

Grade 4

better
to know

Comprehensive Sexual Health Education

Teacher Resource





Department of Health and Social Services
and Department of Education

2022

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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](https://www.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 136 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; website: 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 4 British Columbia Curriculum: Physical and Health Education Curricular Competencies

The Yukon Department of Education follows the British Columbia school curriculum. The Sexual Health Education Curricular Competencies fall under physical and health education. Although sexual health curricular competencies are a part of every grade, they tend to be passed over, minimally taught, and rarely repeated. This often leaves students with significant information gaps and presents a risk of sexual health education becoming a taboo topic.

This resource strongly recommends repeating lessons and reviewing the curricular competencies from the previous years. This will be a review for some students and new information for others.

Sexual health education is repetitive. The more students learn and review a topic, the more knowledgeable and comfortable they become. As students age and have new experiences, the information becomes more relevant.

In some cases, physical health and education teachers report not having enough time to teach sexual health. In these situations, connect with homeroom teachers, school counsellors, or other support staff to discuss alternative teaching options.

Big Ideas:

- ▶ Understanding ourselves and the various aspects of health helps us develop a balanced lifestyle.
- ▶ Personal choices and social and environmental factors influence our health and well-being.
- ▶ Developing healthy relationships helps us feel connected, supported and valued.

CURRICULAR COMPETENCIES

Students are expected to be able to do the following.

Healthy and active living

- ▶ Identify and describe factors that influence healthy choices.
- ▶ Examine and explain how health messages can influence behaviours and decisions.
- ▶ Identify and apply strategies for pursuing personal healthy-living goals.

Social and community health

- ▶ Identify and describe avoidance or assertiveness strategies to use in unsafe and/or uncomfortable situations.
- ▶ Describe and assess strategies for responding to discrimination, stereotyping and bullying.
- ▶ Describe and apply strategies for developing and maintaining positive relationships.
- ▶ Describe and apply strategies that promote a safe and caring environment.

Mental well-being

- ▶ Describe and assess strategies for promoting mental well-being.
- ▶ Describe and assess strategies for managing problems related to mental well-being and substance use.
- ▶ 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

Students are expected to know the following.

- ▶ Media messaging and body image.
- ▶ Strategies and skills to use in potentially hazardous, unsafe or abusive situations, including identifying common lures or tricks used by potential abusers.
- ▶ Strategies for responding to bullying, discrimination and violence.
- ▶ Factors that influence self-identity, including body image and social media.
- ▶ Physical, emotional and social changes that occur during puberty, including those involving sexuality and sexual identity.

Lesson Plans for Grade 4

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

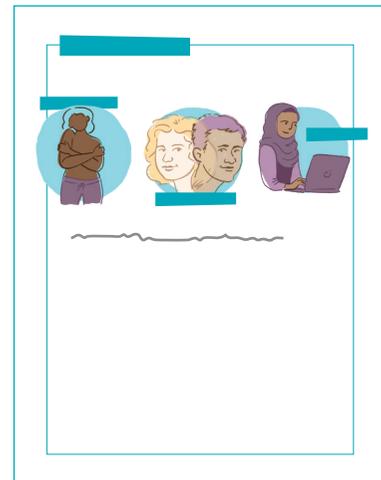
Explain:

- ▶ 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, 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. 29

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

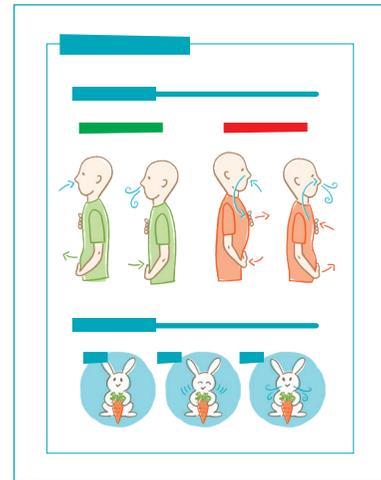
Explain:

- ▶ 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.



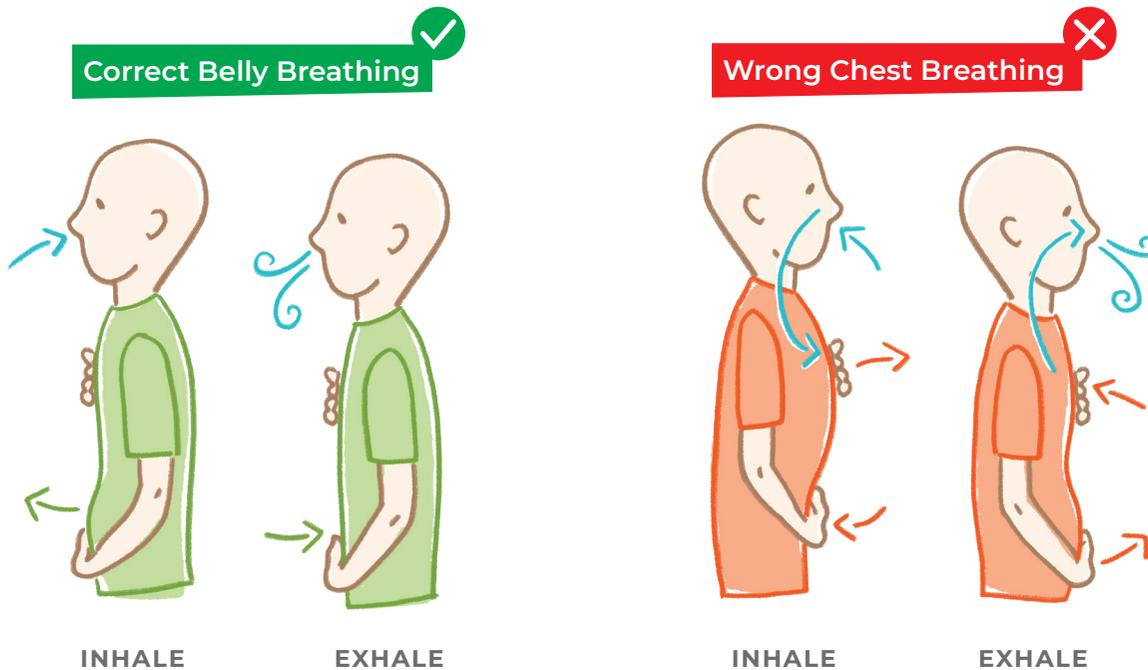
HANDOUT, p. 30

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.

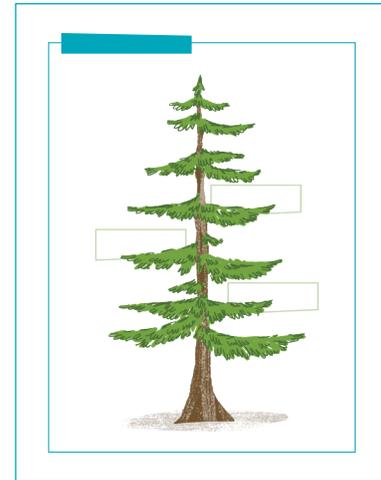
Activity

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. 31

Objective Five: Question Box

Explain:

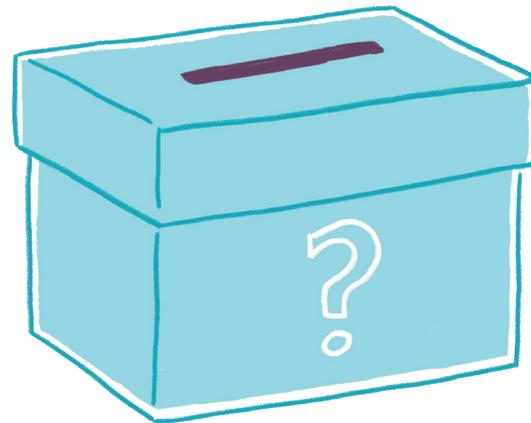
- ▶ Questions are always welcome during class, but a lot of students won't want to ask their question in front of everyone.
- ▶ To solve this problem, at the end of class, everyone will submit an anonymous question in the question box.
- ▶ Everyone must submit a question to make sure it remains anonymous. 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:
 - "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

29 “Healthy Mind, Body and Spirit Drawing”

30 “Breathing Exercises”

31 “Trusted Adult Name Tree”

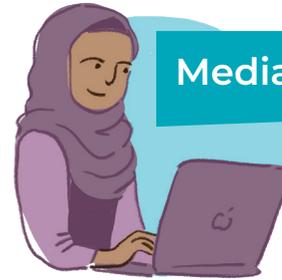
Healthy Mind, Body and Spirit Drawing

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

Body science



Relationships



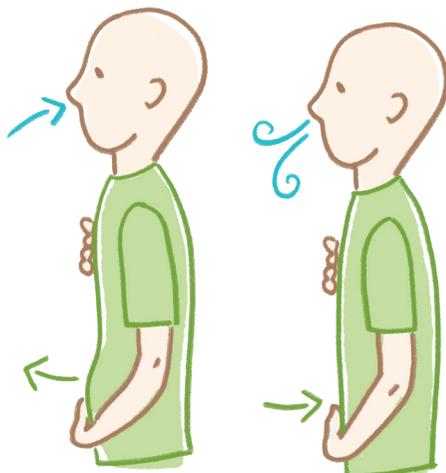
Media literacy

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

Breathing Exercises

Belly Breathing

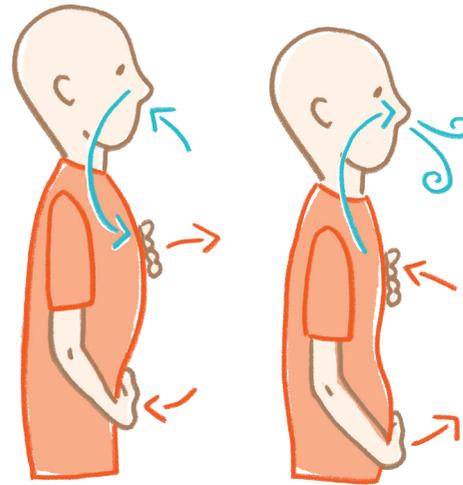
Correct Belly Breathing ✓



INHALE

EXHALE

Wrong Chest Breathing ✗



INHALE

EXHALE

Bunny Breathing

Step 1



Pretend to be a bunny holding a carrot.

Step 2



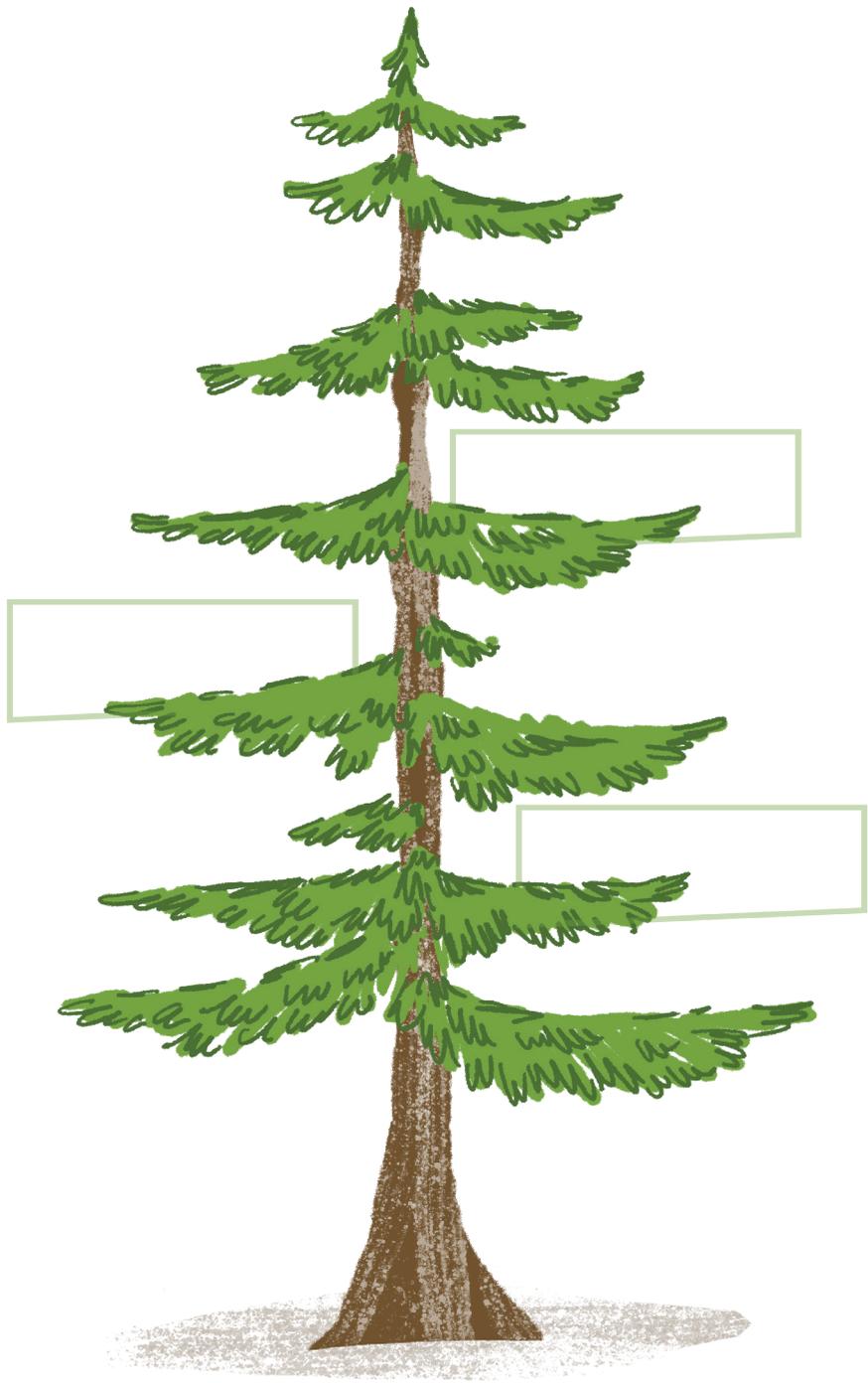
Close your mouth and take three quick sniffs in through the nose. Like you are sniffing a carrot.

Step 3



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

Trusted Adult Name Tree



Lesson 2

Private Parts and Safe Touch

 30 minutes

CURRICULAR COMPETENCIES

Social and community health

- ▶ Identify and describe avoidance or assertiveness strategies to use in unsafe and/or uncomfortable situations.

CONTENT

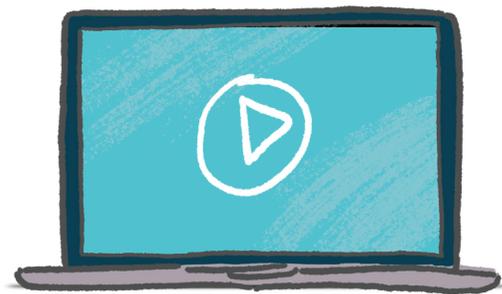
- ▶ Strategies and skills to use in potentially hazardous, unsafe or abusive situations, including identifying common lures or tricks used by potential abusers.

OBJECTIVES

1. Students will learn about the private parts on all bodies.
2. Students will be able to identify and respond to safe and unsafe touch.

MATERIALS

- ▶ Chris and Chris dolls (resourceservices.gov.yk.ca).
- ▶ Lesson plan handouts (see end of lesson):
 - “Chris #1”
 - “Chris #2”
 - “Safe or Unsafe Touch?”
- ▶ Optional: Comprehensive Sexual Health Education: Body Parts and Safe Touch – a video resource for Grades K to 3: [youtube.com/watch?v=w1sh0qRHh0U](https://www.youtube.com/watch?v=w1sh0qRHh0U).



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.

Note: This lesson is typically done in Grades K to 3. It is included in this resource as a review to start the body science section.

Objective One: Private Parts

Ask:

- ▶ Where is your favourite place to go swimming?
- ▶ What do you wear when you go swimming, for example, bathing suit or shorts and t-shirt?
- ▶ Why do you wear a bathing suit when you go swimming?
 - It's a public place so we cover parts of our body that are private.
- ▶ Do you wear a bathing suit when you have a bath or shower?
 - No, because that's a private place, and we need to be naked to clean our entire body.

