Prince Edward Island
CANADA

Education and Early Childhood Development
English Programs

Prince Edward Island Health Curriculum

Health

Grade 6

CURRICULUM

2009
Prince Edward Island
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Reproduced/Adapted with permission from Alberta Education, ***Kindergarten to Grade 9 Health and Life Skills Guide to Implementation*** (Edmonton, AB: Alberta Learning, 2002).

This curriculum guide is intended to provide teachers with the overview of the outcomes framework for grade 6 health education and to assist teachers in designing learning experiences and assessment tasks.

Program Rationale and Philosophy

Health education involves learning about the habits, behaviours, interactions, and decisions related to healthy daily living and planning for the future. The home, school, and community play important roles in contributing to the healthy personal development of students, by providing an opportunity for them to consider information and acquire, practise, and demonstrate strategies for dealing with the challenges of life and living.

The aim of the health curriculum is to enable students to make well-informed, healthy choices and to develop behaviours that contribute to the well-being of self and others.

- Choices are based on attitudes, beliefs, and values. The family is the primary educator in the development of student attitudes and values. The school and community play a supportive and crucial role in building on these attitudes and values.
- To make responsible and healthy choices, students need to know how to seek out relevant and accurate information. They learn health-related information from many sources, including home, school, peers, the community, and the media. This program assists students in identifying reliable sources of information and in becoming discerning consumers of health-related information.
- Students develop decision-making skills that support informed personal health practices and responsibility for health, learn to prevent or reduce risk, and have opportunities to demonstrate caring for self and others.
- Students focus on safety and injury prevention and develop strategies to assess risk, to reduce potential harm, and to identify support systems for self and others. Students learn about products, substances and behaviours that may be injurious to their health. They also learn strategies to use in unsafe situations.
- Students are encouraged to promote and maintain health as a valued and valuable resource, and to examine health issues and factors that promote or limit good health. They gain an understanding of their individual behaviours as well as social and environmental factors which all have an impact on their health.
- In an environment of acceptance, understanding, respect, and caring, students can learn to acknowledge and express personal feelings and emotions, as well as to appreciate the strengths and talents of self and others. There are opportunities for students to accept and appreciate diversity and the uniqueness of self and others in our global society. There is an emphasis on healthy interactions and safe and caring relationships. Friendship skills are developed and then extended to incorporate skills for working in groups.
- Students build and expand upon safe and supportive networks for self and others that link the home, school, and community.
- Students develop the skill of goal setting and begin to realize their ability to influence or control many outcomes and results.

Meeting the Needs of All Learners

Students learn in different ways and at different rates. Each student comes to class with varying interests, experiences, developmental maturity, background knowledge, and skills. What is important is that within each lesson, there is something for everyone—something that meets the needs and learning styles of each and every student.

An effective approach for accommodating student differences is to begin lessons with a whole-group activity and shared experience. Students then choose from a variety of ways to process their thinking and represent their learning. This allows students to work on the same concept in ways that most suit their individual learning styles and developmental stages. Teachers should utilize materials and strategies that accommodate student diversity and ensure that all students have equitable opportunities to experience success as they work toward achieving designated outcomes.

Learning supports for students with special needs, including English as an additional language (EAL), could include the following:

- alternate formats for print materials, such as audiotapes, large print, talking computer books, and read-alouds
- a scribe for written assignments and/or tests
- access to computers
- content-area spelling and vocabulary word lists
- peer support
- questions to guide or focus reading
- demonstrations or modelled examples
- extra time to complete work
- highlighted or underlined sections in textbooks
- specific assistance with organization
- graphic organizers
- visual prompts and pictures

The variety of learning experiences described in this guide, and the suggestions for a variety of assessment practices, will assist teachers in accommodating the diversity of learners.

Assessment and Evaluation

The terms "assessment" and "evaluation" are often used interchangeably, but they refer to quite different processes.

Assessment is the systematic process of gathering information on student learning.

Assessment Techniques

- Formal/Informal Observation gathers information while a lesson is in progress. When observation is formal, the student is made aware of what is being observed and the criteria being assessed. Informal observation could be a frequent, but brief, check on a given criterion. You might be observing the student's participation level, use of a piece of equipment, or application of a process. You could record the results with a checklist, a rating scale, or written notes. Remember to plan the criteria, have recording forms ready, and be sure all students are observed in a reasonable time period.
- Performance encourages learning through active participation. This could be a demonstration/ presentation. The performance is most often assessed through observation.
- Journals provide opportunity for students to express thoughts and ideas in a reflective way. They permit a student to consider strengths and weaknesses, attitudes, interests, and new ideas.
- Interviews promote understanding and application of concepts. Interviewing a student allows the teacher to confirm that learning has taken place beyond factual recall. Interviews may be brief or extensive. Students should know what criteria will be used to assess formal interviews. This assessment technique provides an opportunity to students whose verbal presentation skills are stronger than their written skills.
- Paper and Pencil assessments can be formative or summative. These assessments may be written assignments or tests.
- Presentations require students to analyse and interpret information and then communicate it. These may be given orally, in written/pictorial form, as a project summary, or by using video or computer software.
- Portfolios allow students to be central in the process. Students can make decisions about what goes in the portfolio, how it is used, and how it is evaluated. It should provide a long-term record of growth in learning and skills.

Evaluation is the process of analysing, reflecting upon, and summarizing assessment information, and making judgments or decisions based upon the information gathered. The assessment provides the data, and the evaluation process brings meaning to the data. When students are aware of the outcomes for which they are responsible and the criteria by which their work will be assessed or evaluated, they can make informed decisions about the most effective ways to demonstrate their learning.

Teacher-developed assessments and the evaluations based on them have a variety of uses:

- providing feedback to improve student learning
- determining if curriculum outcomes have been achieved
- certifying that students have achieved certain levels of performance
- setting goals for future student learning
- communicating with parents about their children's learning
- providing information to teachers on the effectiveness of their teaching, the program, and the learning environment
- meeting goals of guidance and administrative personnel

General Curriculum Outcomes

Three general outcomes serve as the foundation for the health curriculum.

Wellness Choices

- ***Students will make responsible and informed choices to maintain health and to promote safety for self and others.***

  Throughout the grades, students study active living, positive health habits, growth and change, body image, nutrition, substance awareness, and abuse awareness, as developmentally appropriate. Each grade level focusses on different aspects of these significant health issues.

  Consideration about safety for self and others in the home, school, and community begins in the early grades and continues throughout the program.

Relationship Choices

- ***Students will develop effective interpersonal skills that demonstrate responsibility, respect, and caring in order to establish and maintain healthy interactions.***

  Students learn the characteristics of healthy relationships. They learn that the development and maintenance of effective relationships requires the communication skills of listening, expressing needs and emotions, and providing feedback. They learn about support networks, mentors, and developing healthy relationships and positive interdependence.

  Students learn how to maintain relationships and how to deal with change and transitions in a variety of life roles.

  They also learn to value the strengths and gifts of self and others, as well as their uniqueness.

Life Learning Choices

- ***Students will use resources effectively to manage and explore life roles and career opportunities and challenges.***

  Students begin in grade 1 to develop practices, knowledge, and skills related to career development. They learn to respect the property of others and to understand the concepts of consequences and accountability.

  Self-direction and personal responsibility are developed as students learn to organize and manage their own resources of time, energy, and personal property.

  Students begin by recognizing the strengths, interests, attributes, and skills of self and others as a basis for understanding that opportunities and possibilities for learning are ever present and lifelong.

  Service learning experiences and explorations provide students with opportunities to learn, practise, and refine skills while making meaningful contributions to their families, schools, and communities.

The general curriculum outcomes are interrelated and interdependent. Each is to be achieved through a variety of experiences. The emphasis is on overall well-being. Students learn to enhance attitudes and behaviours that reflect healthy choices and reduce the potential for harm. They develop personal responsibility for health and they demonstrate caring for others.

