selection for retrenchment
11. Which of the following is NOT true about sexually-transmitted infections (STI)?
- persons with STI will exhibit symptoms of infections
 - oral sex does not give you STI
 - each type of STI has its own treatment
 - a person can only have one STI at a time
12. Which of the following is false about the menstrual cycle?
- light spotting is normal in the early part of pregnancy and should not be perceived as menstrual bleeding
 - severe menstrual cramping is not normal
 - women who experience severe menstrual cramps may have endometriosis
 - menstruation is triggered by traumatic events or experiences
13. Which of the following is true about pregnancy?
- semen contains sperm which can make a woman pregnant
 - a female cannot get pregnant if she didn't have her first period yet
 - pre-ejaculate fluid cannot make a woman pregnant
 - during an unprotected sex, a woman will not pregnant

14. Which of the following is true about contraceptives?
- a. contraceptives are not effective
 - b. condoms can prevent HIV and STI if used consistently and correctly
 - c. contraceptives cause abortion
 - d. contraceptives improves fertilization during sexual intercourse
15. Which of the following is false about sex education?
- a. mandatory sex education will destroy the family
 - b. morality is compromised when people are educated about sex
 - c. sex education promotes safe sexual intercourse
 - d. HIV rates increase because of sex education



LESSON 1

SETTING THE PATH

HOW DO I TAKE CARE OF MY REPRODUCTIVE SYSTEM?

At the end of this lesson, you will be able to:



identify common ailments of the reproductive system according to cause/s (LS2SC-BC-PSD-AE/JHS-48);



identify common ailments of the reproductive system according to symptom/s (LS2SC-BC-PSD-AE/JHS-48) and;



cite ways to prevent ailments of the reproductive system (LS2SC-BC-PSD-AE/JHS-49).



LESSON 1

TRYING THIS OUT

1. On a separate sheet of paper draw the figure given below. Encircle and label the following parts of the male reproductive system.

- a. penis
- b. prostate
- c. testicle

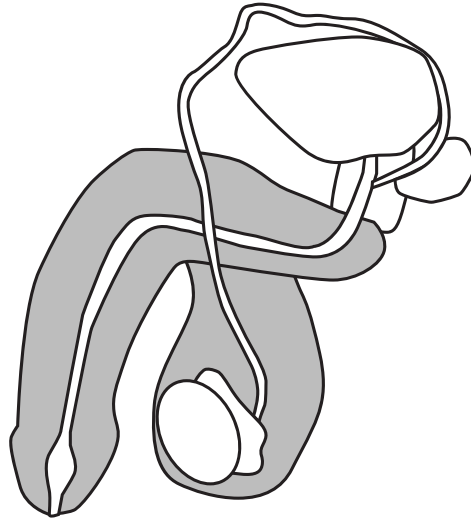


Figure 1.1. Male reproductive system.

2. On a separate sheet of paper draw the figure given below. Encircle and label the following parts of the female reproductive system.

- a. cervix
- b. ovary
- c. uterus
- d. vagina
- e. vulva

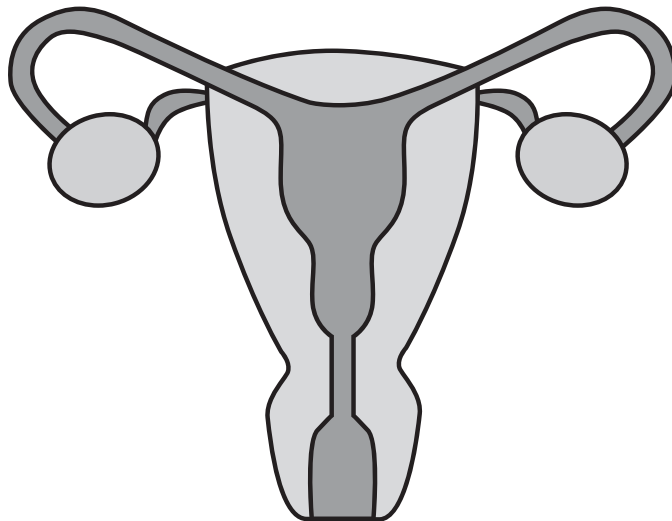


Figure 1.2. Female reproductive system.



LESSON 1

UNDERSTANDING WHAT YOU DID

The parts that you identified are the most common areas of the reproductive system where cells can grow too much that they become unhealthy. If left unchecked, those cells may become a deadly disease called **cancer**.

Growing of Cancer Cell

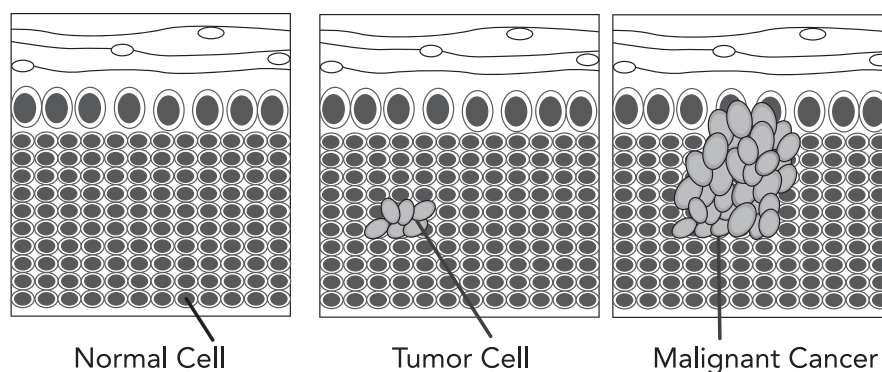


Figure 1.3. Growth of cancer cells.

Reproductive cancer is a type of cancer found in the organs related to reproduction. The most common reproductive organs in women which may develop cancer are the breast, cervix, ovaries, vagina, vulva, and uterus. The table below shows the location, symptom/s, and cause/s of each type of cancer.

Table 1. Location, Sign/s and Symptom/s and Cause/s of Reproductive Cancers in Women

TYPE OF CANCER	Breast
LOCATION	Breast <ul style="list-style-type: none">tissues of the breast
SIGN/S AND SYMPTOM/S	<ul style="list-style-type: none">a lump in the breastfluid coming out of nipple, especially if it is bloodchanges to skin of the breast or around the nipple

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LESSON 1

CAUSE/S	<ul style="list-style-type: none">• being 55 years old or older• someone in your family having had breast cancer (for example, mother or a sister)• smoking• drinking alcohol
----------------	--

TYPE OF CANCER	Cervical
LOCATION	Cervix <ul style="list-style-type: none">• lower end of the uterus that extends to the vagina
SIGN/S AND SYMPTOM/S	<ul style="list-style-type: none">• bleeding or discharge from the vagina that is not normal• may not show any symptom
CAUSE/S	<ul style="list-style-type: none">• smoking• having HIV or a weak immune system• persistence of high-risk human papillomavirus (HPV).

