

Grade 7

better
to know

Comprehensive Sexual Health Education

Teacher Resource





Department of Health and Social Services
and Department of Education

2022

Table of Contents

Resource Goals	4
Comprehensive Sexual Health Education Rationale	5
Golden Rules for Teaching Sexual Health Education	7
Anonymous Question Box	12
Grade 7: Physical and Health Education Curricular Competencies	16
Lesson One: Getting Started with Comprehensive Sexual Health Education	19
Objective One: Comprehensive Sexual Health Education	21
Objective Two: Ground Rules	22
Objective Three: Regulating Strong Emotions.....	23
Objective Four: Trusted Adults.....	25
Objective Five: Question Box.....	26
Closing.....	27
Handouts.....	27
“Healthy Mind, Body and Spirit Drawing”	28
“Breathing Exercises”	29
“Trusted Adult Name Tree”	30
Lesson Two: Puberty Changes That Everyone Experiences	31
Objective One: Puberty Changes That Everyone Experiences and Tools to Manage Changes	33
Closing.....	38
Handouts.....	38
“Puberty Changes That Everyone Experiences”	39
Lesson Three: Puberty Changes for Different Bodies	40
Objective One: Puberty Hormones and Sex Assigned at Birth.....	42
Objective Two: Testosterone-Driven Puberty Changes	44
Objective Three: Estrogen-Driven Puberty Changes.....	48
Closing.....	54
Handouts.....	54
“Testosterone-Driven Puberty Changes”	55
“Foreskin Health Tip”	56
“Testosterone-Driven Bodies: External and Internal Reproductive Anatomy”	57

“Estrogen-Driven Puberty Changes”	58
“Estrogen-Driven Bodies: External Reproductive Anatomy”	59
“Estrogen-Driven Bodies: Internal Reproductive Anatomy”	60
“Menstrual Cycle”	61
“Menstrual Products”	62
Lesson Four: Puberty Changes and Reproduction	63
Objective One: Puberty Changes and Reproduction	65
Closing	67
Handouts	67
“Pregnancy”	68
Lesson Five: Sexually Transmitted Infections (STIs)	69
Objective One: Viruses and Bacteria and Transmission	71
Objective Two: Viruses and Bacteria and Sexually Transmitted Infections	73
Objective Three: Reducing the Spread of Viruses and Bacteria	74
Closing	75
Lesson Six: Healthy vs. Unhealthy Lifestyles and Self-Care	76
Objective One: Healthy vs. Unhealthy Lifestyles	78
Objective Two: Self-Care Strategies	81
Closing	83
Lesson Seven: Developing Healthy Self-Concept	84
Objective One: Self-Concept	86
Objective Two: Shifting Perspectives and Self-Acceptance	87
Closing	91
Handouts	91
“Self-Concept”	92
“Shifting Perspectives”	93
“My Mask”	94

Lesson Eight: Gender Identity, Sexual Orientation, and Sex Assigned at Birth	95
Objective One: Gender, Gender Identity, Gender Expression, Sexual Orientation, and Sex Assigned at Birth.....	97
Closing.....	100
Handouts.....	100
“The Genderbread Person”	101
“Gender Pronouns”	102
“Sex Assigned at Birth”	103
“The Queer Umbrella”	104
 Lesson Nine: Body Image and the Media.....	105
Objective One: Body Images and the Media.....	107
Closing.....	111
 Lesson Ten: Sexual Health Education and Authenticating Online Information	112
Objective One: Finding Credible Sexual Health Information Online	114
Closing.....	119
Handouts.....	119
“Finding Credible Information on the Internet”	120
“Finding Reliable Websites”	121
 Additional Resources	122

Resource Goals

The goals of this resource are as follows.

1. To provide educators with evidence-based research to help contextualize the importance of teaching Comprehensive Sexual Health Education (CSHE) in the classroom.
2. To provide educators with guidelines and a methodology to implement CSHE in the classroom.
3. To provide educators with age-appropriate, scientific and evidence-based lesson plans and resources that coincide with British Columbia's curriculum.

This resource is just one of a larger set of Health Promotion's Better to Know teaching resources. Contact health.promotion@yukon.ca for additional resources.

Comprehensive Sexual Health Education Rationale

Sexual health is a “state of physical, emotional, mental and social well-being in relation to sexuality and not merely the absence of disease and dysfunction....”¹ It is a major factor in determining the health and well-being of individuals, partners, families and communities.²

Comprehensive Sexual Health Education (CSHE) “is a process of teaching and learning about the cognitive, emotional, physical and social aspects of sexuality. It aims to equip children and young people with knowledge, skills, attitudes and values that will empower them to: realize their health, well-being and dignity; develop respectful social and sexual relationships; consider how their choices affect their own well-being and that of others; and, understand and ensure the protection of their rights throughout their lives.”³

CSHE can be delivered in formal and non-formal settings, and should be:⁴

- ▶ Scientifically accurate
 - The content is based on facts and evidence, opposed to personal experiences and opinions.
- ▶ Incremental
 - CSHE is a continuing educational process that starts at an early age, and new information builds upon previous learning.
- ▶ Developmentally appropriate
 - Content is responsive to the changing needs and capabilities of the child and the young person as they grow.

¹“Sexual Health Definition.” World Health Organization (2006), who.int/health-topics/sexual-health#tab=tab_2.

²“Canadian Guidelines for Sexual Health Education.” Sex Information & Education Council of Canada (SIECCAN) (Toronto, ON, 2019).

³“International technical guidance on sexuality education: an evidence-informed approach.” United Nations Educational, Scientific and Cultural Organization (2018), en.unesco.org/news/why-comprehensive-sexuality-education-important.

⁴“International technical guidance on sexuality education: an evidence-informed approach.” United Nations Educational, Scientific and Cultural Organization (2018), en.unesco.org/news/why-comprehensive-sexuality-education-important.

- ▶ Curriculum-based
 - CSHE is included within a written curriculum that guides educators' efforts to support student learning.
- ▶ Comprehensive
 - Comprehensive refers to the breadth and depth of topics and to content that is consistently delivered to learners over time and throughout their education, rather than a one-off lesson or intervention.
 - It addresses sexual and reproductive health issues, including, but not limited to, sexual and reproductive anatomy and physiology; puberty and menstruation; reproduction, modern contraception, pregnancy and childbirth; and STIs, including HIV and AIDS.
 - It teaches analytical communication and other life skills for health and well-being in relation to: sexuality; human rights; a healthy and respectful family life and interpersonal relationships; personal and shared values; cultural and social norms; gender equality; non-discrimination; sexual behaviour; violence and gender-based violence; consent and bodily integrity; and sexual abuse.
- ▶ Based on a human rights approach
 - CSHE promotes an understanding of universal human rights – including the rights of children and young people – and the rights of all persons to health, education, information equality and non-discrimination.
 - It provides young people with equal access to CSHE.
 - It respects young people's rights to the highest attainable standard of health, including safe, responsible and respectful sexual choices free of coercion and violence, as well as their right to access the information that they need for effective self-care.

Teaching Tip

The knowledge gained from these lessons is considered a protective factor for preventing sexual abuse, and contributes to student physical, mental and emotional well-being.

Golden Rules for Teaching Sexual Health Education

1. Review the BC Physical and Health Education Curricular Competencies.

- Educators should be familiar with the Sexual Health Education Curricular Competencies, which fall under the physical and health education curriculum. This will ensure that teachers are meeting the sexual health curriculum for each year. The curricular competencies are referenced on page 16 and can be viewed, in more detail, here: curriculum.gov.bc.ca/curriculum/physical-health-education.

2. Partner with parents and caregivers.⁵

- CSHE is most impactful when school-based programs involve parents/caregivers and other community programming.
- At the beginning of each school year, communicate with parents/caregivers the Sexual Health Education Curricular Competencies that will be taught. This can be done via information session, information letter, phone call, email, etc.
- Provide families with follow-up activities, for example, handouts and information sheets.

3. Start at the beginning of each school year and use repetition.⁶

- Introduce the sexual health curriculum early in the school year, teach topics slowly, and be repetitive. This helps increase student comfort and avoids doing a one-off lesson or intervention that typically makes students uncomfortable and non-receptive.
- As with other subjects, repetition is key. It helps transition knowledge from the conscious to the subconscious. Teach sexual health over several lessons using different activities.

⁵“International technical guidance on sexuality education: an evidence-informed approach.” United Nations Educational, Scientific and Cultural Organization (2018), en.unesco.org/news/why-comprehensive-sexuality-education-important.

⁶“International technical guidance on sexuality education: an evidence-informed approach.” United Nations Educational, Scientific and Cultural Organization (2018), en.unesco.org/news/why-comprehensive-sexuality-education-important.

4. Create a safe learning environment.⁷

- Sexual health education works best in classrooms where there is a mutual feeling of trust, safety and comfort. Classroom rules help create these feelings from the start. Examples of classroom rules include the following.
 - Raise your hand to talk.
 - Regulate awkward feelings by taking a deep breath and thinking “Hmm...interesting. I didn’t know that about the body.”
 - Use scientific names for body parts.
 - No put-downs.
 - No personal questions.
 - It’s okay to pass on talking.
 - Classroom discussions are confidential.
 - Speak for yourself.
 - Be sensitive to diversity.
 - It’s okay to have fun.

5. Create an inclusive learning environment.⁸

- All students should see themselves reflected in the curriculum so they can feel engaged and empowered by their learning experiences.
- Use language that includes a variety of family structures. For example, instead of saying “Go home and ask your mom and dad,” try “Go home and ask the people that you live with.”
- Use gender-neutral language that focuses on anatomy. For example, instead of saying “Boys have wet dreams,” try “Bodies with testicles have wet dreams.”
- Avoid using terminology like “guys” or “boys and girls”; instead use “students,” “folks,” “class” or “friends.”

⁷ “Sexual Health Education Ground Rules.” Alberta Health Services (2020), teachingsexualhealth.ca/teachers/sexual-health-education/understanding-your-role/get-prepared/ground-rules/.

⁸ “Canadian Guidelines for Sexual Health Education.” Sex Information & Education Council of Canada (SIECCAN) (Toronto, ON, 2019).

6. Use a trauma-informed teaching approach.⁹

- Understand Yukon’s sexual assault rate is high compared to the rest of Canada.
- Establish the classroom as a safe place.
- Let students know what is going to happen during the lesson. For example, you will be showing anatomy pictures of the private parts.
- **Provide the Kids Help Phone number (1-800-668-6868; text 68-68-68; kidshelpphone.ca) and other counselling resources.**
- Prepare for disclosures. Under the *Child and Family Services Act* all Yukon Education staff have a duty to report any suspected abuse or neglect of a child to Health and Social Services. For more information refer to Section 9.11 (Staff Responsibilities) of the School Procedures Handbook on Mandatory Reporting of Suspected Child Abuse or Neglect.

7. Teach all students at the same time.¹⁰

- All students need to understand how each body works, not just the one they were born in. This method reduces sexual health stigma and confusion, while building comfort, compassion and knowledge about all bodies.
- It removes the notion that there are secret things about bodies that you only get to learn if you live in that body.
- It teaches students essential sexual health communication skills. For example, starting in Grade 8, we teach sexual decision-making communication skills. We cannot expect students to understand how to talk to each other, if they have been segregated their whole school careers to learn about sexual health.

8. Use general and factual language instead of personal experiences.¹¹

- Sexual health education should be fact and evidence-based, instead of opinion-based.
- Sexual health education should not involve personal stories from educators or students. For example, when talking about menstrual products, teach about the different products, but not which one you believe is better, for example, tampons or pads.
- If students want to share stories or learn about sexual health values, they can talk to their family, First Nation, religious organization, etc.

⁹ “Future of Sex Education Initiative.” *National Sex Education Standards: Core Content and Skills, K–12* (Second Edition) (2020).

¹⁰ “Sexual Health Educator Certification.” Options for Sexual Health (2017), optionsforsexualhealth.org/.

¹¹ “International technical guidance on sexuality education: an evidence-informed approach.” United Nations Educational, Scientific and Cultural Organization (2018), en.unesco.org/news/why-comprehensive-sexuality-education-important.

9. Reflect on personal biases.¹²

- Even the most open-minded educators can have biases and discomfort around teaching sexual health. As an educator, it's important to take the time to reflect on these biases to ensure you're delivering information in a balanced, inclusive way.
- Think about what makes you uncomfortable when you think about sexual health education and manage those feelings before teaching, for example, through counselling or professional development. If you don't feel comfortable with the content, you won't necessarily be able to pass it on to students in a fact-based way.

10. Use a sex-positive teaching approach.¹³

- To reduce stigma around sexual health, it's important to be a sex-positive, approachable educator.
 - Use a neutral expression when teaching (even when topics/student questions make you feel uncomfortable). This tells students you are an approachable adult that is non-judgmental and unbiased.
 - Use non-judgmental language, such as "Tell me more about that," "I understand why you feel that," and "It makes sense that you are laughing right now. This topic doesn't get taught enough."
 - Gently correct students if they use slang or ask inappropriate questions. (They might not have the correct language to talk about sexual health in appropriate ways.)
 - Avoid fear tactics, for example, "Cramps are awful when your period starts"; "Wet dreams are so embarrassing"; "STIs are life-threatening."

11. Create an anonymous question box.

- The question box gets introduced in Grade 4 and is used in every grade. It provides students with a safe space to get answers to questions that they do not feel comfortable to ask in person.
- Anonymous questions tend to be harder questions to answer. See page 12 for detailed instructions on using this tool.

12. Ask for help.

- Educators do not have to reinvent the wheel to teach sexual health. See the list of resources on page 122 for extra support.

¹² "Canadian Guidelines for Sexual Health Education." Sex Information & Education Council of Canada (SIECCAN) (Toronto, ON, 2019).

¹³ "Sexual Health Educator Certification." Options for Sexual Health (2017), optionsforsexualhealth.org/.

Teaching Tip

At the beginning of every class:

1. Provide external resources, such as:
 - Kids Help Phone – 1-800-668-6868; text 68-68-68; kidshelpphone.ca
 - School counsellors
 - Info websites, for example, amaze.org
2. Review your classroom rules.
3. Review the anonymous question box process.
4. Introduce the lesson plan objectives.

Anonymous Question Box¹⁴

The anonymous question box gets introduced in Grade 4. It provides students with a safe space to get answers to questions that they do not feel comfortable to ask in person.

Note: Encourage students to ask questions only (why/how/what statements), instead of sharing a story, connection or personal experience.

To ensure anonymity, try the following.

1. Design a question box with a privacy slot at the top.
2. Provide uniform pieces of paper to each student.
3. Have every student submit either a question, something new they learned, a joke or a picture.
4. Read through the questions in private, prepare your answers, and read them to students in the following sexual health class.

TYPES OF QUESTIONS

Students typically ask three types of questions, either anonymously or in person. Students are usually:

1. Curious about a topic, for example, “What is a wet dream?”
2. Trying to be funny, for example, “What is a boner?”
 - **Note:** It can be hard to tell if students are asking questions to be “funny,” or if they really do not know the answer. It’s still important to answer these types of questions to reduce sexual health stigma and fill information gaps.
3. Crying out for help, for example, “I am scared to tell my mom that I got my period, and I can’t afford pads. What can I do?”
 - **Note:** If it’s an illegal disclosure (for example, “I was sexually abused; what should I do?”), do not read it aloud. Explain that if you did not answer a question, it means you want the student to come talk to you privately. Also provide the Kids Help Phone number: 1-800-668-6868; text 68-68-68; website: kidshelpphone.ca; and any local counselling resources.

¹⁴ “Sexual Health Educator Certification.” Options for Sexual Health (2017), optionsforsexualhealth.org/.

QUESTION AND ANSWER FORMULA

It's the educator's responsibility to answer all questions. If educators don't, students will seek other sources of information (for example, friends, internet, phone apps, porn sites), which can leave them with a distorted perspective on sexual health.

Educators may worry they are going to share too much information or give inappropriate answers. Rest assured: if students are asking the question, they are ready for the answer.

Use the following formula to guide your answers.

1. Normalize and validate. Affirm the question with phrases like this.
 - "Great question."
 - "Lots of people ask this."
 - "Thanks for asking."
2. Be factual and brief.
 - "What is a boner? Great question. The scientific word for boner is erection. It happens when blood fills the penis and it becomes hard."
3. Check in.
 - "Are there any follow-up questions?"

QUESTION AND ANSWER BEST PRACTICES

1. Keep a neutral expression when reading and answering questions. It's important to be non-judgmental and unbiased.
2. Group together common questions. Tell the class "There were many questions about____, so I am addressing them all in this answer."
3. Use proper terminology whenever possible. It is important to acknowledge the slang term so that students who may not know the proper term will be able to match it with the proper term. For example, you might say "There's a question here about jerking off. Lots of people have questions about masturbation."
4. Respectfully acknowledge any questions that you could not understand or that seem off-topic. For example, say "There were a few questions that I couldn't read. Please see me individually if you don't hear your questions answered today, or resubmit them with some more information."
5. Defer lengthy discussions relating to future course content. Try to answer questions briefly and indicate that the topic will be discussed further during an upcoming lesson.
6. When you don't have an answer, it is important to say "I don't know the answer to that, but I will try to find out and get back to you next class."

QUESTION AND ANSWER EXAMPLES

The following are sample **Grades 4 to 7** student questions and are based on real student questions.

- ▶ Why can't you wear a panty liner and go swimming?
 - Great question. Panty liners are very absorbent, kind of like a sponge. If you wear one while swimming, it will fill with water and won't absorb menstrual fluid.
- ▶ How do you have twins?
 - A lot of people wonder this. There are two different types of twins: identical and fraternal. Identical is when the egg splits and grows into two babies. Fraternal is when two eggs are released and fertilized.
- ▶ I don't feel comfortable talking to my parents. Please help.
 - You might be surprised at how open your parents will be to this discussion. You can prep them by saying, "I want to talk to you about something that is kind of awkward." If you REALLY feel you can't talk to them, you can talk to a teacher, counsellor or other trusted adult.
- ▶ What are pubes?
 - Thanks so much for asking. It's the slang term for genital hair, also called pubic hair.
- ▶ Can girls have wet dreams?
 - A lot of people wonder this. People without a penis cannot have wet dreams. Wet dreams happen when the testicles release sperm that exits the body via the penis.
- ▶ What does sexist mean?
 - This is another great question. Sexism is discrimination against someone because of their sex or gender.
- ▶ What causes your period?
 - Great question. Once a month, an ovary releases an egg and the uterus grows a lining of blood. If the egg is not fertilized by a sperm, the egg dissolves into the blood and the uterus lining of blood is shed.
- ▶ Why do people have sex?
 - A lot of people wonder this. People have sex for pleasure and/or to make a baby.
- ▶ Why do people have sex with children?
 - This is a really important and serious thing to talk about. This is illegal and people who do this suffer from a mental illness. If this happens to you, or someone you know, tell a trusted adult or call the Kids Help Phone (1-800-668-6868; text 68-68-68; kidshelpphone.ca).

- ▶ What is rape?
 - This is another really important thing to talk about. Rape is when someone does not consent to having sex and it is forced upon them. It's illegal. If this happens, tell a trusted adult and ask for help.
- ▶ What is a condom?
 - Great question. A condom is a piece of latex that covers the penis during sexual activity. It helps prevent unwanted pregnancy and sexually transmitted infections.
- ▶ What is jacking off?
 - Thanks so much for asking. This is a slang term for masturbation. Masturbation is rubbing your genitals for pleasure.
- ▶ Why do people have crushes?
 - Great question. A crush is when you develop special feelings for a person. Crushes develop for different reasons. You may like the same things, or find that person attractive, but the reason can be different for everyone.
- ▶ How are babies made?
 - A lot of people wonder this. Babies are made when a sperm fertilizes an egg and implants into the uterus wall to grow for nine months.
- ▶ Does puberty affect your whole life?
 - Great question. You will eventually finish puberty and be in your adult body. Puberty will not last your whole life, but your body will be different after you finish puberty.
- ▶ Can you have a penis and vagina?
 - A lot of kids are curious about this. Yes, this is called “differences in sexual development.”
- ▶ Why do only girls have babies and not boys?
 - Great question. Babies can only grow in a uterus. The only way to carry a baby is to have a uterus.
- ▶ Does everyone get pimples during puberty?
 - A lot of students ask this. Yes, but some get more than others.
- ▶ What is the white stuff around the vulva?
 - Another great question. During puberty, the vagina starts to produce a clear white fluid called vaginal fluid. It helps keep the vagina clean and lubricated.

Grade 7: Physical and Health Education Curricular Competencies¹⁵

Big Ideas:

- ▶ We experience many changes in our lives that influence how we see ourselves and others.
- ▶ Healthy choices influence our physical, emotional and mental well-being.
- ▶ Learning about similarities and differences in individuals and groups influences community health.

CURRICULAR COMPETENCIES

Students are expected to be able to do the following.

Healthy and active living

- ▶ Investigate and analyze influences on eating habits.
- ▶ Identify factors that influence healthy choices and explain their potential health effects.
- ▶ Assess and communicate health information for various health issues.
- ▶ Identify and apply strategies to pursue personal healthy-living goals.
- ▶ Reflect on outcomes of personal healthy-living goals and assess strategies used.

¹⁵curriculum.gov.bc.ca/curriculum/physical-health-education/7/core.

Social and community health

- ▶ Identify and describe strategies for avoiding and/or responding to potentially unsafe, abusive or exploitive situations.
- ▶ Describe and assess strategies for responding to discrimination, stereotyping and bullying.
- ▶ Describe and apply strategies for developing and maintaining healthy relationships.
- ▶ Explore strategies for promoting the health and well-being of the school and community.