Specific Curriculum Outcomes

Each general curriculum outcome includes specific curriculum outcomes that students are expected to achieve by the end of each grade. Specific outcomes within each grade are developmentally appropriate, building upon and making connections to prior learning.

Thus, the specific curriculum outcomes are progressive and lead to more developmentally complex thinking skills that address the interrelated dimensions of health: physical, emotional/social, mental/cognitive, spiritual. The specific outcomes incorporate the potential for students to extend and refine learning in real-life situations.

Depending on the learning context and developmental needs of students, outcomes can be integrated or reclustered within the grade, as appropriate.

How to Use the Four-Column Curriculum Layout

The curriculum has been organized into four columns to relate learning experiences to the outcomes by

- providing a range of strategies for learning and teaching associated with a specific outcome or a cluster of outcomes
- demonstrating the relationship between outcomes and assessment strategies
- suggesting ways that teachers can make cross-curricular connections
- providing teachers with resource suggestions.

Column 1: Specific Curriculum Outcomes

Column 1 provides specific curriculum outcomes describing what students are expected to know, be able to do, and, hopefully, value by the end of the year.

Specific outcomes are identified with an abbreviation (for example, W-4.6, R-4.3, or L-4.7). The letter in the abbreviation refers to the general outcome —Wellness, Relationship, or Life Learning Choices. The number after the hyphen is the grade level, and the final number refers to the order number of the specific outcome. The heart symbol ♥ is used to identify outcomes that should be addressed with sensitivity.

Column 2: Elaboration-Strategies for Learning and Teaching

The first part of this column contains an elaboration of the outcome and/or some background related to the outcome of the teacher. The bullets in the second column indicate suggestions for learning and teaching.

Column 3: Tasks for Instruction and/or Assessment

This column provides suggestions for ongoing assessments that form an integral part of the learning experience.

The suggestions are grouped into a variety of types of assessment.

Column 4: Resources/Notes

This column provides additional information for teachers, including literature support resource titles, cross-curricular links, supplementary resources, and Web links. Appendix items with teacher information, student information, and activity sheets are also indicated in this column.

The Four-Column Spread

The curriculum has been organized in four columns in a two-page layout as illustrated below. The content of these columns is explained on pages 9 and 10.

WELLNESS CHOICES

GCO: Students will make responsible and informed choices to maintain health and to promote safety for self and others.

Outcomes	***Elaborations - Strategies for Learning and Teaching***
Students will be expected to	***PERSONAL HEALTH***
• evaluate the need for balance and variety in daily activites that promote personal health (W-6.1)	• As a class, discuss the concept of ***balance*** and why it is important to have balance in your life. • Invite students to complete a weekly schedule showing how they spend their time. Colour code activities to reflect the following categories: physical activity, relaxation, learning, sleep, and reflection. • Have students work in pairs to look at their schedules and evaluate how balanced their lives are. Encourage students to discuss how to achieve better balance in their lives, if necessary.

WELLNESS CHOICES

GCO: Students will make responsible and informed choices to maintain health and to promote safety for self and others.

Tasks for Instruction and/or Assessment	***Resources/Notes***
Presentation	***Health and Wellness***
• Create a collage entitled "Keeping Balance in My Life." Use words and pictures to show the benefits of a balanced life that includes time for physical activity, relaxation, learning, sleep, and reflection.	Chapter 1, pp. 4-9
Journal	***Leaps and Bounds***
• Complete the following statements: - "The kinds of physical activity I enjoy are . . ." - "I make room in my life for these activities by . . ." - "To relax I . . ." - "When I need to reflect on things I . . ." - "To make sure I get enough sleep I . . ." - "Learning is important in my life because . . ." - "I keep balance in my life . . ."	Lesson 2 Lesson 3 Lesson 7

Teacher Notes

- Percentage of instructional time for elementary health grades 4-6:
  5% (15 minutes/day, 1.25 hours/week, or 90 minutes/6 day cycle or 46.25 hours/year)

- Human Sexuality outcomes are boldfaced and included with Wellness Choices. Before addressing any of these outcomes, you must provide parents with information about the content. The expectation is to inform them by letter. A sample letter is available in the appendix, W-6.9, page 89.) Schools may decide to have an information meeting or discuss the program at events such as "Meet-The-Teacher Night."

- In column 4, ***Other Suggested Resources*** (books, videos, Web sites) and cross-curricular links are listed. Teachers are encouraged to use a variety of resources to address the curriculum outcomes (e.g., videos, posters, reference materials, community programs, Web sites, resource people). Please ensure that the material being used is appropriate, engaging, and accurate. Evaluation criteria can be found in ***Evaluation and Selection of Learning Resources: A Guide***. This resource is available in your school or can be accessed on-line at www.gov.pe.ca/educ.

- Eastern School District teachers have access to a selection of materials from the Teachers' Resource Centre. Western School District teachers are encouraged to visit the Little Red School House for resources. All teachers are encouraged to use the Confederation Centre Library and to consult with the teacher-librarians in their schools for updated video curriculum lists as well as other resources. Visit the Confederation Centre Library on-line and search for resources at www.library.pe.ca/abbycat.

- Each school has a ***School Healthy Eating Toolkit*** from the PEI Healthy Eating Alliance.

- The heart symbol ♥ is used to identify outcomes that should be addressed with sensitivity. It is important to know your students and to consider what outcomes/issues should be handled with care.

- Consider community opportunities when planning. Look for designated weeks or months such as Verbal Abuse Prevention week, or Heart and Stroke Month, to address topics that complement the health curriculum.

- ***Let's Just Talk! For Girls*** and ***Let's Just Talk! For Boys*** (DVDs) are available in your school library and may be used to address specific outcome W-6.10.

Grade 6

WELLNESS CHOICES-General Curriculum Outcome

Students will make responsible and informed choices to maintain health and to promote safety for self and others.

Specific Curriculum Outcomes

Personal Health

Students will be expected to

- ☐ evaluate the need for balance and variety in daily activities that promote personal health
- ☐ determine the health risks associated with the sharing of personal-care items
- ☐ examine how health habits/behaviours influence body image and feelings of self-worth
- ☐ analyse personal eating behaviours—food and fluids—in a variety of settings

Safety and Responsibility

Students will be expected to

- ☐ identify and communicate values and beliefs that affect healthy choices
- ☐ analyse how laws, regulations, and rules contribute to health and safety practices
- ☐ evaluate the impact of personal behaviour on the safety of self and others
- ☐ demonstrate responsibility for, and skills related to, the safety of self and others

Sexual Health

Students will be expected to

- ☐ ***describe physical, emotional, and social changes that occur during puberty***
- ☐ ***identify the basic components of the human reproductive systems and describe the basic functions of the various components***

RELATIONSHIP CHOICES-General Curriculum Outcome

Students will develop effective interpersonal skills that demonstrate responsibility, respect, and caring in order to establish and maintain healthy interactions.

Specific Curriculum Outcomes

Understanding and Expressing Feelings

Students will be expected to

- ☐ recognize that individuals can choose their own emotional reactions to events and thoughts
- ☐ establish personal guidelines for expressing feelings
- ☐ develop personal strategies for dealing with stress and change
- ☐ identify, analyse, and develop strategies to overcome barriers to communication

Interactions

Students will be expected to

- ☐ develop and demonstrate strategies to build and enhance relationships in the family
- ☐ develop strategies to maintain and enhance appropriate cross-age relationships
- ☐ apply a variety of strategies for resolving conflict

Group Roles and Processes

Students will be expected to

- ☐ analyse the influence of groups and cliques on self and others
- ☐ make decisions co-operatively

LIFE LEARNING CHOICES-General Curriculum Outcome

Students will use resources effectively to manage and explore life roles and career opportunities and challenges.