TYPE OF CANCER	Ovarian
LOCATION	Ovaries <ul style="list-style-type: none">• the two organs that produce female hormones and a woman's eggs
SIGN/S AND SYMPTOM/S	<ul style="list-style-type: none">• bleeding or discharge from the vagina that is not normal• pressure or pain in the pelvic area• pressure or pain in the abdomen (belly) or back• bloating

LESSON 1

	<ul style="list-style-type: none"> • feeling full quickly while eating • changes in bathroom habits (constipation, blood in urine or stool)
CAUSE/S	<ul style="list-style-type: none"> • being 40 years or older • someone in your family having had cancer of the ovary, breast, or colon • being of Eastern European Jewish descent

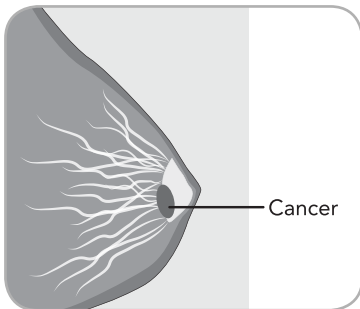
TYPE OF CANCER	Vaginal	
LOCATION	Vagina <ul style="list-style-type: none"> • hollow channel from the uterus and cervix leading to the outside of the body 	
SIGN/S AND SYMPTOM/S	<ul style="list-style-type: none"> • watery vaginal discharge • painful urination 	<ul style="list-style-type: none"> • constipation • pelvic pain • frequent urination
CAUSE/S	<ul style="list-style-type: none"> • having cervical pre-cancer or cancer • having HIV or a weak immune system 	<ul style="list-style-type: none"> • smoking • multiple sexual partners • having HPV

TYPE OF CANCER	Vulvar	
LOCATION	Vulva <ul style="list-style-type: none"> • the area around the opening of the vagina 	
SIGN/S AND SYMPTOM/S	<ul style="list-style-type: none"> • itching, bleeding, burning, a rash or sores around the opening of vagina that do not go away • changes in color of skin around the opening of the vagina 	
CAUSE/S	<ul style="list-style-type: none"> • having cervical pre-cancer or cancer • having HIV or a weak immune system 	<ul style="list-style-type: none"> • smoking • multiple sexual partners • having HPV

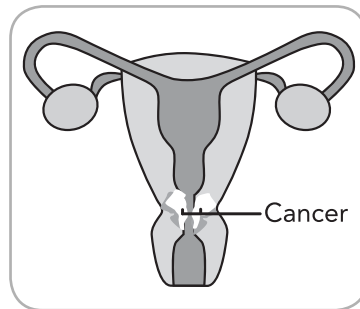
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LESSON 1

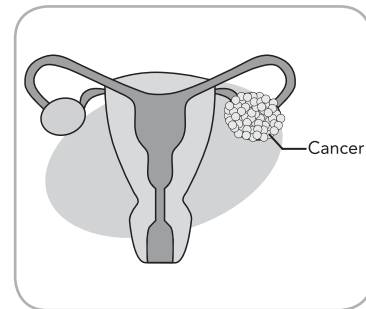
TYPE OF CANCER	Uterine
LOCATION	Uterus <ul style="list-style-type: none"> • hollow muscular organ that is located in the female pelvis between the bladder and rectum
SIGN/S AND SYMPTOM/S	<ul style="list-style-type: none"> • bleeding or discharge from the vagina that is not normal • bleeding after sex • pressure or pain in the pelvic area • bleeding after menopause
CAUSE/S	<ul style="list-style-type: none"> • being 50 years or older • someone in your family having had cancer of the uterus, ovary, or colon • changes in the balance of female hormones in the body • being overweight.



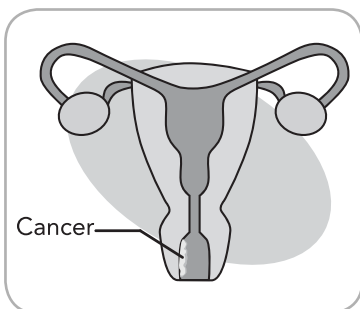
Breast Cancer



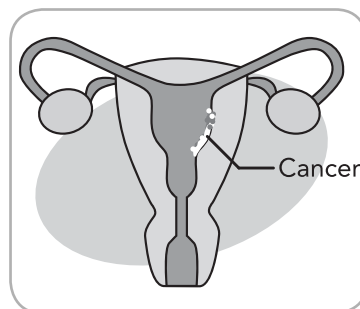
Cervical Cancer



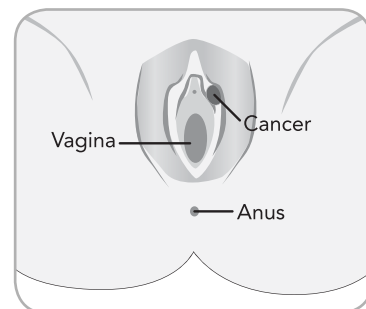
Ovarian Cancer



Vaginal Cancer



Uterine Cancer



Vulvar Cancer

Figure 1.4. Reproductive cancers in females.

LESSON 1

Reproductive cancers have different causes also known as **risk factors**, these causes can increase the chance of developing reproductive cancers. Some risk factors cannot be changed (due to age or from family history), or related to your environment (eating habits, exercise, vices).

Similar to its causes, each type of reproductive cancer has different symptoms. It is important that you, or anybody you know, consult a doctor immediately if any of these symptoms start to appear. Identifying these cancers, called **screening**, in its earliest stage can help prevent the cancer from getting worse.

There are screening tests for breast cancer and cervical cancer:

- **Mammogram:** Breast cancers are screened through an x-ray test. Women between 50 and 74 years old at average risk for breast cancer are recommended to get a mammogram every two years. At 40 to 49 years old, women should start talking to their doctors about getting a mammogram.

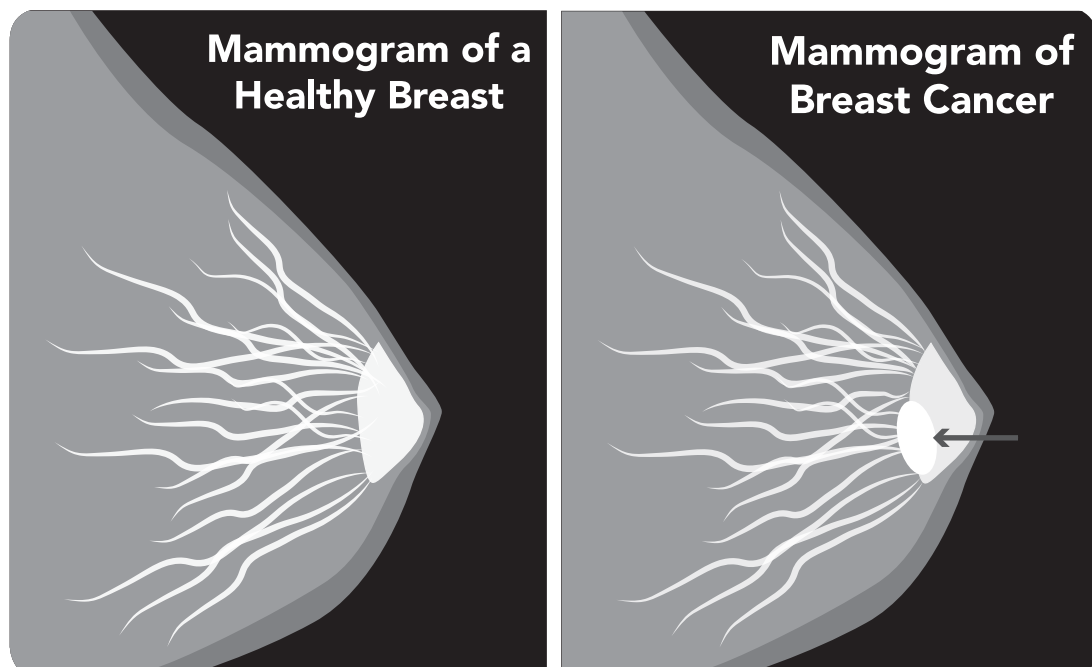


Figure 1.5. Mammogram image of normal (healthy) and abnormal (cancer-containing) breasts.

LESSON 1

- **Pap smear (or cervical cytology):** A sample of cells is taken from the cervix during a pelvic exam to check for cervical cancer, pre-cancer, and HPV, which is the virus associated with causing most cervical cancers. Beginning at age 21, a woman should have a Pap smear every three years. Beginning at age 30, Pap smears are done along with an HPV test every five years.

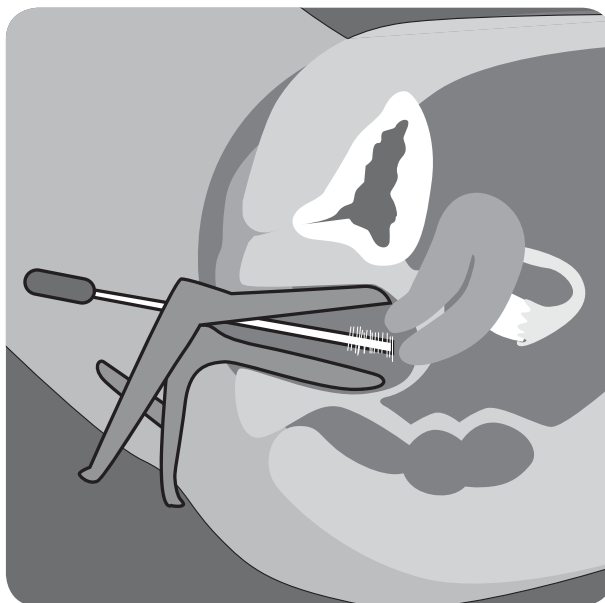


Figure 1.6. Pap smear process.