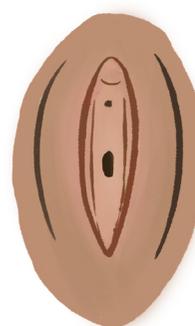
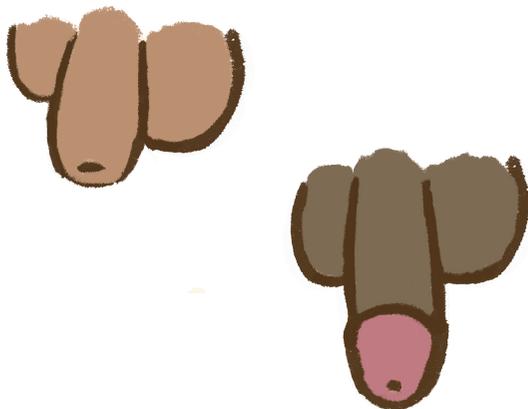
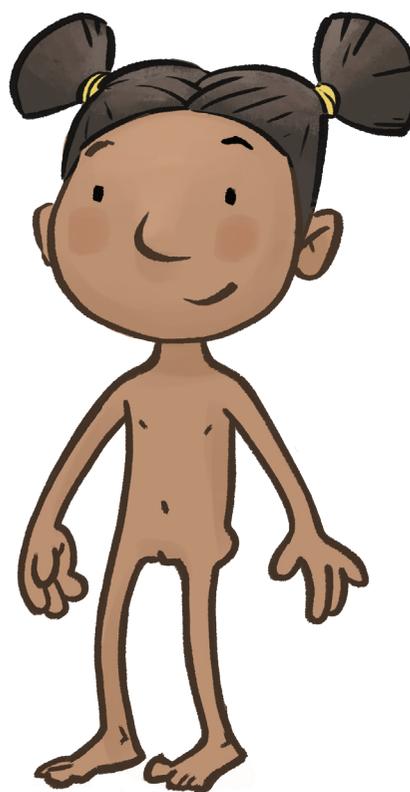
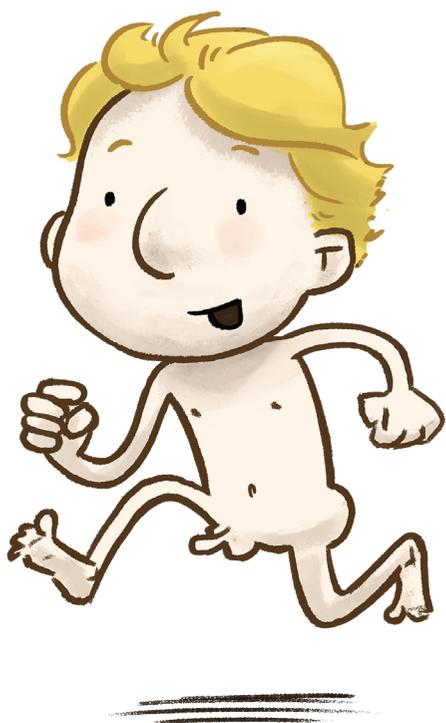
Explain:

- ▶ Today we are going to learn the scientific names for the **private parts**.
- ▶ Some of these parts get covered by a bathing suit, and some don't.
- ▶ To help us, we use Chris and Chris, the body science dolls.
- ▶ Chris and Chris are dolls that are designed to help teach body parts.
- ▶ We use the dolls or images because it's not appropriate to look at other people's private parts.
- ▶ We have permission to look at the dolls' private parts, but we don't have permission to look at other people's private parts.
 - **Note:** Students often mention bathing with siblings, friends, cousins, parents, etc. and being able to see each other's private parts. Explain that as long as everyone feels safe, and they are not touching or staring at each other, it should be okay.
 - Students also talk about visiting the doctor. Explain that sometimes we have to show the doctor our private parts for health reasons. But even then, we need to feel safe and should have a trusted adult with us.
 - Mention they can talk to you more in private if they like.

Note: If teachers do not have the Chris and Chris dolls, they can use the anatomy images provided at the end of the lesson on pages 42 and 43.

Chris #1:

Chris #2:



Chris #1:

Explain:

- ▶ For this part of the lesson you will teach the word, students will repeat after you, and then you will show the body part.
- ▶ **Mouth** – Say “mouth” and show on doll.
 - The mouth is a private part because we don’t touch other people’s mouths or put our mouth on other people without asking first.
- ▶ **Nipples** – Say “nipples” and show on doll and then cover with hand.
- ▶ **Navel** – Say “navel” and show on doll and then cover with hand.
 - Sometimes this part is called the belly button, but the scientific word is the navel.
 - **Note:** Students often mention they see people walking around with no shirt on and can see their nipples and navel. Explain that sometimes we can see other people’s private parts, but we don’t stare or touch.
- ▶ **Bottom** – Say “bottom” and show on doll and then cover with hand.
- ▶ **Anus** – Say “anus” and show on doll and then cover with hand.
 - The anus is an opening on the bottom. When people eat food, the leftover parts they don’t need leave out the anus and it’s called stool or poop. Have students repeat the word “stool.”

Explain:

- ▶ **Genitals** – Say “genitals.”
 - In between the legs, on every body, is called the genitals, but they look different on different bodies.
- ▶ **Penis** – Say “penis” and show on doll and then cover with hand.
- ▶ **Urethra** – Say “urethra” and show on doll and then cover with hand.
 - At the end of the penis, there is an opening called the urethra. This opening is where urine leaves the body.
- ▶ **Scrotum** – Say “scrotum” and show on doll and then cover with hand.
 - Underneath the penis is a sack of skin called the scrotum.
- ▶ **Testicles** – Say “testicles” and show on doll and then cover with hand.
 - Inside the scrotum are two testicles, but you can’t actually see them.

Teaching Tip

Students typically mention that Chris #1 is a boy and Chris #2 is a girl. We can respond to this by saying “I’m not sure because I haven’t asked them yet. Not everyone with a penis likes to be called a boy and not everyone with a vulva likes to be called a girl. I just call them Chris and Chris because those are their names.”

Explain:

- ▶ For the second doll, you want students to take notice of what parts are the same on this body and what parts are different.
- ▶ **Mouth** – Say “mouth” and show on doll.
 - The mouth is a private part because we don’t touch other people’s mouths or put our mouth on other people without asking first.
- ▶ **Nipples** – Say “nipples” and show on doll and then cover with hand.
- ▶ **Navel** – Say “navel” and show on doll and then cover with hand.
 - Sometimes this part is called the belly button, but the science word is the navel.
 - **Note:** Students often mention they see people walking around with no shirt on and can see their nipples and navel. Explain that sometimes we can see other people’s private parts, but we don’t stare or touch.

Explain:

- ▶ **Bottom** – Say “bottom” and show on doll and then cover with hand.
- ▶ **Anus** – Say “anus” and show on doll and then cover with hand.
 - The anus is an opening on the bottom. When people eat food, the leftover parts they don’t need leave out the anus and it’s called stool or poop. Have students repeat the word “stool.”
- ▶ **Genitals** – Say “genitals.”
 - In between the legs, on every body, is called the genitals, but they look different on different bodies.
- ▶ **Vulva** – Say “vulva” and show on doll and then cover with hand.
 - Explain the vulva is made up of a couple different parts.
 - Two folds of skin on the outside are called the labia.
 - **Urethra** – Say “urethra.” Inside the vulva, there is an opening called the urethra. This opening is where urine leaves the body.
 - **Vagina** – Say “vagina.” Another opening inside the vulva is called the vagina. It’s where babies can leave the body from.



Objective Two: Safe and Unsafe touch

Explain:

- ▶ Some touch makes us feel comfortable, happy or safe and some touch makes us feel uncomfortable, unhappy or unsafe.
- ▶ We all like and dislike **different kinds of touch** – meaning, a touch that you enjoy might not be so nice for someone else.
- ▶ Show me the face you make when you are being touched in a way you like, for example, smiling. We give this type of touch a thumbs up.
- ▶ Show me the face you might make when you don't like a type of touch, for example, an angry expression or scared look. We give this type of touch a thumbs down.

Activity

Explain:

- ▶ You are going to show pictures of people being touched.
- ▶ If the touch looks safe, students will give it a thumbs up.
- ▶ If the touch looks unsafe, students will give it a thumbs down.

Note: See the end of the lesson for more images on safe and unsafe touch (pages 44 to 53).

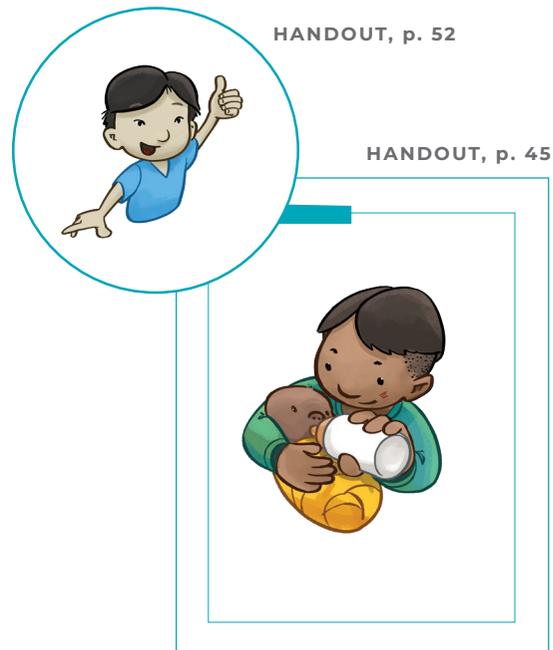
Show picture 1:



Explain:

This picture gets a thumbs up because both people are smiling.

Show picture 2:



Explain:

This picture also gets a thumbs up because both people are smiling.

Show picture 3:



HANDOUT, p. 46



HANDOUT, p. 53

Explain:

- ▶ This image gets a thumbs down because one person looks scared, while the other looks happy.
- ▶ When these situations happen, the touch needs to stop.
- ▶ The first thing to do is to ask them nicely to stop.
 - Try saying:
 - “I don’t feel comfortable; stop holding my hand.”
 - “Please stop that.”
 - “I don’t want to hold hands right now.”
- ▶ If they don’t listen, the second thing to do is to use a strong voice and tell them to stop.
 - Try saying:
 - “STOP THAT NOW!”
 - “QUIT TOUCHING ME!”
 - “STOP!”
- ▶ If the person still doesn’t stop, the third thing to do is to get away.
- ▶ Lastly, you tell a trusted adult. If that person doesn’t believe you or won’t help, tell another trusted adult.
- ▶ It is never okay to be touched if you don’t want to be. It’s your body, so you get to choose who touches you, when and how.

Show:

Optional K to 3 Video

- ▶ [youtube.com/watch?v=wlsh0qRHhOU](https://www.youtube.com/watch?v=wlsh0qRHhOU)



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.

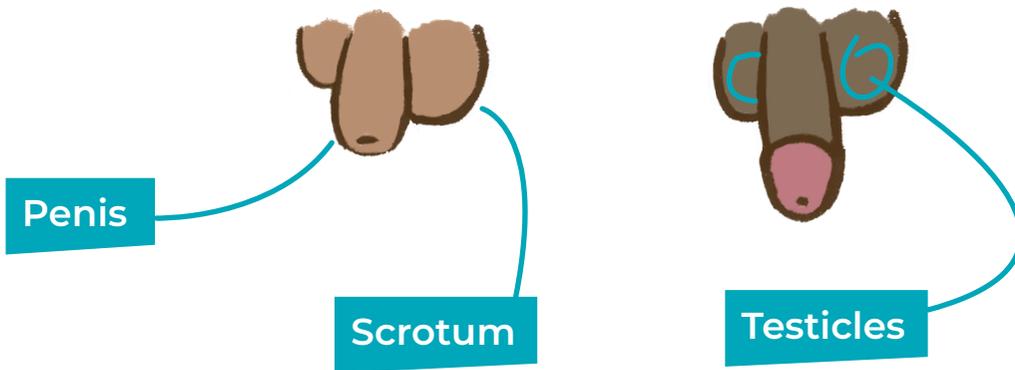
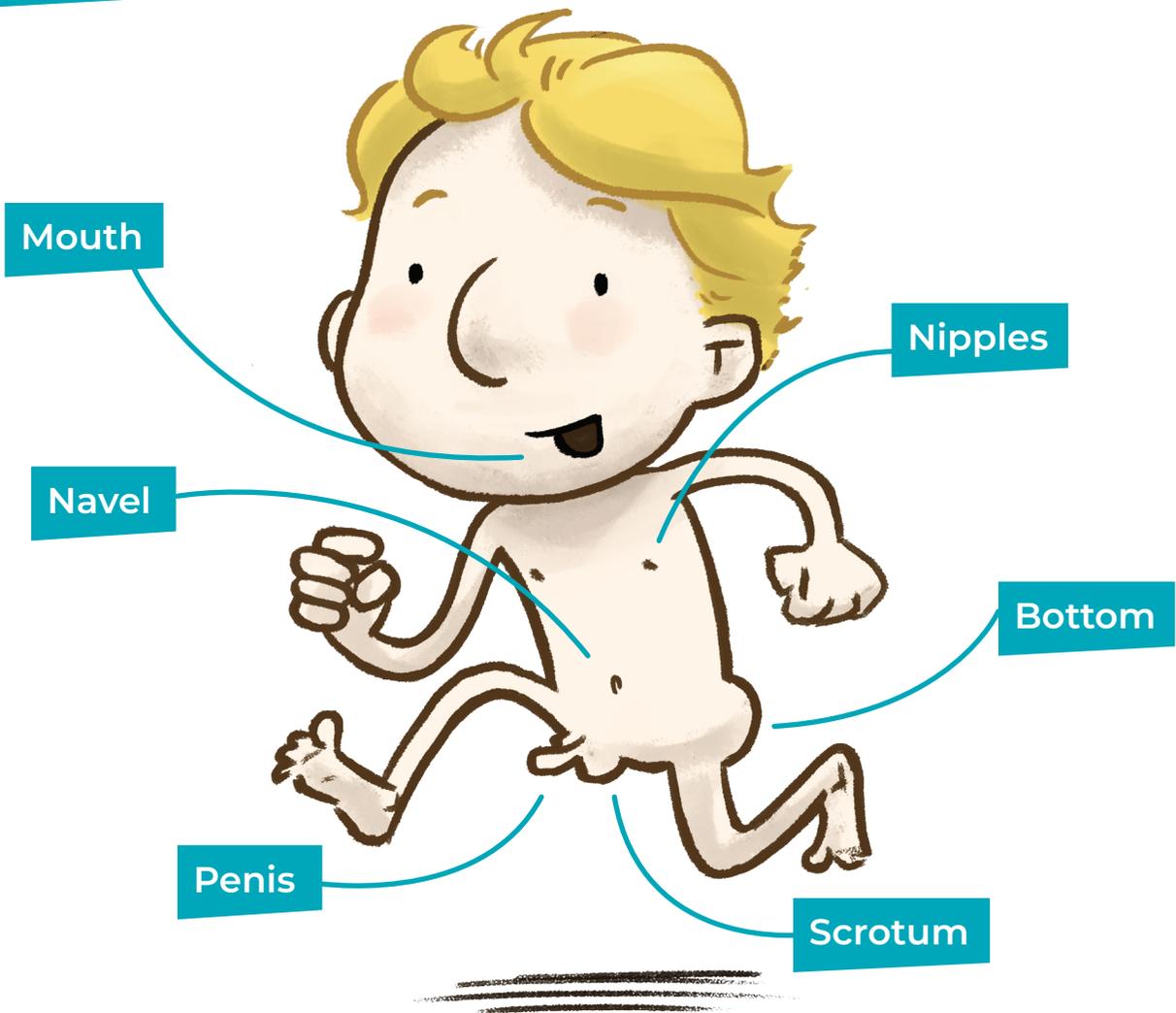
Handouts

42 “Chris #1”

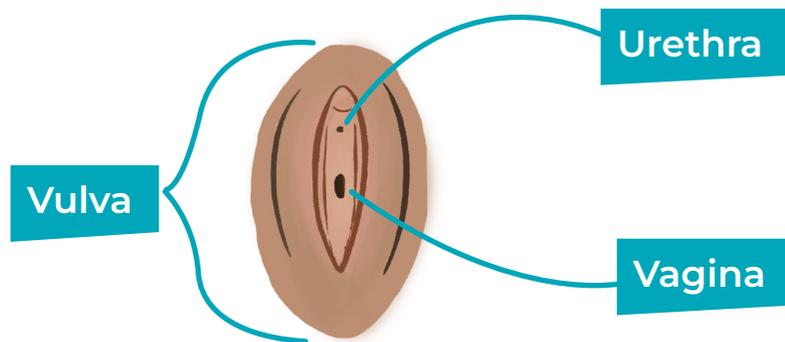
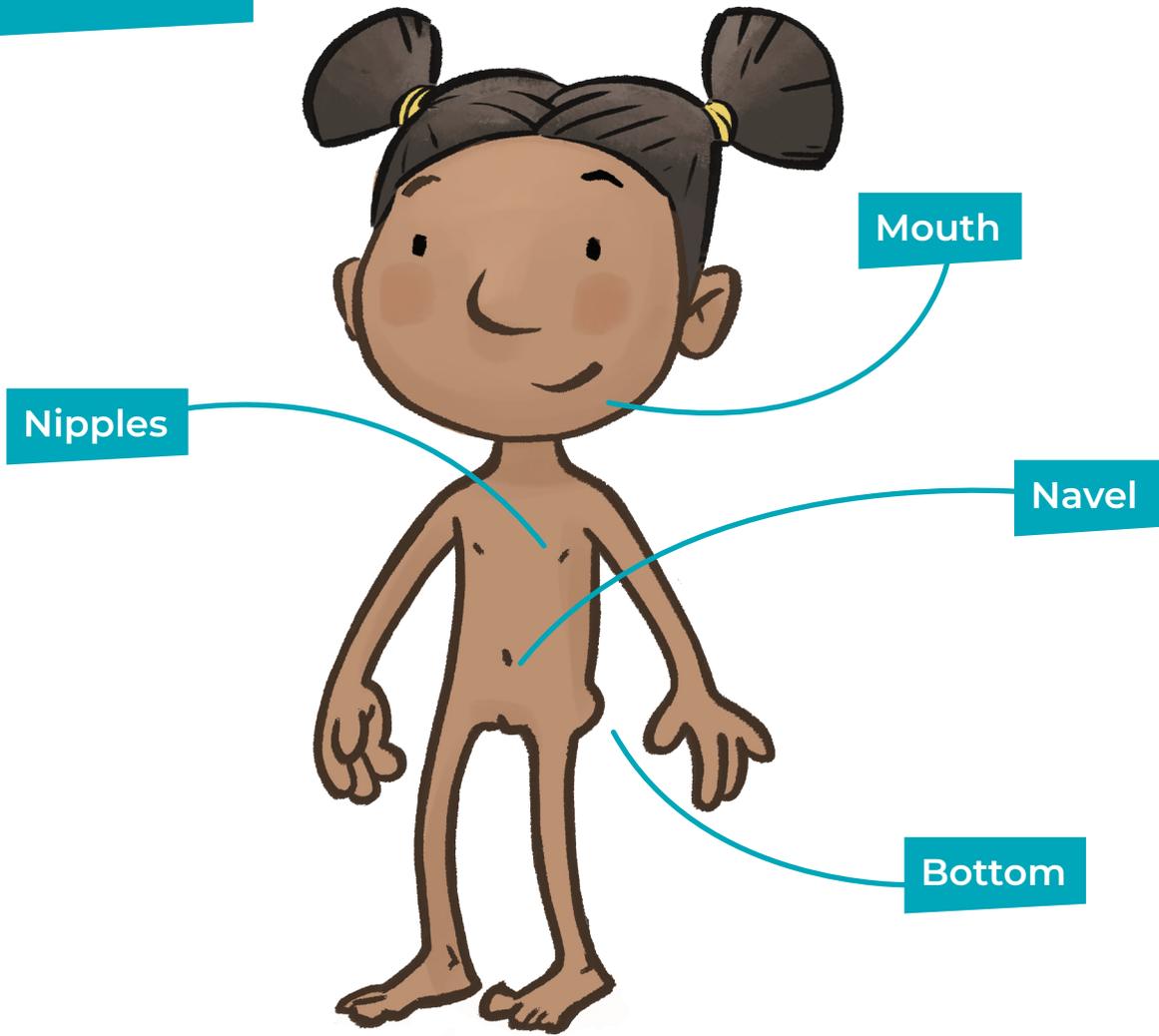
43 “Chris #2”

44 to 53 “Safe or Unsafe Touch?”