Specific Curriculum Outcomes

Learning Strategies

Students will be expected to

- ☐ develop strategies for effective personal money management
- ☐ identify personal skills and skill areas for development in the future
- ☐ analyse influences on decision making
- ☐ identify and develop strategies to overcome possible challenges related to goal fulfilment

Life Goals and Career Development

Students will be expected to

- ☐ relate knowledge, skills, and attitudes of a successful student to those of successful workers
- ☐ analyse and apply effective age-appropriate strategies to manage change

Volunteerism

Students will be expected to

- ☐ identify the volunteer accomplishments of the community, and communicate information and appreciation
- ☐ analyse and assess the impact of volunteerism in the school and community

Wellness Choices

Notes:

PEI Specific Curriculum Outcomes

Personal Health

Students will be expected to

- evaluate the need for balance and variety in daily activities that promote personal health (W-6.1)
- determine the health risks assoicated with the sharing of personal-care items (W-6.2)
- examine how health habits/behaviours influence body image and feelings of self-worth (W-6.3)
- analyse personal eating behaviours—food and fluids—in a variety of settings (W-6.4)

Safety and Responsibility

Students will be expected to

- identify and communicate values and beliefs that affect healthy choices (W-6.5)
- analyse how laws, regulations, and rules contribute to health and safety practices (W-6.6)
- evaluate the impact of personal behaviour on the safety of self and others (W-6.7)
- demonstrate responsibility for, and skills related to, the safety of self and others (W-6.8)

Sexual Health

Students will be expected to

- ***describe physical, emotional, and social changes that occur during puberty (W-6.9)***
- ***identify the basic components of the human reproductive systems and describe the basic functions of the various components (W-6.10)***

GCO: Students will make responsible and informed choices to maintain health and to promote safety for self and others.

Outcomes

Students will be expected to

- evaluate the need for balance and variety in daily activites that promote personal health (W-6.1)

Elaborations-Strategies for Learning and Teaching

PERSONAL HEALTH

- As a class, discuss the concept of ***balance*** and why it is important to have balance in your life.

- Invite students to complete a weekly schedule showing how they spend their time. Colour code activities to reflect the following categories: physical activity, relaxation, learning, sleep, and reflection.

- Have students work in pairs to look at their schedules and evaluate how balanced their lives are. Encourage students to discuss how to achieve better balance in their lives, if necessary.

GCO: Students will make responsible and informed choices to maintain health and to promote safety for self and others.

Tasks for Instruction and/or Assessment

Presentation

- Create a collage entitled "Keeping Balance in My Life." Use words and pictures to show the benefits of a balanced life that includes time for physical activity, relaxation, learning, sleep, and reflection.

Journal

- Complete the following statements:
  - "The kinds of physical activity I enjoy are . . ."
  - "I make room in my life for these activities by . . ."
  - "To relax I . . ."
  - "When I need to reflect on things I . . ."
  - "To make sure I get enough sleep I . . ."
  - "Learning is important in my life because . . ."
  - "I keep balance in my life . . ."

Resources/Notes

Health and Wellness

Chapter 1, pp. 4-9

Leaps and Bounds

Lesson 2

Lesson 3

Lesson 7

GCO: Students will make responsible and informed choices to maintain health and to promote safety for self and others.

Outcomes

Students will be expected to

- determine the health risks associated with the sharing of personal care-items (W-6.2)

Elaborations-Strategies for Learning and Teaching

PERSONAL HEALTH

- As a class, brainstorm health reasons why you would choose to ***not*** share toothbrushes, combs, make-up, or clothing, especially hats. For example, shared toothbrushes or hairbrushes could lead to transmitting cold and flu germs.

- Have students role-play positive responses to situations in which another person might ask you to share a personal-care item or an article of clothing. Be polite and friendly, but firmly say no.

GCO: Students will make responsible and informed choices to maintain health and to promote safety for self and others.

Tasks for Instruction and/or Assessment

Paper and Pencil

- Make a list of 10 personal items that are appropriate to share and 10 items that could create a health risk when shared.

Resources/Notes

Health and Wellness

Chapter 5, pp. 118-119

Appendix

"Ideas for Reducing Health Risks Associated with Sharing Personal Items"

GCO: Students will make responsible and informed choices to maintain health and to promote safety for self and others.

Outcomes

Students will be expected to

- examine how health habits/ behaviours influence body image and feelings of self-worth (W-6.3) ♥

Elaborations-Strategies for Learning and Teaching

PERSONAL HEALTH

- Have students design a mind map that shows at least six personal health habits and behaviours that influence how they feel about their bodies.

- As a class, discuss "Is it true that the better you take care of your body, the more you'll value and appreciate your body?" Discuss the challenges of keeping that balance between caring about your physical appearance and obsessing over what you look like.

- As a class, brainstorm a list of health habits that influence body image. Sort the habits under the following three headings:

Promotes self-worth	Damages self-worth	Can do either, depending on individual circumstances

GCO: Students will make responsible and informed choices to maintain health and to promote safety for self and others.

Tasks for Instruction and/or Assessment

Journal

- Complete the following statements:
  - "Body image is really all about . . ."
  - "Feelings of self-worth come from . . ."
  - "Health habits that influence how I feel about my body include . . ."
  - "One health habit I'd like to improve is . . ."

Resources/Notes

Health and Wellness

Chapter 3, pp. 92-95

Leaps and Bounds

Lesson 3

Lesson 7

Appendix

"Ideas for Promoting the Development of a Positive Body Image"

GCO: Students will make responsible and informed choices to maintain health and to promote safety for self and others.

Outcomes

Students will be expected to

- analyse personal eating behaviours—food and fluids—in a variety of settings (W-6.4)

Elaborations-Strategies for Learning and Teaching

PERSONAL HEALTH

- Review ***Eating Well With Canada's Food Guide*** with students.
- Review the steps of goal setting (Appendix) and discuss how goal setting can be used to improve eating habits.
- Have students design a record-keeping system to track all the food and liquid they consume for one complete day.
- Invite students to bring this data to class and use graphs and other visual tools to organize and display the information. They should classify the foods into different groups.
- Have students use this one-day record to identify eating behaviours they can improve. Use ***Eating Well With Canada's Food Guide*** for recommended guidelines to help set a goal for one week.

GCO: Students will make responsible and informed choices to maintain health and to promote safety for self and others.

Tasks for Instruction and/or Assessment

Presentation

- Design a chart comparing your typical food choices at home, school, and in restaurants.

Journal

- Complete the following statements about your personal eating habits:
  - "My food diary tells me that, at home, I tend to eat . . ."
  - "At school, my food habits are . . ."
  - "When eating in restaurants I . . ."
  - "Overall, my personal eating habits . . ."
  - "One habit I would like to improve is . . ."

Resources/Notes

Health and Wellness

Chapter 3, pp. 65-91

Appendix

"Setting Goals for Personal Eating Habits"

"Ideas for Promoting Healthy Eating Behaviours"

"SMART"

Order copies of ***Eating Well With Canada's Food Guide***

www.healthcanada.gc.ca/foodguide

GCO: Students will make responsible and informed choices to maintain health and to promote safety for self and others.

Outcomes

Students will be expected to

- identify and communicate values and beliefs that affect healthy choices (W-6.5)

Elaborations-Strategies for Learning and Teaching

SAFETY AND RESPONSIBILITY

- As a class, discuss and define ***values*** (what is important to you) and ***beliefs*** (opinion or facts that you hold to be true).

- Have students work in pairs to make a list of 10 common beliefs and 10 common values on single cards. Trade with another pair and sort the new set of 20 cards into values and beliefs.

- As a class, discuss how your personal beliefs and values affect your health and the choices you make. Generate a class list of examples. Discuss what can happen when your personal beliefs and values differ from those of the people around you. How could this affect the different health choices people make? Share examples.

GCO: Students will make responsible and informed choices to maintain health and to promote safety for self and others.

Tasks for Instruction and/or Assessment

Presentation

- Draw an outline of a head and inside it write five important personal beliefs that affect healthy choices.
- Draw an outline of a heart and inside it write five personal values that affect healthy choices.