There are no screening tests for other reproductive cancers. **Diagnostic tests** can be used to find cancers in people who have symptoms. The type of diagnostic test used to find reproductive cancer depends on the type of cancer. These tests include:

- **Lab tests:** Blood tests that sometimes show signs of cancer.
- **Tests** that help healthcare providers “see” inside the body, such as:
 - X-ray
 - Ultrasound
 - MRI scan
 - CT scan



LESSON 1

SHARPENING YOUR SKILLS

I. **Directions:** On the first space, write C if the item is a cause of reproductive cancer and S if it is a symptom.

On the second space, write C if it refers to cervical cancer, O if it refers to ovarian cancer, U if it refers to uterine cancer, VA if it refers to vaginal cancer, VU if it refers to vulvar cancer, and B if it refers to breast cancer.

Write all of your answers on a separate sheet of paper.

- ___ ___ 1. a lump in the breast
- ___ ___ 2. having HPV; having cervical pre-cancer or cancer
- ___ ___ 3. changes to skin of the breast or around the nipple
- ___ ___ 4. bleeding after sex
- ___ ___ 5. being of Eastern European Jewish descent; never giving birth
- ___ ___ 6. bloating
- ___ ___ 7. changes in color of skin around the opening of the vagina.
- ___ ___ 8. bleeding or discharge from the vagina that is not normal.
- ___ ___ 9. itching, bleeding, burning, a rash or sores around the opening of vagina that do not go away.
- ___ ___ 10. fluid coming out of nipple, especially if it is bloody.
- ___ ___ 11. smoking and drinking alcohol
- ___ ___ 12. having HIV or a weak immune system; persistence of high-risk human papillomavirus (HPV)
- ___ ___ 13. bleeding after menopause
- ___ ___ 14. being overweight
- ___ ___ 15. pressure or pain in the abdomen (belly) or back

LESSON 1

Men can also have reproductive cancers. The most common types are testicular, penile, and prostate cancer. Table 2 shows the characteristics of each type.

Table 2. Location, Symptom/s and Cause/s of Reproductive Cancers in Men

TYPE OF CANCER	Testicular
LOCATION	Testes <ul style="list-style-type: none">• two egg-shaped glands that make the sperm in the scrotum (ball sac) near the base of the penis
SIGN/S AND SYMPTOM/S	<ul style="list-style-type: none">• a feeling of heaviness in the scrotum• pain, discomfort, lump, or swelling in the testis itself, aching in the lower abdomen (belly)• smelly discharge (fluid) or bleeding under the foreskin
CAUSE/S	<ul style="list-style-type: none">• abnormal testicle development• having a family history of testicular cancer

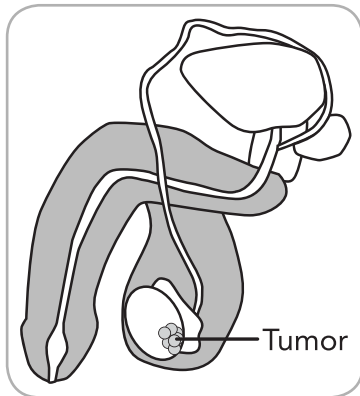
TYPE OF CANCER	Penile
LOCATION	Penis <ul style="list-style-type: none">• part of the external genitals
SIGN/S AND SYMPTOM/S	<ul style="list-style-type: none">• redness, discomfort, sore, or lump on the penis
CAUSE/S	<ul style="list-style-type: none">• having human papillomavirus (HPV)• being uncircumcised• being age 60 or older• having many sexual partners• using tobacco products

TYPE OF CANCER	Prostate
LOCATION	Prostate <ul style="list-style-type: none">• a gland inside the pelvis (the area in the lower belly between the hip bones) that surrounds the urethra (the tube that empties the bladder)
SIGN/S AND SYMPTOM/S	<ul style="list-style-type: none">• weak flow of urine, blood in urine, pain in the back, hips, or pelvis (lower belly between the hips)• needing to pass urine often

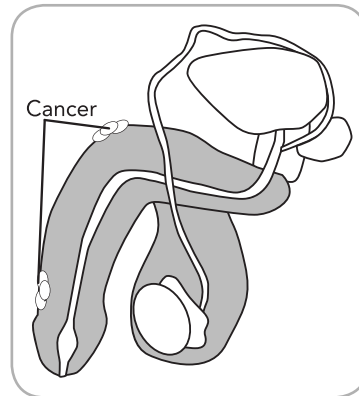
LESSON 1

CAUSE/S

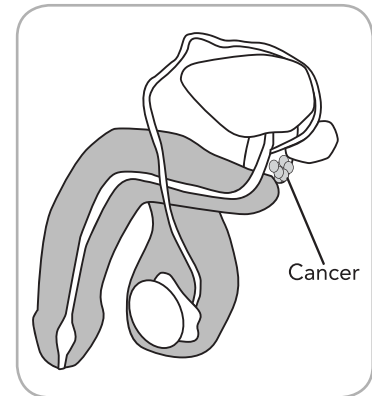
- being aged 50 years old or older
- having a family history of prostate cancer
- tends to start at younger ages and grow faster among African American men



Testicular Cancer



Penile Cancer



Prostate Cancer

Figure 1.7. Reproductive cancers in males.

Reproductive cancers are often treated with surgery, chemotherapy (medicine to kill cancer cells), hormone therapy (medicine to block hormones that are related to cancer growth), radiation, or a combination used together. An oncologist (cancer doctor) can help you select the right treatment(s) for any specific reproductive cancer.

Because reproductive cancers and their treatment can possibly affect a man's ability to have children, it is advised that they consult healthcare providers if they hope to have babies in the future.

LESSON 1

II. Directions: On the first space, write **C** if the item is a cause of reproductive cancer and **S** if it is a symptom.

On the second space, write **T** if it refers to testicular cancer, **E** if it refers to penile cancer, and **O** if it refers to prostate cancer.

Write all of your answers on a separate sheet of paper.

- ___ ___ 1. aching in the lower abdomen (belly)
- ___ ___ 2. pain in hips
- ___ ___ 3. redness of the penis
- ___ ___ 4. undescended testicle
- ___ ___ 5. soreness of the penis
- ___ ___ 6. needing to pass urine often
- ___ ___ 7. swelling of the testis
- ___ ___ 8. pain in the back
- ___ ___ 9. having many sexual partners
- ___ ___ 10. weak flow of the urine
- ___ ___ 11. being aged 50 years and older
- ___ ___ 12. being uncircumcised
- ___ ___ 13. blood in the urine
- ___ ___ 14. common in African American men
- ___ ___ 15. pain in pelvis



LESSON 1

TREADING THE ROAD TO MASTERY

Directions: Read the article below about reproductive health.

Human papillomavirus (HPV) is a virus that is spread during sexual contact. There are about 40 different strains (types) of HPV that can infect the genital area. About a dozen of these can cause cancer.

There are two types or strains of HPV:

- **Low-risk strains:** Low-risk strains of HPV can cause warts on the genitals. Warts can be itchy, embarrassing, and unpleasant, but these strains are considered low risk because they do not cause cancer.
- **High-risk strains:** High-risk strains do not cause warts but can, rarely, cause cancer. This is why they are called high-risk strains.

Most adults will have an HPV infection at some time during their lives. HPV infections almost always clear up on their own without treatment. A person with a high-risk strain of HPV that does not clear up on its own over many years could eventually get cancer.