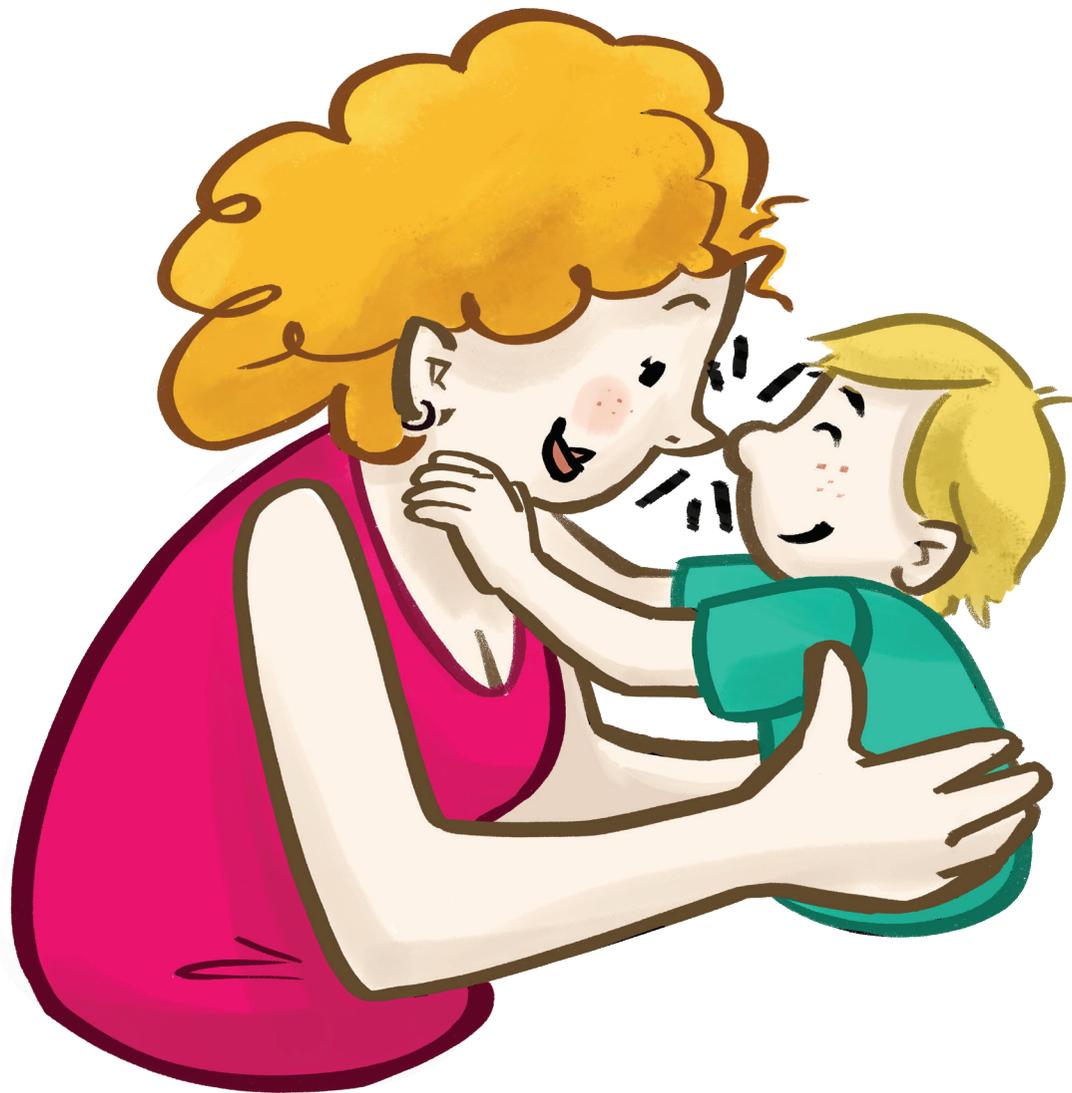
Chris #1



Chris #2



Safe or Unsafe Touch?



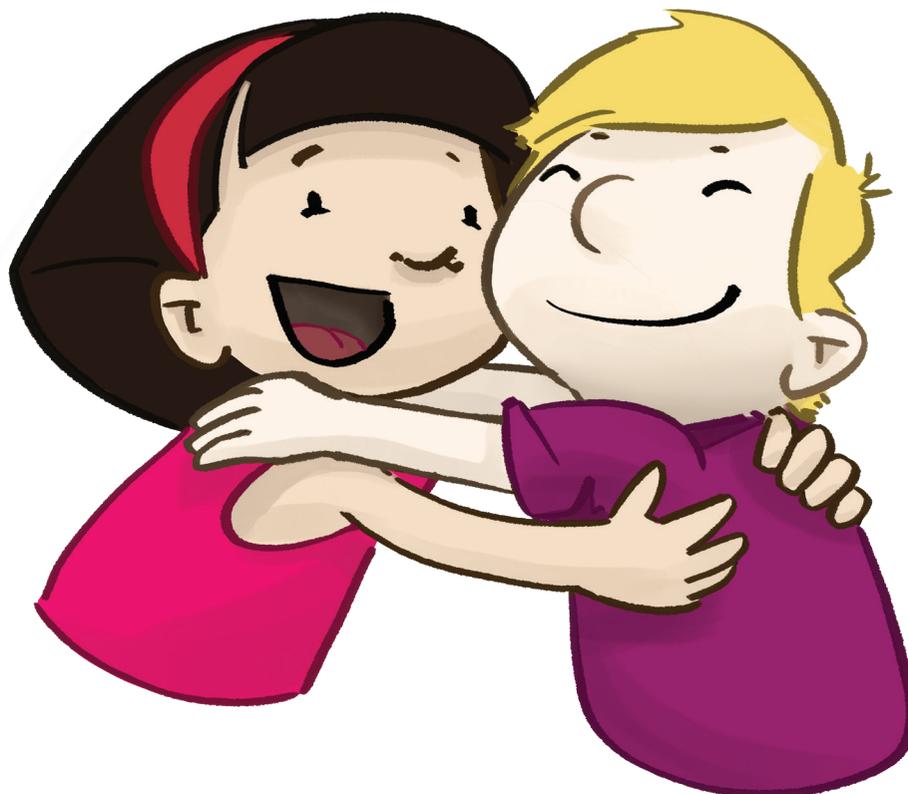
Safe or Unsafe Touch?



Safe or Unsafe Touch?



Safe or Unsafe Touch?



Safe or Unsafe Touch?



Safe or Unsafe Touch?



Safe or Unsafe Touch?



Safe or Unsafe Touch?



Thumbs Up



Thumbs Down



Lesson 3

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

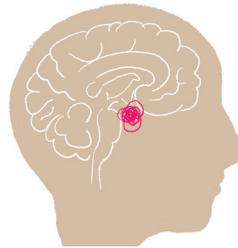
At the beginning of every class:

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 62.



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.



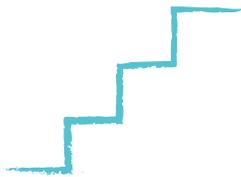
Read:

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:

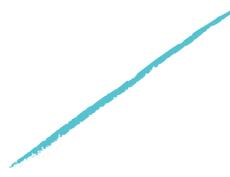
- ▶ The **feet** grow first to support the growing body. Students might notice their shoes never seem to fit because their feet are growing so fast.
- ▶ The second thing to grow is body height. When people grow more than three centimetres in one year, it's called a **growth spurt**. There are four types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

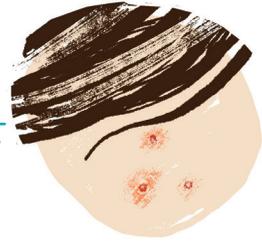
- ▶ Everyone grows body hair in a lot of places. Some people choose to remove their body hair and some choose to leave it. It's your body, so you get to decide.
- ▶ Shaving is a very common way people remove body hair. If you choose to shave it, make sure you ask a trusted adult for help because razors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

62 “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.



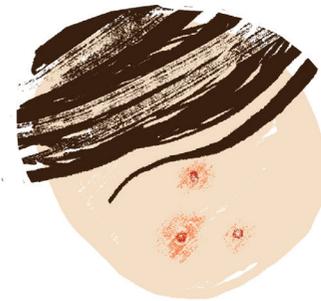
Growth spurts

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 4

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:

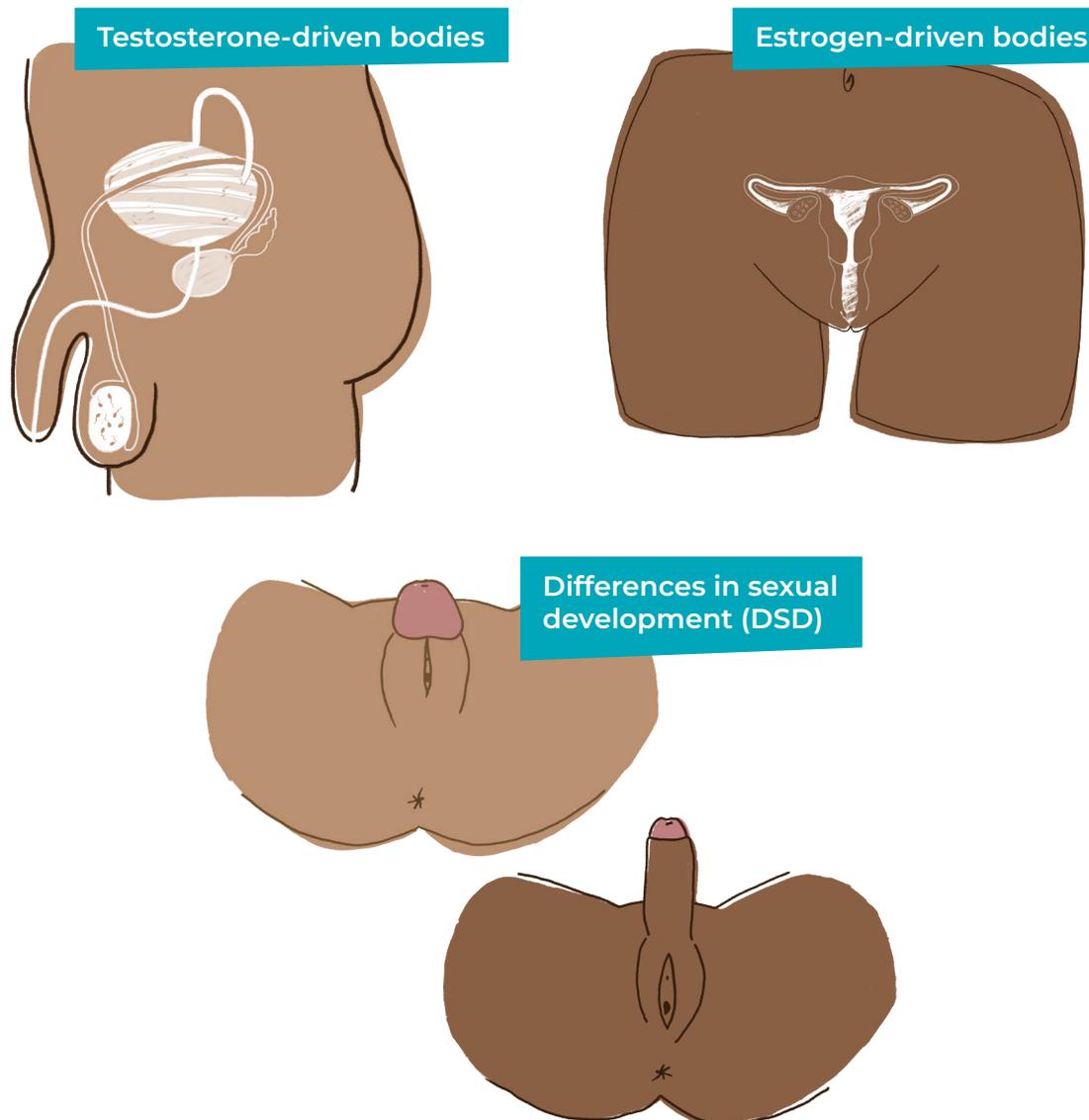
1. Provide external resources, such as:
 - Kids Help Phone – 1-800-668-6868; text 68-68-68; kidshelpphone.ca
 - School counsellors
 - Info websites, for example, amaze.org
2. Review your classroom rules.
3. Review the anonymous question box process.
4. Introduce the lesson plan objectives.

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

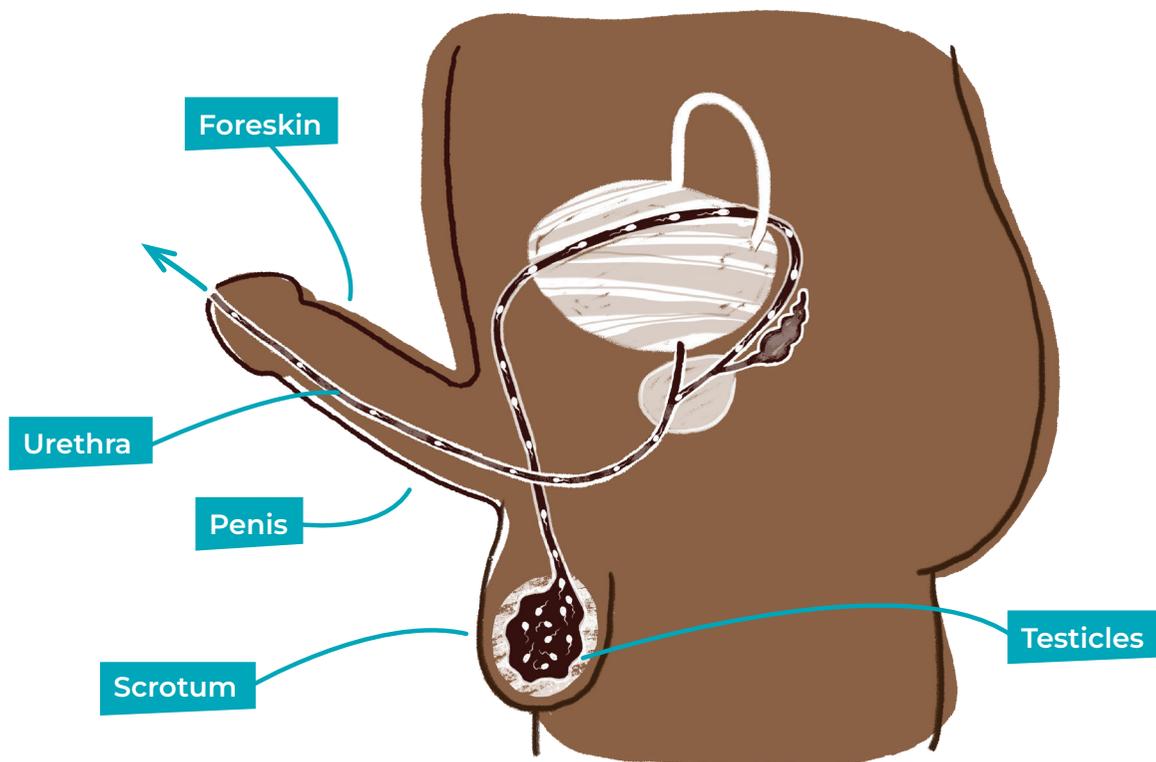
People born with a vulva and more estrogen still have testosterone in their bodies, and will experience growing muscles and a deepening voice – just not as much.