Resources/Notes

Health and Wellness

Chapter 1, pp. 10-17

Leaps and Bounds

Lesson 1

Lesson 2

Lesson 7

Lesson 8

Appendix

"Ideas for Promoting Values and Beliefs That Support Healthy Choices"

GCO: Students will make responsible and informed choices to maintain health and to promote safety for self and others.

Outcomes

Students will be expected to

- analyse how laws, regulations, and rules contribute to health and safety practices (W-6.6)

Elaborations-Strategies for Learning and Teaching

SAFETY AND RESPONSIBILITY

****The focus of this outcome is tobacco regulations.***

- As a class, brainstorm a list of health and safety issues that have related laws or regulations.
- Review the federal Tobacco Act (Appendix).
- As a class, discuss how, in order for a law or regulation to be effective, it must be enforceable. Discuss the challenge of enforcing many health regulations.

GCO: Students will make responsible and informed choices to maintain health and to promote safety for self and others.

Tasks for Instruction and/or Assessment

Presentation

- Research a policy, act, or law for a specific health or safety issue. Share your findings with the class.

Paper and Pencil

- Discuss three laws or regulations about health and safety practices that directly affect your life. What might happen if these laws or regulations were not in effect?

Resources/Notes

Health and Wellness

Chapter 6, pp. 166-211

Appendix

"The Federal Tobacco Act"

GCO: Students will make responsible and informed choices to maintain health and to promote safety for self and others.

Outcomes

Students will be expected to

- evaluate the impact of personal behaviour on the safety of self and others (W-6.7)

Elaborations-Strategies for Learning and Teaching

SAFETY AND RESPONSIBILITY

- As a class, brainstorm a list of choices you made this week that had a positive effect on your safety.
- As a class, discuss specific ways we can take personal responsibility for our own safety in our daily lives and ways our personal behaviour can affect the safety of others.
- Invite students to interview their parents or other adults about how they make choices that affect their own safety and the safety of others. Share their responses with the class.

GCO: Students will make responsible and informed choices to maintain health and to promote safety for self and others.

Tasks for Instruction and/or Assessment

Paper and Pencil

- Describe three ways you take responsibility for your own safety and three ways your personal behaviour could affect the safety of others.
- Make a web showing how your personal behaviour affects your own safety and the safety of others.

Resources/Notes

Health and Wellness

Chapter 3, pp. 104-109

Chapter 5, pp. 146-163

Leaps and Bounds

Lesson 2

GCO: Students will make responsible and informed choices to maintain health and to promote safety for self and others.

Outcomes

Students will be expected to

- demonstrate responsibility for, and skills related to, the safety of self and others (W-6.8)

Elaborations-Strategies for Learning and Teaching

SAFETY AND RESPONSIBILITY

- Invite students to consider a typical grade 6 student who might be home alone between 4 p.m. and 6 p.m. each weekday. List all the safety decisions he or she would make during that two-hour period.

- Have students brainstorm 10 situations in which they have some responsibility for the safety of others.

- Have students work in pairs to brainstorm things they would have to know and things they would have to be able to do to safely baby-sit a four-year-old child. Organize the information on a chart.

GCO: Students will make responsible and informed choices to maintain health and to promote safety for self and others.

Tasks for Instruction and/or Assessment

- Make a tip sheet for staying home alone.
- Make a tip sheet of five safety guidelines for young baby-sitters.
- Imagine you are a parent who will be leaving a grade 6 student home alone for the first time. Write a friendly letter outlining the house rules and explaining what to do in an emergency.

Resources/Notes

Health and Wellness

Chapter 5, pp. 144-163

Appendix

"How to Help a Person Who Is Choking"

"Ideas for Promoting Responsibility for the Safety of Self and Others"

Look . . . A Babysitter (DVD)
Confederation Centre Library

Invite a first-aid instructor to teach the Heimlich manoeuvre to the class.

Encourage students to take advantage of opportunities in their community for baby-sitting and first-aid courses.

Information Pertinent to Sexual Health Outcomes (W-6.9 through W-6.10)

Sexual Health

* Parents/guardians *must* be provided with an information letter prior to the beginning of the sexual health outcomes (W-6.9 through W-6.10). (See sample letter in appendix).

Setting the Scene

At the beginning of this unit, it is important to establish or reinforce class rules, climate, and responsibilities. These can be established as a class, or the teacher may decide to present them. The appendix includes ideas for these.

Teachers will explain the outcomes of this section and the rationale for studying this topic.

Sexuality Education will

- provide opportunities to explore attitudes, feelings, values, and moral views that may influence choices regarding sex and sexual health;
- provide accurate information to students to help them develop the knowledge and skills to make informed, healthy behavioural choices that have a positive impact on sexual health;
- foster self-image and self worth;
- prepare students for the present and future, whether they choose to be sexually active or not;
- show where and how teens can find correct information about sexuality (suggested books, Web sites, videos, and resource people must be relevant and developmentally appropriate).

Suggested Teaching Strategies For Sexual Education Introductory Classes

- As a class, discuss and clarify the meaning of ***sexuality***. Create a web on the board or flipchart. Invite students to identify aspects of themselves that contribute to their sexuality. You may use the handout "Sexuality is . . ." (Appendix) to clarify each of the aspects of sexuality that are part of the web.

Appendix Resources/Notes:

Sample letter to Parents/Guardians
Scope and Sequence
"Instructional Methods"
"Teaching Tips"
"Setting Ground Rules"
"Classroom Climate"
"Sexuality is...."
"Sex Facts in Canada" - Teacher Information

GCO: Students will make responsible and informed choices to maintain health and to promote safety for self and others.

Outcomes

Students will be expected to

- ***describe physical, emotional, and social changes that occur during puberty (W-6.9)***

Elaborations-Strategies for Learning and Teaching

SEXUAL HEALTH

Using a chart similar to the one below, generate ideas about how people's interests, abilities, and emotions change over the years. As a class, share and discuss ideas.

Changes		
Right Now -		
I am interested in . . .	I can . . .	I feel . . .
When I'm 15 -		
I'll be interested in . . .	I will be able to . . .	I will feel . . .
When I'm my parent's/guardian's age -		
I'll be interested in . . .	I will be able to . . .	I will feel . . .

- Invite students to work in small groups to make a list of 25 words or phrases describing the emotions and feelings that their age might have. Have the groups share these with the class.

- Invite students to listen to "They Tell Me I'm Going through Puberty" (Appendix) as you read Chris's story aloud. Ask students if they think Chris is a boy or a girl. Have students share their answer with a nearby classmate.

- Post the following titles on the wall: Boy, Girl, Both. Distribute the Boys/Girls/Both cards (Appendix), one to each student, or have students take a card from the pile. Students can work in pairs or alone to place each card under the title which best fits the puberty change described. As a class, review the card placements, and make the necessary changes according to the puberty changes answer key (Appendix).

- Remind students of Chris's story ("They Tell Me I'm Going through Puberty"). Discuss and emphasize the following points:
  - No change that is happening to Chris would indicate one gender over another.
  - The changes happening to Chris are normal and could happen to anyone.
  - The changes Chris is going through are all signs of puberty and will happen to different people at different times.

GCO: Students will make responsible and informed choices to maintain health and to promote safety for self and others.

Tasks for Instruction and/or Assessment

Journal

- In your journal, complete the following statement:
  "When I am 12 . . ."
  "When I am 16 . . ."
  "When I am 25 . . ."
  "I am mature when I . . ."
  "I want to be mature enough to . . ."
  "Maturation means . . ."
  "Puberty is . . ."
  "I know my body is maturing when . . ."

Interview

- Interview parents and other adults about how their interests and abilities changed from the time they were in Grade 6 through adolescence.

Paper and Pencil

- In your own words, write a definition to show you understand the concepts of ***puberty*** and ***maturation***.

- Complete the "Advice Corner" Activity (Appendix).