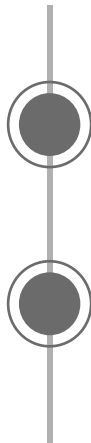
Answer the following questions on a separate sheet of paper.

1. What is the main cause of HPV?
2. What are the signs and symptoms of HPV?
3. How can you prevent HPV?



HOW CAN THE COMMUNITY HELP IN TAKING CARE OF MY REPRODUCTIVE HEALTH?

At the end of this lesson, you will be able to:



identify health services in the community (LS2SC-BC-PSD-LE/AE/JHS-51); and

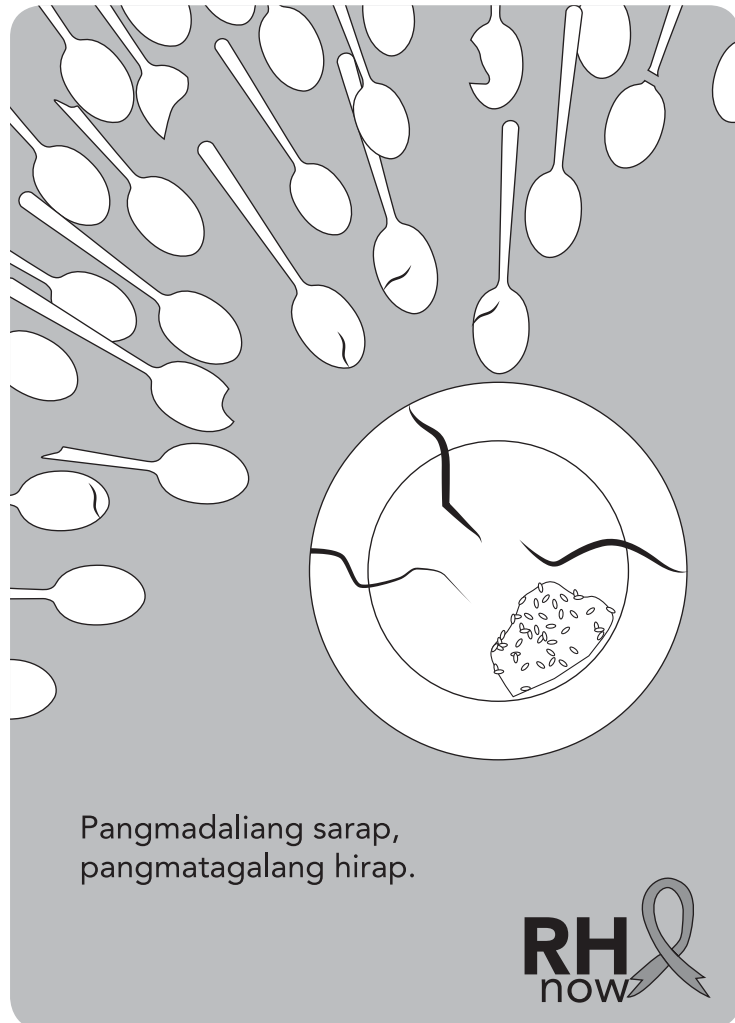
enumerate programs in the community that take care of reproductive health (LS2SC-BC-PSD-LE/AE/JHS-52).



LESSON 2

TRYING THIS OUT

1. You are browsing through social media when you see the advertisement (ad) below:



2. *Questions:*

- a. What do you think is the ad about? What do the spoons and plate symbolize?
- b. What is the ad trying to say (message/meaning)?
- c. How do you feel about the message of the ad?



LESSON 2

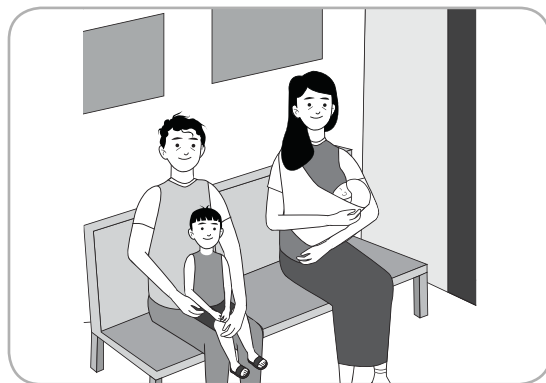
UNDERSTANDING WHAT YOU DID

On 18 December 2012, the Reproductive Health Bill was enacted by the Philippine Congress to become **Republic Act No. 10354 on Responsible Parenthood and Reproductive Health**. Three days later, it became a law after being signed by the President of the Philippines.

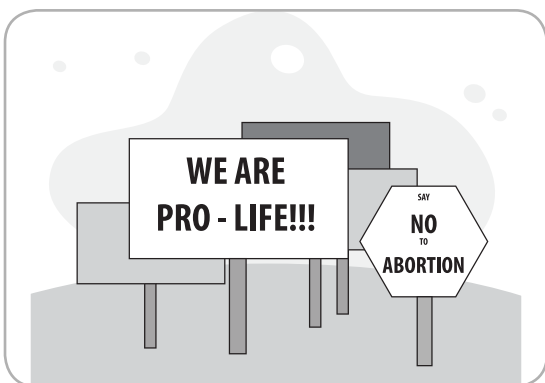
Commonly known as the **RH Law**, RA 10354 provides the following (called **elements**):



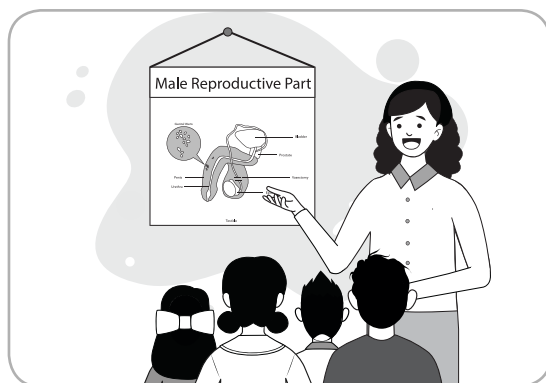
1. Family planning information and services



2. Maternal, infant and child health and nutrition, including breast feeding



3. Prevention of abortion and management of post-abortion complications



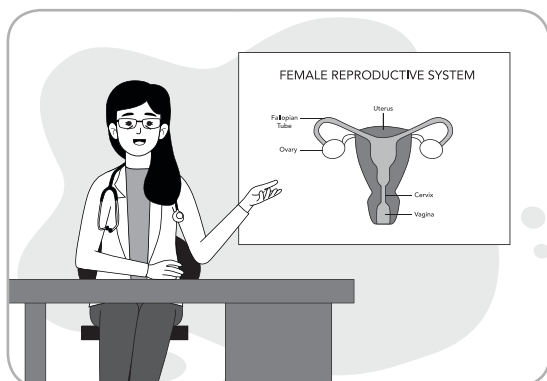
4. Adolescent and youth reproductive health guidance and counseling



5. Prevention and management of reproductive tract infections (RTIs), HIV/AIDS and sexually transmitted infections (STIs)



6. Elimination of violence against women and children and other forms of sexual and gender-based violence



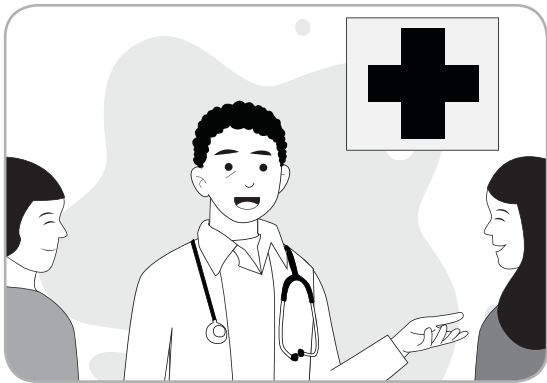
7. Education and counselling on sexuality and reproductive health



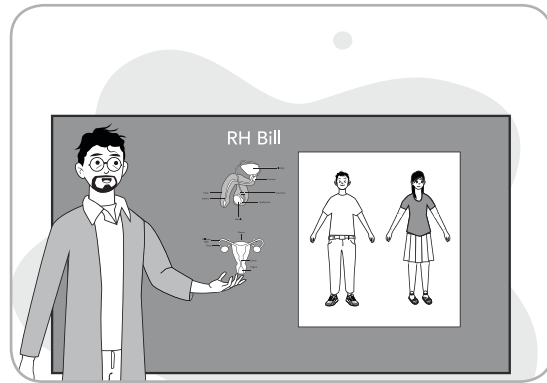
8. Treatment of breast and reproductive tract cancers and other gynecologic conditions and disorders

9. Male responsibility and involvement and men's RH





10. Prevention, treatment and management of infertility and sexual dysfunction



11. RH education for the adolescents



12. Mental health aspect of reproductive health care



LESSON 2

SHARPENING YOUR SKILLS

- I. **Directions:** Choose three (3) of your most preferred elements of the RH Law. Draw an eye-catching ad for each element that can educate people who will see it. Follow the format below on a separate sheet of paper.