- ▶ 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 80.

Fun Fact

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

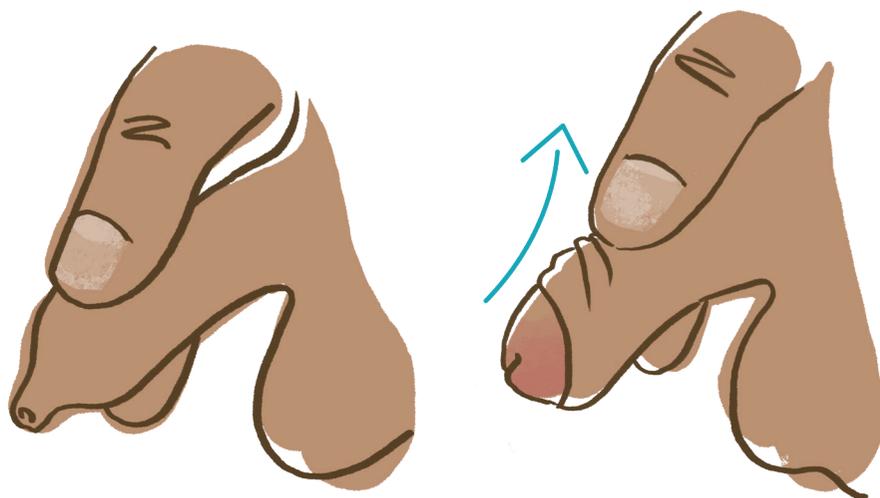
Foreskin Health Tip

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 79.



Explain:

- ▶ The following things happen during puberty. (The “Testosterone-Driven Puberty Changes” handout can be found on page 78.)
 - 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. (The “Estrogen-Driven Puberty Changes” handout can be found on page 81.)
 - 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:

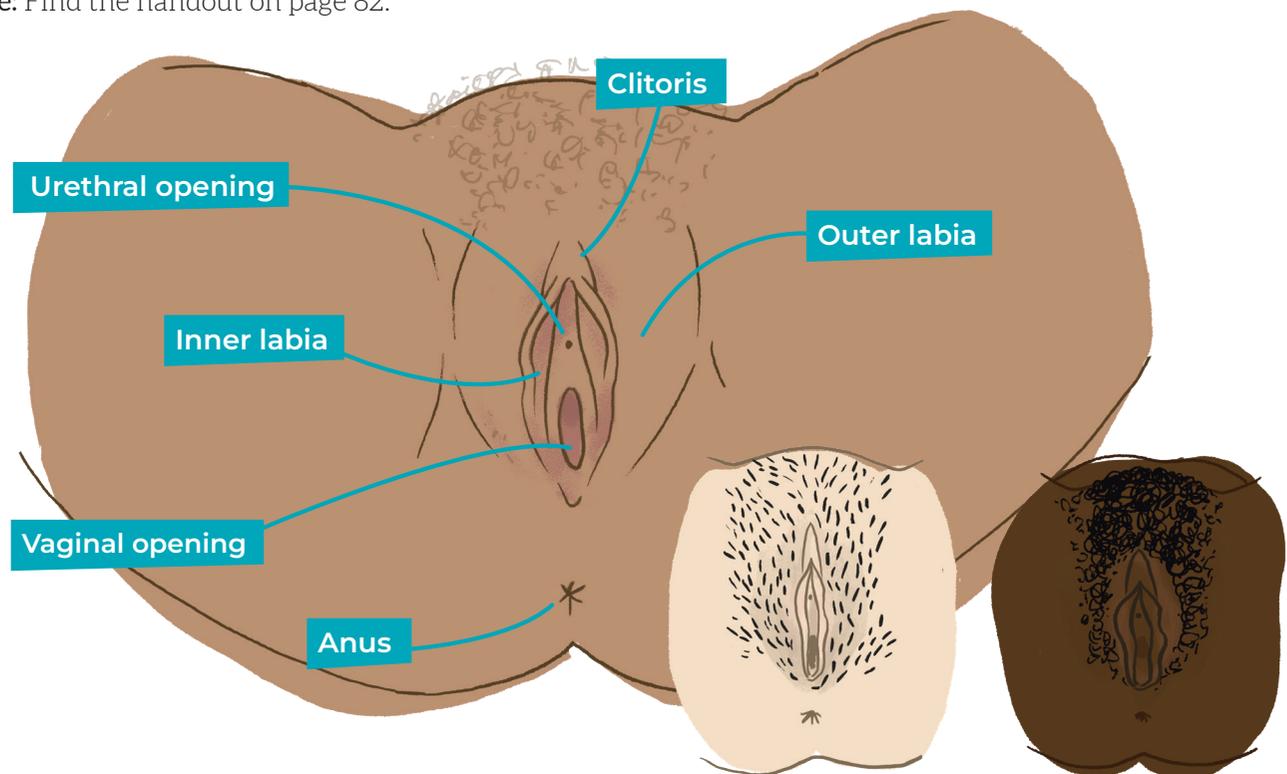
- ▶ The anatomy on this body has to be taught in two different parts. First, I will describe the **external genitals**, which is called the vulva. Second, I will describe the **internal reproductive system**.

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 82.



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

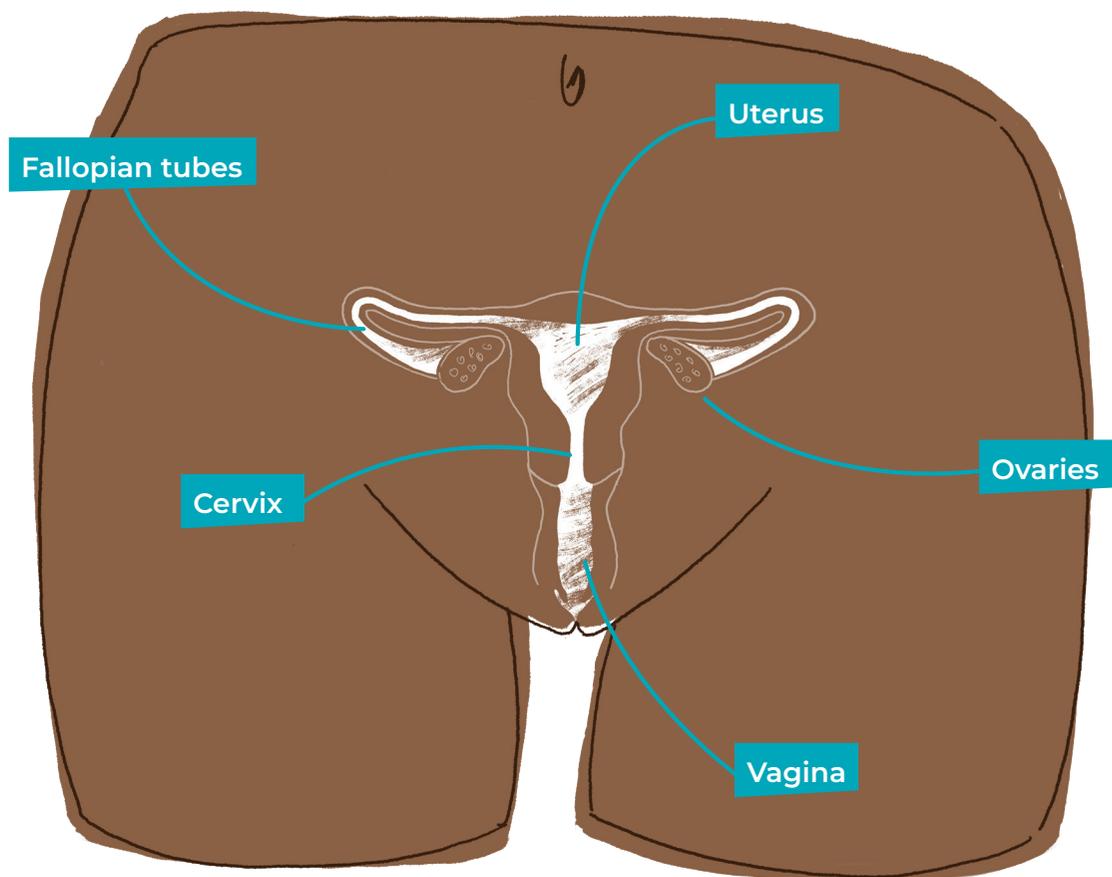
When using the bathroom, always wipe from the top of the vulva to the anus. This prevents bacteria from the anus entering the vagina and urethra.

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 83.

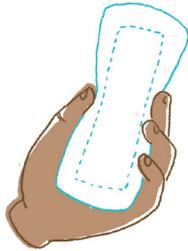


Explain:

- ▶ During puberty, the **menstrual cycle** begins. (Find the “Menstrual Cycle” handout on page 84.)
 - 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:

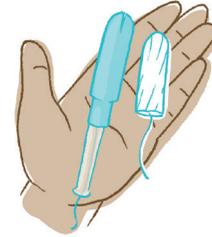
- **Menstrual products** are designed to collect menstrual fluid. There are several products to choose from. Start by introducing the basics. (Find the “Menstrual Products” handout on page 85.)

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.

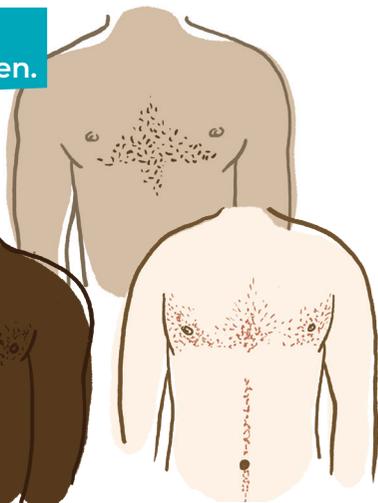
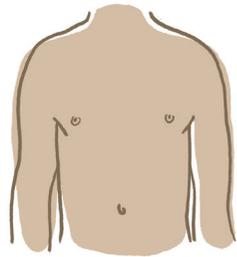
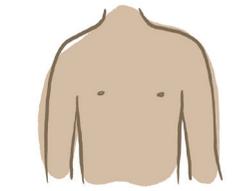
Anonymous questions:

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

Handouts

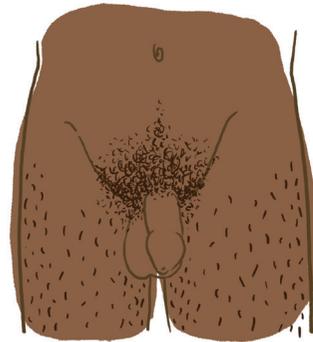
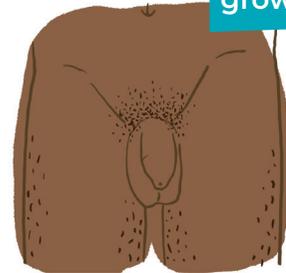
- 78 “Testosterone-Driven Puberty Changes”
- 79 “Foreskin Health Tip”
- 80 “Testosterone-Driven Bodies: External and Internal Reproductive Anatomy”
- 81 “Estrogen-Driven Puberty Changes”
- 82 “Estrogen-Driven Bodies: External Reproductive Anatomy”
- 83 “Estrogen-Driven Bodies: Internal Reproductive Anatomy”
- 84 “Menstrual Cycle”
- 85 “Menstrual Products”

Testosterone-Driven Puberty Changes



The chest and shoulders broaden.

Age 3



The penis and testicles grow bigger.

Age 18

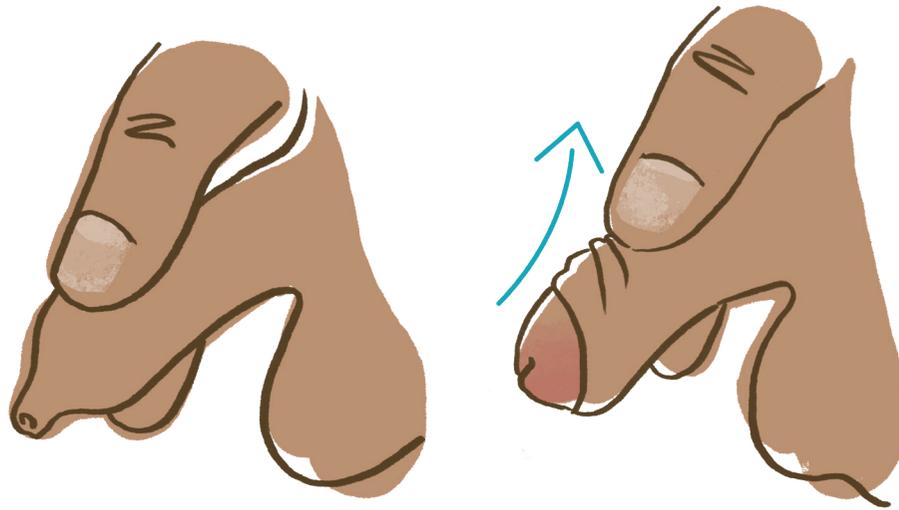
Increase in the number of erections.

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

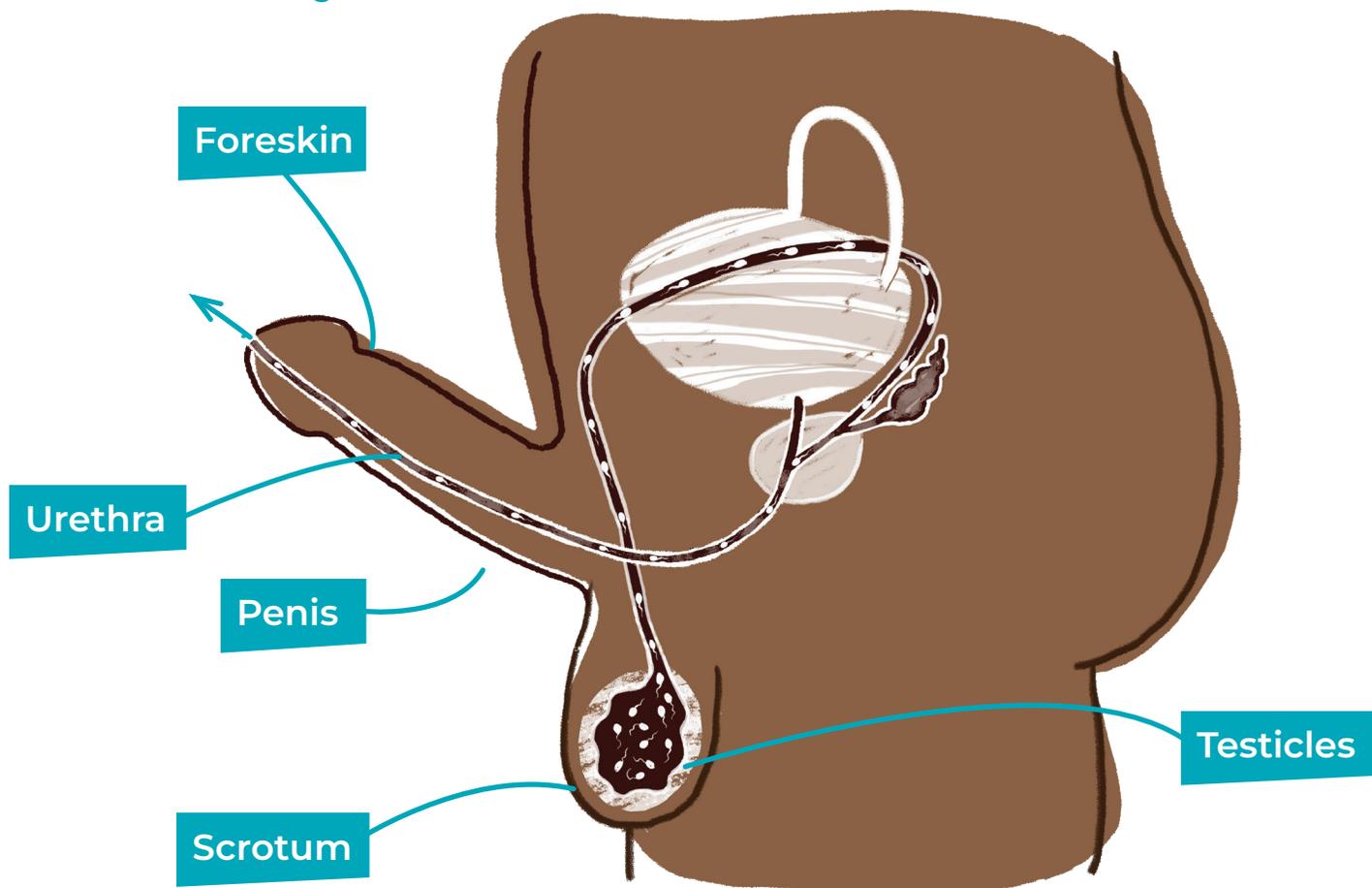
People with a foreskin need to wash underneath it, every day, to remove the buildup of smegma.