Mental well-being

- ▶ Describe and assess strategies for promoting mental well-being, for self and others.
- ▶ Describe and assess strategies for managing problems related to mental well-being and substance use, for others.
- ▶ Create and assess strategies for managing physical, emotional and social changes during puberty and adolescence.
- ▶ Explore the impact of transition and change on identities.

CONTENT

Students are expected to know the following.

- ▶ Practices that reduce the risk of contracting sexually transmitted infections and life-threatening communicable diseases.
- ▶ Sources of health information, basic principles for responding to emergencies.
- ▶ Strategies to protect themselves and others from potential abuse, exploitation and harm in a variety of settings.
- ▶ Consequences of bullying, stereotyping and discrimination.
- ▶ Influences of physical, emotional and social changes on identities and relationships.

Lesson Plans for Grade 7

Lesson 1

Getting Started with Comprehensive Sexual Health Education

 60 minutes

CURRICULAR COMPETENCIES

Social and community health

- ▶ Describe and apply strategies that promote a safe and caring environment.

Mental well-being

- ▶ Describe and assess strategies for promoting mental well-being.
- ▶ Describe factors that positively influence mental well-being and self-identity.

OBJECTIVES

1. Students will learn what Comprehensive Sexual Health Education (CSHE) is.
2. Students will learn the ground rules for talking about sexual health.
3. Students will learn how to regulate strong emotions when talking about sexual health.
4. Students will learn about trusted adults.
5. Students will learn how to ask anonymous questions.

MATERIALS

- ▶ Lesson plan handouts (see end of lesson plan):
 - “Healthy Mind, Body and Spirit Drawing”
 - “Breathing Exercises”
 - “Trusted Adult Name Tree”
- ▶ Anonymous question box slips.

Teaching Tip

At the beginning of every class:

1. Provide external resources, such as:
 - Kids Help Phone – 1-800-668-6868; text 68-68-68; kidshelpphone.ca
 - School counsellors
 - Info websites, for example, amaze.org
2. Review your classroom rules.
3. Review the anonymous question box process.
4. Introduce the lesson plan objectives.

Objective One: Comprehensive Sexual Health Education

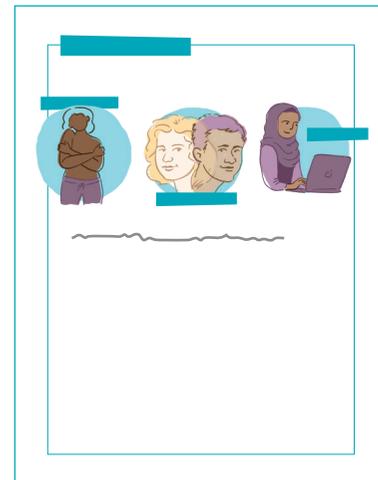
Explain:

- ▶ Comprehensive Sexual Health Education (CSHE) teaches us skills to help keep our mind, body and spirit safe and healthy. CSHE includes a lot of different topics. The lessons we will focus on cover the following.
 - Body science, for example, the scientific names for body parts, puberty and reproduction.
 - Relationships, for example, with yourself, family and friends.
 - Media literacy, for example, online safety.

Activity

Explain:

- ▶ On the “Healthy Mind, Body and Spirit” handout, ask students to draw a picture of what a healthy mind, body and spirit look like to them.



HANDOUT, p. 28

Objective Two: Ground Rules

Explain:

- ▶ Sexual health is a sensitive topic and people learn best in classrooms where there are mutual feelings of trust, safety and comfort.
- ▶ Classroom ground rules help create these feelings from the start.

Activity

Discuss:

- ▶ Ask students for examples of respectful, classroom ground rules and write them on the board. Rules could include the following.
 - Raise your hand to talk.
 - Regulate awkward feelings by taking a deep breath and thinking “Hmm...interesting. I didn’t know that about the body.”
 - Use scientific names for body parts.
 - No put-downs.
 - No personal questions.
 - It’s okay to pass on talking.
 - Classroom discussions are confidential.
 - Speak for yourself.
 - Be sensitive to diversity.
 - It’s okay to have fun.
- ▶ Once students have shared their ideas, as a group, choose which ones will be your classroom rules.
- ▶ Write down the chosen ground rules in a permanent location, and review before every sexual health lesson.

Objective Three: Regulating Strong Emotions

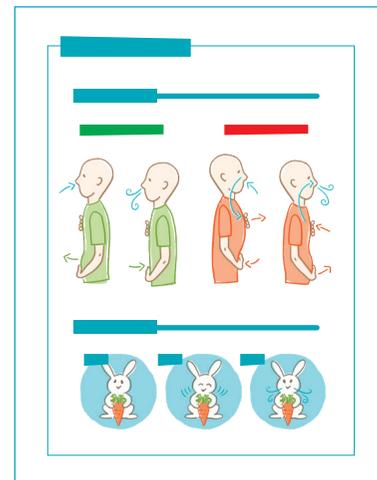
Explain:

- ▶ During sexual health classes, students often experience a range of strong emotions which get in the way of learning, for example, feeling nervous, shy, embarrassed, excited, silly or curious.
- ▶ These feelings can be controlled by learning to control our breathing.
- ▶ Breathing exercises teach us how to control our breathing and thus our feelings.

Activity

Explain:

- ▶ Explain that you are going to teach two different breathing exercises called “belly breathing” and “bunny breathing.”
- ▶ **Belly breathing** is used anytime someone feels stressed, anxious, nervous, etc.
 - Belly breathing fills the lungs fully, raises the belly, slows the breathing rate and helps people relax.
- ▶ **Bunny breathing** is used anytime someone is very upset and can't find their breath.
 - Bunny breathing is done by taking three quick breaths in, and one long breath out.



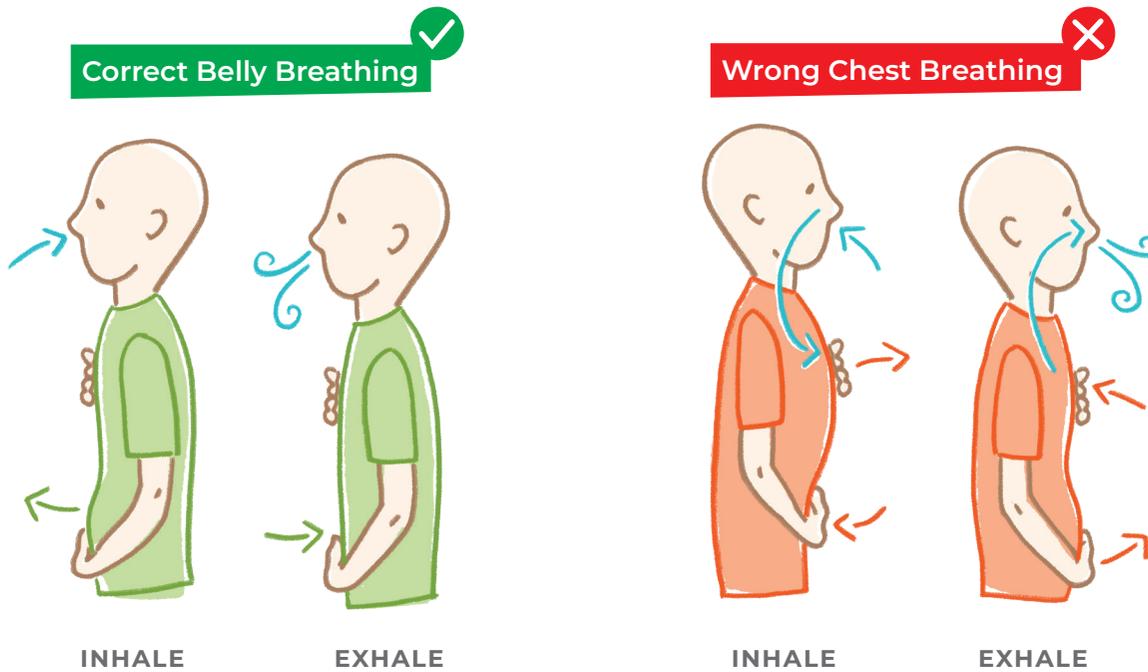
HANDOUT, p. 29

Practice:

1. Belly breathing

- Place one hand on your chest and the other on your belly.
- Close your mouth and breathe in slowly through your nose.
- Feel your belly expand first and your chest expand second, like a big balloon.
- Open your mouth or keep it closed, and slowly breathe all the air out of your lungs.
- Feel your belly empty and your chest soften, like deflating a balloon.
- Repeat several times.

Note: When people first try belly breathing, they typically only breathe into their chest, and it rises. The key is getting your tummy to rise too!



2. Bunny breathing

- Close your mouth and take three quick sniffs in through the nose, like you are sniffing a carrot.
- Keeping your mouth closed, breathe air slowly out your nose.



Objective Four: Trusted Adults

Explain:

- ▶ It is important to identify a trusted adult that you can talk to about sexual health. You can even have more than one!
- ▶ A **trusted adult** is someone you feel safe and comfortable with.
- ▶ A trusted adult is someone you can talk to about sexual health.
- ▶ A trusted adult can be a teacher, parent, cousin, foster parent or friend of the family.

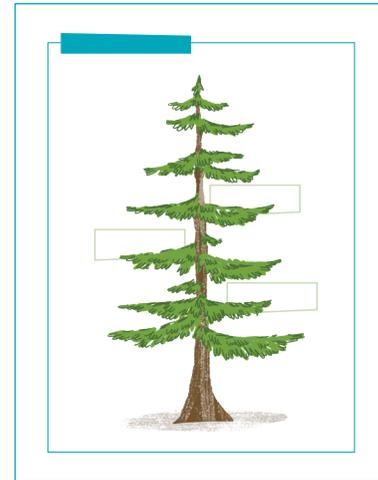
Activity

Ask:

- ▶ Close your eyes and think of your trusted adult(s).
- ▶ When you have that person in mind, raise your hand, but don't open your eyes.
- ▶ If you are having trouble thinking of someone, we can brainstorm people together after class.
 - **Note:** Some students may not raise their hand because they can't think of anyone. Make sure you check in with them. Maybe you are their trusted adult.
- ▶ All right. Everyone open your eyes.

Write:

- ▶ Have students fill out the names of their trusted adult(s) on the leaves of the tree.



HANDOUT, p. 30

Objective Five: Question Box

Explain:

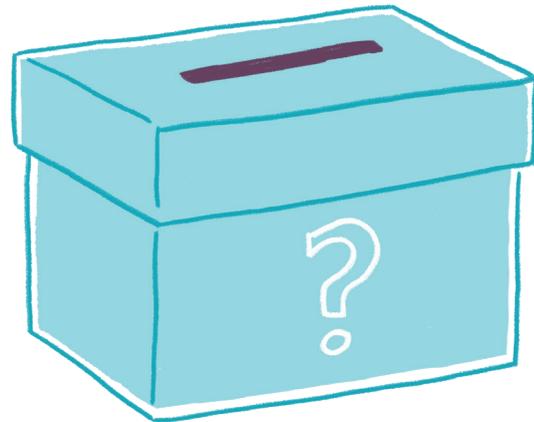
- ▶ Questions are always welcome during class, but a lot of students won't want to ask their question in front of everyone.
- ▶ To solve this problem, at the end of class, everyone will submit an anonymous question in the question box.
- ▶ Everyone must submit a question to make sure it remains anonymous. If only one person submits, it would be easy to tell who the question came from.
- ▶ If you can't think of a question, you can submit a joke or share something new you learned.
- ▶ The questions will be answered during the next class.

Note: See pages 12 to 15 for more information on how to answer student questions.

Activity

Explain:

- ▶ Give each student a uniform slip of paper.
- ▶ Ask students to write down a question, something new they learned, a story or joke.
- ▶ Remind students to start questions with phrases like these.
 - “Is it true that...?”
 - “How do you know if...?”
 - “What do they mean by...?”
 - “Is it normal to...?”
 - “What causes...?”
 - “What should you do if...?”
- ▶ Once students are finished, they can put their paper in the anonymous question box.
- ▶ Explain that you will review the questions in private and prepare your answers for next class.



CLOSING

Review:

- ▶ Review the objectives covered in the lesson.

Anonymous questions:

- ▶ Collect anonymous question slips and answer them in the next class.
- ▶ **Note:** If you need assistance answering questions, contact health.promotion@yukon.ca.

Handouts

- 28 “Healthy Mind, Body and Spirit Drawing”
- 29 “Breathing Exercises”
- 30 “Trusted Adult Name Tree”

Healthy Mind, Body and Spirit Drawing

Comprehensive Sexual Health Education (CSHE) gives us the skills to help keep our mind, body and spirit safe and healthy.

Body science



Relationships



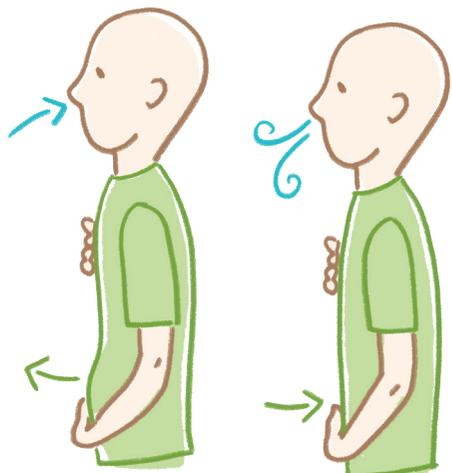
Media literacy

Draw a picture of what a healthy mind, body and spirit look like to you.

Breathing Exercises

Belly Breathing

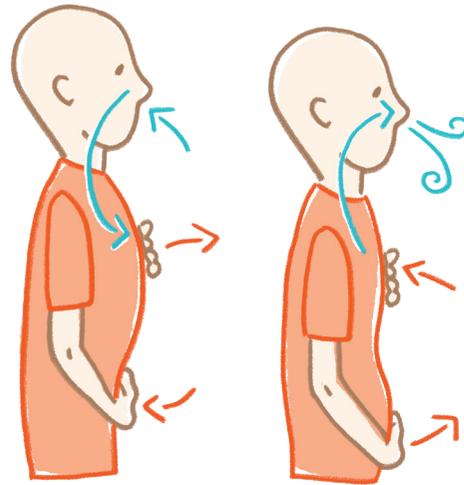
Correct Belly Breathing ✓



INHALE

EXHALE

Wrong Chest Breathing ✗



INHALE

EXHALE

Bunny Breathing

Step 1



Pretend to be a bunny holding a carrot.

Step 2



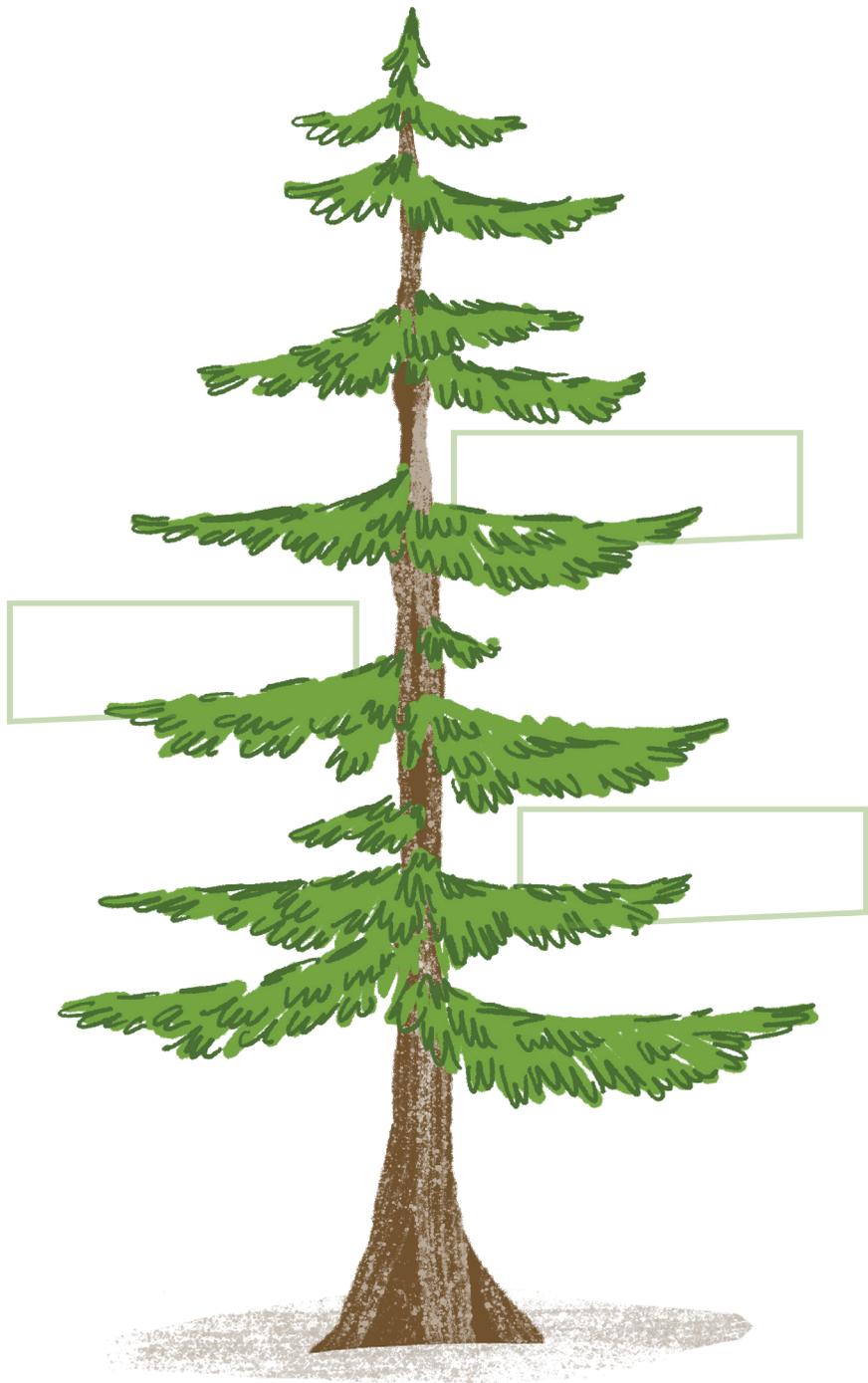
Close your mouth and take three quick sniffs in through the nose. Like you are sniffing a carrot.

Step 3



Keeping your mouth closed, breathe air slowly out your nose.

Trusted Adult Name Tree



Lesson 2

Puberty Changes That Everyone Experiences

 60 minutes

CURRICULAR COMPETENCIES

Mental well-being

- ▶ Describe and assess strategies for promoting mental well-being.
- ▶ Explore and describe strategies for managing physical, emotional and social changes during puberty.
- ▶ Describe factors that positively influence mental well-being and self-identity.

CONTENT

- ▶ Physical, emotional and social changes that occur during puberty, including those involving sexuality, and sexual identity.

OBJECTIVES

1. Students will learn about the puberty changes that everyone experiences, and tools to manage the changes.

MATERIALS

- ▶ Puberty kit containing pain medication, shampoo/conditioner, deodorant, razors, soap, face wash and pimple cream.
 - **Note:** If you do not have access to sample products, use the handout at the end of the lesson.
- ▶ Lesson plan handout (see end of lesson):
 - “Puberty Changes That Everyone Experiences”
- ▶ Anonymous question box slips.

Teaching Tip

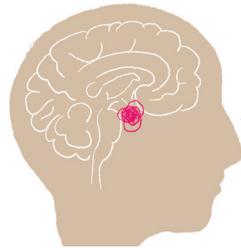
At the beginning of every class:

1. Provide external resources, such as:
 - Kids Help Phone - 1-800-668-6868; text 68-68-68; kidshelpphone.ca
 - School counsellors
 - Info websites, for example, amaze.org
2. Review your classroom rules.
3. Review the anonymous question box process.
4. Introduce the lesson plan objectives.

Objective One: Puberty Changes That Everyone Experiences and Tools to Manage Changes

Explain:

- ▶ Our bodies are always changing.
- ▶ **Puberty** is the time in our lives when we grow into our adult bodies.
- ▶ After puberty, our bodies have the physical ability to make a baby.
- ▶ Most kids find this idea “gross” because they are not mentally or emotionally ready for a baby, but it is still important to understand how the body works.
- ▶ To start the lesson, we will read a story about a person named Chris who is going through puberty. Throughout the story I will stop and explain in detail what Chris is talking about.
- ▶ **Note:** Find the “Puberty Changes That Everyone Experiences” handout on page 39.



Read:

Hi, I'm Chris, and I'd like to tell you about what's happening to me. It seems that every day brings a new change. It's almost like I'm getting a new body! They tell me I'm going through puberty.

Explain:

- ▶ In the middle of the brain is the pituitary gland. It's the size of a pea. During puberty, it releases hormones that cause the body to change. **Hormones** are chemical messengers that control how bodies work, but you can think of them as “growing juices.”
- ▶ Puberty begins between ages 8 and 13 and takes about four years to finish.
- ▶ It starts and finishes at different ages for everyone.
- ▶ Understanding puberty changes and how to take care of yourself during this time makes it a lot easier.
- ▶ It's important to never comment or tease other people as they go through puberty. Puberty can be uncomfortable. Being kind to ourselves and each other makes it way easier.



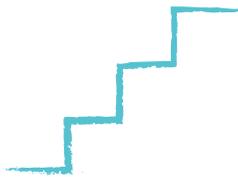
Read:

I don't mind some of the changes I'm seeing. In fact, some things I even like. My feet are getting bigger and I am growing taller.

Explain:

- ▶ The **feet** grow first to support the growing body. Students might notice their shoes never seem to fit because their feet are growing so fast.
- ▶ The second thing to grow is body height. When people grow more than three centimetres in one year, it's called a **growth spurt**. There are four types of growth spurts.

Stair Master



1. **The Stair Master:** Someone grows a little bit, then levels off. Then grows a little bit, then levels off. (Use your hands to show a stair-like image.)