Elements of RH Law: _____

LESSON 2

Aside from its elements, the RH Law also requires cities and municipalities to provide the following:

1. **Midwives and other skilled attendants for childbirth.**
2. **Emergency obstetric (childbirth) care**
3. **Hospital-based family planning** – family planning services such as ligation, vasectomy and intrauterine device (IUD) placement should be available in all government hospitals.

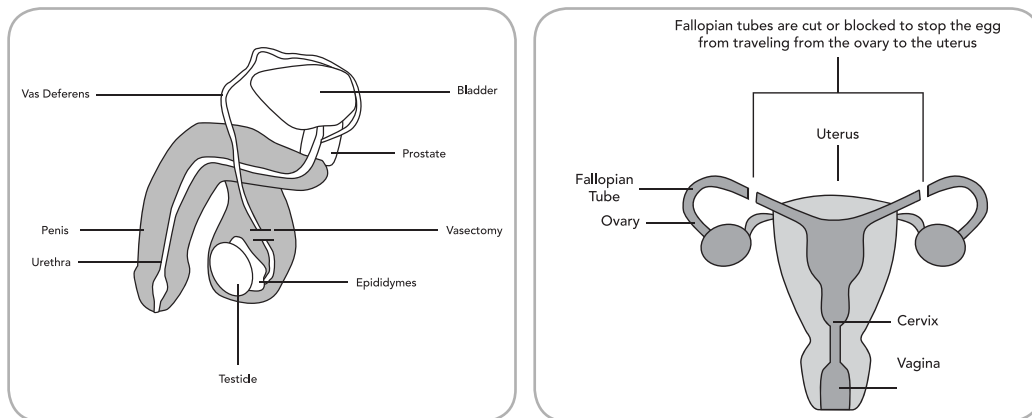


Figure 2.1. Vasectomy (left) and ligation (right).

4. **Contraceptives as essential medicines** – contraceptives (medicines used to prevent the sperm from fertilizing) and other reproductive health products shall be considered essential medicines and supplies. As part of the National Drug Formulary, the government is now allowed to buy contraceptives and not just depend on donations.

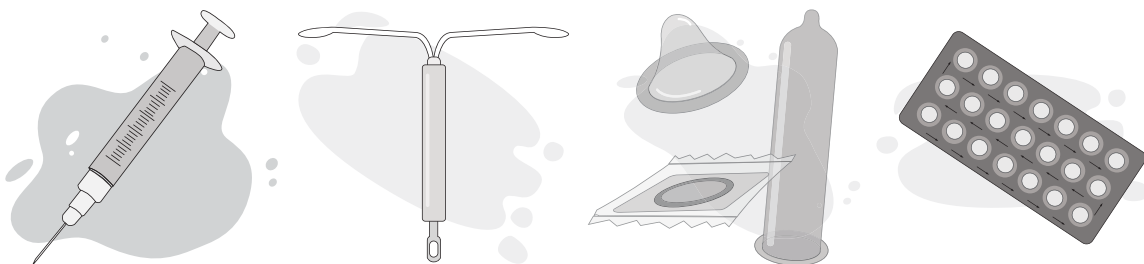


Figure 2.2. Common contraceptives.

LESSON 2

5. **Reproductive health education** - teachers are now allowed to educate students, at an appropriate age, about reproductive health education.
6. **Employers' responsibilities** - women shall not be discriminated during hiring, regularization of employment status or selection for retrenchment (lay-off from jobs).
7. **Capability-building of community-based workers** - workers from the community shall undergo additional and updated training on the delivery of reproductive health care services and shall receive additional payments after successfully completing the training.

II. Directions: Using social media, speak with a local health center representative or official and ask if they can readily provide midwives, emergency childbirth care, family planning services, contraceptives, RH education, and training on reproductive healthcare services. Write your answer to the following questions on a separate sheet of paper.

1. Is your health center providing all services mentioned in our lesson?
If not, why?
2. What is the reproductive health service in your health center that people look for the most? Why?
3. Are there missing reproductive health services in your health center?
Why?



LESSON 2

TREADING THE ROAD TO MASTERY

Directions: Using social media, ask your local health center about the two (2) most common problems regarding reproductive health in your community. Write your answers to the following questions on a separate sheet of paper.

1. What programs have they made to address these problems? Discuss each of them.
2. How can you help in addressing this problem?
3. How can you avoid being a part of this problem?



WHAT ARE THE COMMON MISCONCEPTIONS ABOUT REPRODUCTIVE HEALTH?

At the end of this lesson, you will be able to:



identify the misconceptions about reproductive health (LS1CS/EN-S-PSB-LE/JHS-13); and



explain the correct ideas on the misconceptions about reproductive health (LS1CS/EN-S-PSB-LE/JHS-13).

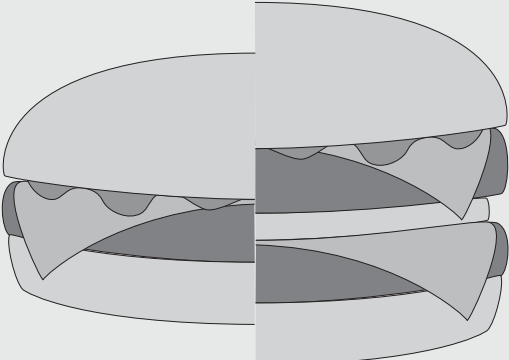


LESSON 3

TRYING THIS OUT

1. Analyze the poster.

RESTAURANT PREP TIME	ADVERTISING PREP TIME
<p>APPROX 3 MINS TO ASSEMBLE BY OUR DEDICATED CREW</p>	<p>APPROX 4 HOURS WITH HELP FROM: LIGHTING FOOD STYLIST PHOTOGRAPHER EDITING PHOTOSHOP</p>



2. *Questions:*

- a. How is a fact different from a myth?
- b. Why do people often believe in myths?
- c. How important is discovering the truth and sharing it with other people?



LESSON 3

UNDERSTANDING WHAT YOU DID

In any advertisement, business owners tend to distort reality in order to make a product pleasing to the buyers. Unlike the poster, it exposes the Expectations vs. Reality dilemma among its consumers. The poster showed the difference between the product being advertised to the one being sold, thereby clarifying a misconception in commercials.

Similar to advertisements, people have misconceptions about reproductive health. This is commonly due to the many negative perceptions of the public. Here are several misconceptions about reproductive health:

A. On Menstrual Cycle

MISCONCEPTION	FACT
1. Menstrual bleeding means you are not pregnant.	Light spotting is normal in the early part of a pregnancy. This is known as implantation bleeding.
2. Severe menstrual cramps is normal.	Severe menstrual cramping is not normal. It may be a symptom of Endometriosis. When several menstrual cramps happen too often, visiting a doctor is highly recommended.