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



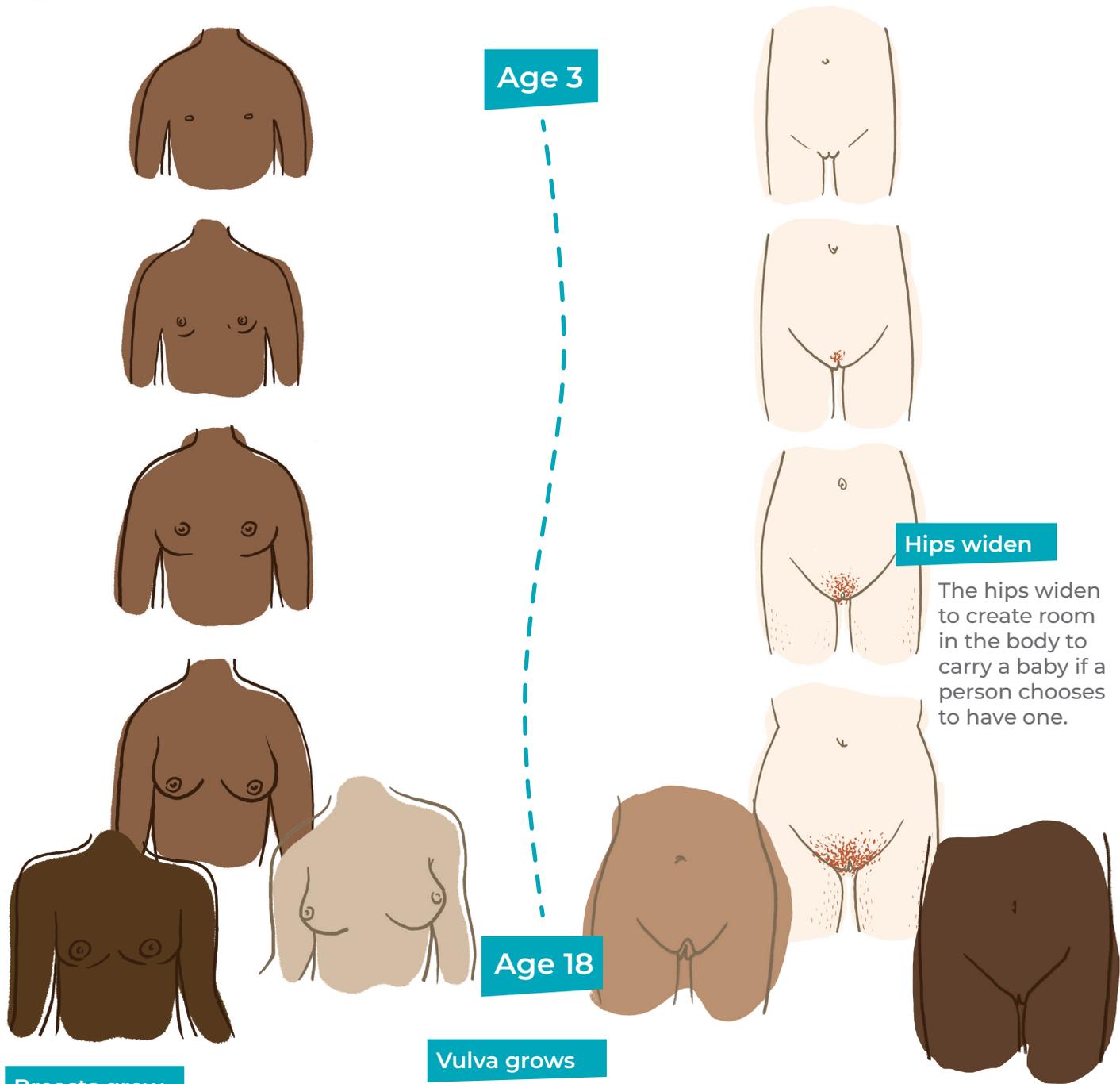
Fun Fact

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



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.

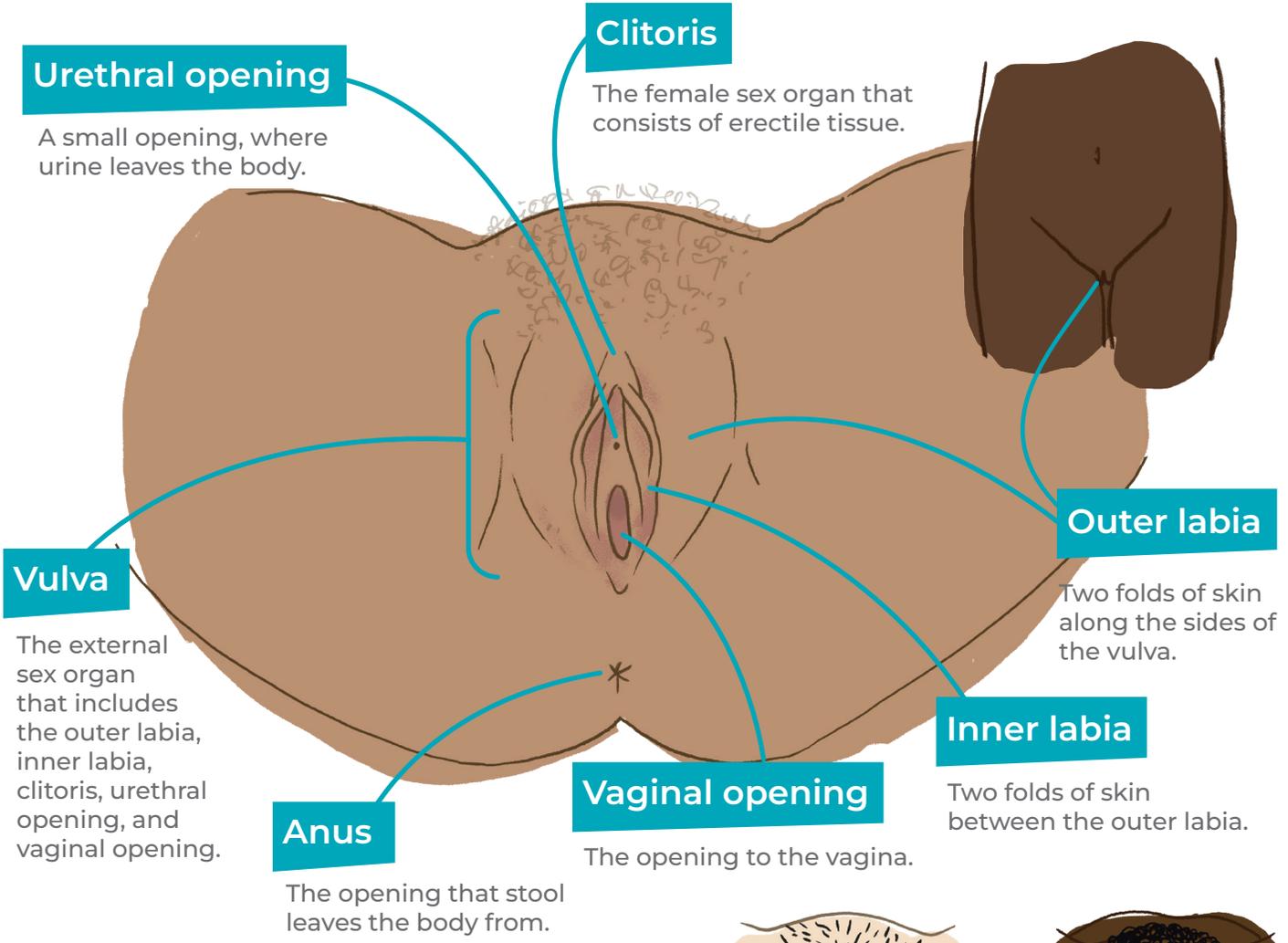
Hips widen

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

Menstrual cycle begins

Estrogen-Driven Bodies:

External Reproductive Anatomy



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.



Estrogen-Driven Bodies:

Internal Reproductive Anatomy

Fallopian tubes

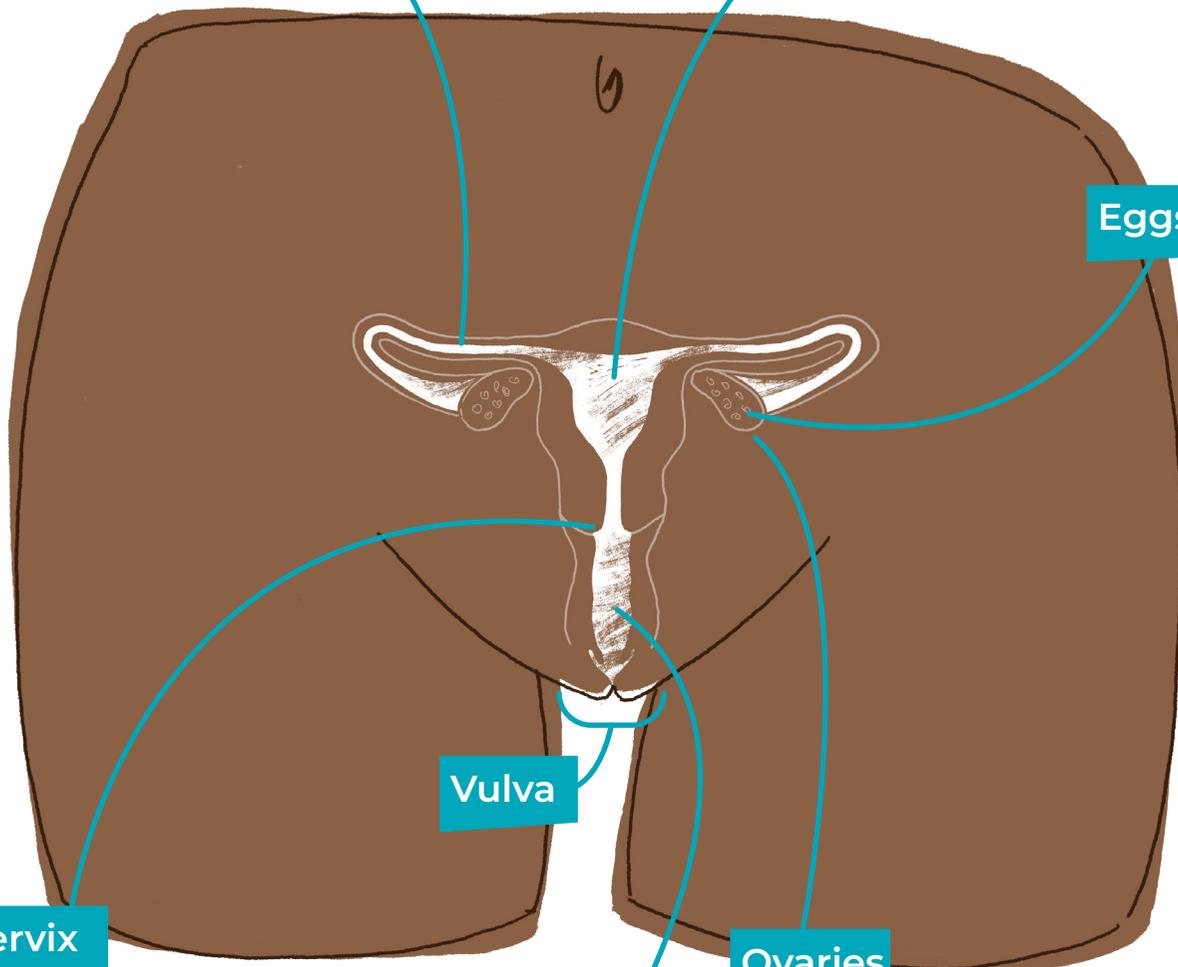
Tubes that extend from the uterus toward the ovaries.

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.

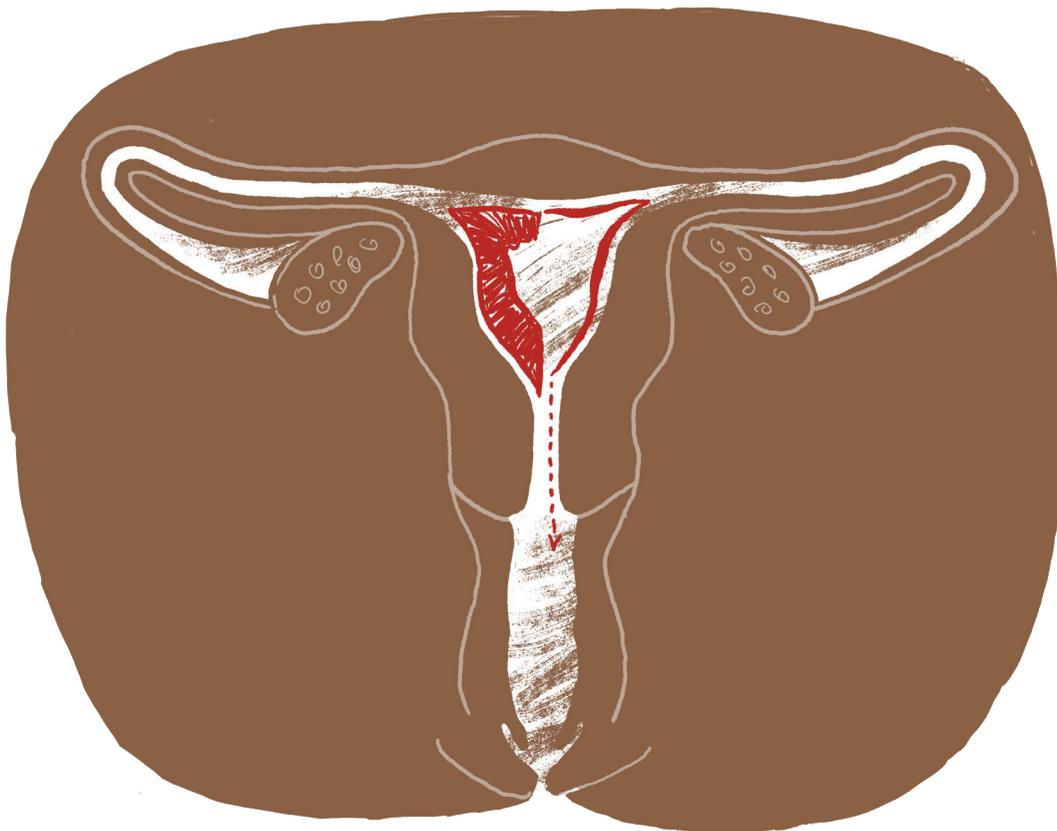
If the egg is not fertilized, it will dissolve and the uterus lining is shed through the vaginal opening. This is called **menstruation** or a **period**.

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.

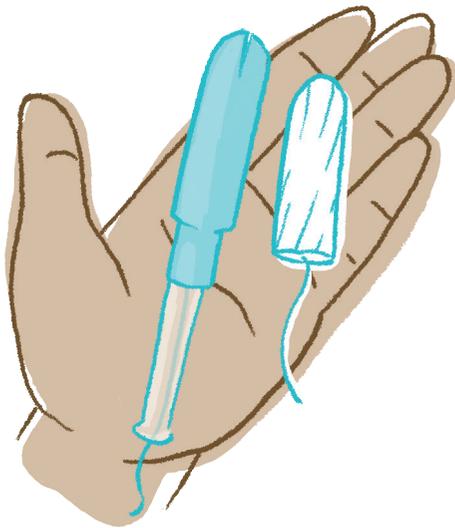
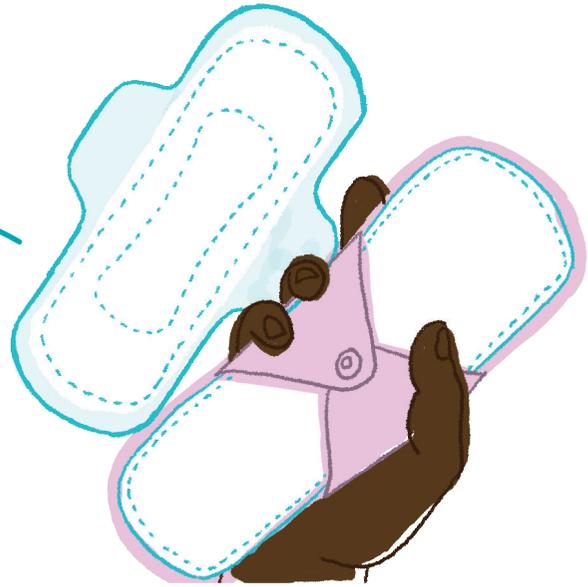


Menstrual Products

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.