Resources/Notes

Appendix

"They Tell Me I'm Going through Puberty"

Boys/Girls/Both (Cards)

Puberty Changes Answer key

"Puberty—Physical Changes" (Venn Diagram)

What is Puberty? etc. (Teacher Information)

"Advice Corner" Activity

"Puberty Interview"

Red Light/Green Light/Yellow Light Activity

GCO: Students will make responsible and informed choices to maintain health and to promote safety for self and others.

Outcomes

Students will be expected to

- ***identify the basic components of the human reproductive systems and describe the basic functions of the various components (W-6.10)***

Elaborations-Strategies for Learning and Teaching

SEXUAL HEALTH

*For students in Grade 6, understanding the function of each component of the human reproductive systems is more important than knowing actual locations and physical descriptions. It is difficult for students of this age to accurately visualize these internal organs. Semantic webbing can be an effective tool for identifying the basic components of the human reproductive system. Blackline drawings from the appendix can be used as overhead transparencies in addressing this outcome, along with the DVDs. Teachers are encouraged to use diagrams in the context of the classroom and avoid distributing copies to students. These kinds of diagrams taken out of context may lead to misunderstanding of the instructional intent.

Show the DVDs and use the diagrams and Teacher Information provided in the appendix to introduce and discuss the basic functions of the various components of the human reproductive systems.

Basic components and functions of the female reproductive system

ovum	female reproductive cell, sometimes called an egg (plural—ova)
uterus	place where fertilized egg develops into a baby
vagina	passageway for sperm, baby travelling out of the body, menstrual fluid travelling out of the body
ovaries	produce eggs and secrete hormones
fallopian tubes	move eggs from the ovaries into the uterus

Basic components and functions of the male reproductive system

sperm	the male sex cell required to fertilize an egg
testicles	produce sperm and secrete hormones
scrotum	holds testicles and regulates temperature
penis	the male sex organ
urethra	passageway for sperm and urine (***NOT*** at the same time)

Fertilization is the joining of one male sperm and one female egg or ovum to create a cell that will develop into a baby. ***Conception*** is another word for fertilization.

GCO: Students will make responsible and informed choices to maintain health and to promote safety for self and others.

Tasks for Instruction and/or Assessment

Presentation

- Complete a web of the female and male reproductive organs, describing the function of each.

Male and Female Reproductive Systems

Paper and Pencil

- Complete "The Story of The Menstrual Cycle" and "Sperm Production Story" (Appendix).

Resources/Notes

DVDs: (Copies of these in School Library)

Let's Just Talk! For Girls

Let's Just Talk! For Boys

Appendix

Teacher Information/Diagrams (Fertilization, Male and Female Reproductive Systems)

"Boys and Puberty"

"Girls and Puberty"

"Female Reproductive System"

"The Menstrual Cycle"

"Conception"

"Male Reproductive System"

"Sperm Production"

"The Story of the Menstrual Cycle"

"Sperm Production Story"

"The First Trimester"

"The Second Trimester"

"The Third Trimester"

"Fraternal Twins"

"Identical Twins"

Relationship Choices

Notes:

PEI Specific Curriculum Outcomes

Understanding and Expressing Feelings

Students will be expected to

- recognize that individuals can choose their own emotional reactions to events and thoughts (R-6.1)
- establish personal guidelines for expressing feelings (R-6.2)
- develop personal strategies for dealing with stress and change (R-6.3)
- identify, analyse, and develop strategies to overcome barriers to communication (R-6.4)

Interactions

Students will be expected to

- develop and demonstrate strategies to build and enhance relationships in the family (R-6.5)
- develop strategies to maintain and enhance appropriate cross-age relationships (R-6.6)
- apply a variety of strategies for resolving conflict (R-6.7)

Group Roles and Processes

Students will be expected to

- analyse the influence of groups and cliques on self and others (R-6.8)
- make decisions co-operatively (R-6.9)

GCO: Students will develop effective interpersonal skills that demonstrate responsibility, respect, and caring in order to establish and maintain healthy interactions.

Outcomes

Students will be expected to

- recognize that individuals can choose their own emotional reactions to events and thoughts (R-6.1)

Elaborations–Strategies for Learning and Teaching

UNDERSTANDING AND EXPRESSING FEELINGS

- Invite students to picture this situation:

  A person is watering the flowers in a window box on the fifth floor of an apartment building. A second person walks by on the street below and the whole bucket of water dumps on this person's head!

  Brainstorm a list of possible reactions the wet person might have.

- As a class, discuss how individuals can choose their own emotional reactions to events.

GCO: Students will develop effective interpersonal skills that demonstrate responsibility, respect, and caring in order to establish and maintain healthy interactions.

Tasks for Instruction and/or Assessment

Journal

- Draw a web showing at least six ways you could react to a new baby in the family. Circle the response that would be best for your well-being.
- Complete "Choose Your Reaction" (Student Activity Sheet—Appendix).

Resources/Notes

Health and Wellness

Chapter 1, pp. 22-29

Leaps and Bounds

Lesson 4

Lesson 5

Lesson 6

Appendix

"Choose Your Reaction"

GCO: Students will develop effective interpersonal skills that demonstrate responsibility, respect, and caring in order to establish and maintain healthy interactions.

Outcomes

Students will be expected to

- establish personal guidelines for expressing feelings (R-6.2)

Elaborations–Strategies for Learning and Teaching

UNDERSTANDING AND EXPRESSING FEELINGS

**** The focus of this outcome is recognizing feelings, choosing appropriate times/places to express feelings, identifying preferred ways of expressing feelings, and accepting ownership of feelings.***

- Have students describe in their journals a time when they expressed an important feeling in a way that was unexpected. They may then discuss this experience with a partner.

- As a class, discuss what it means to take ownership for your own feelings. How does this affect communication?

GCO: Students will develop effective interpersonal skills that demonstrate responsibility, respect, and caring in order to establish and maintain healthy interactions.

Tasks for Instruction and/or Assessment

Paper and Pencil

- Imagine that a friend has just teased you in front of a group of classmates. Your feelings are hurt because the friend used private information about you to entertain other people. Describe how you will express your feelings to this friend. What time and place would work best? How will you express your feelings? What will you say to ensure you are accepting ownership of your feelings?

- Complete "How Do I Express Myself? (Student Activity Sheet—Appendix).

- Choose a feeling that is important to you and develop an action plan for improving how you express this feeling.

Resources/Notes

Health and Wellness

Chapter 1, pp. 22-29

Leaps and Bounds

Lesson 4

Lesson 5

Appendix

"How Do I Express Myself?"

GCO: Students will develop effective interpersonal skills that demonstrate responsibility, respect, and caring in order to establish and maintain healthy interactions.

Outcomes

Students will be expected to

- develop personal strategies for dealing with stress and change (R-6.3)

Elaborations–Strategies for Learning and Teaching

UNDERSTANDING AND EXPRESSING FEELINGS

- Review the definition of ***stress***. Stress is the body's reaction to the demands of daily living. (The concept of stress was introduced in grade one.)

- As a class, discuss the following questions.
  - "What are your warning signs that you're feeling stressed?"
  - "How do you know when you're feeling nervous, angry, or uncomfortable?"
  - "How does this differ from when you're feeling comfortable, happy, or excited?"
  - "Why is it just as important to recognize positive feelings as negative feelings?"

- Have students brainstorm with a partner 25 things that might cause a grade 6 student stress.

- Have students work in small groups to develop a list of strategies for handling stress and negative feelings.

- Invite students to think about an incident where humour, relaxation, or a physical activity helped them reduce stress or better handle a situation. Ask for volunteers to share examples with the class.

GCO: Students will develop effective interpersonal skills that demonstrate responsibility, respect, and caring in order to establish and maintain healthy interactions.

Tasks for Instruction and/or Assessment

Presentation

- Design a poster outlining your personal stress triggers and how you can recognize and handle these feelings.

Paper and Pencil

- Write a letter to a friend offering advice on handling the stress of a new situation he or she will be facing. Consider situations such as moving to a new school, handling parents' divorce, or being cut from a sport team.

- Find a magazine or newspaper article on how to handle stress and other negative feelings. Post the article, along with a synopsis of it, on the class bulletin board.