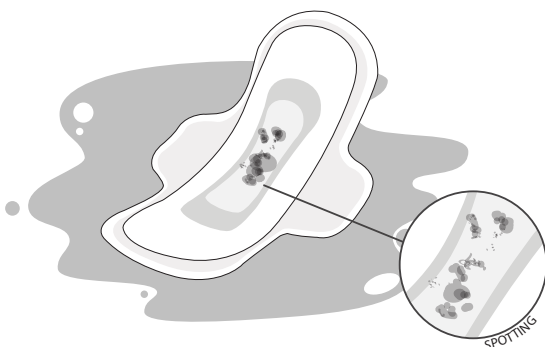


Figure 3.1. Spotting



Figure 3.2. Severe menstrual cramping

B. On sexually-transmitted infections (STI)

MISCONCEPTION	FACT
1. Persons with STI will exhibit symptoms of infection.	Symptoms of STI cannot be easily observed (called asymptomatic). Chlamydia is normally asymptomatic and is one of the leading causes of infertility.
2. Oral sex does not give you STI.	People can still have STI during oral sex. Examples of these are herpes, syphilis, gonorrhea, genital warts and hepatitis A.
3. You can only have one STI at a time.	Anybody can have more than one STI at a time. Each of these have their own treatment.

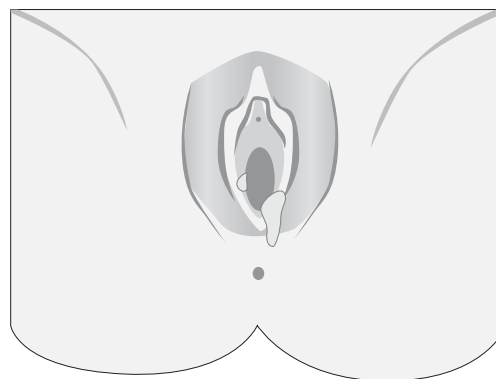


Figure 3.3. Chlamydia



Figure 3.4. Herpes, Syphilis, Genital Warts



LESSON 3

SHARPENING YOUR SKILLS

- I. **Directions:** Using social media, ask around in your family or community about their common perceptions (not mentioned above) on menstrual cycles and sexually transmitted infections. Identify at least two (2) for each. Are they myths or facts? Explain. Write your answers on a separate sheet of paper.

LESSON 3

C. On Pregnancy

MISCONCEPTION	FACT
1. Pre-ejaculate fluid cannot make a woman pregnant.	Semen contains sperm which can make a woman pregnant. Pre-ejaculate fluid does not contain sperm. However, if there is remaining sperm in the urethra after a previous ejaculation, pre-ejaculate fluid can pick it up and cause pregnancy.
2. A female cannot get pregnant if she did not have her first period yet.	A female can start ovulating even before she experiences menstrual bleeding. During an unprotected sex, she can still get pregnant.

OVULATION

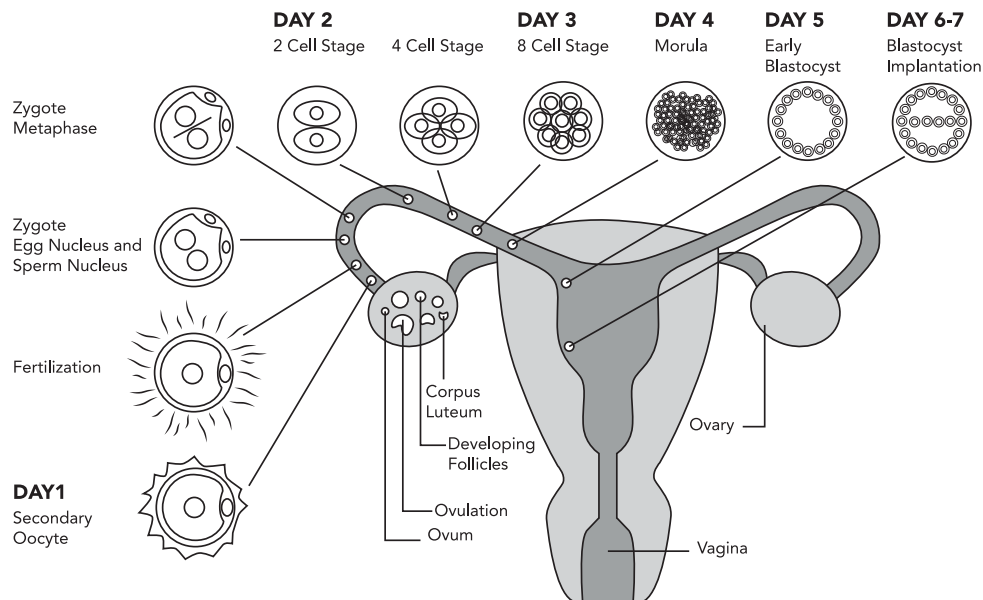


Figure 3.5. Ovulation

D. On Contraceptives and Sex Education

MISCONCEPTION	FACT
1. Condoms are not effective.	When used consistently and correctly, condoms can prevent HIV and STI. In a study, only 2 pregnancies were reported in an estimated 8,300 acts of sexual intercourse. The male latex condom is considered the most effective item.
2. Contraceptives cause abortion; life begins at fertilization, so contraceptives kill children.	Contraceptives do not cause abortion since it prevents fertilization during sexual intercourse. It has reduced abortion rates by 85% in the past years.
3. Contraceptives are dangerous to health and can cause cancer.	No scientific study has proven the link of contraceptives to cancer. Contraceptives have been proven safe worldwide.
4. Mandatory sex education and contraceptives will destroy the family, compromise morality, increase promiscuity and promote HIV infection.	Sex education promotes safe sexual intercourse. It aims to prevent STI and even lessen promiscuity.

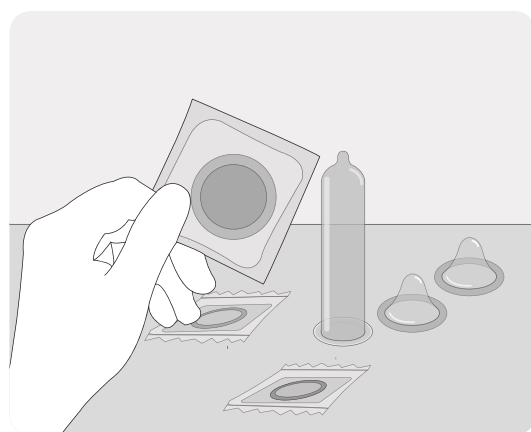


Figure 3.6. Condoms

LESSON 3

II. Directions: Using social media, ask around in your family or community about their common perceptions (not mentioned above) on pregnancy and the use of contraceptives. Identify at least two (2) for each. Are they myths or facts? Explain. Write your answers on a separate sheet of paper.

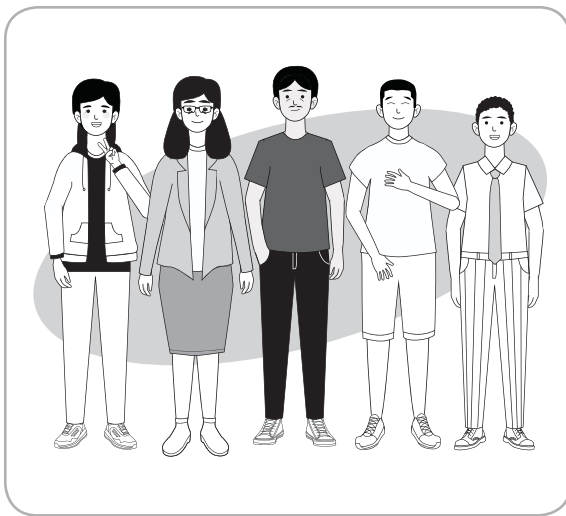


LESSON 3

TREADING THE ROAD TO MASTERY

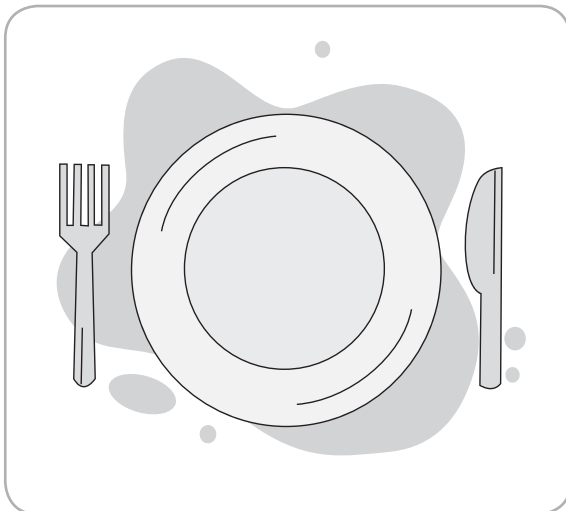
Directions: Below are five myths on human immunodeficiency virus (HIV) and acquired immune deficiency syndrome (AIDS). Explain the facts to prove that each statement is a myth. Write your answers on a separate sheet of paper.