Ninja



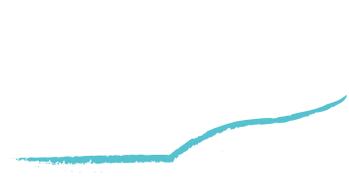
2. **The Ninja:** Someone grows consistently and seemingly so slowly that nobody notices except for maybe a person who hasn't seen them in a long time. (Use your hands to show a diagonal line.)

Turbo Grower



3. **The Turbo Grower:** This type of grower shoots straight up quickly and seemingly out of nowhere. (Use your hands to show a backwards L shape.)

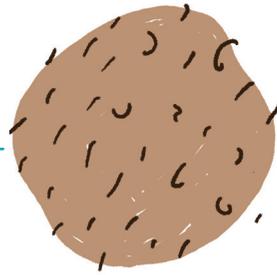
Turtle Grower



4. **The Turtle Grower:** This type of grower feels like they may never grow. They do grow – everyone does – but it's a bit slow or not very noticeable. (Use hands to show flat then curving upwards line.)

- ▶ Everyone grows at their own pace and with different types and combinations of growth spurts.
- ▶ When you go through a growth spurt, you may also experience **growing pains** because as the bones grow the muscles and tendons stretch. Medication can help reduce pain. (Show a bottle of pain medication.)
- ▶ Always get a trusted adult to help you take any medication.



**Read:**

Another thing that's happening is this new hair that's growing in places it's never been before. Like under my arms and on my legs and genitals. I know this is normal and all, but it still takes getting used to.

Explain:

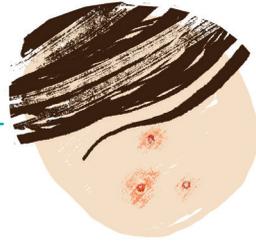
- ▶ Everyone grows body hair in a lot of places. Some people choose to remove their body hair and some choose to leave it. It's your body, so you get to decide.
- ▶ Shaving is a very common way people remove body hair. If you choose to shave it, make sure you ask a trusted adult for help because razors are very sharp. (Show samples of razors.)

**Read:**

There are some changes that aren't so good. Like body odour. The first time I smelled it, I thought something was wrong with me. Now I realize it's not too bad if I wash and use deodorant.

Explain:

- ▶ There are sweat glands all over our body. When we get too hot, they release moisture to cool us down. We call this **sweating**.
- ▶ Before puberty, when we sweat there is no bad smell.
- ▶ However, during puberty, we grow a second set of sweat glands all over our body - in our armpits, around the genitals, on our feet, etc.
- ▶ When we sweat from the new sweat glands it mixes with bacteria on our body and creates a smell. We call this smell **body odour**.
- ▶ To reduce the smell of body odour, wash and use deodorant every day. Make sure the soap gets all over your body, including in the arm pits and around the genitals. (Show sample of soap and deodorant.)
 - **Note:** Remind the students that deodorant is only for the armpits and to check with the people they live with for advice on which one to use.

**Read:**

One time when I was getting ready for school, I looked in the mirror and found a pimple on my face and noticed that I had really greasy hair.

Explain:

- ▶ Underneath the skin we have **oil glands** that release oil that keeps our skin soft.
- ▶ The oil leaves our skin through pores, which are small openings on the surface of our skin.
- ▶ During puberty, hormones cause the oil glands to produce extra oil.
- ▶ Sometimes the oil traps bacteria and dirt in the pores and creates a **pimple**.
- ▶ Some people get only a few pimples, but some people get a lot all over their face and body.
- ▶ To manage pimples, wash your face in the morning and evening with warm water and face wash. After washing, apply a pimple cream to the area. If these steps do not help, see a doctor for a prescription pimple medication.
- ▶ Lots of people like to pop their pimples. The safest way to do this is to follow these steps.
 1. Wait until you see a white dot on the top of the pimple. This means it's ready to pop.
 2. Wash your hands.
 3. Put pressure on either side of the pimple to release oil.
 4. Stop touching the pimple once oil has been released.
 - **Note:** If you keep digging at your pimple after it's been popped, you may create an infection and get a scar.
- ▶ The scalp also produces extra oil and hair becomes greasier.
- ▶ To manage **greasy hair**, wash your hair every day with shampoo and conditioner. It will also help with any pimples on your forehead. (Show sample of face wash, pimple cream, shampoo and conditioner.)



Read:

There's one thing I get a little embarrassed about. I'm starting to get special feelings for someone in my class. I am not mentioning any names because it feels strange, but also kind of nice. They tell me it's normal. Is it?

Explain:

- ▶ Hormones control our feelings. New hormones create new and stronger feelings.
- ▶ A **crush** is a word we use to describe special feelings we have for another person.
- ▶ Along with crushes comes changes in our **moods**.
- ▶ During puberty, our hormones are not balanced, which means our feelings are not balanced.
- ▶ This means we can go from being happy to sad to mad in very short periods of time.
- ▶ Getting enough sleep, eating healthy, taking time for ourselves, and talking with friends and trusted adults can help with these changes in mood. If these things don't help, it could be warning signs of a mental health concern.
- ▶ **Mental health concerns** are real, painful and sometimes severe. You might need help if you:
 - feel hopeless or worthless;
 - often feel very angry or very worried;
 - feel grief for a long time after a loss or death;
 - think your mind is controlled or out of control;
 - hurt other people or destroy property; or
 - do reckless things that could harm you or others.
- ▶ Mental health problems can be treated. To find help, talk to your parents, school counsellor or health care provider.
- ▶ You can also call the Kids Help Phone Line 1-800-668-6868 or visit their website at kidshelpphone.ca.

Ask:

- ▶ After that story, do you think Chris is a boy or a girl? Or are you unsure?

Explain:

- ▶ It may be unclear because this story is explaining changes that everybody goes through, no matter what body they were born in.

Activity

Make puberty kits with students or provide pre-made kits with soap, deodorant, and menstrual products...this might also improve any smells that are brewing in your class.

CLOSING

Review:

- ▶ Review the objectives covered in the lesson.

Anonymous questions:

- ▶ Collect anonymous question slips and answer them in the next class.
- ▶ **Note:** If you need assistance answering questions, contact health.promotion@yukon.ca.

Handouts

39 “Puberty Changes That Everyone Experiences”

Puberty Changes

That Everyone Experiences

Body odour

During puberty, a second set of sweat glands develops. When they release sweat, it mixes with bacteria on the body and creates an odour. Washing daily and using deodorant will manage the smell.



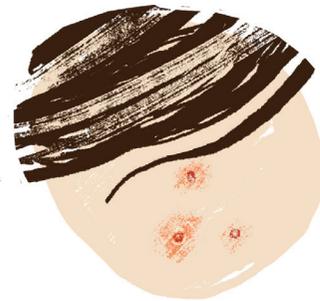
Growth spurts

Growth spurts occur when the body grows more than 3 cm in one year. During a growth spurt, people may feel growing pains caused by tendons lengthening. Medication and rest can help alleviate the pain.



Pimples and oily hair

Oil glands, located underneath the skin, help keep the skin and hair soft. During puberty, the glands produce extra oil that can clog pores causing pimples and greasy hair. Daily washing will help manage the extra oil. If the pimples are too difficult to manage, they can be treated with medication.



The feet grow bigger

Feet are the first body part to start growing during puberty.



Body hair

Hair will grow all over the body, including the armpits and genitals. It might be a different colour or texture than the hair on the head. Some people remove body hair, but some don't.



The sads, mads and glads

During puberty, emotions can change dramatically. Exercise, healthy food and rest can help to manage emotions.

Lesson 3

Puberty Changes for Different Bodies

 60 minutes

CURRICULAR COMPETENCIES

Mental well-being

- ▶ Describe and assess strategies for promoting mental well-being.
- ▶ Explore and describe strategies for managing physical, emotional, and social changes during puberty.
- ▶ Describe factors that positively influence mental well-being and self-identity.

CONTENT

- ▶ Physical, emotional, and social changes that occur during puberty, including those involving sexuality, and sexual identity.

OBJECTIVES

1. Students will learn about puberty hormones and sex assigned at birth.
2. Students will learn about testosterone-driven puberty changes and methods for managing those changes.
3. Students will learn about estrogen-driven puberty changes and methods for managing those changes.

MATERIALS

- ▶ Lesson plan handouts (see end of lesson):
 - “Testosterone-Driven Puberty Changes”
 - “Testosterone-Driven Bodies: External and Internal Reproductive Anatomy”
 - “Estrogen-Driven Puberty Changes”
 - “Estrogen-Driven Bodies: External Reproductive Anatomy”
 - “Estrogen-Driven Bodies: Internal Reproductive Anatomy”
 - “Menstrual Cycle”
 - “Menstrual Products”
- ▶ Anonymous question box slips.

Teaching Tip

At the beginning of every class:

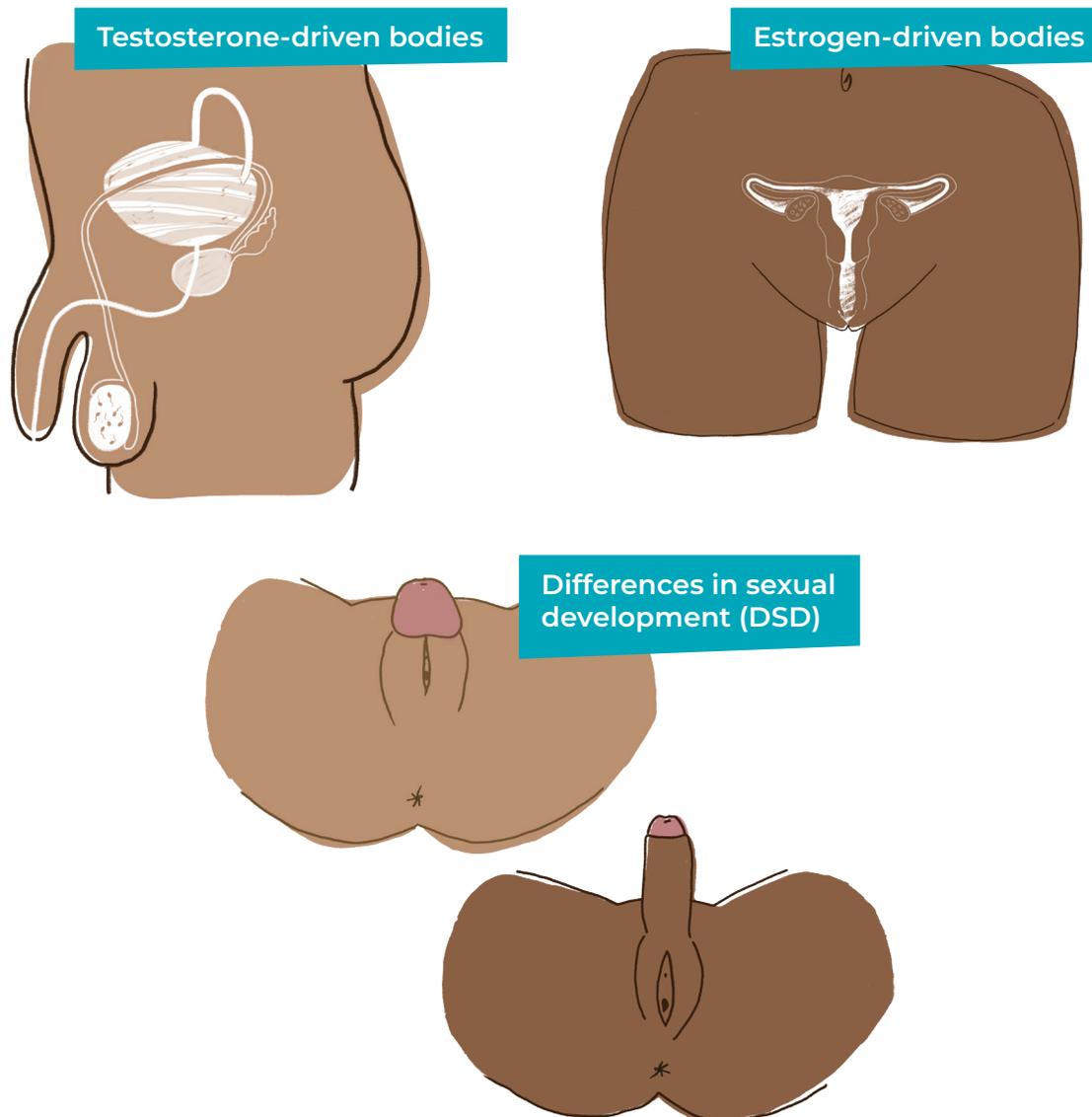
1. Provide external resources, such as:
 - Kids Help Phone – 1-800-668-6868; text 68-68-68; kidshelpphone.ca
 - School counsellors
 - Info websites, for example, amaze.org
2. Review your classroom rules.
3. Review the anonymous question box process.
4. Introduce the lesson plan objectives.

Objective One: Puberty Hormones and Sex Assigned at Birth

Explain:

- ▶ **Hormones** signal our bodies to start puberty.
- ▶ **Testosterone** and **estrogen** are the two main puberty hormones we talk about.
- ▶ All bodies produce both estrogen and testosterone during puberty, which is why a lot of changes are the same (like we read in the Chris story).
- ▶ But some bodies produce more estrogen and some bodies produce more testosterone so some changes are different.
- ▶ People with more testosterone typically have a penis and testicles and are often referred to as **males**.
- ▶ People with more estrogen typically have a vulva, vagina, ovaries and a uterus and are often considered **females**.
- ▶ Some people are born with a combination of genitals. This is called **differences in sexual development (DSD)**, previously known as intersex.
- ▶ This is what we call **sex assigned at birth**.

- ▶ It is important to acknowledge that anatomy and hormones don't decide gender. Some people with a penis don't want to be called male and some people with a vulva don't want to be called female.
- ▶ For this reason, when we talk about the different puberty changes, we use these terms.
 - **Testosterone-driven bodies** or people with a penis.
 - **Estrogen-driven bodies** or people with a vulva.
- ▶ In this section, we will learn about the reproductive systems on very typical-looking bodies. It does not mean that all bodies will look and function like these. Every body is unique.



Objective Two: Testosterone-Driven Puberty Changes

Explain:

- ▶ Testosterone causes specific changes in the body.
 - The shoulders and chest broaden, due to an increase in muscle mass.
 - The voice gets deeper, due to the larynx and vocal cords growing.

Fun Fact

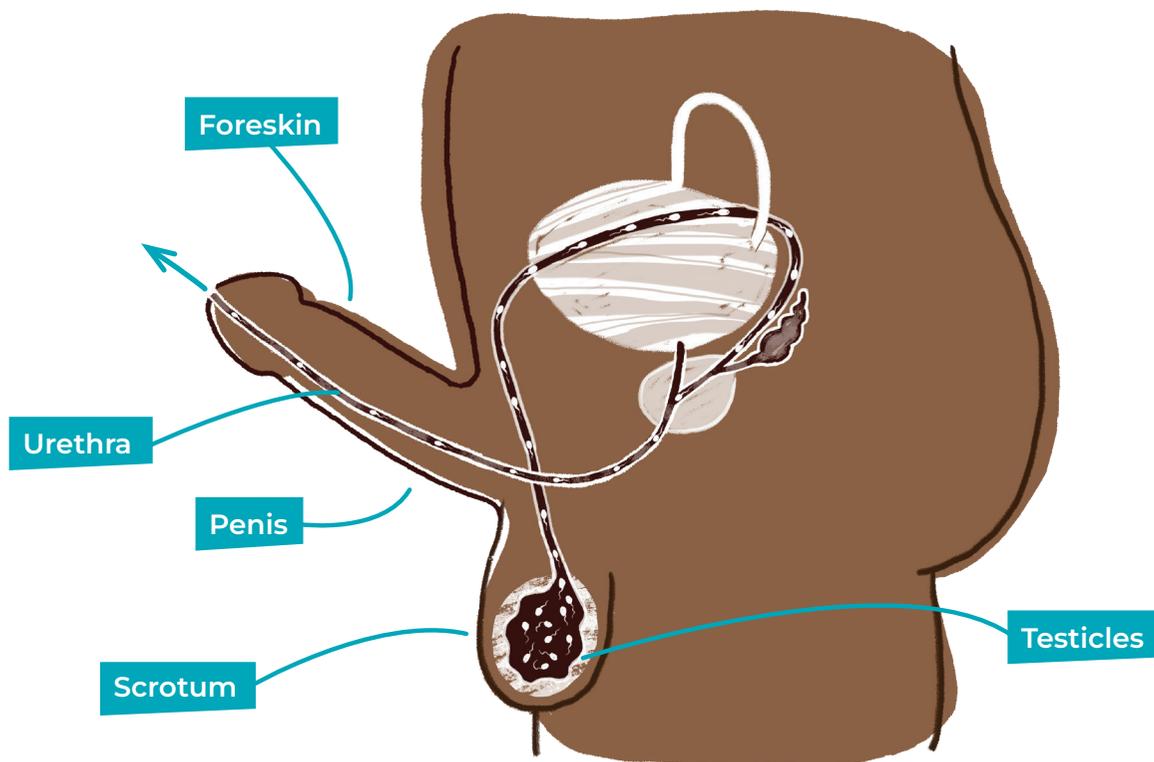
People born with a vulva and more estrogen still have testosterone in their bodies, and will experience growing muscles and a deepening voice – just not as much.

- ▶ The rest of the puberty changes we are going to talk about happen to the genitals and reproductive system. In order to understand these changes, we have to explain the reproductive system first.

ANATOMY OF TESTOSTERONE-DRIVEN BODIES

Explain:

- ▶ Testosterone-driven bodies include the following parts.
 - **Penis** – external reproductive organ.
 - **Foreskin** – a fold of skin covering the head of the penis. Sometimes the foreskin is removed in a procedure called circumcision.
 - **Scrotum** – a sack of skin containing the testicles.
 - **Testicles** – two oval reproductive glands inside the scrotum.
 - **Urethra** – the tube that carries both urine and semen out of the body.



Teaching Tip

Either draw this diagram on the board or provide students with the handout, found on page 57.

Fun Fact

When the penis becomes hard, the bladder muscle closes so urine and semen can never leave the penis at the same time.

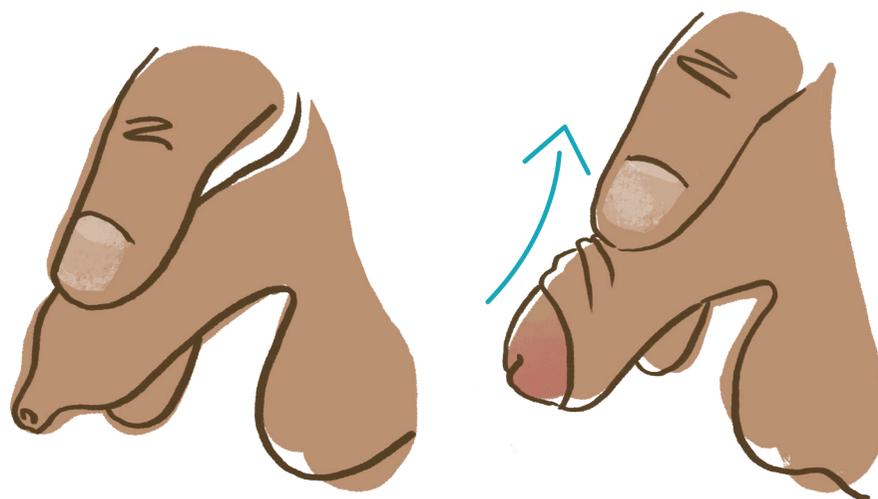
Foreskin Health Tip

Smegma is a naturally occurring lubricant that allows the foreskin to pull back. People with a foreskin need to wash underneath it – every day – to remove the buildup of smegma.

Here is how to wash the foreskin.

1. Gently slip the foreskin back in the shower.
2. Use a mild soap and warm water to wash the head of the penis and the inside fold of the foreskin.
3. Rinse the area well.
4. After the shower, pull the foreskin back to dry the head of the penis.

Note: Find the handout on page 56.



Explain:

- ▶ The following things happen during puberty. (Find the “Testosterone-Driven Puberty Changes” handout on page 55.)
 - The penis and testicles grow bigger.
 - More **erections** happen.
 - Erections occur when blood rushes to the penis and it becomes hard.
 - Erections happen for a lot of reasons, including rubbing the genitals, pleasurable thoughts, seeing an image or person they like, or for no reason at all.
 - If someone gets an erection in public they can sit down or cover up until it goes away.
 - The penis develops the ability to **ejaculate**.
 - Ejaculations become possible when the testicles begin to produce and release **sperm**.
 - Sperm leaves the testicles, mixes with fluid from the reproductive system to create **semen**, and exits out the tip of the penis.

Objective Three: Estrogen-Driven Puberty Changes

Explain:

- ▶ Estrogen causes specific changes in the body. (Find the “Estrogen-Driven Puberty Changes” handout on page 58.)
 - Hips widen to create room in the body to carry a baby if a person chooses to.
 - Breasts grow. If a person chooses to have a baby, the breasts fill with milk to feed the baby. The breasts may feel tender when growing. Wearing a bra or tight-fitting shirt can ease discomfort.

Health Tip

During puberty, people with a penis also develop a small amount of breast tissue. The breast tissue will not grow into full-sized breasts. Exercise and a healthy diet will help turn the tissue into muscle. Wearing a tight-fitting undershirt can ease discomfort.

- ▶ The rest of the puberty changes we are going to talk about happen to the genitals and reproductive system. In order to understand these changes, we have to explain the reproductive system first.