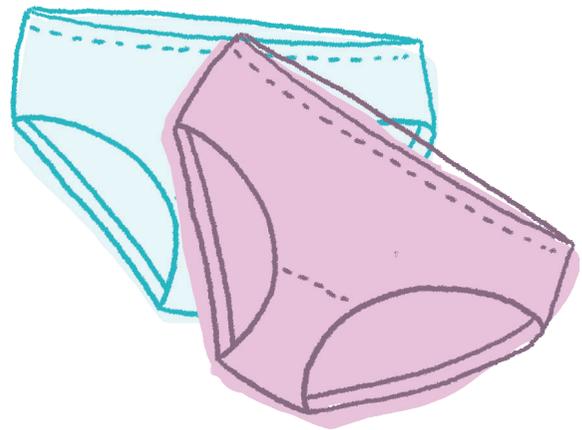


Tampons

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 5

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:

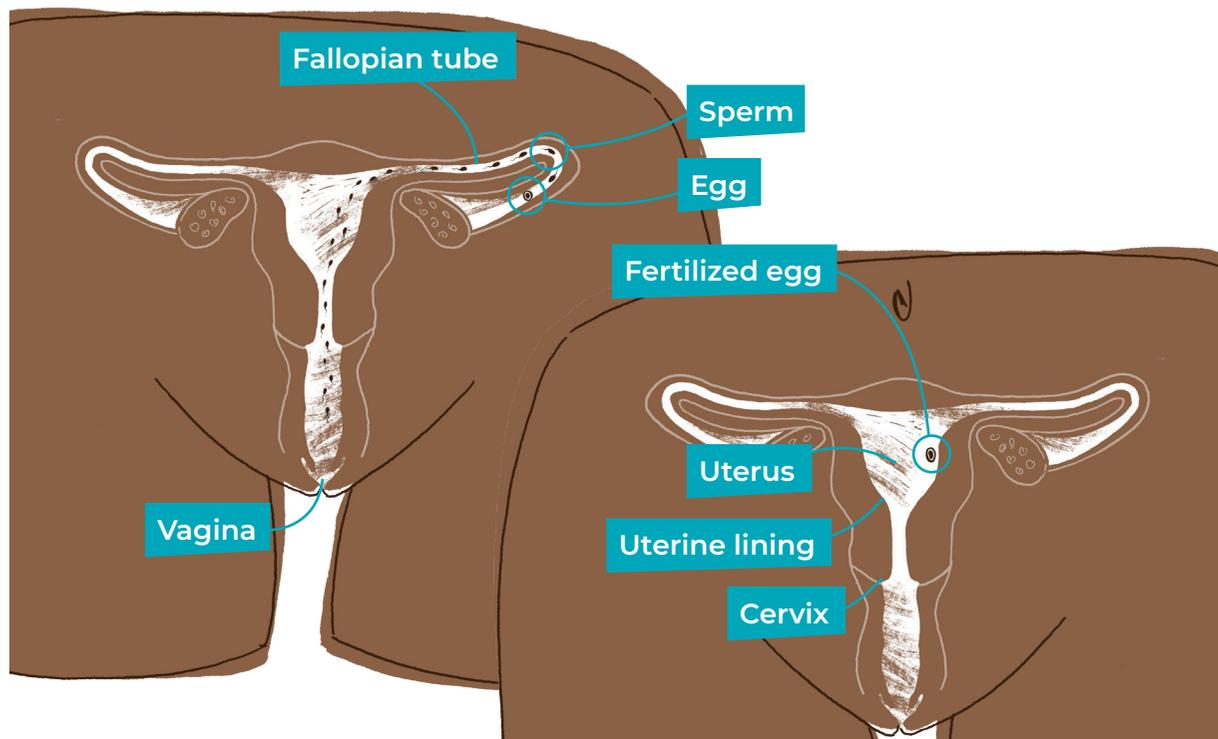
- ▶ Before puberty, the body cannot make a baby.
- ▶ Once bodies start producing sperm and releasing eggs, they have the ability to create a baby.
- ▶ Most kids find this concept “gross” because they are not mentally or emotionally ready to have a baby.
- ▶ Making a baby is a big decision for consenting 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 or 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 91.



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

91 “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

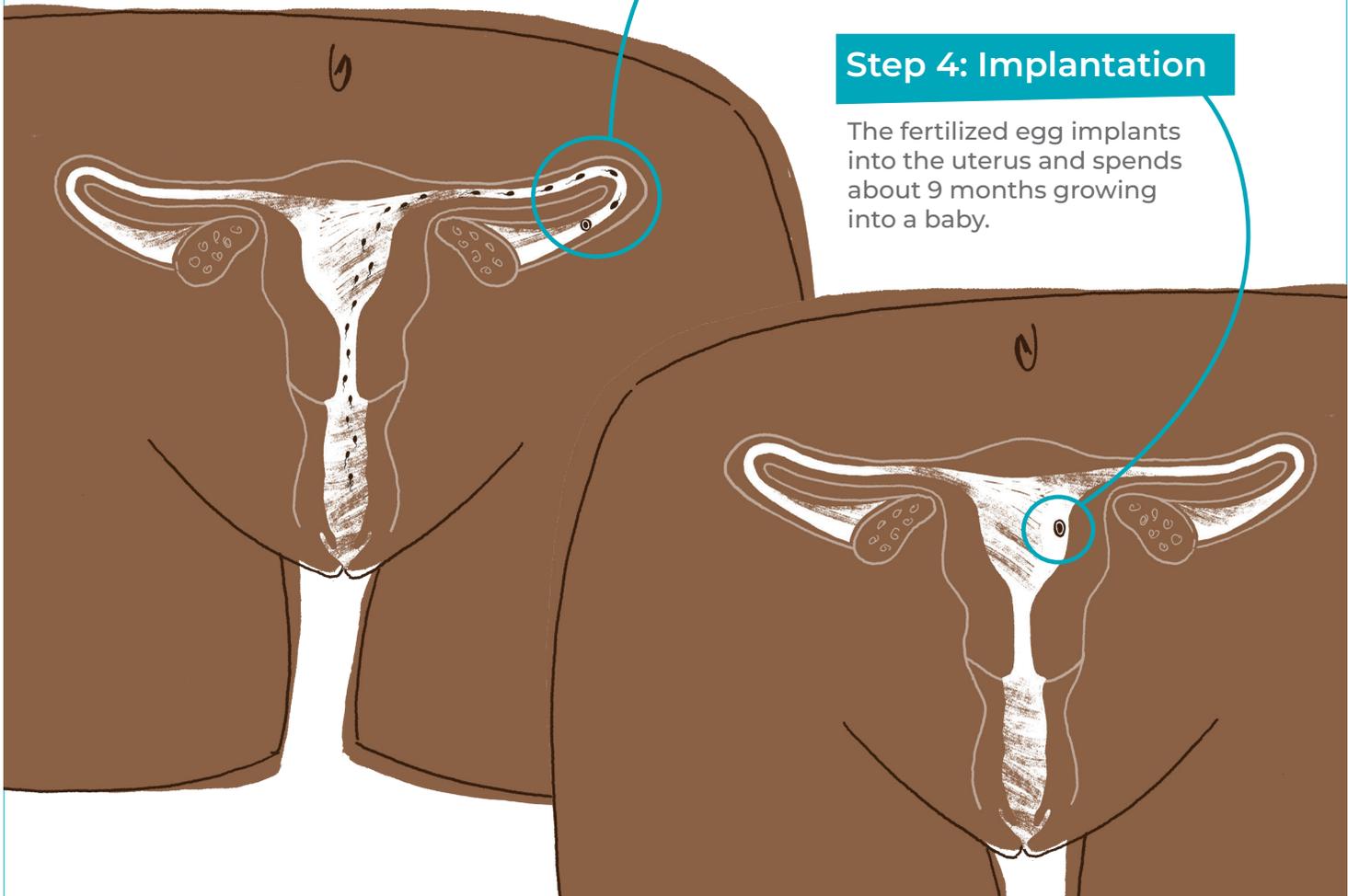
Semen containing sperm enter into the vagina. During intercourse this happens when the penis ejaculates into the vagina.

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 6

Self-Esteem

 60 minutes

CURRICULAR COMPETENCIES

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 about self-esteem.
2. Students will identify ways in which they “belong.”
3. Students will explore ways in which they “can do things.”
4. Students will identify things they like about themselves.

MATERIALS

- ▶ Lesson plan handouts (see end of lesson):
 - “I Belong”
 - “I Can Do Things”
- ▶ Magazines, scissors, glue and poster paper for collages.
- ▶ 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: Self-Esteem

Explain:

- ▶ **Self-esteem** is how you feel about yourself.
- ▶ **Positive self-esteem** is when you like yourself and have a lot of confidence.
- ▶ **Negative self-esteem** is when you don't really like yourself and have low confidence.
- ▶ People with positive self-esteem tend to make healthier choices, tend to make and keep friends more easily, and live happier lives.
- ▶ This lesson will focus on ways to build up self-esteem in both yourself and others.

Objective Two: I Belong

Explain:

- ▶ **Belonging** to a group and being included are great ways to increase self-esteem.
- ▶ We feel like we belong when we join a group, like a sports team or art club, have close friends, or feel connected to family.
- ▶ Belonging is something we can control, for example, by joining school clubs or spending time with friends.
- ▶ Unfortunately, at times, people can make us feel like we don't belong, for example, if we are left out of joining a game or don't get invited to a birthday party. To overcome these times, we need to learn how to feel secure with ourselves. It's also important to talk to a trusted adult when you feel excluded. They can help remind you of all the ways you do belong.
- ▶ Feeling secure with ourselves is something we have to practice. This is done by focusing on our strengths, thinking about situations where we do belong, and learning to be okay on our own at times.
 - For example, Jill got left out of playing a game at recess, felt alone and played by herself. To feel better she reminded herself about her playdate after school. Even though it was still hard to be left out, she felt better. She told her teacher about what happened at recess, and the class had big talk on not excluding other classmates.

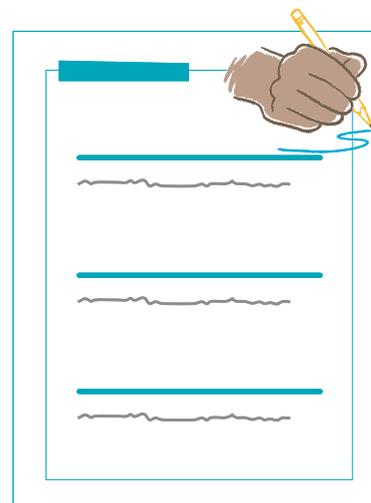
Activity

Explain:

- ▶ On the "I Belong" handout, ask students to draw the following situations.
 - Where they "belong" and how it feels. For example, being in drama club makes me feel happy and secure.
 - When they felt excluded and how it felt. For example, not getting invited to a classmate's birthday party makes me feel lonely.
 - When they included someone else and how it felt. For example, inviting someone to eat lunch together because they were eating alone made me feel proud.

Share:

- ▶ End the activity with a discussion on the pictures they drew.



HANDOUT, p. 99

Objective Three: I Can Do Things

Explain:

- ▶ **Being able to do things** adds to positive self-esteem.
 - Jimmy feels this way when he plays the piano.
 - Katy she feels this way when she rides her bike.
 - Damien is in a wheelchair; he feels this way when his new electric wheelchair allows him to go places without being pushed by others!
- ▶ We can control this area by learning and practicing new skills that we want to learn.
- ▶ We can also teach our friends skills that we have, to help increase both people's confidence.

Activity

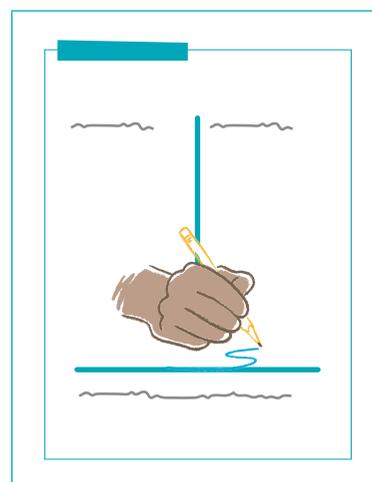
LESSON 6

Explain:

- ▶ On the "I Can Do Things" handout, ask students to draw or write:
 - skills they have (for example, biking, drawing, swimming, baking) and describe how it makes them feel to do those things (for example, proud, happy); and
 - how they can help others feel good about their accomplishments.

Share:

- ▶ End the activity with a discussion on the pictures they drew.



HANDOUT, p. 100

Objective Four: Things I Like About Myself

Explain:

- ▶ People often focus on their weaknesses or things they don't like about themselves (for example, being too short or too tall), rather than on their strengths or things they do like about themselves.
- ▶ A lot of times, things we see as a weakness may in fact be a strength, for example, shorter people can fit into smaller spaces, while taller people can reach things on high shelves.
- ▶ When we only focus on our weaknesses it leads to negative self-esteem. So it's important to **focus on our strengths** and things we like about ourselves.
- ▶ It's still okay to acknowledge things we want to improve, while reminding ourselves about all the wonderful things we have to offer.
- ▶ It's important to acknowledge that everyone has different strengths and likes, and we need to accept people for who they are.

Activity

Share the story:

- ▶ Read or show the story *I Like Myself!* by Karen Beaumont:
 - [youtube.com/watch?v=3vPI4gKWDGg](https://www.youtube.com/watch?v=3vPI4gKWDGg)
- ▶ Ask students to think about the following questions during the story.
 - Do you like and respect yourself?
 - Do you accept yourself for who you are?
 - Do you have confidence to try new things even though you might fail?

Create:

- ▶ Ask students to make a collage of the things they like about themselves, using the provided art supplies, for example, blank paper, magazines, scissors and glue. Post collages around the classroom.

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

99 “I Belong”

100 “I Can Do Things”

I Belong



Draw a situation where you belong and how it feels.

Draw a time where you felt excluded and how it felt.

Draw a time where you included someone and how it felt.

I Can Do Things

Draw a skill you have, for example, bike riding.

Draw a skill you can teach to someone else, for example, cooking.



Describe how it makes you feel to be able to do things, for example, strong.

Lesson 7

Personal Space and Physical Boundaries

 60 minutes

CURRICULAR COMPETENCIES

Social and community health

- ▶ Identify and describe avoidance or assertiveness strategies to use in unsafe and/or uncomfortable situations.
- ▶ Describe and apply strategies for responding to discrimination, stereotyping and bullying.

CONTENT

- ▶ Strategies and skills to use in potentially hazardous, unsafe or abusive situations, including identifying common lures or tricks used by potential abusers.
- ▶ Strategies for responding to bullying, discrimination and violence.

OBJECTIVES

1. Students will learn about personal space and how to maintain it.
2. Students will learn how to identify body alerts and what to do in unsafe situations.

MATERIALS

- ▶ Lesson plan handouts (see end of lesson):
 - “Zones of Personal Space”
 - “Body Language”
 - “Personal Space Invasions”
 - “Body Alert Scenarios”
- ▶ Anonymous question box slips.

Teaching Tip

At the beginning of every class:

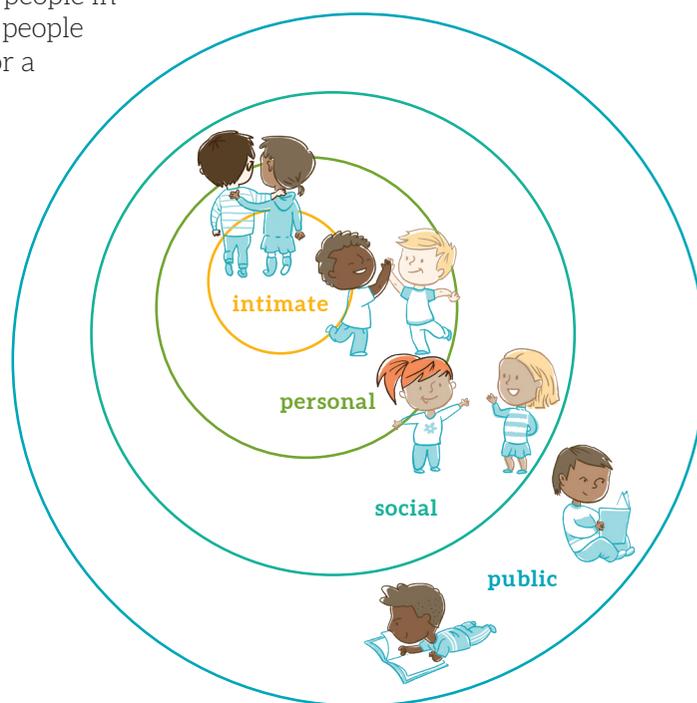
1. Provide external resources, such as:
 - Kids Help Phone – 1-800-668-6868; text 68-68-68; kidshelpphone.ca
 - School counsellors
 - Info websites, for example, amaze.org
2. Review your classroom rules.
3. Review the anonymous question box process.
4. Introduce the lesson plan objectives.

Objective One: Personal Space and Touch

Explain:

Note: You can distribute “Zones of Personal Space” handout (p. 109) and “Body Language” handout (p. 110) to students, prior to explaining the following.

- ▶ Personal space is the physical space around us that we feel comfortable in.
 - ▶ Some people call this their “bubble” or “physical boundary.”
 - ▶ You can think of personal space as an invisible bubble that you feel safe in.
 - ▶ Personal space grows bigger or smaller based on the environment and people in those spaces, for example, public places vs private places, strangers vs. family.
 - ▶ The “Zones of Personal Space” diagram illustrates four types of personal space people can have.¹⁵
1. **Intimate space** is the space right beside you. It is for people you feel very safe with, for example, a parent, guardian or best friend. In this zone people may hug, kiss, play fight, etc.
 2. **Personal space** is an arm’s length from you. It is for interactions with friends and acquaintances. In this zone, people may shake hands, give high-fives, etc.
 3. **Social space** is 4 to 10 feet from you. It is for interactions with people like a store clerk. In this zone people may wave or smile at each other.
 4. **Public space** is 10+ feet from you. This is for people in public spaces like at the library. In this zone people may look at each other and smile, but just for a quick second.
- ▶ In all the four zones, people must ask each other for permission about touch. For example, in the intimate zone, if you want to have a tickle fight with your best friend, you must ask, for example, “Do you want to tickle fight?” Your friend may say “yes” or “no.” If your friend says no, it’s very important you respect their request, so that they feel safe around you.