Resources/Notes

Health and Wellness

Chapter 1, pp. 22-29

Chapter 2, pp. 48-61

Leaps and Bounds

Lesson 5

GCO: Students will develop effective interpersonal skills that demonstrate responsibility, respect, and caring in order to establish and maintain healthy interactions.

Outcomes

Students will be expected to

- identify, analyse, and develop strategies to overcome barriers to communication (R-6.4)

Elaborations–Strategies for Learning and Teaching

UNDERSTANDING AND EXPRESSING FEELINGS

- Draw a large brick wall on the chalkboard or on poster board. Brainstorm a list of words describing barriers to communication and print the words on the bricks of the drawing. For example, words could include anger, jealousy, misunderstanding, criticism.

- Distribute copies of "Barriers To Communication" (Student Activity, Appendix) to students and review with them. Have students work with a partner to add two more blocks to the chart and write a brief description of each. Share these with the class.

- Have students work in small groups to generate a strategy for overcoming one of these blocks. Ask them to consider what they could think, what they could say, and what they could do. Have students share and discuss with the class.

GCO: Students will develop effective interpersonal skills that demonstrate responsibility, respect, and caring in order to establish and maintain healthy interactions.

Tasks for Instruction and/or Assessment

Paper and Pencil

- Describe the communication barrier you face most often when working with other students. Outline the things you can think, say, and do to overcome this barrier.

Resources/Notes

Health and Wellness

Chapter 2, pp. 34-47

Appendix

"Barriers to Communication" (Teacher Information and Student Activity)

"Ideas for Promoting Active Listening and Improving Communication Skills"

GCO: Students will develop effective interpersonal skills that demonstrate responsibility, respect, and caring in order to establish and maintain healthy interactions.

Outcomes

Students will be expected to

- develop and demonstrate strategies to build and enhance relationships in the family (R-6.5) ♥

Elaborations–Strategies for Learning and Teaching

INTERACTIONS

- Invite students to brainstorm a list of ways their families influence them. They should consider things such as daily choices about foods they want, to choices about how they relate to others, and what they value.

- Healthy relationships are the basis for a healthy family. Relationships are the connections you have with other people. As a class, discuss these ways family members build relationships:
  - love: giving and receiving care and affection
  - communication: sharing feelings and information, and listening to others
  - co-operation: working together
  - understanding: being aware how other members think and feel
  - appreciation: providing encouragement and support
  - responsibility: counting on one another to be dependable.

- In small groups, discuss how people in a family show these behaviours in different ways. Display your ideas on chart paper to discuss with the class.

How people in families show . . .

Love	*Communication*	*Co-operation*	*Respect*
Understanding	*Appreciation*	*Responsibility*	

- In small groups, brainstorm at least five positive and negative behaviours that could affect relationships in the family. Trade lists with another group and discuss how each of the behaviours could affect family relationships.

- As a class, discuss why being honest can sometimes be difficult in family relationships. What are some of the reasons people are not honest? Do you think it is ever okay not to be honest?

GCO: Students will develop effective interpersonal skills that demonstrate responsibility, respect, and caring in order to establish and maintain healthy interactions.

Tasks for Instruction and/or Assessment

Journal

- Describe one person in your family whom you really trust. Explain what that person says and does that makes him or her trustworthy.

- Complete the following statements:
  - "I show love to my family by . . ."
  - "I communicate with my family by . . ."
  - "I show co-operation in my family by . . ."
  - "I show respect in my family by . . ."
  - "I show understanding in my family by . . ."
  - "I show appreciation in my family by . . ."
  - "I show responsibility in my family by . . ."

Resources/Notes

Health and Wellness

Chapter , pp. 48-53

GCO: Students will develop effective interpersonal skills that demonstrate responsibility, respect, and caring in order to establish and maintain healthy interactions.

Outcomes

Students will be expected to

- develop strategies to maintain and enhance appropriate cross-age relationships (R-6.6)

Elaborations–Strategies for Learning and Teaching

INTERACTIONS

- As a class, brainstorm a list of all the different types of relationships a typical grade 6 student might have.
- Have students create a mind map showing the cross-age relationships in their lives. Have them list qualities, special interests, or values that they share with these different aged individuals.
- As a class, organize a tea or other social for local seniors.

GCO: Students will develop effective interpersonal skills that demonstrate responsibility, respect, and caring in order to establish and maintain healthy interactions.

Tasks for Instruction and/or Assessment

Journal

- Who is the youngest person in your life? Who is the oldest person in your life? Describe the kinds of things you say and do to maintain these relationships?

Paper and Pencil

- Interview two adults about the significant cross-age relationships in their lives. Describe the kinds of things they say and do to maintain these relationships.

Resources/Notes

Health and Wellness

Chapter 2, pp. 54-61

pp. 254-255

Appendix

"The Truth about Seniors"

"Ideas for Promoting Cross-age Relationships"

GCO: Students will develop effective interpersonal skills that demonstrate responsibility, respect, and caring in order to establish and maintain healthy interactions.

Outcomes

Students will be expected to

- apply a variety of strategies for resolving conflict (R-6.7)

Elaborations–Strategies for Learning and Teaching

INTERACTIONS

Conflict is the belief that the current goals of two or more parties cannot be reached simultaneously.

Conflict resolution is an important part of any group relationship—at home or at school. Conflict cannot be eliminated and has many benefits. Students can learn to deal with a variety of conflicts and develop resolution strategies to use throughout their lives. Differing viewpoints can provide the starting point for a variety of solutions. Differences can be seen as opportunities rather than problems.

- As a class, brainstorm a number of responses that you could give when another person voices a difference in opinion (for example; "That's an interesting way of looking at things," or "That's an idea I haven't considered.")

- Use "Consider The Alternatives" (Appendix) to generate solutions to a typical conflict situation, such as one of the following:
  - Parents and students are complaining that a number of younger children had their trading card collections stolen at school or older students have taken valuable cards and given younger students less valuable cards in trade. The principal wants to ban all trading cards from school grounds. Any cards found would be confiscated until June. What is another solution to this problem?
  - Mark and Chi have repeatedly argued on the soccer field during recess. They have to come up with a solution for eliminating these conflicts or they will both lose recess for the rest of the term.
  - Because Halloween falls on a Saturday this year, the school is not planning any Halloween activities. Many students live in rural areas and are unable to go trick-or-treating. The students were looking forward to a chance to dress up and have some Halloween fun on the Friday before Halloween.

GCO: Students will develop effective interpersonal skills that demonstrate responsibility, respect, and caring in order to establish and maintain healthy interactions.

Tasks for Instruction and/or Assessment

Paper and Pencil

- Complete "Consider The Alternatives" (Appendix) to resolve the following conflict.
  - Your class is choosing a service learning project. Half the students want to do something for the neighbourhood seniors' residence while the other half feels that working with the preschoolers in the school would be a better project.

Journal

- Discuss in writing the saying "Crisis is an opportunity in disguise." Describe examples in which people you know who had differing opinions improved a situation or solved a difficult problem.

Resources/Notes

Health and Wellness

Chapter 2, pp. 38-47

Appendix

"Consider the Alternatives"

GCO: Students will develop effective interpersonal skills that demonstrate responsibility, respect, and caring in order to establish and maintain healthy interactions.

Outcomes

Students will be expected to

- analyse the influence of groups and cliques on self and others (R-6.8)

Elaborations–Strategies for Learning and Teaching

GROUP ROLES AND PROCESSES

A ***group*** includes people who share common interests and spend time together. Groups can help people build social skills.

A ***clique*** is a group of people who keep others out of their group. Joining a clique may not be a healthy choice. Members of cliques hurt the feelings of people they leave out. They can also hurt themselves by limiting the people they spend time with. They may not make friends outside the clique because they are afraid the clique will reject them. They have less chance to learn social skills that help them get to know other people.

- Working as a class, use a Venn diagram to create a definition, and compare and contrast the characteristics of ***groups*** and ***cliques***.