ANATOMY OF ESTROGEN-DRIVEN BODIES

Explain:

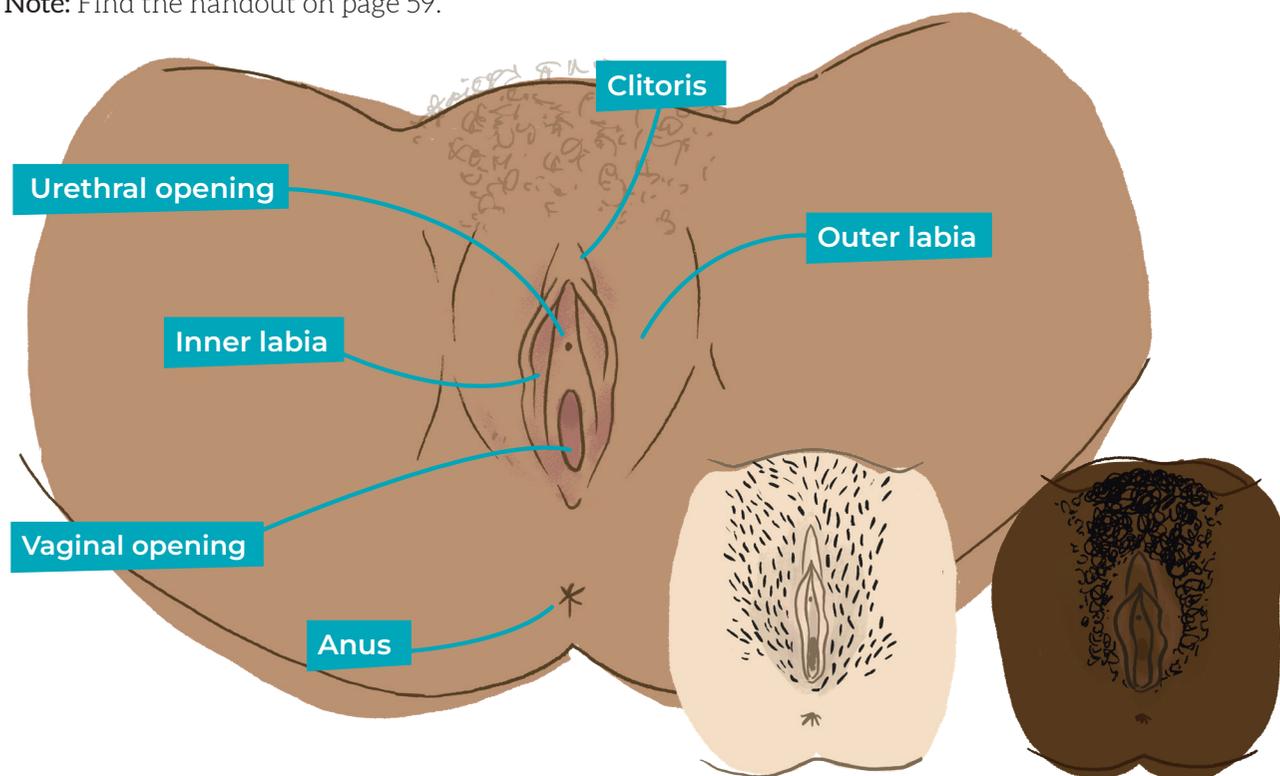
- ▶ The anatomy on this body has to be taught in two different parts. First, I will describe the **external genitals**, which is called the vulva. Second, I will describe the **internal reproductive system**.

EXTERNAL GENITALS

Explain:

- ▶ The genitals on this body are called the **vulva**.
- ▶ The vulva is tucked beneath the legs and underneath the body, so we will illustrate it facing up.
- ▶ The vulva is composed of the following parts.
 - **Outer labia** – two folds of skin along the sides of the vulva.
 - **Inner labia** – two folds of skin between the outer labia that grow during puberty.
 - **Clitoris** – a bundle of nerves at the top of the vulva that grows bigger during puberty.
 - **Urethral opening** – a small opening where urine leaves the body.
 - **Vaginal opening** – the opening to the vagina where menstrual fluid leaves the body.

Note: Find the handout on page 59.



Explain:

- ▶ During puberty:
 - The vulva develops – the outer and inner labia and clitoris grow larger.
 - **Vaginal fluid** is produced.
 - The vagina and cervix start to produce a clear white substance that helps clean and moisten the vagina.
 - Vaginal fluid will be noticeable on the underwear.
 - **Note:** If the vaginal fluid has an odour or is itchy, it could signal an infection and need medical treatment. See your doctor.

Health Tip

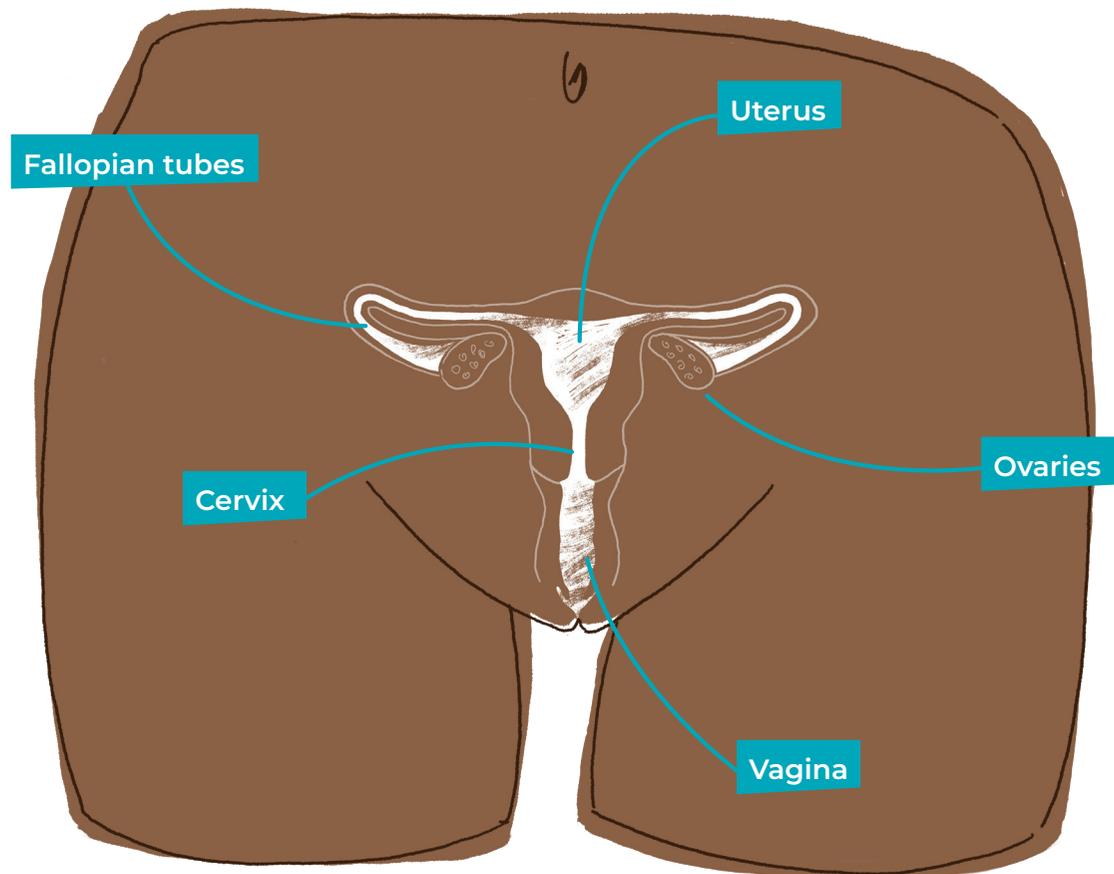
When using the bathroom, always wipe from the top of the vulva to the anus. This prevents bacteria from the anus entering the vagina and urethra.

INTERNAL REPRODUCTIVE SYSTEM

Explain:

- ▶ The vaginal opening leads to the **internal reproductive system**, which consists of the following parts.
 - **Vagina** – a muscular canal that extends up from the vaginal opening.
 - **Cervix** – the lower part of the uterus that extends into the vagina.
 - **Uterus** – a hollow pear-shaped organ where babies develop.
 - **Fallopian tubes** – tubes that extend from the uterus to the ovaries.
 - **Ovaries** – almond-shaped organs on each side of the uterus that hold eggs (ova).

Note: Find the handout on page 60.

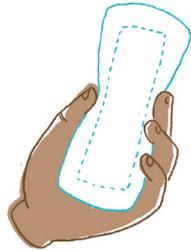


Explain:

- ▶ During puberty, the **menstrual cycle** begins. (Find the “Menstrual Cycle” handout on page 61.)
 - Once a month, an ovary releases an egg (ovum) and the uterus grows a lining of blood and tissue.
 - If the egg becomes fertilized by a sperm, it can implant into the uterus lining and develop into a baby.
 - If the egg is not fertilized, it will dissolve. The uterus lining of blood is then shed and leaves the body through the vaginal opening. This is called menstruation or a period.
 - Menstruation takes about five days. The first day the fluid is a “light flow” and a dark brown colour. The second, third, and fourth days the fluid is a “heavier flow” and is dark red. The fifth day the fluid returns to the dark brown colour.
 - Once the fluid is finished leaving the body the cycle starts again. The uterus lining regrows and an egg is released. This cycle takes around 28 days.
 - When the menstrual cycle starts, it may happen once and not again for several months. Once the puberty hormones balance out, the menstrual cycles become more regular.
 - Some people experience cramps when they get their period. Pain medication typically helps alleviate symptoms. If the pain is significant, visit a doctor.

Explain:

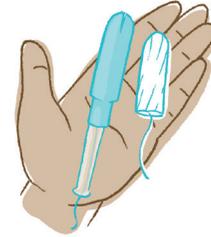
- ▶ **Menstrual products** are designed to collect menstrual fluid. There are several products to choose from. Start by introducing the basics. (Find the “Menstrual Products” handout on page 62.)

Panty liners

Panty liners are thin absorbent pads that are worn inside the underwear that collect menstrual fluid. Panty liners are used when the flow is light and should be changed every couple of hours, but they can be worn overnight. (Show sample and indicate that the sticky side is placed down.)

Pads

Pads are similar to panty liners, but are larger and hold more fluid. Pads are used when the flow is heavier and should be changed every couple of hours, but they can be worn overnight. (Show sample and indicate that the sticky side is placed down.)

Tampons

Tampons absorb menstrual fluid by being inserted into the vagina. Tampons should be changed every couple of hours. To remove a tampon, pull on the string and wrap in tissue before disposing in the garbage. Explain that it's very important not to leave a tampon in too long or else you can get a rare but serious infection. (Show sample of a tampon.)

Note: Students often ask if tampons hurt or if they can get stuck in the body. Explain that when you first use a tampon it might be uncomfortable, but it shouldn't be painful because the vagina is actually stretchy. If it is painful don't use them. Explain that a tampon cannot get stuck in the body. The vagina is the size of the middle finger and at the top of the vagina is the cervix. The tampon cannot pass the cervix so it's impossible for a tampon to get stuck. If the string does break off (which is very rare), they can “bear down” like they need to poop, place their fingers at the vaginal opening, and pull out the tampon.

Teaching Tip

Some students might say “I won't get a period. Why am I learning about this?”

Explain that it's important to understand how all bodies work to build comfort, compassion and knowledge around all bodies.

CLOSING

Review:

- ▶ Review the objectives covered in the lesson.

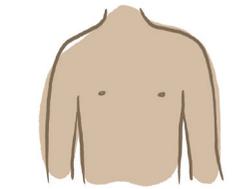
Anonymous questions:

- ▶ Collect anonymous question slips and answer them in the next class.
- ▶ **Note:** If you need assistance answering questions, contact health.promotion@yukon.ca.

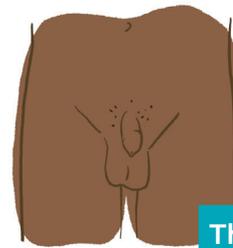
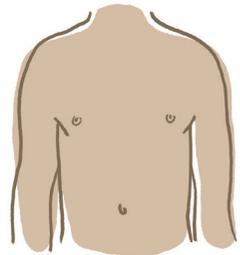
Handouts

- 55 “Testosterone-Driven Puberty Changes”
- 56 “Foreskin Health Tip”
- 57 “Testosterone-Driven Bodies: External and Internal Reproductive Anatomy”
- 58 “Estrogen-Driven Puberty Changes”
- 59 “Estrogen-Driven Bodies: External Reproductive Anatomy”
- 60 “Estrogen-Driven Bodies: Internal Reproductive Anatomy”
- 61 “Menstrual Cycle”
- 62 “Menstrual Products”

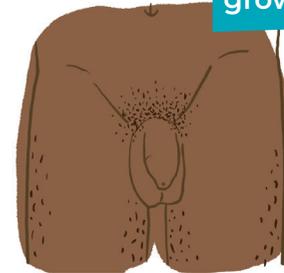
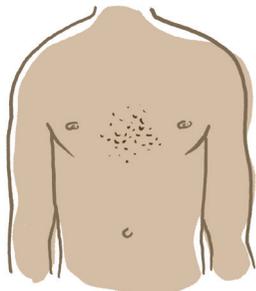
Testosterone-Driven Puberty Changes



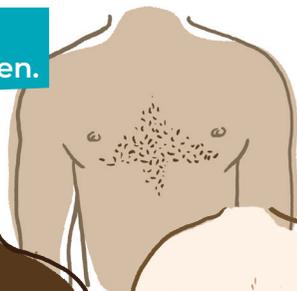
Age 3



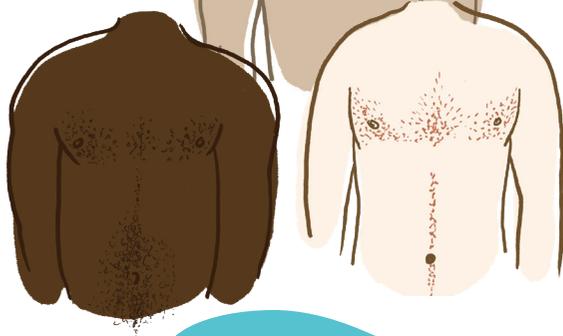
The penis and testicles grow bigger.



The chest and shoulders broaden.



Age 18



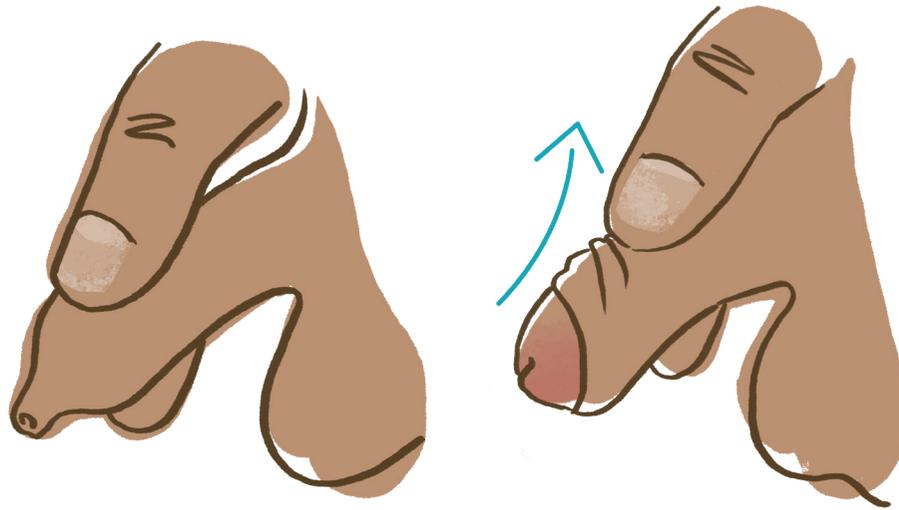
Increase in the number of erections.

Erections happen when blood rushes to the penis and it becomes hard. Erections happen for a lot of reasons including touching, pleasurable thoughts, seeing an image or person they like, or for no reason at all. If someone gets an erection in public they can sit down until it goes away.

Fun Fact

During puberty, males may develop a small amount of breast tissue. The breast tissue will not grow into full-sized breasts. Exercise and a healthy diet will help turn the tissue into muscle. Wearing a tight-fitting undershirt will ease discomfort.

Foreskin Health Tip



Smegma

Smegma is a naturally occurring lubricant that allows the foreskin to pull back.

Washing foreskin

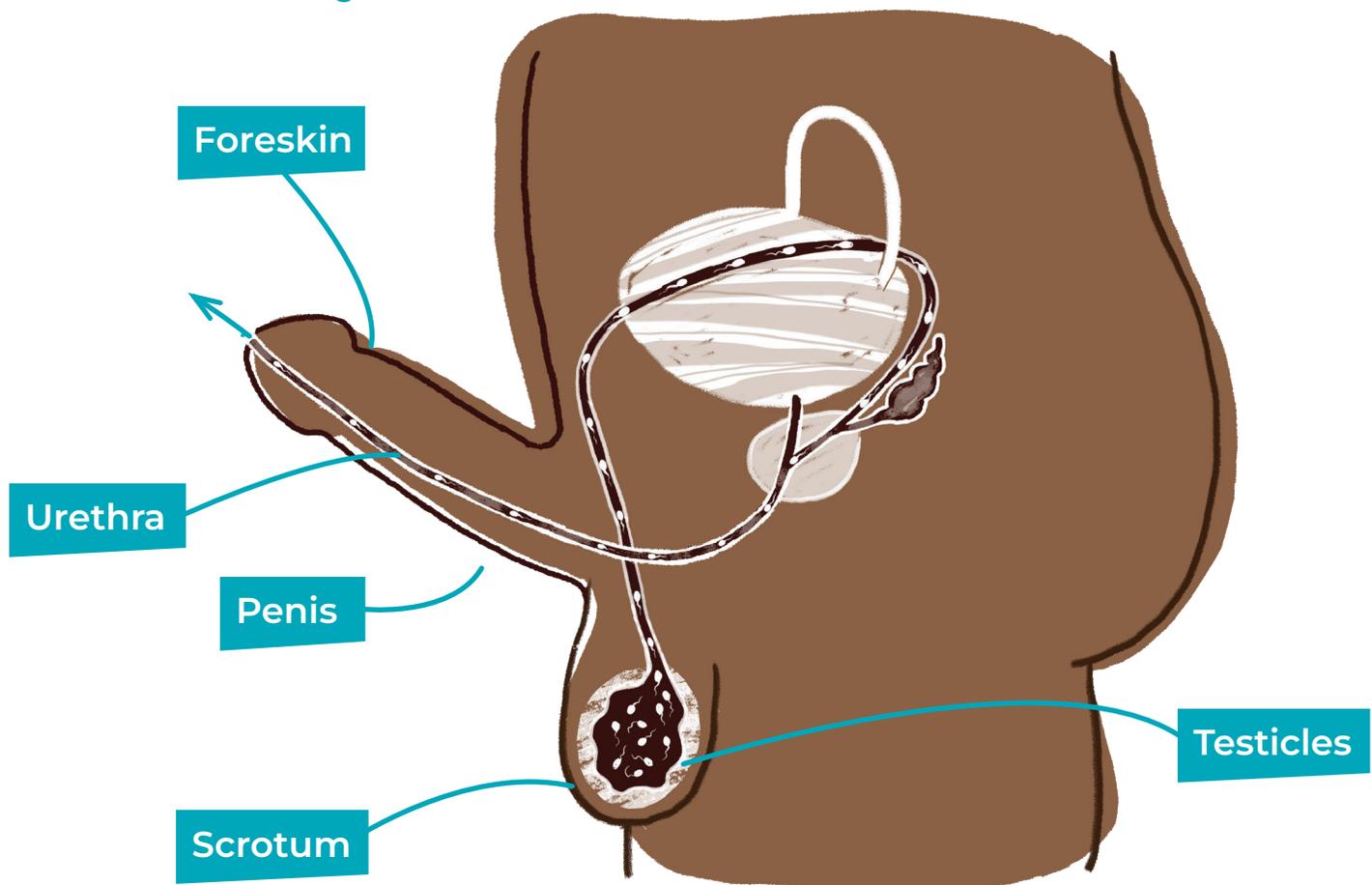
People with a foreskin need to wash underneath it, every day, to remove the buildup of smegma.

Here is how:

1. Gently slip the foreskin back in the shower.
2. Use a mild soap and warm water to wash the head of the penis and inside fold of the foreskin.
3. Rinse the area well.
4. After the shower, pull foreskin back to dry the head of the penis.