TOP 5 MYTHS OF HIV / AIDS



MYTH #1

It is not possible to live a 'normal life' with HIV / AIDS.



MYTH #2

HIV can be transmitted through sharing of items like cutlery, cups, dishes, or towels.



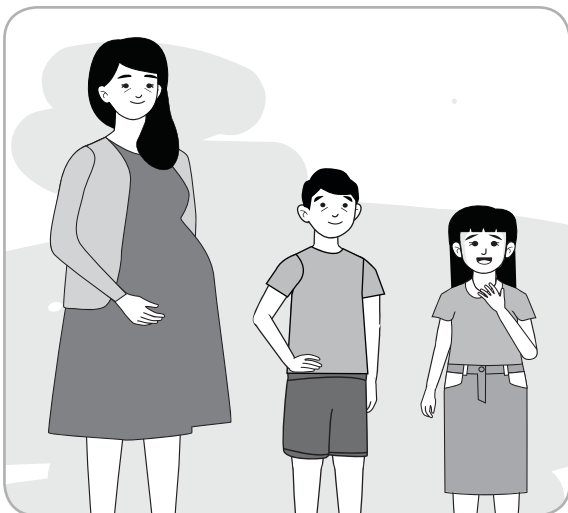
MYTH #3

You can have sex with someone who is HIV positive without risk of getting an HIV.



MYTH #4

Individuals who use drugs can only get HIV if they share needles or syringes.



MYTH #5

A woman who is infected with HIV / AIDS has 50 % possibility to transfer the disease to her child/children.



MODULE 6

DON'T FORGET



- The most common **reproductive cancers of women** are:
 - 1) cervical cancer
 - 2) ovarian cancer
 - 3) uterine cancer
 - 4) vaginal cancer
 - 5) vulvar cancer

- The most common **reproductive cancers of men** are:
 - 1) testicular cancer
 - 2) penile cancer
 - 3) prostate cancer

- The Elements of the **RH Law** are:
 - 1) family planning information and services
 - 2) maternal, infant and child health and nutrition, including breast feeding
 - 3) prevention of abortion and management of post-abortion complications
 - 4) adolescent and youth reproductive health guidance and counseling
 - 5) prevention and management of Reproductive Tract Infections (RTIs), HIV/AIDS and Sexually Transmitted Infections (STIs),
 - 6) elimination of violence against women and children and other forms of sexual and gender-based violence





- 7) education and counselling on sexuality and reproductive health
 - 8) treatment of breast and reproductive tract cancers and other gynecologic conditions and disorders
 - 9) Male responsibility and involvement and men's RH
 - 10) prevention, treatment and management of infertility and sexual dysfunction
 - 11) RH education for the adolescents and
 - 12) mental health aspect of reproductive health care
- **There are several misconceptions about reproductive health.** Knowing the facts will help in the prevention and cure of its disorders.





MODULE 6

EXPLORE MORE

For additional activities related to the topics of this module, these resources may be helpful:

Myths About Sex: Debunked

https://www.youtube.com/watch?v=pCKf1_yYOCY

Reproductive Cancers – Family Planning

<https://www.familyplanning.org.nz/advice/reproductive-cancers>

Reproductive Cancers (Types, Causes, Screening and Treatment)

<https://www.plannedparenthood.org/learn/cancer>

Reproductive Systems: An Interactive Game

- **Female:** <https://naturalsciences.didactalia.net/resource/female-reproductive-system-side-view-easy/21e9d611-2494-45d7-a760-4d74ef8bdf32>
- **Male:** <https://naturalsciences.didactalia.net/resource/male-reproductive-system-front-view-easy/eb9fe2b8-b774-4dfe-9607-af658768576e>

Responsible Parenthood and Reproductive Health Act of 2012: Republic Act 10354

https://lawphil.net/statutes/repacts/ra2012/ra_10354_2012.html

Sexual Health Information for Teens

<https://www.plannedparenthood.org/learn/teens>

The Science of HIV/AIDS

<https://www.youtube.com/watch?v=FDVNdn0CvKI>



MODULE 6

REACH THE TOP

You are almost done! Answer the following questions below on a separate sheet of paper.

I. Write T if the underlined word/words make the statement true. If not, write F.

- ___ 1. A cause of breast cancer is fluid coming out of a nipple, especially if it is blood
- ___ 2. Cervical cancer can be found at the lower end of the uterus that extends to the vagina.
- ___ 3. Bleeding or discharge from the pelvic area that is not normal is a symptom of ovarian cancer.
- ___ 4. Vaginal cancer can be caused by smoking.
- ___ 5. Uterine cancer can be found in women with ages 50 years or younger.
- ___ 6. An undescended testis is a possible cause of testicular cancer.
- ___ 7. An uncircumcised man may develop penile cancer.
- ___ 8. If there is a strong flow of urine and back pains in man, he may have prostate cancer.
- ___ 9. Chemotherapy is a medicine to block hormones that are related to cancer growth.
- ___ 10. A cancer doctor is also known as a gynecologist.

II. Write T if the underlined word/words make the elements of RH Law. If not, write F.

- ___ 1. Family planning information and services
- ___ 2. Maternal, infant and child health and nutrition, including breast feeding
- ___ 3. Promotion of abortion and management of post-abortion complications.

- ___ 4. **Adolescent** and youth reproductive health guidance and counseling.
- ___ 5. Elimination of violence against women and **men** and other forms of sexual and gender-based violence.
- ___ 6. Education and counselling on **maturity** and reproductive health.
- ___ 7. **Children** responsibility and involvement
- ___ 8. Prevention, treatment, and management of **infertility** and sexual dysfunction.
- ___ 9. RH Education for the **adolescents**
- ___ 10. **Spiritual** health aspect of reproductive health care.

III. Write **M** if the statement refers to a misconception of reproductive health and **F** if it is a fact.

- ___ 1. Menstrual bleeding means you are not pregnant.
- ___ 2. Severe menstrual cramping is not normal.
- ___ 3. Symptoms of STI cannot be easily observed.
- ___ 4. You can only have one STI at a time.
- ___ 5. Pre-ejaculate fluid cannot make a woman pregnant.
- ___ 6. During an unprotected sex, a woman can still get pregnant.
- ___ 7. Condoms are not effective.
- ___ 8. Contraceptives cause abortion.
- ___ 9. Contraceptives have been proven safe worldwide.
- ___ 10. Sex education aims to prevent STI and even lessen promiscuity.

ANSWER KEY

PRE-ASSESSMENT

PAGE 2

- | | |
|-------|-------|
| 1. A | 11. C |
| 2. B | 12. D |
| 3. C | 13. A |
| 4. D | 14. B |
| 5. A | 15. C |
| 6. B | |
| 7. C | |
| 8. D | |
| 9. A | |
| 10. B | |

LESSON 1: HOW DO I TAKE CARE OF MY REPRODUCTIVE SYSTEM?

SHARPENING YOUR SKILLS

PAGE 14

ACTIVITY I

1. S, B
2. C, C
3. S, B
4. S, U
5. C, O
6. S, O
7. S, VU
8. S, C or S,O, or S,VA or S, U
9. S, VU
10. S, B
11. C, B
12. C, VA or VU
13. S, U
14. C, U
15. S, O

ANSWER KEY

ACTIVITY II

- | | |
|----------|----------|
| 1. S, T | 11. C, O |
| 2. S, O | 12. C, E |
| 3. S, E | 13. S, O |
| 4. C, T | 14. C, O |
| 5. S, E | 15. S, O |
| 6. S, O | |
| 7. S, T | |
| 8. S, O | |
| 9. C, E | |
| 10. S, O | |

TREADING THE ROAD TO MASTERY

PAGE 18

1. The main cause of HPV is during sexual contact.
2. Low-risk strains of HPV can cause warts on the genitals. High-risk strains do not cause warts but can, rarely, cause cancer.
3. Early treatment of HPV is important upon detection. If not, diagnosis after having multiple sexual partners is important to observe precautionary measures for immediate treatment.