As a class,

- brainstorm a list of groups and cliques that influence you;
- invite students to use a mind map to show the influences these various groups of people have on how you feel about yourself and relate to others, how you dress and talk, activities you choose, and values and beliefs you hold important.

GCO: Students will develop effective interpersonal skills that demonstrate responsibility, respect, and caring in order to establish and maintain healthy interactions.

Tasks for Instruction and/or Assessment

Presentation

- Do a book or movie talk on a novel or film that explores the influence of a specific group on the behaviour and feelings of an individual.

Journal

- Brainstorm a list of groups and cliques that influence you. Use a mind map to show the influences these various groups of people have on how you feel about yourself and relate to others, how you dress and talk, activities you choose, and values and beliefs you hold important.

- Complete the following statements:
  - "My group of friends at school influences me in the way I . . ."
  - I resist the influence of groups when they . . ."
  - "I'm glad that one group influences me to . . ."
  - "The group that has the most influence in my life right now is . . . because . . ."

Resources/Notes

Health and Wellness

Chapter 2, pp. 34-39
pp. 54-61

Leaps and Bounds

Lesson 6

Appendix

"Cliques"

"Ideas for Promoting Positive Group Influence"

GCO: Students will develop effective interpersonal skills that demonstrate responsibility, respect, and caring in order to establish and maintain healthy interactions.

Outcomes

Students will be expected to

- make decisions co-operatively (R-6.9)

Elaborations–Strategies for Learning and Teaching

GROUP ROLES AND PROCESSES

- As a class, discuss and define ***consensus*** and its benefits; for example, all people reach a general agreement.

- Review the steps involved in making group decisions:
  - identifying the problem or issue
  - picking the best choice
  - accepting responsibility for the decision
  - making a plan
  - accepting responsibility for the decision
  - putting the plan into action
  - evaluating the plan and deciding how to proceed

- Have students work in small groups and complete a specific task within a time limit:
  - rank the seven dwarfs in order of importance
  - choose the next three read-aloud novels to suggest to the teacher
  - write a class song to the tune of ***Twinkle, Twinkle, Little Star***

- As a class, discuss the strategies group members used to build consensus and make decisions that all members were happy with.

- Use a Venn diagram to compare and contrast group decision making with individual decision making.

GCO: Students will develop effective interpersonal skills that demonstrate responsibility, respect, and caring in order to establish and maintain healthy interactions.

Tasks for Instruction and/or Assessment

Presentation

- Compile strategies and design a tip sheet on how to make group decisions that are win-win solutions.

- Your grade 6 class has earned an incentive reward and will be allowed to go on a class field trip. Expenses will be covered as long as the entire cost of the trip, including transportation, does not exceed $500. In groups of five, use consensus building to reach a group decision. Share with the class the process your group used.

Resources/Notes

Health and Wellness

Chapter 1, pp. 18-21

Chapter 7, pp. 220-221

Appendix

"Group Decision Making"

Life Learning Choices

Notes:

PEI Specific Curriculum Outcomes

Learning Strategies

Students will be expected to

- develop strategies for effective personal money management (L-6.1)
- identify personal skills and skills areas for development in the future (L-6.2)
- analyse influences on decision making (L-6.3)
- identify and develop strategies to overcome possible challenges related to goal fulfilment (L-6.4)

Life Goals and Career Development

Students will be expected to

- relate knowledge, skills, and attitudes of a successful student to those of successful workers (L-6.5)
- analyse and apply effective age-appropriate strategies to manage change (L-6.6)

Volunteerism

Students will be expected to

- identify the volunteer accomplishments of the community, and communicate information and appreciation (L-6.7)
- analyse and assess the impact of volunteerism in the school and community (L-6.8)

GCO: Students will use resources effectively to manage and explore life roles and career opportunities and challenges.

Outcomes

Students will be expected to

- develop strategies for effective personal money management (L-6.1)

Elaborations–Strategies for Learning and Teaching

LEARNING STRATEGIES

**** The Focus of this outcome is budgeting.***

- As a class, discuss and define a ***personal budget***.
- Working with a partner, use sale flyers to plan how you would spend a gift of $100 on your personal hobbies and interests.
- As a class, design a survey to collect data on how students in grade 6 spend money. Use a graph to display data for class discussion.
- Invite a representative from a local bank to talk about saving money. Discuss the benefits of having a savings account.

- identify personal skills and skill areas for development in the future (L-6.2)

- Invite students to brainstorm a list of skills they would like to have in the future. Have them consider all areas of their lives.

  Skills could include the following:

  - people skills (e.g., outgoing)
  - knowing-myself skills (e.g., visual learner)
  - artistic skills (e.g., drawing)
  - physical/athletic skills (e.g., celtic dancing)
  - academic skills (e.g., spelling)

GCO: Students will use resources effectively to manage and explore life roles and career opportunities and challenges.

Tasks for Instruction and/or Assessment

Resources/Notes

Paper and Pencil

- Develop a personal budget plan for one month that includes the following items:
  - how much money you have to spend
  - typical expenses
  - goals you have for one month

Health and Wellness

Chapter 7, pp. 213-219

Leaps and Bounds

Lesson 4

Lesson 6

Lesson 8

- Make a list of purchases you typically make in one month. Estimate the cost of each purchase. Make a list of purchases your parents typically make on your behalf in one month. Estimate the cost of each purchase.

Journal

- Describe three skill areas that will be important for you in the future. Explain why.

- Draw a circle and divide it into six areas of your life. Label each area for one important part of your life. The circle shown here is an example.

Leaps and Bounds

Lesson 4

List three skills you would like to develop in each of these areas in the future.

GCO: Students will use resources effectively to manage and explore life roles and career opportunities and challenges.

Outcomes

Students will be expected to

- analyse influences on decision making (L-6.3)

Elaborations–Strategies for Learning and Teaching

LEARNING STRATEGIES

- Have students brainstorm the influences that affect decisions such as the following:
  - how you spend a Saturday afternoon
  - how you choose an intermediate school
  - what you wear to school
  - what you will do on your birthday

- Provide students with "Influences on Decision-Making" handout (Appendix) to use to analyse the influences on a recent decision they have made. Discuss them with a partner.

- As a class, discuss what should ***not*** influence your decisions.

GCO: Students will use resources effectively to manage and explore life roles and career opportunities and challenges.

Tasks for Instruction and/or Assessment

Paper and Pencil

- Use "Influences on Decision Making" (Appendix) to analyse the influences on your recent decision to study, or not study, for a major unit test.

- Examine a recent political decision made by the local, provincial, or federal government. Discuss influences that might have affected this decision.

Resources/Notes

Health and Wellness

Chapter 7, pp. 226-231

Leaps and Bounds

Lesson 1

Lesson 2

Lesson 3

Appendix

"Influences on Decision Making"

GCO: Students will use resources effectively to manage and explore life roles and career opportunities and challenges.

Outcomes

Students will be expected to

- identify and develop strategies to overcome possible challenges related to goal fulfilment (L-6.4)

Elaborations–Strategies for Learning and Teaching

LEARNING STRATEGIES

- Invite students to share a time when they had to rely on an alternate plan due to a change of circumstance (for example, writing an assignment by hand because the computer crashed the night before an assignment was due).
- As a class, generate a list of typical situations in which having alternative plans is essential.
- Do a think-pair-share on the advantages of having alternative plans.
- As a class, discuss the importance of being flexible and having alternative plans when setting goals or making decisions.
- Have students share situations from favourite movies or novels in which characters use alternative plans when something doesn't work as expected.

GCO: Students will use resources effectively to manage and explore life roles and career opportunities and challenges.

Tasks for Instruction and/or Assessment

Journal

- Describe a situation in which you used a backup plan. Explain how you handled this challenge. Identify other alternatives you might have considered.