Testosterone-Driven Bodies:

External and Internal Reproductive Anatomy



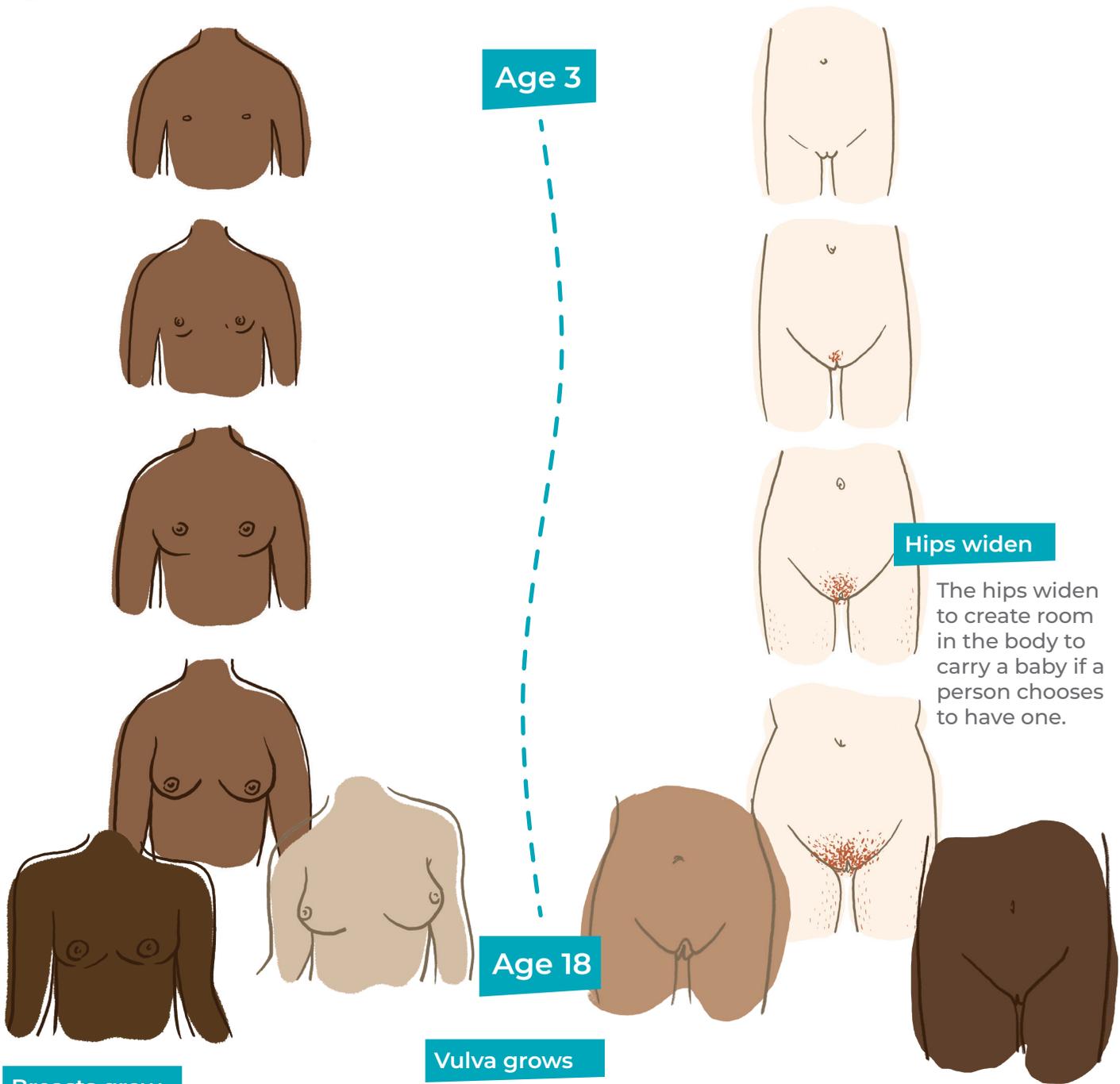
Fun Fact

When the penis becomes hard, the bladder muscle closes so urine and semen can never leave the penis at the same time.

Ability to ejaculate

Ejaculations become possible when the testicles begin to produce and release sperm. Sperm leave the testicles, mix with fluid from the reproductive system to create semen, and exit out the tip of the penis.

Estrogen-Driven Puberty Changes



Age 3

Age 18

Hips widen

The hips widen to create room in the body to carry a baby if a person chooses to have one.

Breasts grow

The breasts grow larger (and have the ability to produce milk if a person gives birth). The breasts can be tender when they are growing. Wearing a training bra eases discomfort.

Vulva grows

The outer and inner labia and clitoris grow and develop.

Vaginal fluid is produced

The vagina and cervix start to produce a clear white substance that helps clean and moisten the vagina. Vaginal fluid will be noticeable on the underwear. If the vaginal fluid has an odour or is itchy, it could signal an infection and require medical treatment.

Menstrual cycle begins

Estrogen-Driven Bodies:

External Reproductive Anatomy

Urethral opening

A small opening, where urine leaves the body.

Clitoris

The female sex organ that consists of erectile tissue.

Vulva

The external sex organ that includes the outer labia, inner labia, clitoris, urethral opening, and vaginal opening.

Outer labia

Two folds of skin along the sides of the vulva.

Inner labia

Two folds of skin between the outer labia.

Anus

The opening that stool leaves the body from.

Vaginal opening

The opening to the vagina.

Health Tip

When using the bathroom, always wipe from the top of the vulva to the anus. This prevents bacteria from the anus entering the vagina and urethra.



Note: Every vulva looks a little different.

Estrogen-Driven Bodies:

Internal Reproductive Anatomy

Fallopian tubes

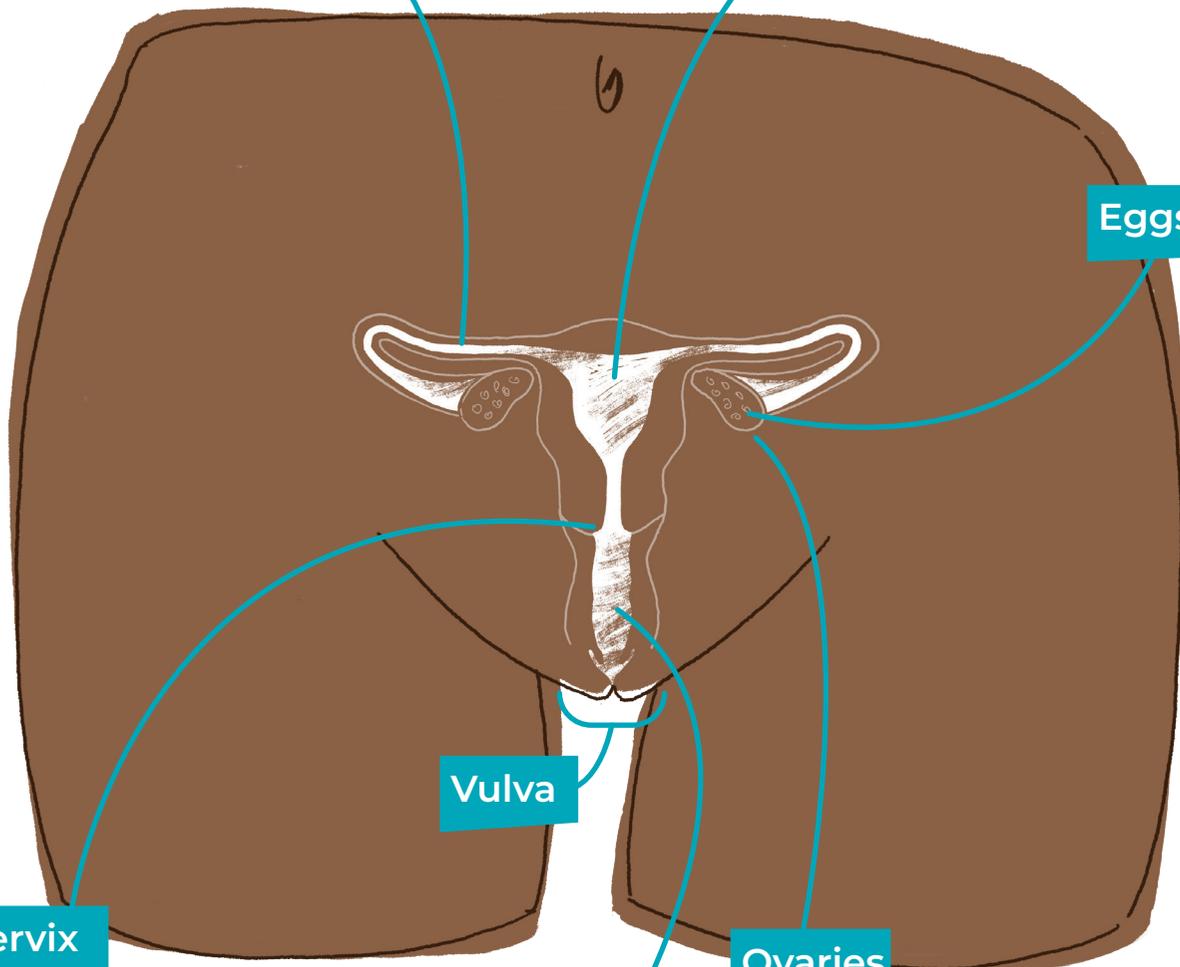
Tubes that extend from the uterus toward the ovaries.

Uterus

A hollow, pear-shaped organ where babies develop.

Eggs/ovum

Female sex cells.



Vulva

Cervix

The lower part of the uterus that extends into the vagina.

Ovaries

Almond-shaped organs on each side of the uterus that produce eggs (ova).

Vagina

A muscular canal that extends up from the vaginal opening.

Menstrual Cycle

Once a month, one ovary releases an egg (ovum), and the uterus grows a lining of blood and tissue. If the egg becomes fertilized by a sperm, it can implant into the uterus lining and develop into a baby.

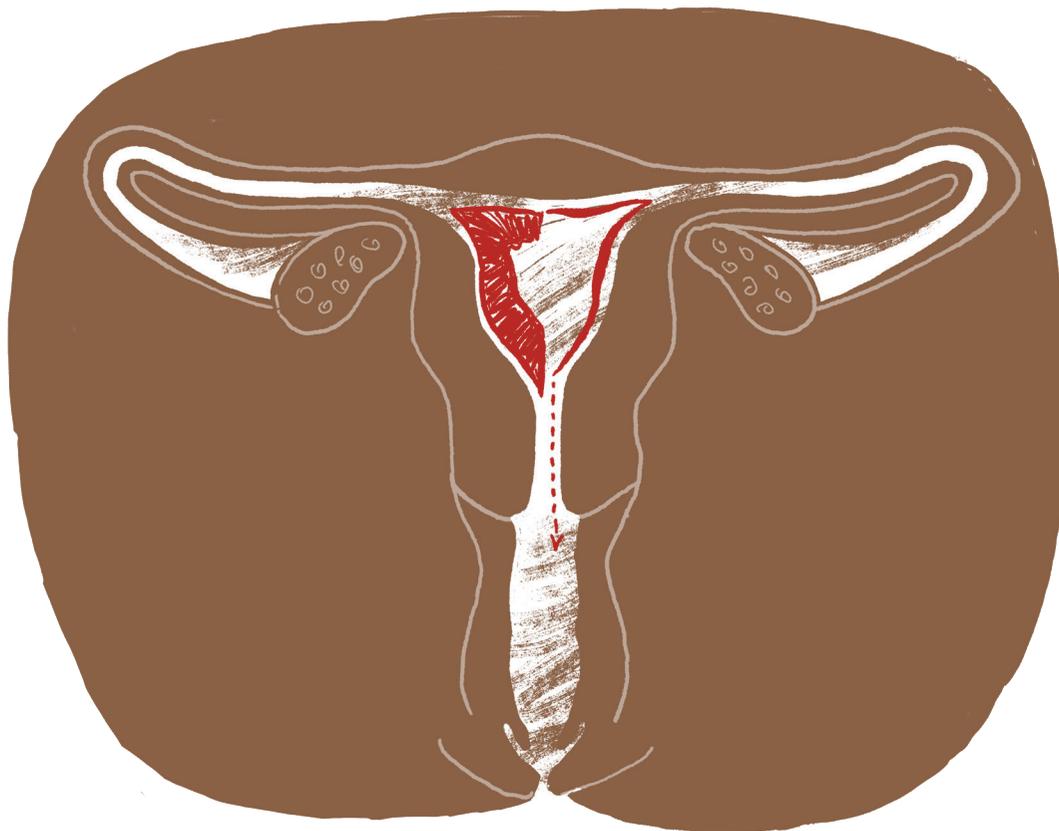
If the egg is not fertilized, it will dissolve and the uterus lining is shed through the vaginal opening. This is called **menstruation** or a **period**.

Before a period

The uterus develops a thick lining of blood and tissue.

During a period

Most of the lining is shed in the menstrual flow.

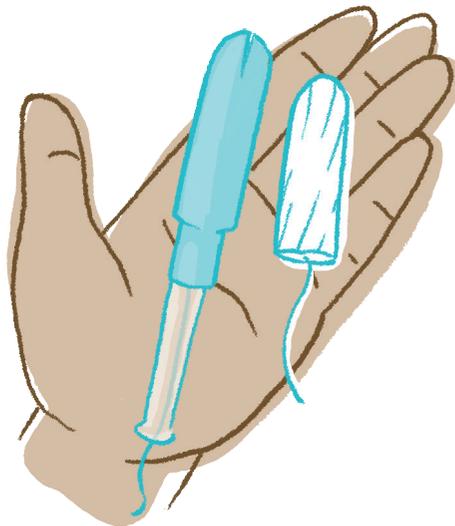
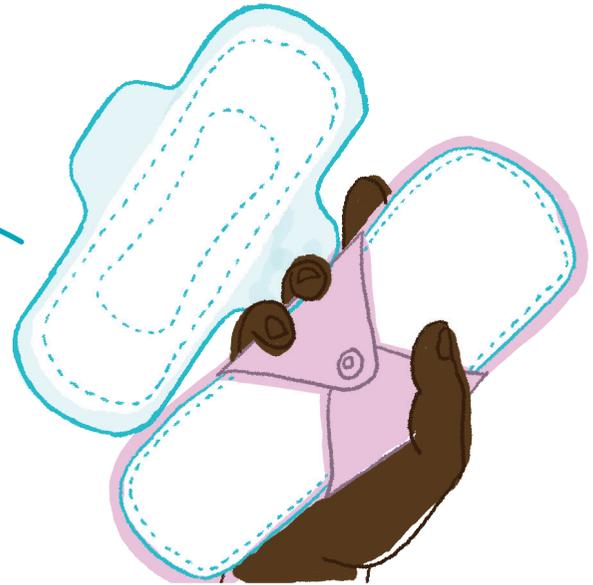


Menstrual Products

There are so many ways a person can manage their period. Here are some options.

Pads

Place on top of underwear. It collects blood as it leaves the vagina. You can also find reusable pads that you can machine wash.

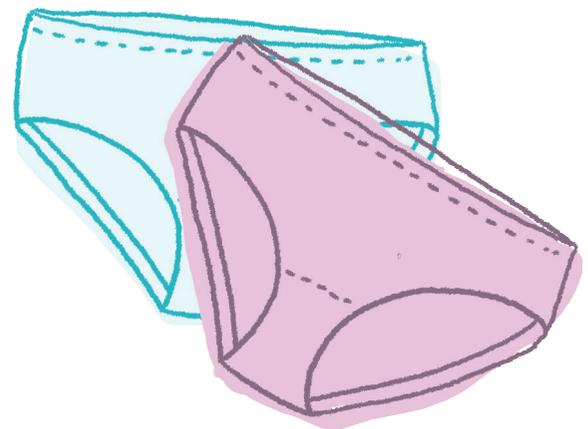


Tampons

Insert into the vagina. It absorbs blood before it leaves the body. Read the box to see how long you can safely leave them in.

Period underwear

Wear the same as regular underwear. Blood absorbs directly into the fabric. Rinse and machine wash to use during your next period.



Lesson 4

Puberty Changes and Reproduction

 60 minutes

CURRICULAR COMPETENCIES

Mental well-being

- ▶ Describe and assess strategies for promoting mental well-being.
- ▶ Explore and describe strategies for managing physical, emotional and social changes during puberty.
- ▶ Describe factors that positively influence mental well-being and self-identity.

CONTENT

- ▶ Physical, emotional and social changes that occur during puberty, including those involving sexuality, and sexual identity.

OBJECTIVES

1. Students will learn the connection between puberty and reproduction.

MATERIALS

- ▶ Lesson plan handout (see end of lesson):
 - “Pregnancy”
- ▶ Anonymous question box slips.

Teaching Tip

At the beginning of every class:

1. Provide external resources, such as:
 - Kids Help Phone - 1-800-668-6868; text 68-68-68; kidshelpphone.ca
 - School counsellors
 - Info websites, for example, amaze.org
2. Review your classroom rules.
3. Review the anonymous question box process.
4. Introduce the lesson plan objectives.

Objective One: Puberty Changes and Reproduction

Explain:

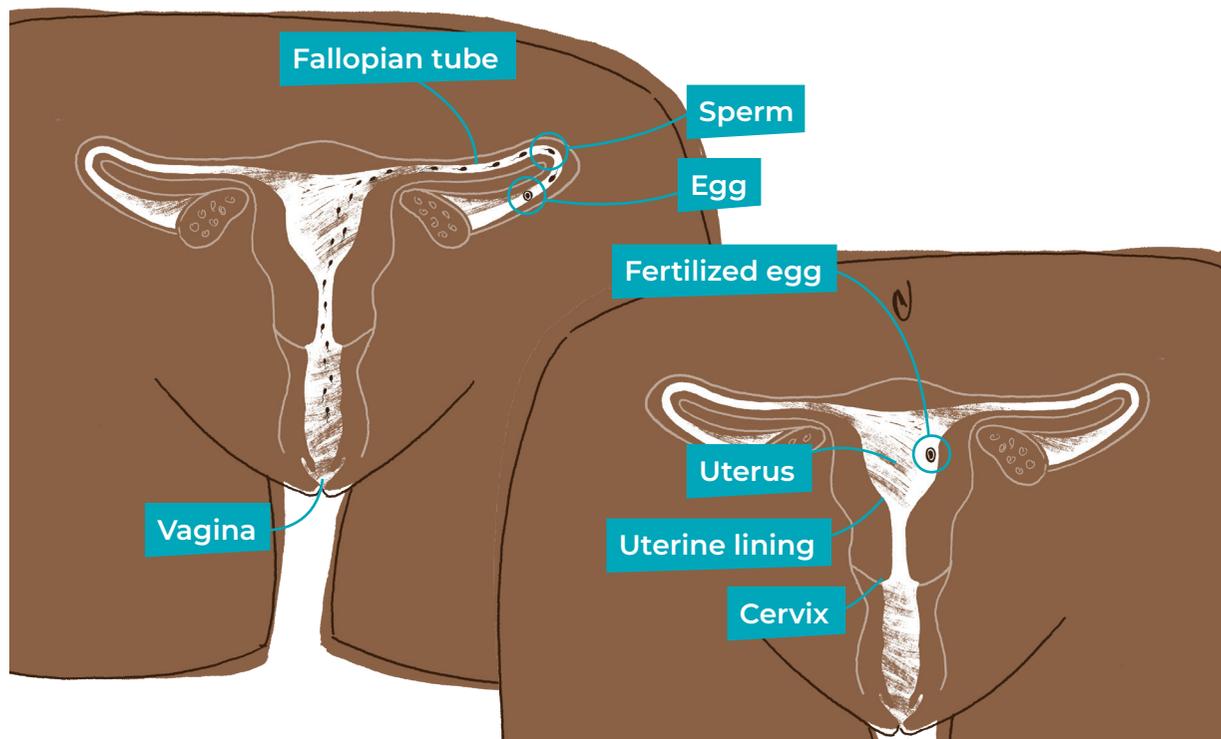
- ▶ Before puberty, the body cannot make a baby.
- ▶ Once bodies start producing sperm and releasing eggs, they have the ability to create a baby.
- ▶ Most kids find this concept “gross” because they are not mentally or emotionally ready to have a baby.
- ▶ Making a baby is a big decision for consenting adults.
- ▶ Even though you are not ready to have a baby, it’s still important to understand how the body works.

CONCEPTION/PREGNANCY

Explain:

- ▶ **Conception/pregnancy** happens when a sperm fertilizes an egg, the fertilized egg implants into the uterus lining and grows into a baby.
- ▶ This can happen during vaginal intercourse (penis into the vagina) or through different types of fertility treatments, for example, medication, sperm donation, egg donation.
- ▶ There are a few general steps that need to happen for the sperm and egg to meet.
 1. **Ovulation** – Once a month, an ovary releases an egg into the fallopian tube.
 2. **Intercourse** – A penis enters the vagina and semen, containing sperm, is ejaculated into the vagina. This step can also happen through fertility treatments, for example, medication, sperm donation or egg donation.
 3. **Fertilization** – A sperm connects with the egg in the fallopian tube.
 4. **Implantation** – The fertilized egg implants into the uterus and spends about nine months growing into a baby.
- ▶ After nine months, the baby is ready to leave the body.
- ▶ The cervix (the organ between the vagina and uterus) opens 10 cm and the baby leaves the uterus and out the vagina.
- ▶ Sometimes (for various reasons) a baby cannot leave through the vagina. In these cases, the baby is born by caesarean section (C-section) where a doctor will make an incision into the uterus and guide the baby out.

Note: Find the handout on page 68.



Fun Fact

Twins, triplets, quadruplets, quintuplets, etc.

A lot of students ask about twins and multiple babies because the recipe for a baby is one egg and one sperm. In the case of identical twins, a fertilized egg splits and develops into two babies with exactly the same genetic information. In the case of non-identical twins, two eggs are released and are fertilized by two different sperm and produce two different-looking babies.

In the case of triplets and multiple babies, it is more complicated, and each case would be unique. It may even be the result of using fertility treatments, for example, medication, sperm donation or egg donation.

CLOSING

Review:

- ▶ Review the objectives covered in the lesson.

Anonymous questions:

- ▶ Collect anonymous question slips.
- ▶ **Note:** If you need assistance answering questions, contact health.promotion@yukon.ca.

Handouts

68 "Pregnancy"

Pregnancy

Pregnancy happens when a sperm fertilizes an egg that then implants into the uterus wall and grows into a baby. This can happen during vaginal intercourse or through different types of fertility treatments, for example, medication, sperm donation or egg donation.

Step 1: Ovulation

Once a month an ovary releases one egg into the fallopian tube.