¹⁵ yourtherapysource.com/blog1/2019/09/17/personal-space-bubble-what-is-it-and-why-does-it-matter.

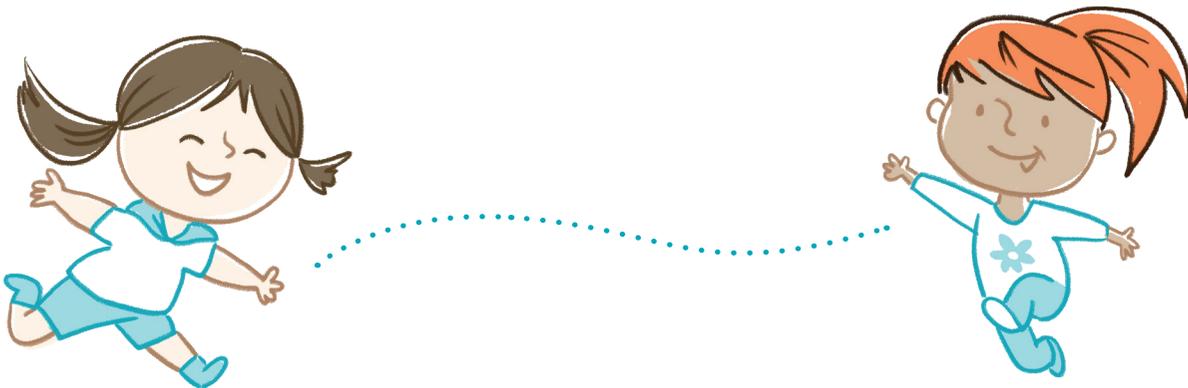
- ▶ Sometimes you can use body language to ask permission to touch a friend.
- ▶ If a friend holds their arms open to you, it likely means they want to hug. If you hold your arms open back to them, it means you also want to hug. If you shy away and shrink down, it means you don't want to hug.
- ▶ Unfortunately, there are times where people may come into your bubble or touch you without your permission.
- ▶ You always have the right to say "no" when someone goes into your personal space or touches you without permission. If you tell the person "no" and they don't listen, find a trusted adult for help.

Activity

Explain:

- ▶ Explain that we are going to do an activity to figure out everyone's personal space bubble in the classroom, with classmates.
- ▶ Number the students 1s and 2s.
- ▶ Ask the 1s to stand in a row.
- ▶ Ask the 2s to stand two metres across from someone in row 1.
- ▶ Ask the 1s to close their eyes.
- ▶ Ask the 2s to walk slowly toward their 1.
- ▶ When 1 feels like their 2 is getting too close, they can raise their hand to stop their 2.
- ▶ If a 2 feels like they are getting too close to their 1, they can stop walking forward.
- ▶ When everyone has stopped, have the 1s open their eyes and look around.

Note: Find the handout on page 110.



Ask:

- ▶ 1s, was it hard to know when 2s were near you?
- ▶ 1s, did you feel 2s near you? How did you know? Did you get any signals from your body? What sorts of signals did you get? Did some people feel nothing? How do you feel now that you can see 2? Are you uncomfortable? Is 2 too close?
- ▶ 2s, how did you feel about this exercise? Did you have to go closer to 1s than you wanted to? Did you feel rejected when 1s stopped you, as if you were too far away?
- ▶ Note how some 2s are very close, and others are not. Discuss the reasons why.
- ▶ Is there a difference when the 1s and 2s are friends?
- ▶ Ask the class to brainstorm situations where their personal space may be invaded. Some examples could include the following.
 - Standing too close to you in a lineup.
 - Standing too close to you in the change room at the CGC.
 - A friend giving you a hug, but you didn't want to hug.

Handout:

- ▶ Distribute the “Personal Space Invasion” handout. Go through each image as a class and ask these questions.
 - How can you tell when someone's personal space is being invaded?
 - What should they say or do?



HANDOUT, p. 111

Objective Two: Body Alerts and Unsafe Situations

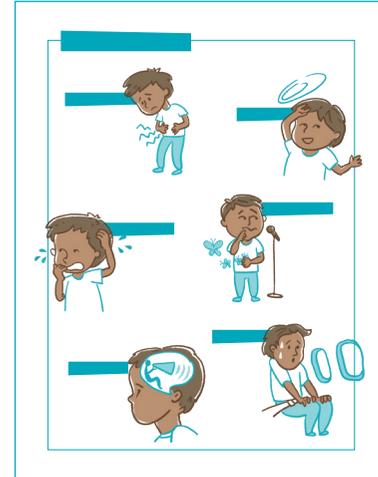
Explain:

- ▶ When someone invades our bubble, touches without asking, or if a situation is not safe, our bodies send us signals called “**body alerts.**” Spiderman calls this his “spidey sense.”
- ▶ Examples of body alerts include the following.
 - Flutters in the stomach.
 - Stomach ache.
 - Headache.
 - General weakness in your body.
 - Body freezes, unable to move.
 - Shaking, shortness of breath, faster heartbeat.
 - Rubbing hands together, chewing fingernails or hair without noticing.
 - Sweaty hands or armpits.
 - Tingles – down the spine, back of the neck, in a leg, hand or foot.
 - Twitching eyes.
 - Sense of “knowing” or gut feeling.
- ▶ If you get a body alert, check in with yourself to figure out the cause of it. If your body is telling you about physical or emotional danger, remove yourself from the situation and ask a trusted adult for help if necessary. For example, if your friend asks you to go cliff jumping, but the idea makes you feel sick to your stomach, it’s a sign you should say no.
- ▶ **Note:** You can also get body alerts in safe situations, like trying a new activity (for example, rock climbing), learning about sexual health, or seeing someone you have a crush on. In these cases, you can do a self-regulating activity, like breathing exercises, to control your emotions.

Activity

Handout:

- ▶ Distribute the “Body Alert Scenarios” handout. Go through each scenario as a class and ask these questions.
 - Is this situation safe or unsafe?
 - What is the body alert?
 - What can people do in unsafe situations?
 - Tell them to stop.
 - Leave the situation.
 - Tell a trusted adult.
 - Yell for help.
 - What can people do if they get a body alert in a safe situation?
 - Deep breathing exercises.
 - Play with a fidget.
 - Go for a walk.



HANDOUT, p. 112

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

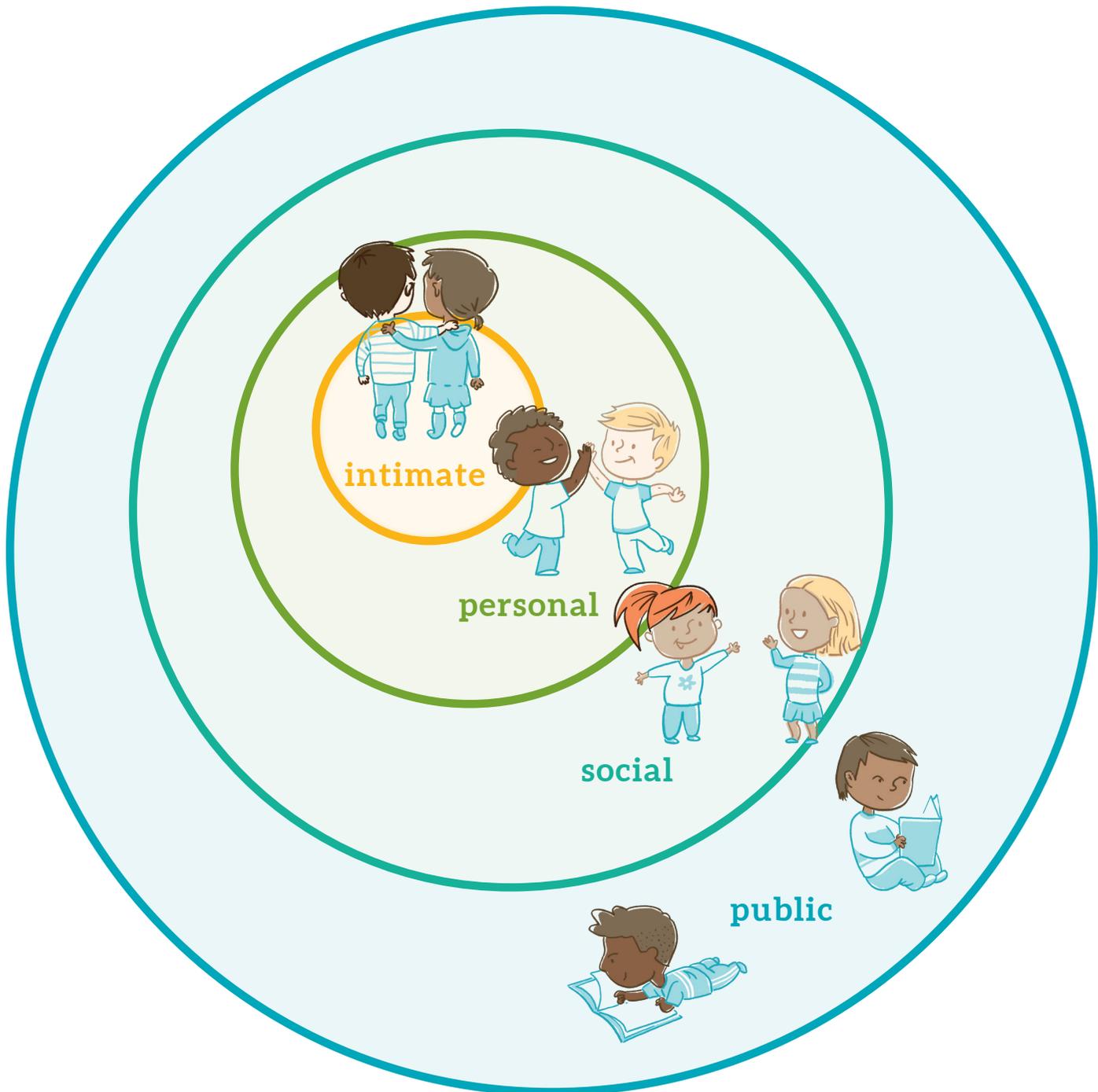
109 “Zones of Personal Space”

110 “Body Language”

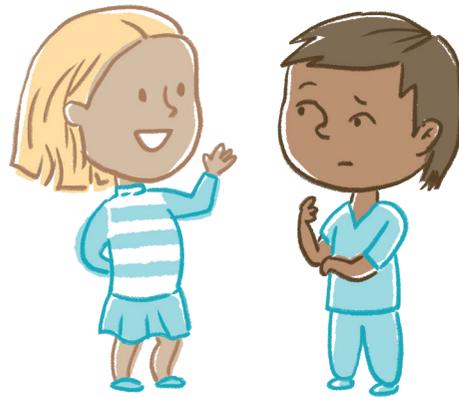
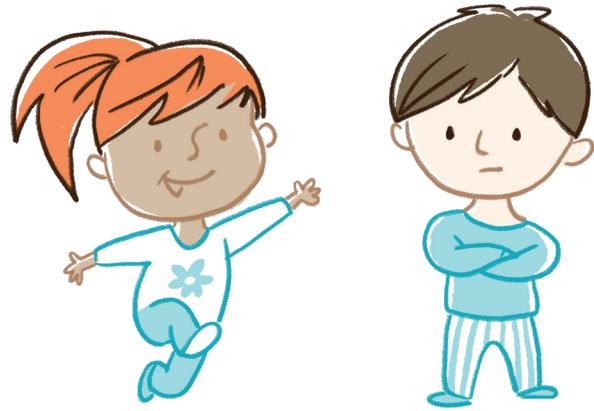
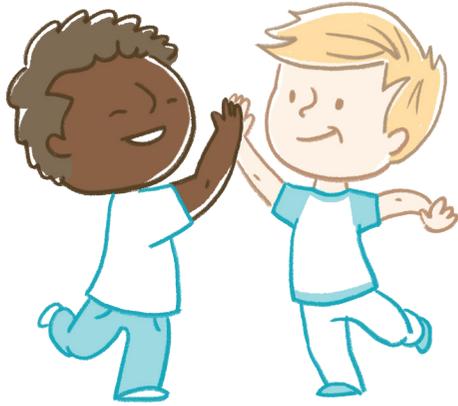
111 “Personal Space Invasion”

112 “Body Alert Scenarios”

Zones of Personal Space



Body Language



Personal Space Invasion

Based on the pictures, how can you tell when someone's personal space is being invaded?

What can they say or do when someone is invading their personal space?



Body Alert Scenarios

Answer the following questions for each scenario.

1. Is this situation safe or unsafe?
2. What is the body alert?
3. What can people do in unsafe situations?
4. What can people do if they get a body alert in a safe situation?

Scenario One:

Your friend's older brother tells you to steal a chocolate bar for him from the store. He says if you do it, he will tell all his friends how cool you are. You start to feel a "pit" in your stomach.



Scenario Four:

You see your crush and feel light-headed.



Scenario Two:

Someone asks you to show them your private parts because they want to see what they look-like, and not to tell anyone about it. You start to feel sweaty and scared.



Scenario Five:

You are in the school play. It is opening night, and you get butterflies in your stomach.

Scenario Three:

Your friend asks you to go cliff jumping into a very dangerous river. A voice in your head tells you it's not a good idea.



Scenario Six:

You go on a plane for the first time. You start to sweat and your heart beats faster.



Lesson 8

Personal Boundaries

 60 minutes

CURRICULAR COMPETENCIES

Social and community health

- ▶ Identify and describe avoidance or assertiveness strategies to use in unsafe and/or uncomfortable situations.
- ▶ Describe and assess strategies for responding to discrimination, stereotyping and bullying.
- ▶ Describe and apply strategies for developing and maintaining positive relationships.
- ▶ Describe factors that positively influence mental well-being and self-identity.

CONTENT

- ▶ Strategies and skills to use in potentially hazardous, unsafe or abusive situations, including identifying common lures or tricks used by potential abusers.
- ▶ Strategies for responding to bullying, discrimination and violence.

OBJECTIVES

1. Students will learn about personal boundaries and how to set them.
2. Students will learn about assertive communication.

MATERIALS

- ▶ Lesson plan handouts (see end of lesson):
 - “Tips for Setting Healthy Boundaries”
 - “I Statements – Role Play Scenarios”
- ▶ 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: Three Types of Personal Boundaries¹⁶

Explain:

- ▶ Personal boundaries are psychological limits you set within relationships. They help you figure out what types of activities and things you feel comfortable doing with other people, for example, your friends, siblings, cousins or caregivers.
- ▶ Personal boundaries are different for everyone and based on values. For example, if you value spending time with your family, you might not make as much time for your friends.
- ▶ There are different types of personal boundaries, and today we are going to learn about three of them.
 1. Healthy boundaries.
 - This is when someone knows their values and doesn't compromise them.
 - This is when someone knows how to communicate their needs, and can say "no" when they don't feel comfortable doing something.
 - This is when someone can accept other people telling them "no."
 2. Tight boundaries.
 - This is when someone knows their values, but avoids getting close to people.
 - This is when someone keeps people at a distance.
 - This is when someone does not like to ask for help.

¹⁶ therapistaid.com

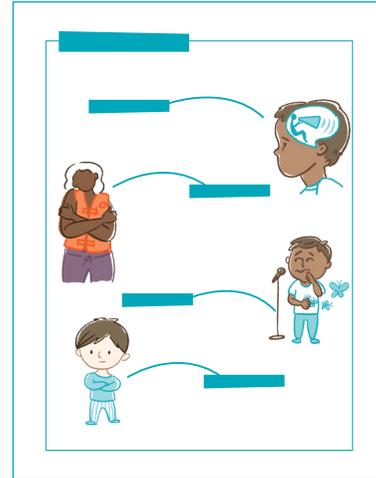
3. Loose boundaries.

- This is when someone is not clear about their own values.
 - This is when someone overshares personal information and doesn't like saying no.
 - This is when someone gets overinvolved with other people's problems.
- ▶ It is important to try and be a person with healthy boundaries.
 - ▶ To set healthy boundaries, there are four main actions you can take.
1. Explore your values.
 - To figure out your values, ask yourself what are some things that are important to you. Maybe it's sports, spending time with family, spending time with friends, going to church, connecting with your First Nation, etc.
 - Your values are your guide to setting boundaries.
 2. Know your limits.
 - Before becoming involved in a situation, know what you are comfortable doing. For example, your friend asks you to jump off the diving board at the pool. Before saying yes, ask yourself if you have the skills to swim in the deep end or do you need a life jacket first?
 3. Listen to your body alerts.
 - If you notice feelings of discomfort, like butterflies in your stomach, that is your body telling your brain that you need to set a boundary.
 4. Be assertive.
 - When you know it's time to set a boundary, don't be shy. Politely say "no" or "I am not comfortable doing that."

Activity

Explain:

- ▶ Distribute the “Tips for Setting Healthy Boundaries” handout and get students to answer the questions at the end.



HANDOUT, p. 120

Objective Two: Assertive Communication and “I” Statements

Explain:

- ▶ **Assertive communication** involves effectively using “I” statements to let others know your feelings without hurting theirs.
- ▶ **“I” statements** help us to communicate our boundaries.
- ▶ Sometimes people get “I” statements confused with “you” statements.
- ▶ “You” statements make people defensive and angry.
- ▶ Here are some examples of the differences between “You” statements and “I” statements.