ANSWER KEY

LESSON II: HOW CAN THE COMMUNITY HELP IN TAKING CARE OF MY REPRODUCTIVE HEALTH?

SHARPENING YOUR SKILLS ACTIVITY I

PAGE 24

Criterion	Exemplary (4)	Proficient (3)	Needs Improvement (2)	Poor (1)
Coverage of the Topic	Details on the poster capture the important information about the topic and increase the audience's understanding.	Details on the poster include important information but the audience may need more information to understand fully.	Details on the poster relate to the topic but are too general or incomplete. The audience needs more information to understand.	Details on the poster have little or nothing to do with the main topic.
Use of Graphics	All graphics are related to the topic and make it easier to understand.	All graphics are related to the topic and most make it easier to understand.	All graphics relate to the topic.	Graphics do not relate to the topic.
Mechanics	No grammatical, spelling or punctuation errors.	Almost no grammatical, spelling or punctuation errors	A few grammatical, spelling, or punctuation errors.	Many grammatical, spelling, or punctuation errors.

ANSWER KEY

ACTIVITY II

Rubric for Discussion of Results (on next page)

CRITERION	Exemplary (2)	Proficient (1)
Support/ Evidence (x3)	Argument is clearly supported by accurate evidence considered credible by the audience; there is sufficient detail to support the main points of the argument	Some evidence is provided, but information is not fully explained; important pieces of evidence have not been included; some data are relevant or credible but inaccurate
Clarity/ Conciseness (x2)	Sentences flow smoothly, are structurally correct, and convey the intended meaning; no wordiness	The majority of ideas expressed are awkward, incorrectly constructed, or wordy
Strategy/ Audience	Content, structure, and language of argument is geared to intended audience	Argument is missing a substantial portion of content required by audience

TREADING THE ROAD TO MASTERY

PAGE 27

Rubric for Discussion of Results

CRITERION	Exemplary (2)	Proficient (1)
Support/ Evidence (x3)	Argument is clearly supported by accurate evidence considered credible by the audience; there is sufficient detail to support the main points of the argument	Some evidence is provided, but information is not fully explained; important pieces of evidence have not been included; some data are relevant or credible but inaccurate
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ANSWER KEY

LESSON III: WHAT ARE THE COMMON MISCONCEPTIONS ABOUT REPRODUCTIVE HEALTH?

SHARPENING YOUR SKILLS

PAGE 32

ACTIVITY I AND ACTIVITY II

Rubric for Discussion of Results

CRITERION	Exemplary (2)	Proficient (1)
Support/ Evidence (x3)	Argument is clearly supported by accurate evidence considered credible by the audience; there is sufficient detail to support the main points of the argument	Some evidence is provided, but information is not fully explained; important pieces of evidence have not been included; some data are relevant or credible but inaccurate
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ANSWER KEY

TREADING THE ROAD TO MASTERY

PAGE 36

Rubric for Discussion of Results

CRITERION	Exemplary (2)	Proficient (1)
Support/ Evidence (x3)	Argument is clearly supported by accurate evidence considered credible by the audience; there is sufficient detail to support the main points of the argument	Some evidence is provided, but information is not fully explained; important pieces of evidence have not been included; some data are relevant or credible but inaccurate
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Strategy/ Audience	Content, structure, and language of argument is geared to intended audience	Argument is missing a substantial portion of content required by audience

ANSWER KEY

REACH THE TOP

PAGE 41

ACTIVITY I

- | | |
|------|-------|
| 1. F | 6. T |
| 2. T | 7. T |
| 3. F | 8. F |
| 4. T | 9. F |
| 5. F | 10. F |

ACTIVITY II

- | | |
|------|-------|
| 1. T | 6. F |
| 2. T | 7. F |
| 3. F | 8. T |
| 4. T | 9. T |
| 5. F | 10. F |

ACTIVITY III

- | | |
|------|-------|
| 1. M | 6. F |
| 2. F | 7. M |
| 3. F | 8. M |
| 4. M | 9. F |
| 5. M | 10. F |

GLOSSARY

Ailment	an illness, typically a minor one
Cancer	a disease caused by an uncontrolled division of abnormal cells in a part of the body
Contraceptive	a device or drug serving to prevent pregnancy
Fertilization	the action or process of fertilizing an egg involving the fusion of male and female gametes to form a zygote
Infection	the process of infecting or the state of being infected
Ligation	the surgical procedure of closing off a blood vessel or other duct or tube in the body by means of a ligature or clip
Menstruation	the process in a woman of discharging blood and other materials from the lining of the uterus
Pregnancy	the condition or period of being pregnant
Prevention	the action of stopping something from happening or arising
Symptom	a physical or mental feature which is regarded as indicating a condition of disease

REFERENCES

- Advocates for Youth. n.d. Myths and Facts About Comprehensive Sex Education. Accessed August 24, 2019. https://www.advocatesforyouth.org/wp-content/uploads/storage//advfy/documents/cse-myths- and-facts.pdf?source=post_page.
- Cabral, Esperanza. "Reproductive health law in the Philippines." *Journal of the ASEAN Federation of Endocrine Societies* 28, no. 1 (2013): 26-26.
- Department of Health. n.d. RA 10354. Accessed August 24, 2019. https://www.doh.gov.ph/sites/default/files/policies_and_laws/ra_10354.pdf.
- Department of Health. n.d. "The Responsible Parenthood and Reproductive Health Act", n.d. Accessed August 24, 2019. https://www.doh.gov.ph/sites/default/files/policies_and_laws/RA10354_RPRHLawIRR1.pdf.
- Mulat Pinoy Kabataan News Network. n.d. "Get Real: The Facts Vs. Myths on Population, Family Planning, and ...", n.d. Accessed August 24, 2019. <http://bixby.berkeley.edu/wp-content/uploads/2011/04/The-Facts-vs.-Myths-on-Population-Family-Planning-and-Reproductive-Health.pdf>.
- National Family Planning Board. n.d. "Misconceptions And Sexual And Reproductive Health." n.d. Accessed August 24, 2019. http://www.jnfpb.org/assets/Misconceptions_And_Sexual_And_Reproductive_Health-November-22-2011.pdf.
- n.a. n.d. "The Pap Smear." Accessed August 24, 2019. <https://sexinfo.soc.ucsb.edu/article/pap-smear>

REFERENCES

Philippine Legislator's Committee on Population and Development Foundation. 2013. A Primer on the Reproductive Health Law. Accessed August 24, 2019. <http://www.plcpd.org.ph/wp-content/uploads/2014/08/A-primer-on-the-Reproductive-Health-Law.pdf>.

The American Society of Breast Surgeons Foundation. n.d. "Beneath the Surface", n.d. Accessed August 24, 2019. <https://breast360.org/topics/2017/01/01/beneath-surface-guide-breast-imaging/>

US Department of Health & Human Services. n.d. "Female Reproductive Cancers | HHS.Gov", n.d. Accessed August 24, 2019. <https://www.hhs.gov/opa/reproductive-health/fact-sheets/cancers/female-reproductive-cancers/index.html>.

US Department of Health & Human Services. n.d. "Male Reproductive Cancers | HHS.Gov", n.d. Accessed August 24, 2019. <https://www.hhs.gov/opa/reproductive-health/fact-sheets/cancers/male-reproductive-cancers/index.html>.

Wynn, L. L., Angel M. Foster, and James Trussell. "Misconceptions and Ignorance About Sexual and Reproductive Health." *The female patient* 34, no. 11 (2009): 29.

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