Step 2: Intercourse or fertility treatment

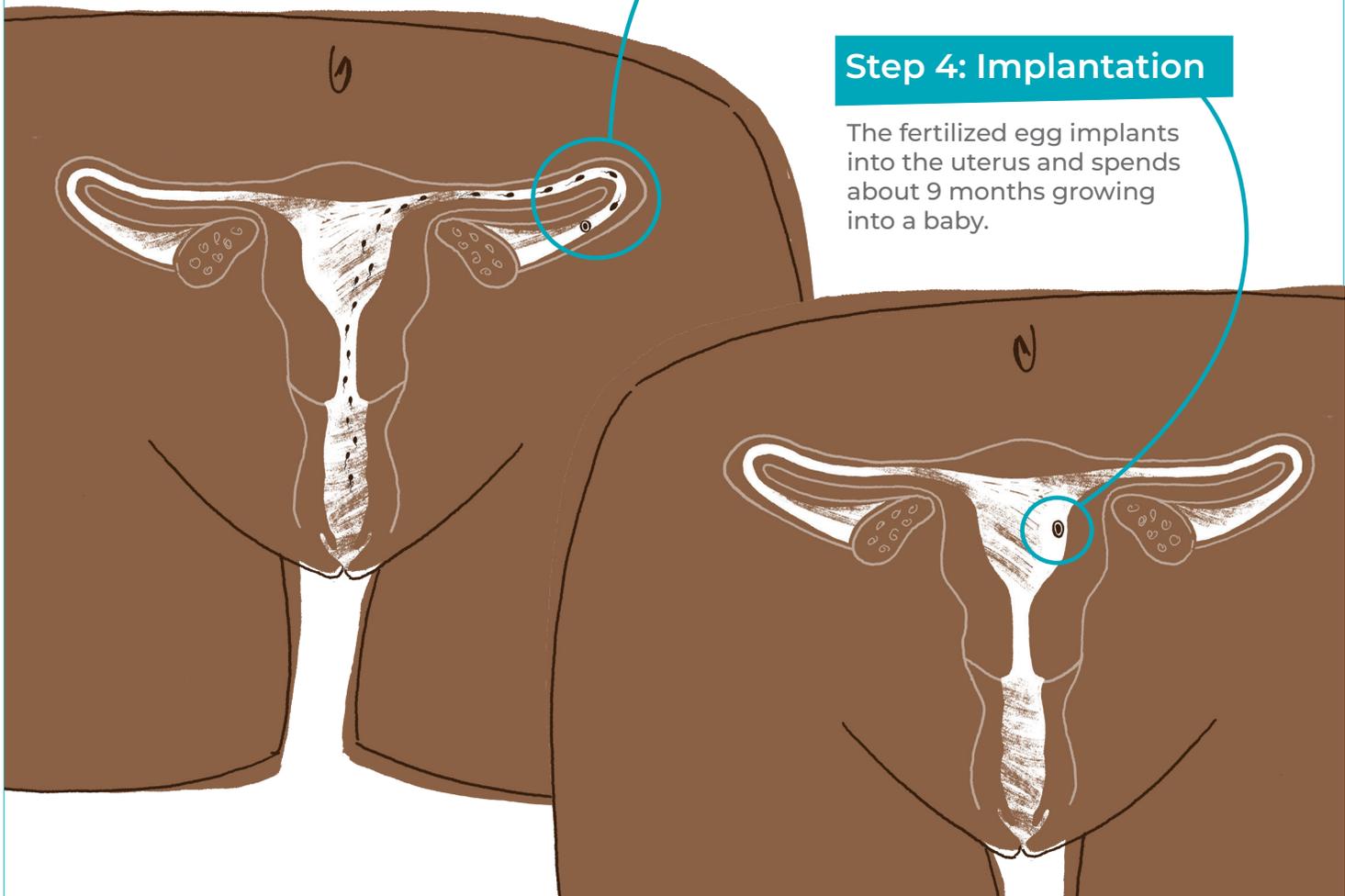
Semen containing sperm enter into the vagina. During intercourse this happens when the penis ejaculates into the vagina.

Step 3: Fertilization

A sperm connects with the egg in the fallopian tube.

Step 4: Implantation

The fertilized egg implants into the uterus and spends about 9 months growing into a baby.



Lesson 5

Sexually Transmitted Infections (STIs)

 60 minutes

CURRICULAR COMPETENCIES

Social and community health

- ▶ Identify and describe strategies for avoiding and/or responding to potentially unsafe, abusive or exploitive situations.
- ▶ Describe and assess strategies for responding to discrimination, stereotyping and bullying.
- ▶ Describe and apply strategies for developing and maintaining healthy relationships.

Mental well-being

- ▶ Explore and describe strategies for managing physical, emotional and social changes during puberty and adolescence.
- ▶ Explore and describe how personal identities adapt and change in different settings and situations.

CONTENT

- ▶ Practices that reduce the risk of contracting sexually transmitted infections and life-threatening communicable diseases.
- ▶ Sources of health information.
- ▶ Strategies to protect themselves and others from potential abuse, exploitation and harm in a variety of settings.
- ▶ Physical, emotional and social changes that occur during puberty and adolescence.
- ▶ Influences of physical, emotional and social changes on identities and relationships.
- ▶ Influences on individual identity, including sexual identity, gender, values and beliefs.

OBJECTIVES

1. Students will learn about viruses and bacteria and how they spread.
2. Students will learn about the connection between viruses and bacteria and sexually transmitted infections.
3. Students will learn ways to reduce the spread of viruses and bacteria.

Note: Each objective can be taught as a separate lesson.

Teaching Tip

This lesson should only be taught after students have a full understanding of puberty and reproduction. If necessary, teach the Grades 4 to 7 Puberty and Reproduction lesson for review.

MATERIALS

- ▶ Post-it® Notes.
- ▶ Latex gloves.
- ▶ Question box with sheets of paper.
- ▶ Optional: sexually transmitted microbes stuffed models (giantmicrobes.com).

RATIONALE

- ▶ Most students at this age are not sexually active, yet they are regularly exposed to messages about sexually transmitted infections (STIs) from the media and the internet. Hearing about STIs, without understanding what they are, creates fear and stigma that can lead to lifelong anxiety about getting tested and treated once they become sexually active.
- ▶ Teaching students from a young age what STIs are, how they are spread, and how to prevent and treat them alleviates confusion, normalizes sexual health, and helps safeguard them before they become sexually active.

Objective One: Viruses and Bacteria and Transmission

Explain:

- ▶ **Viruses** and **bacteria** are germs that can make us sick.
- ▶ Write virus and bacteria on the board in two columns.

Ask:

- ▶ Who has had the chickenpox or flu? Write **chickenpox** and **flu** under virus.
- ▶ Who has had strep throat or pink eye? Write **strep throat** or **pink eye** under bacteria.

Explain:

- ▶ Viruses and bacteria are transmitted from person to person, often through very casual contact, for example, breathing in virus particles after someone sneezes or coughs, ingesting virus particles from our hands when we eat, or sharing a drink or food.
- ▶ When a **virus** enters our body, the **immune system** will try to flush it out by making us sneeze, cough, run a fever, etc. Eventually, our immune system will figure out how to destroy the virus. If that virus tries to enter our body again, it won't be able to because our body knows how to fight it. Sometimes we can also take antiviral medication to help our body suppress the virus.
- ▶ When **bacteria** enters our body, we take **antibiotics** to kill the bacteria. If the bacteria enters our body again, we have to take antibiotics again.
- ▶ Some viruses and bacteria are preventable through **vaccinations**.
- ▶ A **vaccine** is a type of medicine that keeps you from getting sick. It does this by teaching your body to fight off certain viruses and bacteria. There are more vaccines for viruses than bacteria.

Activity

Explain:

- ▶ You are going to play a game to illustrate how viruses and bacteria spread.

Instructions:

1. Give each student and yourself a sticky note.
2. Give gloves to a few students.
3. Tell a few students that they are not going to participate and will just observe the activity.
4. Tell the rest of the students to move around and high-five at least five peers and jot down their names.
5. Once everyone has high-fived, have them sit down.

Explain:

- ▶ That you, the teacher, have the **high-five virus**.
- ▶ Whomever high-fived you got the virus, unless they wore a glove.
- ▶ The people you high-fived also got the virus.
- ▶ The virus may have even spread to the whole classroom if everyone high-fived someone who was infected.
- ▶ The people wearing gloves or not playing did not get the virus or bacteria.
- ▶ This activity reinforces the fact that there are invisible viruses and bacteria all around us that are spread in various ways, for example, sneezing, coughing and touching.

Objective Two: Viruses and Bacteria and Sexually Transmitted Infections

Ask:

- ▶ How do viruses and bacteria relate to sexually transmitted infections (STIs)?

Explain:

- ▶ **Sexually transmitted infections (STIs)** are viruses, bacteria and parasites that can be passed through sexual activity.
- ▶ STIs are similar to infections people get in their daily lives, but stigma/shame often prevents people from getting tested and treated.
- ▶ STIs can be passed through fluid-to-fluid and skin-to-skin contact with an infected partner.

Fluids that can transmit STIs are:

- ▶ Blood
- ▶ Semen
- ▶ Vaginal fluid

Body parts that can transmit STIs are:

- ▶ Mouth
- ▶ Genitals
- ▶ Anus

Objective Three: Reducing the Spread of Viruses and Bacteria

Explain:

- ▶ In high school, lessons go into much more detail about STIs. For now, it's important to understand that there are several steps a person can take to **reduce the spread of STIs**, which include the following.
 1. **Abstain** from having sex.
 2. Use a **condom**. Condoms go over the penis and prevent the skins from touching and fluids from mixing, which can both transmit STIs.
 3. **Get tested** for STIs once sexually active.
 4. **Get treated** for STIs if necessary.
- ▶ A lot of stigma surrounds STIs and, because symptoms are rare, many people don't know when they have an STI.
- ▶ Left untreated, many STIs can have long-term health consequences. People can also infect other partners without realizing it!
- ▶ STI tests are quick and easy, and usually involve a urine sample, swab, blood test, and/or visual exam. If a patient is found to have an STI, they can be treated at the same clinic where they got tested. Many STIs can be treated quickly by antibiotics. Other STIs can be managed with anti-viral medication.

STIs often have no symptoms. Testing is the only way to know.

Explain:

- ▶ There are several places throughout the Yukon where you can get tested for STIs. You can call your local care provider to make an appointment. See below for contact information.
 - **In Whitehorse:**
 - Yukon Communicable Disease Control (YCDC): 4 Hospital Road, 867-667-8323
 - Sexual Health Clinic: 406 Lambert Street, 867-393-6635
 - Your family doctor
 - **Note:** Community health centres are on the next page.

- **Community health centres:**
 - Beaver Creek: Mile 1202 Alaska Highway, 867-862-4444
 - Carcross: 1952 Tagish Avenue, 867-821-4444
 - Carmacks: 106 River Drive, 867-863-4444
 - Dawson City: 501 Sixth Avenue, 867-993-4300
 - Destruction Bay: Mile 1083 Alaska Highway, 867-841-4444
 - Faro: 111 Bell Avenue, 867-994-4444
 - Haines Junction: 131 Bates Street, 867-634-4444
 - Mayo: 21 Centre Street, 867-996-4444
 - Old Crow: Building 200, 867-966-4444
 - Pelly Crossing: Km 464 North Klondike Highway, 867-537-4444
 - Ross River: 14 Kulan Street, 867-969-4444
 - Teslin: 27 Johnstone Avenue, 867-390-4444
 - Watson Lake: 801 Ravenhill Drive, 867-536-5255

CLOSING

Review:

- ▶ Today we talked about the following.
 1. Viruses and bacteria and how they spread.
 2. The connection between viruses and bacteria and sexually transmitted infections.
 3. Ways to reduce the spread of viruses and bacteria.

Anonymous questions:

- ▶ Collect anonymous questions and answer them in the next class.
- ▶ **Note:** If you need assistance answering questions, contact health.promotion@yukon.ca.

Lesson 6

Healthy vs. Unhealthy Lifestyles and Self-Care¹⁶

 60 minutes

CURRICULAR COMPETENCIES

Healthy and active living

- ▶ Identify factors that influence healthy choices and explain their potential health effects.
- ▶ Identify and apply strategies to pursue personal healthy-living goals.

Mental well-being

- ▶ Describe and assess strategies for promoting mental well-being, for self and others.

CONTENT

- ▶ Factors that influence personal eating choices.

OBJECTIVES

1. Students will explore the concept of healthy and unhealthy lifestyles.
2. Students will explore self-care strategies.

MATERIALS

- ▶ Six sticky notes per student.
- ▶ Four pieces of construction paper per student.
- ▶ Anonymous question box slips.

¹⁶ *Beyond the Basics: A Resource for Educators on Sexuality and Sexual Health* (Third Edition)
Action Canada for Sexual Health & Rights (2017).

Teaching Tip

At the beginning of every class:

1. Provide external resources, such as:
 - Kids Help Phone – 1-800-668-6868; text 68-68-68; kidshelpphone.ca
 - School counsellors
 - Info websites, for example, amaze.org
2. Review your classroom rules.
3. Review the anonymous question box process.
4. Introduce the lesson plan objectives.

Objective One: Healthy vs. Unhealthy Lifestyles

Explain:

- ▶ **Health** is a state of complete physical, mental and social well-being, and not merely the absence of disease or infirmity.¹⁷
- ▶ The media often portrays a very different notion of healthy people and behaviours, for example, tall, extremely skinny, very muscular, popular, vaping, drinking and partying.
- ▶ Often these representations of health are not possible to attain (for example, being taller), or they require **unhealthy** actions to achieve (for example, crash dieting, excessive exercising, making “fake” friends, changing yourself to fit in, vaping and drinking).
- ▶ Being able to discern between healthy vs. unhealthy concepts of lifestyles and beauty is a part of self-care and self-acceptance.
- ▶ **Self-care** is the act of caring for yourself beyond physical survival needs.
- ▶ Self-care is vital to defying the pressures to achieve unrealistic beauty standards.

¹⁷ World Health Organization (2021).

Activity

Brainstorm:

- ▶ On one side of the board write “Healthy” and “Unhealthy” on the other.
- ▶ Hand out six sticky notes to each student.
- ▶ Ask students to write the first couple of words that come to mind when they think of the word “healthy.”
- ▶ Ask students to write the first couple of words that come to mind when they think of the word “unhealthy.”
- ▶ If necessary, prompt with questions such as these.
 - What do each of these words *look* like?
 - What do each of these words *feel* like?
 - What do each of these words *taste* like?
 - What do each of these words *smell* like?
 - What do each of these words *sound* like?
- ▶ Ask students to place their sticky notes under “Healthy” or “Unhealthy.” If they are unsure, ask them to place them between the two categories.

Share:

- ▶ Ask if any student would be willing to pick out one of their sticky notes and share a reflection with the class based on the questions below.
 - Why did you place this sticky note here?
 - What information influenced your decision?
- ▶ After students have shared their reflections, ask the class the following questions.
 - Consider all the sticky notes under the “Healthy” section. Are skinny people all these things? How about plus-sized people? Why or why not?
 - Consider all the sticky notes under the “Unhealthy” section. Are skinny people all these things? How about plus-sized people? Why or why not?
- ▶ **Note:** It’s important to explain that many people are naturally skinny, while others are naturally bigger. The concern happens when people go to extreme measures to achieve these body types.

Explain:

- ▶ There is no easy “black or white” answer to what makes someone healthy or unhealthy.
- ▶ Each person has a unique health profile that includes – but is not limited to – genetic, social, psychological, emotional, economic, political and environmental factors.
- ▶ Body size does not indicate health status.
- ▶ You cannot tell how healthy or unhealthy someone is by looking at their outward physical appearance.
- ▶ As bodies change during puberty and adolescence, many people feel self-conscious and/or dissatisfied with the way they look.
- ▶ Self-care is a great way to improve our body image and feel better about ourselves.

Objective Two: Self-Care Strategies

Explain:

- ▶ **Self-care** is the act of caring for yourself beyond physical survival needs.
- ▶ Self-care is unique to everyone.
- ▶ Self-care is about figuring out what feels like an affirming and supportive practice to you.
- ▶ Part of your self-care might include reading every night, writing in a journal, playing sports, learning an instrument, etc.
- ▶ Whatever self-care strategies you choose, they are usually:
 - something that does not depend on someone else; and
 - a way of loving, supporting, affirming and caring for the whole of who you are.

Activity

Brainstorm:

- ▶ Explain that learning to love and appreciate yourself is a big part of self-care.
- ▶ Write the word “love” on the board and ask students what they think of when they hear this word.
- ▶ Write their answers on the board.
- ▶ Write the word “care” on the board and ask students what they think of when they hear this word.
- ▶ Write their answers on the board.

Write:

- ▶ Ask students to use the words on the board, as inspiration, to write a “loving and caring” letter to themselves.
- Note:** Make this a private activity that students do not have to share.

Debrief:

- ▶ Debrief the activity by asking the following questions.
 - What surprised you about the activity?
 - What did you find challenging about the activity?
 - What did you find empowering about the activity?

Explain:

- ▶ Explain that we can break self-care strategies into four categories.
 1. Body.
 2. Mind.
 3. Heart.
 4. Spirit.
- ▶ It is important to find different ways to care for each aspect of yourself.
- ▶ Give each student four pieces of construction paper and ask them to label each with the categories.

- ▶ Explain that their task is to think of a way that they could (or already do) care for one of these aspects of themselves (body, mind, heart, spirit), then represent it in poster form. Some examples include exercising, meditating, drawing and reading.
- ▶ They can either draw or write words on their self-care posters.
- ▶ Emphasize that the point is not to encourage other people to adopt your self-care strategy. It is about creating a poster that you feel affirmed by, one you might want to hang on your wall as a reminder of what self-care strategies work for you.

CLOSING

Review:

- ▶ Review the objectives covered in the lesson.

Anonymous questions:

- ▶ Collect anonymous questions and answer them in the next class.
- ▶ **Note:** If you need assistance answering questions, contact health.promotion@yukon.ca.

Lesson 7

Developing Healthy Self-Concept¹⁸

 60 minutes

CURRICULAR COMPETENCIES

Healthy and active living

- ▶ Identify factors that influence healthy choices and explain their potential health effects.
- ▶ Identify and apply strategies to pursue personal healthy-living goals.

Mental well-being

- ▶ Describe and assess strategies for promoting mental well-being, for self and others.

CONTENT

- ▶ Factors that influence personal eating choices.

OBJECTIVES

1. Students will learn about self-concept.
2. Students will learn self-acceptance strategies.

MATERIALS

- ▶ Body-sized piece of paper for each student.
- ▶ Lesson plan handouts (see end of lesson):
 - “Self-Concept”
 - “Shifting Perspectives”
 - “My Mask”
- ▶ Anonymous question box slips.

¹⁸ *Beyond the Basics: A Resource for Educators on Sexuality and Sexual Health* (Third Edition) Action Canada for Sexual Health & Rights (2017).

Teaching Tip

At the beginning of every class:

1. Provide external resources, such as:
 - Kids Help Phone – 1-800-668-6868; text 68-68-68; kidshelpphone.ca
 - School counsellors
 - Info websites, for example, amaze.org
2. Review your classroom rules.
3. Review the anonymous question box process.
4. Introduce the lesson plan objectives.

Objective One: Self-Concept

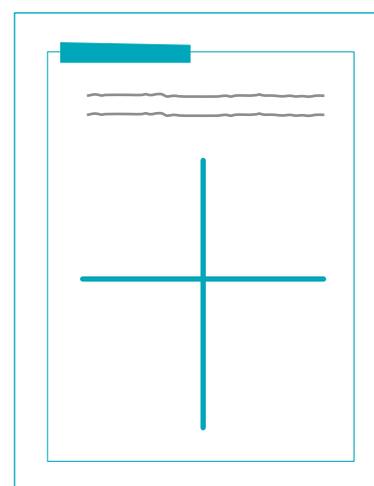
Explain:

- ▶ **Self-concept** refers to the ways that we think about ourselves based on belief, perception and evaluation.
- ▶ Self-concept includes self-esteem, self-worth and self-image.
- ▶ Self-concept is influenced by families, peers, communities, media and cultures.
- ▶ Self-concept is also influenced by experience of stigma and discrimination.

Activity

Explain:

- ▶ **Step 1:**
 - Distribute the “Self-Concept” handout and ask students to fill out each of the four quadrants.
 - Ask them to provide at least three answers in each quadrant.
 - Prompt students by asking the following questions.
 - How does what happens outside of you influence how you feel about yourself internally?
 - What stories do you tell yourself and how do these stories influence how you see and value yourself?
- ▶ **Step 2:**
 - Distribute a body-sized piece of paper to each student.
 - Working in pairs, ask students to draw their partner’s body outline.
 - Individually, ask students to use their body outlines to visually depict what they wrote in their four quadrants. They can draw each quadrant wherever they like on their body.
- ▶ **Step 3:**
 - Debrief the activity and ask the following questions.
 - How did this activity feel?
 - Did this activity give you any new perspectives about how you see yourself?
 - Did this activity provide any insight about how your experiences in the world have influenced the way you think about yourself?



HANDOUT, p. 92

Objective Two: Shifting Perspectives and Self-Acceptance

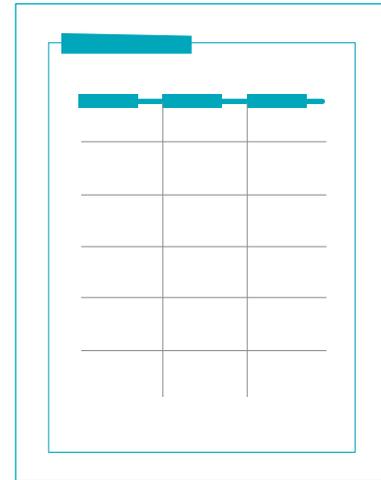
Explain:

- ▶ There are some things we easily appreciate about ourselves and some things we do not, such as:
 - our abilities;
 - our values;
 - our personality;
 - our accomplishments; and
 - our appearance.
- ▶ **Perspective** is how we see or understand situations. Even with factors we cannot change, by shifting our perspective, we can change how we experience something. Some examples include the following.
 - The glass can be seen as half empty or as half full.
 - Our failures can be seen as dead-ends or as stepping stones in the learning process.
 - Our differences in appearance can be seen as things that separate us from others or as things that are unique and authentic to us.
 - Rainy days can interfere with plans but can also be seen as good for gardens, crops, etc.