“You” Statements:

- ▶ You talk too loud and don’t let me talk.
- ▶ You always leave me out.

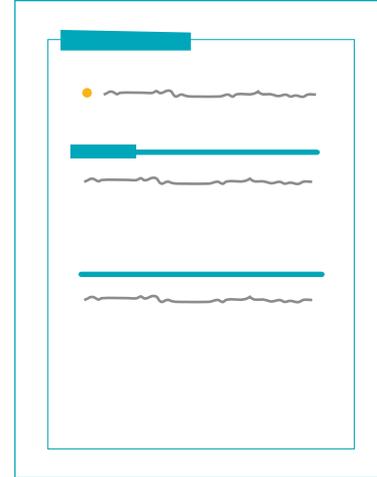
“I” Statements:

- ▶ I feel annoyed when I don’t get a turn to talk.
- ▶ I feel lonely when I don’t get to play.
- ▶ “I” statements and assertive communication have two parts.
 - Part 1: Expressing your feelings.
 - I feel (lonely) when (I don’t get to play the game).
 - Part 2: Saying what you need or want.
 - I would like to (be included).

Activity

Explain:

- ▶ Distribute the “I Statements Role Play Scenarios” handout.
- ▶ Ask students to make an “I” statement for each scenario.



HANDOUT, p. 121

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 “Tips for Setting Healthy Boundaries”

121 “I Statements – Role Play Scenarios”

Tips for Setting Healthy Boundaries

1. Explore your values.

To figure out your values, ask yourself what are some things that are important to you. Is it sports, spending time with family, spending time with friends, going to church, connecting with your First Nation, etc.?

Your values are your guide to setting boundaries.

Examples of my values are...e.g., I prefer spending time with my family on the weekends.



2. Know your limits.

Before becoming involved in a situation, know what you are comfortable doing. For example, your friend asks you to jump off the diving board at the pool. Before saying yes, ask yourself if you have the skills to swim in the deep end or do you need a lifejacket first.

Examples of my limits are...e.g., wearing a life jacket to jump off the diving board.



3. Listen to your body alerts.

If you notice feelings of discomfort, like butterflies in your stomach, that is your body telling your brain that you need to set a boundary.

Examples of body alerts that tell me to set a boundary are...e.g., butterflies in my tummy.



4. Be assertive.

When you know it's time to set a boundary, don't be shy. Politely say "no" or "I am not comfortable doing that."

Examples of assertive communications are...e.g., I don't feel comfortable swimming in the deep end without a life jacket.



"I" Statements – Role Play Scenarios

Read the following scenarios and create an "I" statement to address each situation.

- You lend a friend one of your books. They return it with pages missing.
- Your friend always asks to borrow money, but they never repay you.
- Your friend asks if you want to work together on an assignment, even though the teacher said it was an individual activity.

"I" statement formula:

Part 1: Expressing your feelings.

I feel _____

when _____

Part 2: Saying what you need or want.

I need _____

Lesson 9

Media and Stereotyping

 60 minutes

CURRICULAR COMPETENCIES

Mental well-being

- ▶ Describe factors that positively influence mental well-being and self-identity.

CONTENT

- ▶ Media messaging and body image.
- ▶ Factors that influence self-identity, including body image and social media.

OBJECTIVES

1. Students will explore the concepts of media and stereotyping.

MATERIALS

- ▶ Lesson plan handout (see end of lesson):
 - “Stereotyping in Stories”
- ▶ *The Paper Bag Princess* by Robert Munsch (available from the Yukon Department of Education) or online at [youtube.com/watch?v=DvmySr7zN4U](https://www.youtube.com/watch?v=DvmySr7zN4U).
- ▶ 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: Media and Stereotyping

Explain:

- ▶ **Media** are tools used for large-scale communication.
- ▶ Things like the radio, internet, television, newspapers and magazines are all part of the media.
- ▶ These methods of communication reach many people in most areas of the world and have a large influence on people's thoughts and ideas.
- ▶ Media often contributes to stereotypes.
- ▶ **Stereotypes** are widely held, fixed and oversimplified images or ideas about a particular type of person or thing.
- ▶ Stereotypes can change how we treat others because we have already "decided" who they are by putting them in a box (a stereotype).
- ▶ Another word for stereotyping is "generalizing." You know you are doing this any time you start a sentence this way: "Boys are..." or "Kids are..." etc. Because not all boys are one thing, nor are all kids the same.
- ▶ Stereotypes may have an element of truth, but that does not make them true.

Activity One

Discuss:

- ▶ As a class, brainstorm children's films, for example, *Cinderella*. Ask students to describe some typical stereotypes used in the films they chose. Examples could include the following.
 - The princess is pretty.
 - The stepmother is evil.
 - The prince is handsome.
 - The villain is ugly.
 - The hero is attractive.
- ▶ Ask if these stereotypes are true? Discuss why or why not.

Explain:

- ▶ Media characters are often very stereotypical, which influences how certain people are viewed, for example, stepmoms are evil.
- ▶ Stereotyping often creates false impressions and limiting beliefs on groups of people.
- ▶ It is important to think critically about the characters and people we see in the media and what messages they are sending to people.
- ▶ Ask students if they can think of any movie characters that don't fit into a stereotypical role.

Activity Two

Discuss:

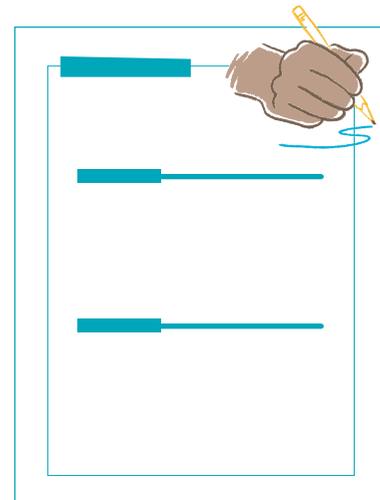
- ▶ Read *The Paper Bag Princess* by Robert Munsch or show it ([youtube.com/watch?v=DvmySr7zN4U](https://www.youtube.com/watch?v=DvmySr7zN4U)). Then discuss the following questions.
 1. How is Elizabeth different from stereotypical princesses?
 2. How is Prince Ronald different from other princes?
 3. Are *The Paper Bag Princess* characters like anyone that you know? In what ways are they like real people?
 4. What do you think of these characters, including the villain/dragon? Do you like them? Why? Why not?

Explain:

- ▶ Distribute the “Stereotyping in Stories” handout.
- ▶ Have students draw a picture of a stereotypical media character and then a non-stereotypical version of the same character. Students may need some help in creating their non-stereotypical characters.

Explain:

- ▶ Most people have characteristics that don’t seem “typical” and don’t match stereotypes, which is what makes people so unique and special.
- ▶ For example, a prince/ss who really wants to be a shoemaker, or a villain who has a secret fear of spiders.
- ▶ Just like the Paper Bag Princess, we feel best when we celebrate what makes us and others unique.



HANDOUT, P. 128

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

128 “Stereotyping in Stories”

LESSON 9

Stereotyping in Stories

In the space below, draw a picture of a stereotypical media character.
Then draw a non-stereotypical version of the same character.



**Stereotypical
character**

**Non-stereotypical
character**

Lesson 10

Online Communication and Cyberbullying

 60 minutes

CURRICULAR COMPETENCIES

Social and community health

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

Mental well-being

- ▶ Describe factors that positively influence mental well-being and self-identity.

CONTENT

- ▶ Media messaging and body image.
- ▶ Strategies for responding to bullying, discrimination and violence.
- ▶ Factors that influence self-identity, including body image and social media.

OBJECTIVES

1. Students will explore online communication and cyberbullying.

MATERIALS

- ▶ Lesson plan handouts (see end of lesson):
 - “Effects of Cyberbullying”
 - “Rules for Online Communication and Responding to Cyberbullying”
- ▶ Anonymous question box slips.

Teaching Tip

At the beginning of every class:

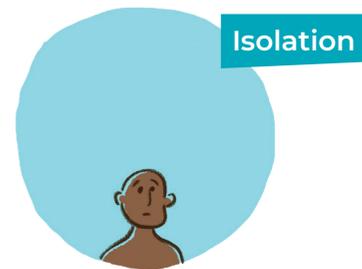
1. Provide external resources, such as:
 - Kids Help Phone - 1-800-668-6868; text 68-68-68; kidshelpphone.ca
 - School counsellors
 - Info websites, for example, amaze.org
2. Review your classroom rules.
3. Review the anonymous question box process.
4. Introduce the lesson plan objectives.

Objective One: Online Communication and Cyberbullying

Explain:

- ▶ Cyberbullying is a growing problem.
- ▶ Cyberbullying takes place using electronic technology such as cell phones, computers and tablets as well as communication tools including social media sites, text messages, chat and websites.
- ▶ People find it easier to say and do mean things because they can't see each other.
- ▶ Examples of cyberbullying include: mean text messages or emails; rumours sent by email or posted on social networking sites; and embarrassing pictures, videos, websites or fake profiles.
- ▶ Any type of bullying can have negative physical and psychological effects on the victims, such as:
 - anxiety;
 - depression;
 - decrease in school attendance;
 - strained relationship with friends;
 - extreme embarrassment; or
 - school relocation.
- ▶ It is important that we all do our part to end cyberbullying.

Note: Find the handout on page 134.



Activity

Read:

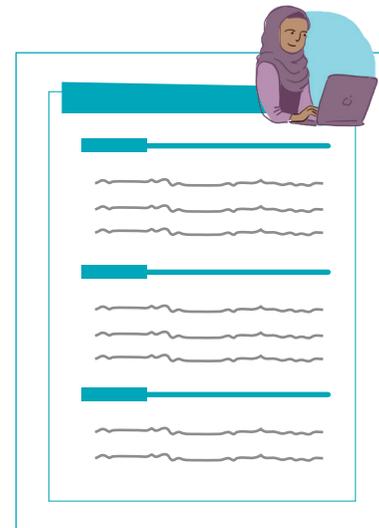
It's easier to say and do mean things online because you are not face to face. You are hiding behind a screen.

Discuss:

- ▶ Discuss the following questions.
 - Do you agree with that statement? Why or why not?
 - When someone says something to you online that hurts your feelings, how is it different from when it happens offline?
 - Have you ever been unsure whether something that someone said or did to you online was meant to be mean or not?
 - If so, what did you do about it?
 - Have you every accidentally said something online that offended someone? Have you made a comment meaning to be funny, and it backfired?

Explain:

- ▶ Distribute and review the “Rules for Good Online Communication and Responding to Cyberbullying” handout.



HANDOUT, p. 135

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

134 “Effects of Cyberbullying”

135 “Rules for Online Communication and Responding to Cyberbullying”

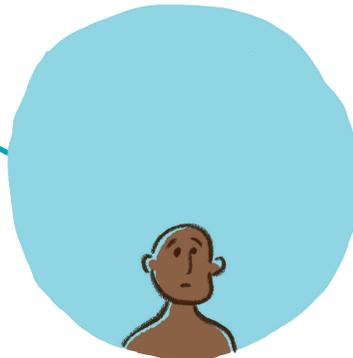
Effects of Cyberbullying

Anger

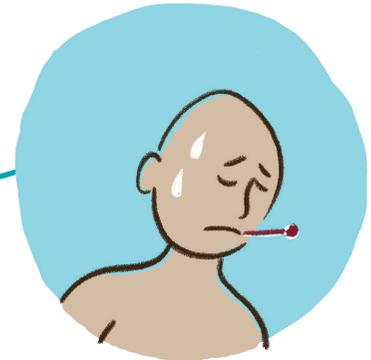


Depression

Isolation



Illness



Humiliation

Rules for Online Communication and Responding to Cyberbullying



Follow these rules of good online communication.

1. Respect other people's privacy online: no rumours, no sharing their stories or information with others; no sharing photos of someone without their permission.
2. Respect other people's virtual space. Don't go into someone else's files or computer.
3. Be inclusive of other people. It is just as mean to exclude people online as it is face to face.
4. Don't try to turn people against one another. Making someone else be a bully is no different from being a bully yourself.
5. Your values in the virtual world should be the same as in the physical world. Never write anything to anyone or about anyone that you wouldn't be willing to say to their face. If you feel an urge to write something angry, sleep on it. Or, better yet, write it out by hand and do not post it online. When you feel better, talk to that person face to face.

Learn how to respond to cyberbullying.

1. STOP immediately. Leave the online environment or activity where bullying is going on.
2. BLOCK emails or instant messages received from bullies. NEVER RESPOND.
3. REPORT any harassing messages or images and send them to the internet provider (for example, Hotmail, Facebook) or app (for example, Snapchat, TikTok). Most providers have policies about users harassing people on their platform.
4. TALK to a trusted adult about the cyberbullying. Alert the police when bullying involves physical threats.

Learn what to do if you witness cyberbullying.

1. If someone asks you to pass on an insulting or embarrassing message, photo or video of another person, refuse to do it – even if you don't know that person.
2. Take action to stop bullying when you see it. When your friends get involved in cyberbullying, tell them or the perpetrator it is not okay. Speak up every time you witness online bullying. Most young people are more sensitive to criticism from their peers than from their parents. If you are concerned, ask an adult for help. Online bullying is dangerous and against the law. Do not be afraid to report it to the RCMP or to your parents.

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)

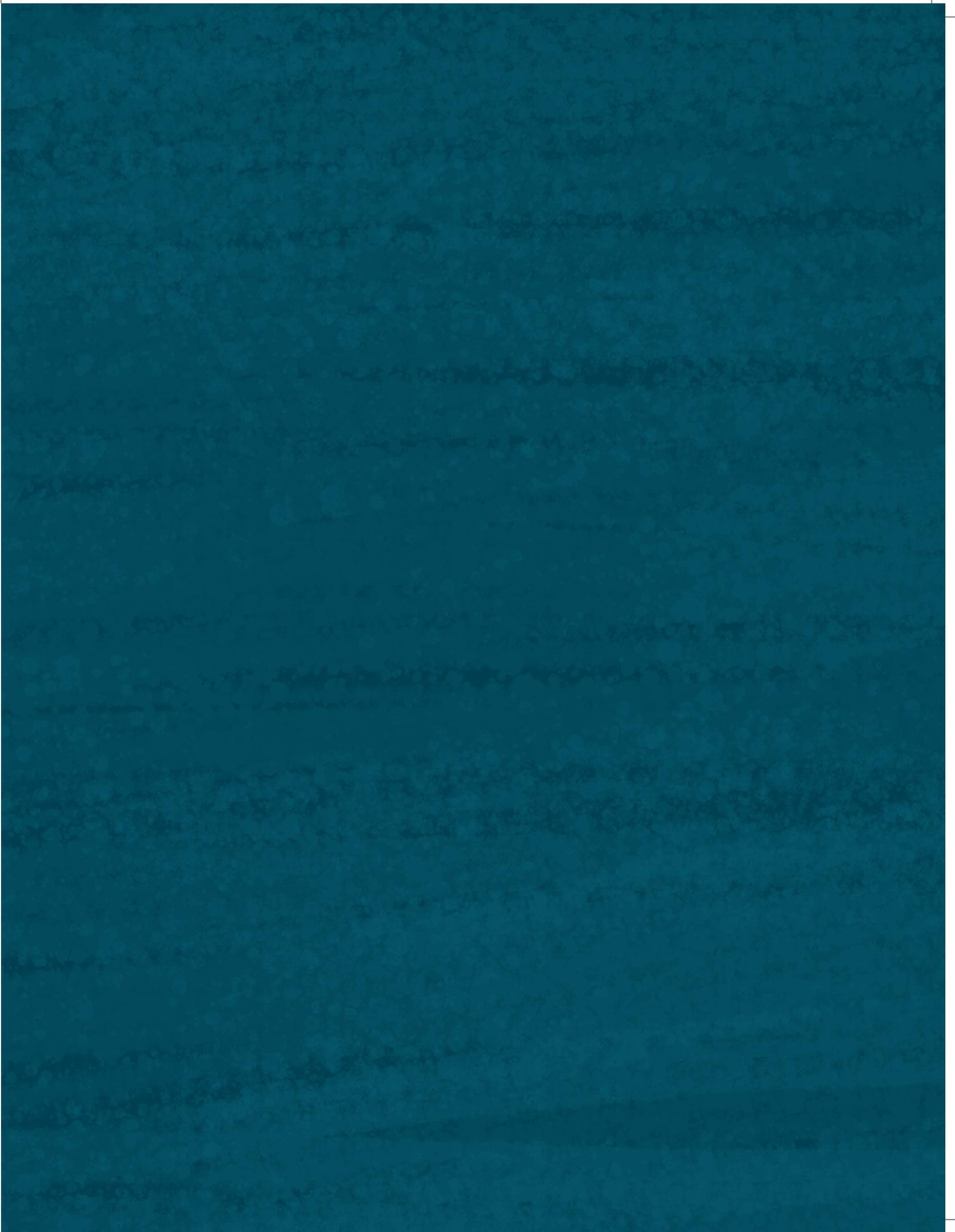
- ▶ Call this number to speak to a sexual health educator or nurse and receive Yukon-specific sexual health information. This service is available Monday to Friday, from 9 am to 9 pm, Yukon Standard Time.

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