Activity One

Explain:

- ▶ Divide the class into small groups.
- ▶ Distribute the “Shifting Perspectives” handout.
- ▶ **Step 1:** Ask each member of your group to suggest an activity they could do together and have everyone record it on their handout. Some examples of possible activities:
 - Let’s bake a cake.
 - Let’s hike a mountain.
- ▶ **Step 2:** As a group, come up with reasons you cannot do the activity and record it on your handout. Possible examples of why you cannot do an activity:
 - We do not have flour to bake a cake.
 - The mountains are too far away.
- ▶ **Step 3:** As a group, rephrase their reasons for not doing the activity as questions starting with “how can we.” For example:
 - How can we get flour to make a cake?
 - How can we get to the mountains that are so far away?
- ▶ What does the first way of thinking presume? Discuss.
 - Answer: There is no solution.
- ▶ What does the second way of thinking presume? Discuss.
 - Answer: There is a solution that can be found.
- ▶ Ask students to apply the concept of shifting perspectives to the following examples.
 - I feel self-conscious about my acne and can’t go to school today.
 - Shifting perspective:
 - » How can I feel less self-conscious about my acne?
 - » How can I focus on aspects of myself I feel confident about?



HANDOUT, p. 93

- I had a fight with my friend and don't want to go to school.
 - Shifting perspective:
 - » How can I make up with my friend?
- I hate the weekends because I have no one to hang out with.
 - Shifting perspective:
 - » What activities can I do by myself?
 - » What clubs can I join on the weekends so I can feel connected to my community?
- I am so jealous of my friends' new clothes; I am not going to talk to them today.
 - Shifting perspective:
 - » How can I appreciate the clothes that I have?
 - » How can I save my money to buy new clothes too?
- I got a terrible report card; I am so embarrassed.
 - Shifting perspective:
 - » How can I get a tutor to help me with my grades?
 - » How can I find compassion for myself?

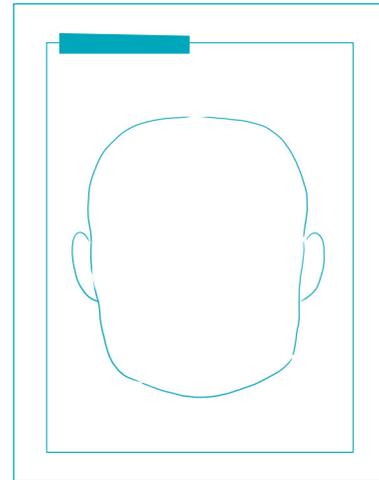
Activity Two

Explain:

- ▶ Give each student a copy of the “My Mask” handout.
- ▶ On the front of the mask, ask students to write or draw the qualities, values and personalities that they show to the world.
- ▶ On the back of the mask, ask students to write or draw the qualities, values, and personalities that they do not show anyone.
- ▶ **Note:** Allow students to keep their masks private.

Discuss:

- ▶ Ask students the following questions.
 - What determines what a person shows to the world and what they do not?
 - Feeling embarrassed, ashamed or self-conscious.
 - Experiences of racism and discrimination.
 - Feeling unsafe.
 - What might it feel like if your outside (what you show to the world) was totally different from your inside?
 - Inauthentic.
 - Guarded.
 - Closed off from others.
 - What might it feel like to show your true self to the world?
 - Relieving.
 - Confidence-boosting.
 - Happy.
 - What do you need in order to feel safe enough to show more of yourself to the world?
 - To be surrounded by supportive people.
 - To be in a supportive classroom environment.



HANDOUT, p. 94

Explain:

- ▶ There are many things we can change and many things we cannot.
- ▶ Our **perspective** is one of the things we can change.
- ▶ Asking “How can I...” allows us to get into a proactive, creative mindset.
- ▶ We all have “masks” that we wear. Fear, shame and lack of safety (from people or systemic factors) often stop us from showing our true selves.
- ▶ Having our inside and outside selves match can bring a sense of peace, freedom, confidence and community.
- ▶ **Self-acceptance** is a big part of starting to show more of your hidden parts.

CLOSING

Review:

- ▶ Review the objectives covered in the lesson.

Anonymous questions:

- ▶ Collect anonymous question slips and answer them in the next class.
- ▶ **Note:** If you need assistance answering questions, contact health.promotion@yukon.ca.

Handouts

92 “Self-Concept”

93 “Shifting Perspectives”

94 “My Mask”

Self-Concept

Self-concept refers to the ways that we think about ourselves based on belief, perception and evaluation.

In each box, write three answers.

I see myself as...

I value myself because...

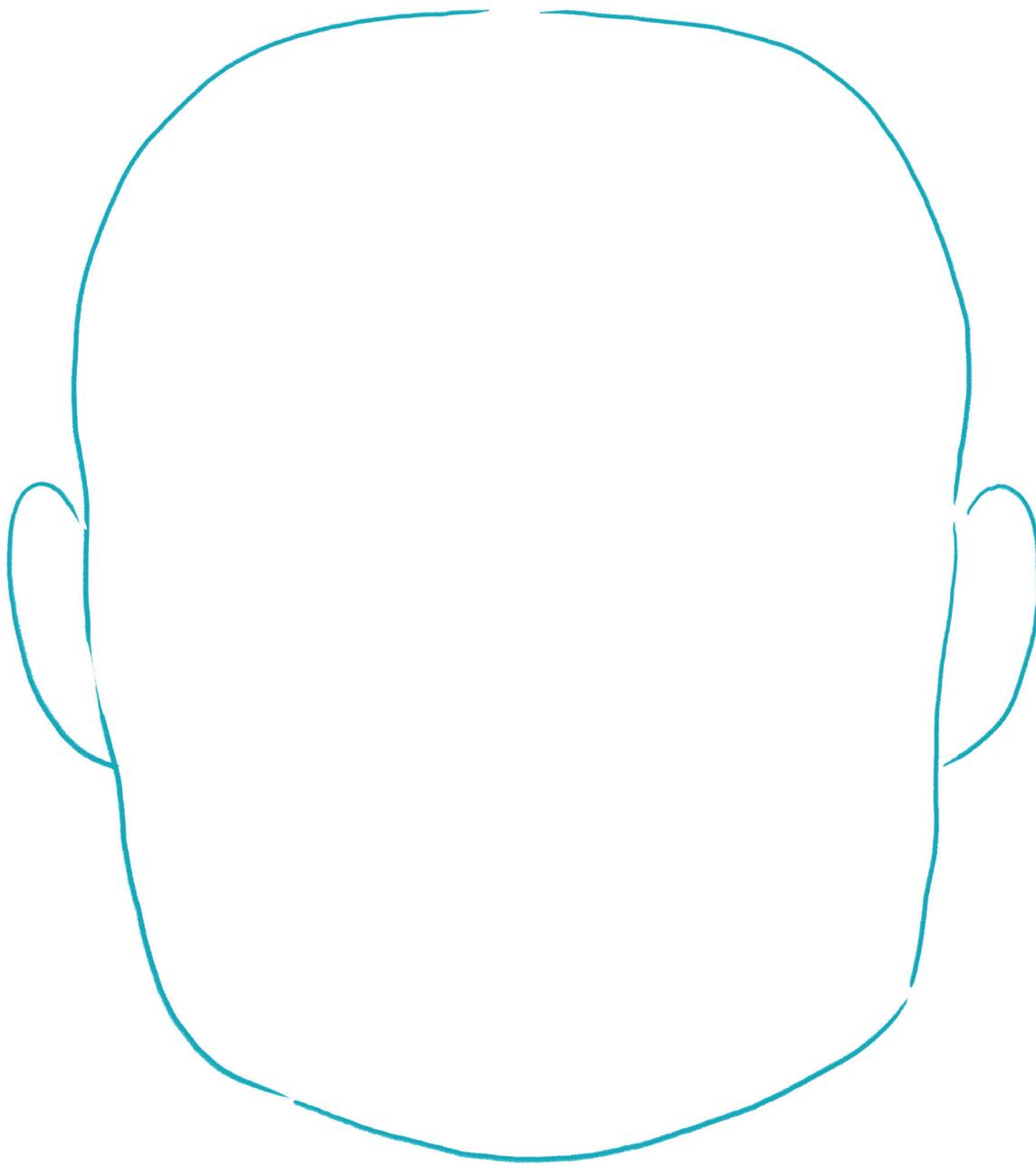
The following experiences make me who I am...

I aspire to be...

Shifting Perspectives

Activities	Reasons not to do the activities	Shifting-perspective questions
Example: Let's bake a cake.	No flour.	How can we get some flour?
Example: Let's hike a mountain.	The mountains are too far away and we don't drive.	How can we get there?

My Mask



Lesson 8

Gender Identity, Sexual Orientation, and Sex Assigned at Birth

 60 minutes

CURRICULAR COMPETENCIES

Social and community health

- ▶ Describe and assess strategies for responding to discrimination, stereotyping and bullying.

Mental well-being

- ▶ Explore and describe how personal identities adapt and change in different settings and situations.

OBJECTIVES

1. Students will learn the difference between gender, gender identity, gender expression, sexual orientation, and sex assigned at birth.

MATERIALS

- ▶ Lesson plan handouts (see end of lesson):
 - “The Genderbread Person”
 - “Gender Pronouns”
 - “Sex Assigned at Birth”
 - “The Queer Umbrella”
- ▶ Anonymous question box slips.

Teaching Tip

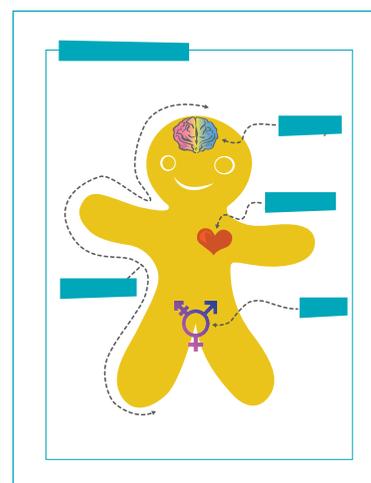
At the beginning of every class:

1. Provide external resources, such as:
 - Kids Help Phone - 1-800-668-6868; text 68-68-68; kidshelpphone.ca
 - School counsellors
 - Info websites, for example, amaze.org
2. Review your classroom rules.
3. Review the anonymous question box process.
4. Introduce the lesson plan objectives.

Objective One: Gender, Gender Identity, Gender Expression, Sexual Orientation, and Sex Assigned at Birth¹⁹

Explain:

- ▶ Today we are going to learn about gender identity, gender expressions, sexual orientations, and sex assigned at birth.
- ▶ This lesson is about learning to understand, embrace and accept people from all backgrounds.
- ▶ Acceptance and understanding are how we build a healthy, happy and safe school.
- ▶ Distribute “The Genderbread Person” handout.
- ▶ Explain that to help us understand the difference between gender identity, gender expression, sexual orientation, and sex assigned at birth, we are going to use the “Genderbread” person.



HANDOUT, p. 101

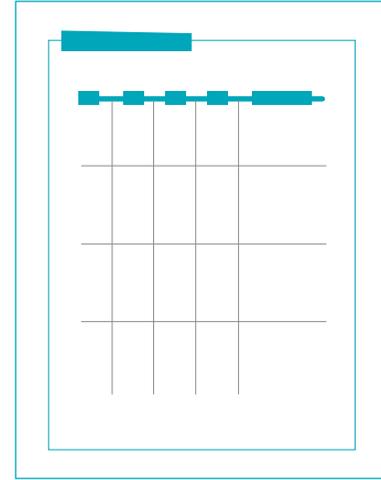
1. Starting at the top of the “Genderbread” person – in the brain – are **gender** and **gender identity**.
 - **Gender** – what a society says is masculine or feminine; the way men and women are expected to act based on their assigned sex at birth.
 - **Gender identity** – one’s sense of feeling male, female, both, neither or something entirely different.
 - Common terms include the following.
 - » **Cisgender** – someone whose sex assigned at birth and gender identity are the same.
 - » **Agender** – someone who does not identify with a gender.
 - » **Gender fluid** – someone who does not identify themselves as having a fixed gender.
 - » **Transgender** – someone whose sex assigned at birth and gender identity are different.

¹⁹ This lesson was adapted from genderbread.org.

- » **Two-Spirit** – a term from First Nations cultures that identifies someone who has both the spirit of a man and a woman in one body; traditionally, Two-Spirit people were regarded as having received a special gift.
- » **Queer** – someone who expresses a fluidity of gender expression, identity and/or sexual orientation.

2. Moving to the entire body, mind and heart is **gender expression**.

- Gender expression is the way people present their gender, through actions, clothing and demeanor.
- You can't always tell what gender people identify with. When introducing yourself to someone new, include your pronouns. For example, my name is Jill and I go by she/her.
- There are an infinite number of pronouns people can use. The gender pronoun chart defines some common pronouns. Distribute the "Gender Pronouns" handout to students.²⁰



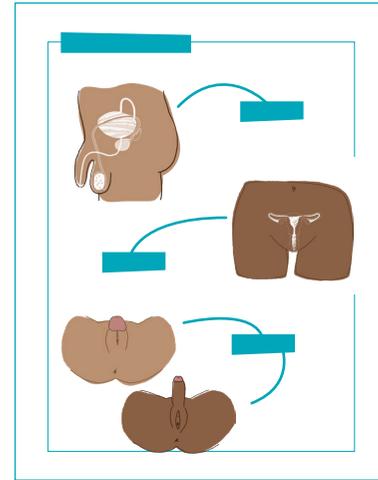
HANDOUT, p. 102

3. Next, in the heart, is **sexual orientation**.

- Sexual orientation is who you are attracted to emotionally and sexually.
- Throughout life, people often question their sexual orientation and gender.
- Discovering who we are, what we like and don't like, changes and continues over time.
- Common terms include the following.
 - » **Gay** – someone who is attracted to members of the same gender.
 - » **Lesbian** – a female who is attracted to females.
 - » **Bisexual** – a person who is attracted to both members of their own gender and other genders.
 - » **Heterosexual** – someone who is attracted to members of the opposite gender, also called "straight."
 - » **Homosexual** – someone who is attracted to members of the same gender, also called "gay."
 - » **Pansexual** – someone who is attracted to people, regardless of their gender identity or biological sex.

²⁰ transstudent.org/graphics/pronouns101/.

- » **Asexual** – someone with a lack of sexual attraction to others.
 - » **Queer** – someone that expresses a fluidity of gender expression, identity and/or sexual orientation.
4. Finally, between the legs, is **sex assigned at birth**. Sometimes this is called biological sex, but the one thing it’s not is gender. Sex assigned at birth is determined by the genitals someone is born with.
- Common terms include the following.
 - » **Male** – penis, scrotum and testicles.
 - » **Female** – vulva, vagina and ovaries.
 - » **Differences in sexual development (DSD)** – a combination of genitals.
- ▶ Distribute the “Sex Assigned at Birth” handout.
 - ▶ The terms that are used to describe sexuality and gender have evolved over time and will continue to shift.
 - ▶ Currently, **LGBTQ+** is one acronym that defines the different gender identities and sexual orientations.



HANDOUT, p. 103

Explain:

- ▶ LGBTQ+ stands for: Lesbian, Gay, Bisexual, Transgender, Queer or Questioning, plus additional sexual orientations and gender identities. The Queer Umbrella illustrates the LGBTQ+ acronym.
- ▶ Distribute “The Queer Umbrella” handout to students.²¹



HANDOUT, p. 104

²¹ thesafezoneproject.com/wp-content/uploads/2015/08/GenderbreadPersonLGBTQUmbrella.pdf.

CLOSING

Review:

- ▶ Review the objectives covered in the lesson.

Anonymous questions:

- ▶ Collect anonymous question slips and answer them in the next class.
- ▶ **Note:** If you need assistance answering questions, contact health.promotion@yukon.ca.

Handouts

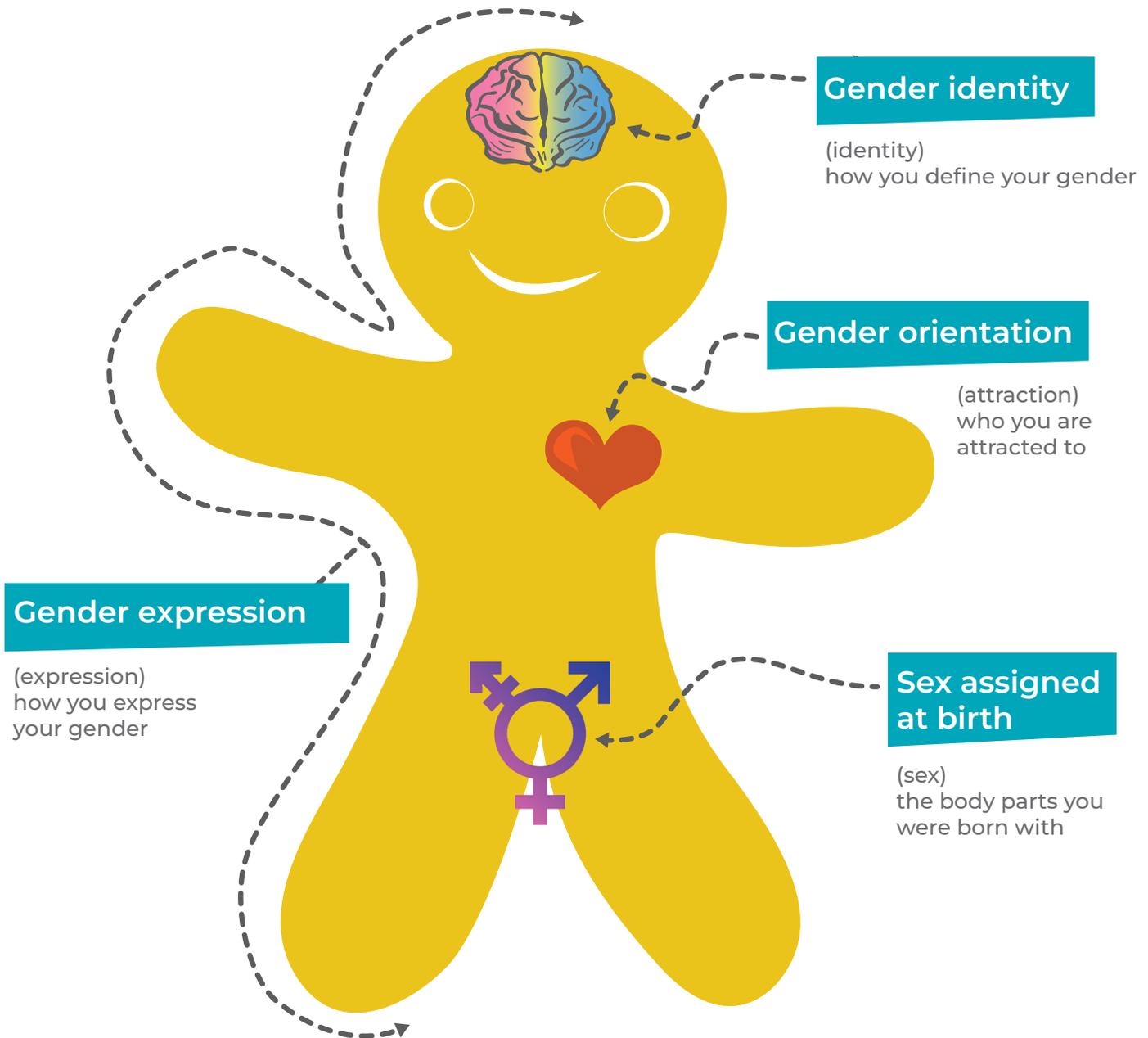
101 “The Genderbread Person”

102 “Gender Pronouns”

103 “Sex Assigned at Birth”

104 “The Queer Umbrella”

The Genderbread Person²²



²²genderbread.org/resource/genderbread-person-v4-0.

Gender Pronouns²³

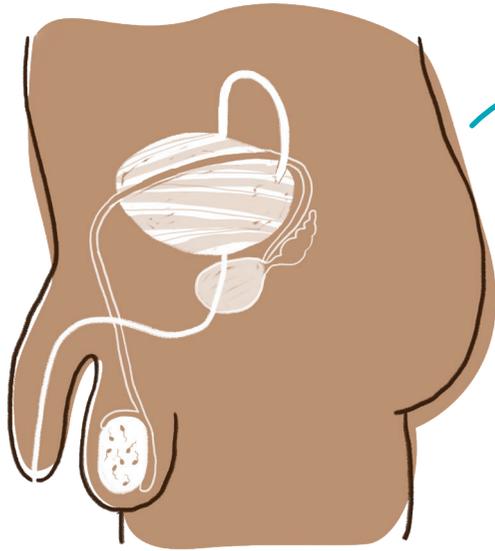
Please note that these are not the only pronouns. There are an infinite number of pronouns as new ones emerge in our language. Always ask someone for their pronouns.

Subjective	Objective	Possessive	Reflexive	Example
She	Her	Hers	Herself	<ul style="list-style-type: none"> ▶ She is speaking. ▶ I listened to her. ▶ The backpack is hers.
He	Him	His	Himself	<ul style="list-style-type: none"> ▶ He is speaking. ▶ I listened to him. ▶ The backpack is his.
They	Them	Theirs	Themselves	<ul style="list-style-type: none"> ▶ They are speaking. ▶ I listened to them. ▶ The backpack is theirs.
Ze	Hir/ Zir	Hirs/ Zirs	Hirself/ Zirself	<ul style="list-style-type: none"> ▶ Ze is speaking. ▶ I listened to hir. ▶ The backpack is zirs.

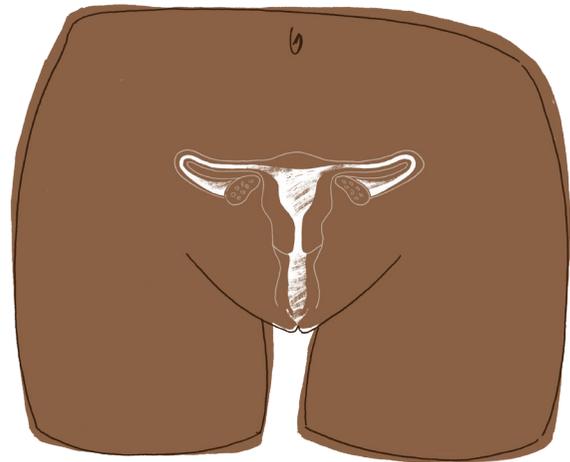
²³ transstudent.org/graphics/pronouns101/.

Sex Assigned at Birth

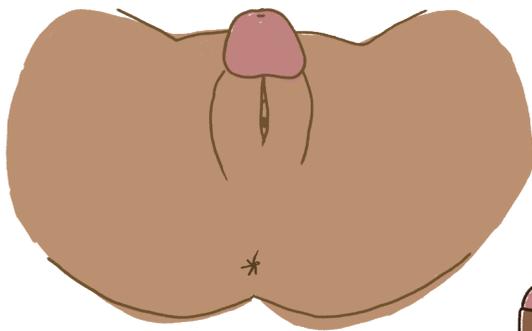
Sex assigned at birth is determined by what your genitals look like when you are born.



Male = penis, scrotum and testicles



Female = vulva, vagina and ovaries



Differences in sexual development (DSD) = born with a combination of both genitals

The Queer Umbrella²⁴



The “Q” sometimes stands for “questioning” and “transgender” is often thought of as an umbrella term itself (sometimes abbreviated “trans”; or “trans*” in writing). Lots of asterisks, lots of exceptions, because hey – we’re talking about lots of different folks with different lived experiences to be inclusive of.

²⁴ thesafezoneproject.com/wp-content/uploads/2015/08/GenderbreadPersonLGBTQUmbrella.pdf.

Lesson 9

Body Image and the Media²⁵

 60 minutes

CURRICULAR COMPETENCIES

Social and community health

- ▶ Identify and describe strategies for avoiding and/or responding to potentially unsafe, abusive or exploitive situations.

Healthy and active living

- ▶ Identify factors that influence healthy choices and explain their potential health effects.
- ▶ Identify and apply strategies to pursue personal healthy-living goals.

Mental well-being

- ▶ Describe and assess strategies for promoting mental well-being, for self and others.

CONTENT

- ▶ Sources of health information.

OBJECTIVES

1. Students will explore the concept of body image and the media.

MATERIALS

- ▶ Magazines.
- ▶ Question box slips.

²⁵ *Beyond the Basics: A Resource for Educators on Sexuality and Sexual Health* (Third Edition)
Action Canada for Sexual Health & Rights (2017).

Teaching Tip

At the beginning of every class:

1. Provide external resources, such as:
 - Kids Help Phone - 1-800-668-6868; text 68-68-68; kidshelpphone.ca
 - School counsellors
 - Info websites, for example, amaze.org
2. Review your classroom rules.
3. Review the anonymous question box process.
4. Introduce the lesson plan objectives.

Objective One: Body Images and the Media

Explain:

- ▶ **Body image** is how you feel about your body and how you see yourself.
- ▶ People can either have positive or negative feelings about their body's shape, size, skin tone, dis/abilities, etc.
- ▶ Having a **positive body image** means:
 - understanding that physical appearance is only a small part of who you are as a person;
 - having an accurate and true perception of what your body looks like;
 - being comfortable with and accepting the body you have; and
 - not comparing your appearance with people in the media, for example, models, celebrities and professional athletes.
- ▶ Having a **negative body image** means:
 - defining yourself only by the way you look;
 - having a distorted/untrue perception of what you look like;
 - feeling ashamed about the size, shape, qualities and dis/abilities of your body; and
 - feeling bad about your body because you compare yourself to others and to unrealistic standards.
- ▶ The **media** tends to advertise unrealistic beauty standards towards youth, for example, tall, extremely skinny, white, very muscular, extra-large breasts and big lips. However, these images are often altered – using editing software – to present an unachievable and unrealistic idea of reality.
 - **Note:** Some people are naturally skinny, muscular, have large breasts, etc. The concern is when people go to extreme and unhealthy lengths to achieve these looks.
- ▶ Teens are under enormous pressure to conform to the media's perception of beauty, even though it's almost impossible to achieve.
- ▶ Insecurity about not looking the same as people in the media can have negative impacts on body image.

Discuss:

- ▶ What are some influences that contribute to positive and negative body image?
 - **Positive influences** include:
 - eating well;
 - having good friends;
 - being active;
 - having fun using our bodies;
 - feeling strong;
 - learning about body positivity; and
 - not consuming too much media.
 - **Negative influences** include:
 - being criticized for how you look;
 - discrimination;
 - bullying;
 - consuming media that show a lot of so-called “perfect” bodies; and
 - crash dieting.
- ▶ How does being conscious of negative influences on body image benefit us?
 - We are less likely to blame ourselves for everything.
 - We might feel empowered to engage with media more wisely.
 - We might be able to make more informed decisions about how we relate to the media.
 - We might change our perception of what is beautiful.

- ▶ How does the media pressure us to change our body image?
 - It appeals to our faults, fears and insecurities.
 - It creates desires and the “need” to consume their products.
- ▶ How does it affect advertisers or companies if people have negative vs. positive body image?
 - If people have a **negative body image** they are more likely to use their products:
 - to improve themselves/their appearance if they feel like they are lacking; and
 - to feel better (the adrenaline rush of shopping).
 - If people have a **positive body image** they are:
 - less likely to spend money on the companies and products that are being advertised; and
 - more likely to pursue activities that make them feel better from the inside out, for example, making art, playing music, playing sports and forming positive relationships.

Activity

Step 1:

- ▶ Ask students to make a collage of people who look different from one another, using images from the provided magazines.

Step 2:

- ▶ As a class, discuss the following questions.
 - What kind of *bodies* were easy to find?
 - What kind of *skin colours* and tones were easy to find?
 - What kind of *hair types* was easy to find?
 - What kind of *gender expressions* were easy to find?
 - What kind of *lives* were represented?
 - What kind of *relationships* and ways of loving were represented?

Step 3:

Ask students to write about or draw images of people that were not easy to find or were missing from the magazines.

Step 4:

- ▶ As a class discuss the following questions.
 - What kind of *bodies* did you write or draw about?
 - What kind of *skin colours* did you write or draw about?
 - What kind of *hair types* did you write or draw about?
 - What kind of *gender expression* did you write or draw about?
 - What kind of *lives* did you write or draw about?
 - What kind of *relationships* did you write or draw about?
 - Why do you think these representations were missing from the magazines?

Explain:

- ▶ Typically, it is much easier to find images of the following.
 - Skinny, fit and able bodies.
 - White and fair skin tones, smooth skin (without wrinkles, blemishes or acne).
 - Young people.
 - Normative gender expression (expressions that fit into easily identifiable feminine and masculine categories and are often attached to cisgender people).
 - Affluent lives, lives free of struggle and hardship.
 - Monogamous, straight/heterosexual relationships and love.
- ▶ The advertising world and fashion/beauty companies make money by playing into people's insecurities and creating (and maintaining) fear around certain aspects of bodies and outward characteristics and appearances.
- ▶ Systemic discrimination and prejudice both fuel and compound many of the fears and insecurities that beauty/fashion companies and advertisers play into.
- ▶ Even if it does not seem obvious, media – used to sell products – are invested in the public having a negative self-image.
- ▶ Ideals of attractiveness in popular media often perpetuate existing systemic injustices about things such as race, size, disability, class, gender, normativity, skin tone, etc.
- ▶ Understanding advertising companies' intentions – which are to sell products and make money – can help motivate us to explore alternative ways to improve our body image (as opposed to buying expensive products and participating in a lifestyle that we don't necessarily want).

CLOSING

Review:

- ▶ Review the objectives covered in the lesson.

Anonymous questions:

- ▶ Collect anonymous question slips and answer them in the next class.
- ▶ **Note:** If you need assistance answering questions, contact health.promotion@yukon.ca.

Lesson 10

Sexual Health Education and Authenticating Online Information²⁶

 60 minutes

CURRICULAR COMPETENCIES

Social and community health

- ▶ Identify and describe strategies for avoiding and/or responding to potentially unsafe, abusive or exploitive situations.

Healthy and active living

- ▶ Identify factors that influence healthy choices and explain their potential health effects.
- ▶ Identify and apply strategies to pursue personal healthy-living goals.

Mental well-being

- ▶ Describe and assess strategies for promoting mental well-being, for self and others.

CONTENT

- ▶ Sources of health information.

²⁶ mediasmarts.ca/lessonplan/i-heard-it-round-internet-sexual-health-education-and-authenticating-online-information.

OBJECTIVES

1. Students will learn how to find credible sexual health information online.

MATERIALS

- ▶ Lesson plan handouts (see end of lesson):
 - “Finding Credible Information on the Internet”
 - “Finding Reliable Websites”
- ▶ Anonymous question box slips.

Teaching Tip

At the beginning of every class:

1. Provide external resources, such as:
 - Kids Help Phone – 1-800-668-6868; text 68-68-68; kidshelpphone.ca
 - School counsellors
 - Info websites, for example, amaze.org
2. Review your classroom rules.
3. Review the anonymous question box process.
4. Introduce the lesson plan objectives.

Objective One: Finding Credible Sexual Health Information Online

Explain:

- ▶ Many people don't feel comfortable asking sexual health-related questions in person; which results in them turning to the internet.
- ▶ The advantages to using the internet are:
 - it's anonymous;
 - it's instant;
 - it's accessible; and
 - it houses extensive amounts of information.
- ▶ The disadvantages to using the internet are:
 - it can be hard to find sexual health information without being exposed to sexually explicit material, for example, porn;
 - filtering software often blocks sexual health-related information; and
 - it can be difficult to determine if what you're finding is fact or fiction.
- ▶ Finding credible information on the internet is a skill that needs to be learned.
- ▶ There are methods and tricks we can use to get more relevant results and fewer unwanted results.
- ▶ The words you use in a search engine are called "search terms."
- ▶ The more relevant your words, the better your results will be.

- ▶ You can also limit the results by using certain words and symbols such as the following.
 - Quotation marks (“...”).
 - Putting quotation marks around words means that you will only get results that include those exact words, for example, **“teen” “pregnancy.”** This helps eliminate many irrelevant results.
 - You can also search whole phrases by placing them within quotes. This means you will only get results in which those words occur in that order.
 - You can combine this with other search terms, for example, **“sexual health.”**
 - You can also limit your search to a particular website by placing the word **“site”** and then the site’s URL (web address) after you start your search string, for example, **“puberty” amaze.org.**
 - The word **OR.**
 - Including OR between two words means that you will only get results that include either word.
 - This is good when you have two words that are synonymous or close in meaning. It can also help if one of the words is likely to be blocked by a filtering program, for example, **birth control OR contraception.**
 - Tilde sign (~).
 - The tilde sign is used to look for a word and any words that mean the same thing. For example, a search for **~contraception** will also search for the word “birth control” because the two words are synonymous.
 - Hyphen (-).
 - Placing a hyphen before a word means that you will get only results that do not include that word, for example, **pill -vitamin.** This helps eliminate many irrelevant search results.
- ▶ Many search engines also let you filter your results to keep out material that may be offensive. For example, Google lets you set Safe Search settings. It’s a good idea to start at the highest level and only switch if you can’t find what you are looking for.

Activity One

Explain:

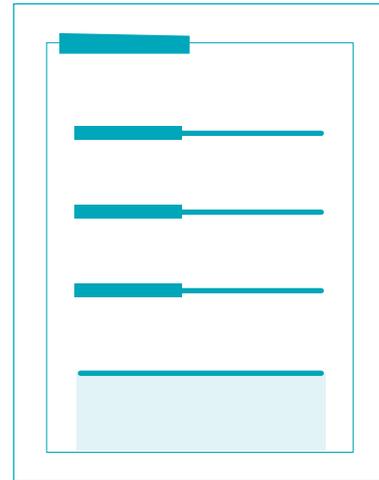
- ▶ Distribute the “Finding Credible Information on the Internet” handout.
- ▶ Ask students to find a partner and brainstorm three search strings, using words and symbols, to research the following topic.
 - *Are youth affected by being exposed to sex and sexuality in media such as TV, movies, music and videos?*
- ▶ After groups have brainstormed their search strings, ask them to share. Possible answers include:
 - “youth” or “teens”;
 - “media” and “TV”;
 - “sexuality”;
 - “movies” or “music”; or
 - “effects”.
- ▶ Boil down the discussion into two or three search strings, such as:

“effects”~ teens “sex in media”

~effect +youth “sex” TV OR movies OR “music videos”

“sex in media” youth OR teens

- ▶ Using a computer and projector, enter the search strings into your search engine of choice and compare the results.
- ▶ Ask students to decide which search string produced the most relevant results and as a class answer the following research topic.
 - *Are youth affected by being exposed to sex and sexuality in media such as TV, movies, music and videos?*



HANDOUT, p. 120

Explain:

- ▶ In addition to using search engines, they can go directly to reputable websites that specialize in sexual health.
- ▶ You can find out if the site is reputable by asking the following questions.
 - What is the website's purpose?
 - Is it to inform, entertain or persuade, sell something, mock or make a joke?
 - How do you know?
 - Who is the intended audience?
 - What does a background search on Google tell you about the organization?
 - Is it generally seen as a reliable source?
 - Are there good reasons to think the site's authors are experts on the topic?
 - Is there any reason to think the site's authors may be biased in a way that makes them less reliable? (A biased source starts with what they believe and then chooses or interprets the facts to fit those beliefs.)

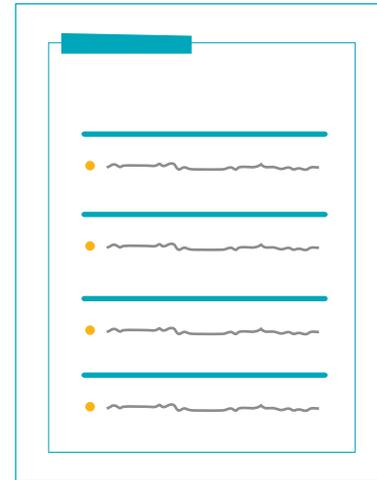
Activity Two

Explain:

- ▶ Distribute the “Finding Reliable Websites” handout and ask students to use the internet to answer the questions.
- ▶ After students are done, discuss the answers as a class. (See answer key below.)

“Finding Reliable Websites” Answer Key and Class Discussion

- ▶ Sex & U is sponsored by the Society of Obstetricians and Gynecologists of Canada. A search on the organization shows that it is the national body for doctors and nurses in that field, so the organization can be considered an authority. As a result, the site can be considered reliable and there is no reason to think it is biased.
- ▶ Teen Health Source is sponsored by United Way and Planned Parenthood. A search on the organization shows that they are a non-profit organization that provides reproductive health care around the world and have been advocates for protecting women’s reproductive rights. This suggests that the organization is an authority and will probably have useful information but might be biased around issues such as contraception and abortion.
- ▶ Best Choice has no parent organization listed on its About page. A search for “Best Choice” and “sex education” (the second term is needed because just searching for “best choice” will result in too many irrelevant searches) shows that several schools have dropped the program because it was seen as biased in favour of abstinence-only education. As a result, we can conclude that the source is not an authority and that it is also biased in a way that makes it unreliable.
- ▶ Go Ask Alice is sponsored by Columbia University. A search for the university shows that it is more than 250 years old and considered one of the top ten universities in the world. We can conclude that the source is reliable and there is no reason to consider it biased.



HANDOUT, p. 121

Explain:

- ▶ The internet is full of sexual health information. It is important to be mindful of the pros and cons of the internet and use their new research skills to find credible information.

CLOSING

Review:

- ▶ Review the objectives covered in the lesson.

Anonymous questions:

- ▶ Collect anonymous question slips and answer them in the next class.
- ▶ **Note:** If you need assistance answering questions, contact health.promotion@yukon.ca.

Handouts

120 “Finding Credible Information on the Internet”

121 “Finding Reliable Websites”

Finding Credible Information on the Internet

The words you use in a search engine are called “search terms.” The more relevant your words are, the better your results will be. You can also use symbols to help limit the results.

Some words and symbols that can help narrow your search include the following.

Quotation marks (“...”)

- ▶ Putting quotation marks around words means that you will only get results that include those exact words, for example, “teen” “pregnancy.” This helps eliminate many irrelevant results.
- ▶ You can also search whole phrases by placing them within quotes. This means you will only get results in which those words occur in that order.
- ▶ You can combine this with other search terms, for example, “sexual health.”
- ▶ You can also limit your search to a particular website by placing the word “site” and then the site’s URL (web address) after you start your search string, for example, “puberty” amaze.org.

The word OR

- ▶ Including OR between two words means that you will only get results that include either word.
- ▶ This is good when you have two words that are synonymous or close in meaning. It can also help if one of the words is likely to be blocked by a filtering program, for example, **birth control OR contraception.**

Tilde sign (~)

- ▶ The tilde sign is used to look for a word and any words that mean the same thing. For example, a search for ~**contraception** will also search for the word “birth control,” because the two words are synonymous.

Hyphen (-)

- ▶ Placing a hyphen before a word means that you will get only results that do not include that word, for example, pill -vitamin. This helps eliminate many irrelevant search results.

Many search engines also let you filter your search results to keep out material that may be offensive. Google, for example, lets you set your Safe Search settings if you click Settings and select Search Settings. It’s a good idea to start at the highest level and only switch if you can’t find what you are looking for.

Using the information above, create a search string to try and answer the following question.

Are youth effected by being exposed to sex and sexuality in media such as TV, movies, music and videos?

Finding Reliable Websites

Choose one of the following websites.

sexandu.ca teenhealthsource.com bestchoicestl.org/sex-101/ goaskalice.columbia.edu

Then, using the internet, answer the corresponding questions.

URL: _____

1. Is the site's purpose to inform, entertain or persuade, sell something, satirize or make a joke? How do you know?

2. Who sponsored or created the site? How do you know?

3. Is there reason to think the author is an expert, or the organization is an authority on the topic? How do you know?

4. Is there any reason to think the author or organization are biased in a way that makes the site unreliable? Why or why not? (Remember that having an opinion is not the same thing as being biased. Being biased means the source has started from their opinion and then chosen, interpreted or invented facts to fit, rather than letting facts and data inform their opinion.)

Additional Resources

There are many sexual health education resources on the internet. It can be hard to know what sources are up-to-date and accurate. Here are a few credible options.

Government of Yukon

- ▶ Health and Social Services' Health Promotion Unit:
health.promotion@yukon.ca; 867-667-3003
 - This resource was developed in partnership between the Yukon's Health Promotion Unit and Department of Education. It is a condensed version of their *Better to Know: Comprehensive Sexual Health Education* resources and services, which include:
 - professional development sessions with certified sexual health educators;
 - sexual health classroom presentations with certified sexual health educators;
 - *Better to Know: Comprehensive Sexual Health Education Body Parts and Safe Touch* video resource, Grades K to 3;
 - *Better to Know: Comprehensive Sexual Health Education Teacher Resource Books for Grades 4 to 7*; and
 - *Better to Know: Comprehensive Sexual Health Education Student Resource Books for Grades 8 to 12*.
 - To access the above resources, visit bettertoknow.yk.ca.
- ▶ Department of Education provides sexual health curriculum support that includes the following.
 - Curriculum support and assessment: Nikki.Krocker@gov.yk.ca;
867-667-5609
curriculum.gov.bc.ca/curriculum/physical-health-education
 - Yukon's Sexual Orientation and Gender Identity Policy:
education.gov.yk.ca/school-policies.html
 - lss.yukonschools.ca/curriculum--assessment2.html

Websites

bettertoknow.yk.ca

- ▶ The Government of Yukon’s sexual health and information website includes a service for Yukoners to email anonymous sexual health and relationship questions and get answers from sexual health educators.

amaze.org

- ▶ AMAZE takes the awkward out of sex ed. Real info in fun, animated videos that give you all the answers you actually want to know about sex, your body and relationships.

optionsforsexualhealth.org

- ▶ This non-profit organization based out of British Columbia offers sexual and reproductive health care and education.

sexandu.ca

- ▶ The Society of Obstetricians and Gynecologists of Canada youth site provides accurate, credible and up-to-date information on topics related to sex, sexuality and reproductive health.

kidshelpphone.ca

- ▶ Canada’s 24/7 support services offer counselling and information for youth in English and French.

actioncanadashr.org

- ▶ Action Canada is a voice for sexual health and rights in Canada and globally.

sieccan.org

- ▶ Sex Information and Education Council of Canada (SIECCAN) works with educators, health professionals, community organizations, governments and other partners to promote the sexual and reproductive health of Canadians.

Phone Numbers

1-800-SEX-SENSE (1-800-739-7367)

- ▶ Call this number to speak to a sexual health educator or nurse and receive Yukon-specific sexual health information. This service is available Monday to Friday, from 9 am to 9 pm, Yukon Standard Time.

1-800-668-6868 or text 68-68-68

- ▶ The Kids Help Phone line is available 24 hours a day, seven days a week for counselling, information and support in English and French. Use 68-68-68 as the number for texting.

811 Health Line

- ▶ Call this number to get general health information from Yukon registered nurses. This service is available 24 hours a day, seven days a week.



Yukon