Resources/Notes

Leaps and Bounds

Lesson 1

Lesson 3

Lesson 6

Lesson 7

Lesson 8

Think-Pair-Share

In think-pair-share, the teacher poses a topic or question and allows students to think about it for a given amount of time, usually 1-3 minutes. Each student then pairs with a partner to discuss the question, allowing students to clarify their thoughts. Next, each pair has an opportunity to share their answers with a larger group or whole class. Think-pair-share is a co-operative learning strategy that provides opportunities for students to

- participate
- learn from others
- make connections

GCO: Students will use resources effectively to manage and explore life roles and career opportunities and challenges.

Outcomes

Students will be expected to

- relate knowledge, skills, and attitudes of a successful student to those of successful workers (L-6.5)

Elaborations–Strategies for Learning and Teaching

LIFE ROLES AND CAREER DEVELOPMENT

- As a class, brainstorm skills that are transferable from home, school, extracurricular activities, and community activities to the workplace.

- Invite students to research a career they are interested in and come up with a list of qualifications and skills for it. Have students share their findings with the class.

- As a class, discuss how skills and attitudes for workers are taught and encouraged in school. Use "Essential Skills for Life and Work" (Appendix) to guide this discussion.

- Encourage students to talk to their parents about the importance of interpersonal skills in the workplace. Relate the skills you need to be a good friend to those you need to be successful in the workplace.

GCO: Students will use resources effectively to manage and explore life roles and career opportunities and challenges.

Tasks for Instruction and/or Assessment

Paper and Pencil

- List 10 skills you have as a student that will be transferable to a work situation.

Resources/Notes

Health and Wellness

pp. 236-237

p. 12

p. 99

p. 139

Appendix

"Essential Skills for Life and Work"

GCO: Students will use resources effectively to manage and explore life roles and career opportunities and challenges.

Outcomes

Students will be expected to

- analyse and apply effective age-appropriate strategies to manage change (L-6.6)

Elaborations–Strategies for Learning and Teaching

LIFE ROLES AND CAREER DEVELOPMENT

****The focus of this outcome is to predict, plan, and prepare for transition to intermediate school. Consolidated school students can look at the transition between grade levels.***

- As a class, make a Venn diagram showing similarities and differences between elementary school and intermediate school.

- Working in small groups, choose three differences from the Venn diagram and outline the changes in behaviour you will have to make. Discuss how you can begin preparing for the transition.

GCO: Students will use resources effectively to manage and explore life roles and career opportunities and challenges.

Tasks for Instruction and/or Assessment

Presentation

- Interview three current grade 7 students to find out how they handled the transition from elementary to intermediate school. Are there things they would have done differently? What was one thing about intermediate school that surprised them? Did they have to make changes in their work habits and study practices? Share your responses with the class.

Journal

- Complete the following statements:
  - "Elementary school has been . . ."
  - "What I will miss most about my elementary school is . . ."
  - "In intermediate school, I'm looking forward to . . ."
  - "I'm a little worried about . . ."
  - "To get ready for intermediate school, I . . ."

Resources/Notes

Leaps and Bounds

Lesson 5

Lesson 8

GCO: Students will use resources effectively to manage and explore life roles and career opportunities and challenges.

Outcomes ***Students will be expected to***	Elaborations–Strategies for Learning and Teaching ***VOLUNTEERISM***
• identify the volunteer accomplishments of the community, and communicate information and appreciation (L-6.7)	• In a think-pair-share, discuss a positive experience you had in a community activity that was made possible by volunteerism. • As a class, brainstorm a list of activities, services, and materials in your school that are made possible through volunteer efforts.
• analyse and assess the impact of volunteerism in the school and community (L-6.8)	• Have students design a survey to gather information about the volunteer accomplishments of the community. Organize and display findings. Use these results to discuss how volunteerism affects your community.

GCO: Students will use resources effectively to manage and explore life roles and career opportunities and challenges.

Tasks for Instruction and/or Assessment

Paper and Pencil

- Choose a volunteer accomplishment and write a thank-you letter to a volunteer who has contributed to the quality of your life at school or in the community.

Journal

- Describe the effects of volunteerism in your life. How has your experience with a volunteer or as a volunteer affected how you feel about your responsibility to do volunteer work in the future?

Resources/Notes

Health and Wellness

Chapter 7, pp. 232-237

Appendix

"Ideas for Promoting Volunteerism and Service Learning"

Grade 6
Appendix

IDEAS FOR REDUCING HEALTH RISKS ASSOCIATED WITH SHARING PERSONAL ITEMS

Students can

- be aware that disease is spread by sharing personal items;
- have their own water bottles for sports;
- avoid sharing drinks with friends;
- bring their own gym clothes and avoid sharing clothing with others;
- avoid sharing personal stereo earphones;
- avoid sharing earrings or other pierced jewellery;
- use proper antiseptic cleaners for rinsing mouthpieces when sharing musical instruments, before and after playing.

Parents can

- encourage children to have their own water bottles for sports and school activities;
- talk to children about the importance of drinking and eating from their own containers only;
- model correct behaviour by not sharing drinks, even in the family;
- encourage hand washing before and after meals, and when preparing meals;
- use separate dishware and cutlery when a family member is sick.

Communities can

- model proper health habits on community sports teams by encouraging all players to drink from their own bottles and use their own towels;
- enforce rules forbidding the sharing of clothing or other personal items by youth in clubs, especially while out on trips;
- post signs in public washrooms reminding patrons to wash their hands;
- enforce a no-exchange policy on certain jewellery or clothing items in local stores, for health reasons.

IDEAS FOR PROMOTING THE DEVELOPMENT OF A POSITIVE BODY IMAGE

Students can

- be aware of the variety of body types within family and groups of friends, and know that all body types can be healthy;
- look for varieties of body types among television and media personalities;
- talk to their parents or older siblings about body image concerns;
- appreciate their own physical talents and abilities, such as athletic abilities, musical dexterity, and artistic abilities;
- be aware that one's physical body makes up only a part of who one is or can be.

Parents can

- be aware that the beginning of puberty can bring about changes that affect body image;
- be aware that puberty changes begin gradually but often earlier than parents might expect;
- make a conscious effort to have and model healthy behaviours and attitudes related to body image;
- be aware that negative comments about body size and type can be damaging to children's developing sense of worth;
- be available to listen and talk when children have questions or concerns about body image;
- understand that feelings and concerns related to body image may surface in other ways, such as through behaviours or attitudes;
- help their child develop strategies to handle teasing;
- ensure that siblings do not tease each other about body size or image
- make a conscious effort not to compare body types among family, friends, and celebrities in unproductive ways, such as, "She would look much better if . . .";
- help their child understand that diversity in body shape and size is normal and natural—all types deserve respect.

SETTING GOALS FOR PERSONAL EATING HABITS

Goal setting is a simple, powerful tool for making changes in your daily life. Goal setting is widely used by registered dietitians and nutritionists to promote positive changes to eating habits.

Self-assessment or personal reflection is the first step in goal setting. During this phase, students are asked to look at their current habits as a starting point for change by creating a personalized one-day food record.

Comparison to the standard is the next step. ***Eating Well With Canada's Food Guide*** is recognized by nutrition professionals and other health educators as the standard for healthy, balanced eating patterns. By comparing their food record to the recommendations of the food guide, students gain insight into areas where their eating habits are healthy, as well as areas where they might benefit from change.

The final stages of goal setting are setting a goal, implementing it for a period of time, and evaluating the outcome. For goal setting to be as effective as possible, goals should be SMART (specific, measurable, achievable, realistic, and time-limited). The student should be encouraged to pick one small area to improve.

Allow time for implementation and then ask students to evaluate their personal progress and outcomes. Remind them that goal setting is not a win/lose approach. Rather, the purpose is to define strategies that best meet each person's individual needs.

IDEAS FOR PROMOTING HEALTHY EATING BEHAVIOURS

Students can

- commit to periodically analysing their eating habits to identify areas for improvment;
- evaluate their success at reaching a goal and brainstorm alternative approaches;
- propose ways to use goal setting in other areas of their lives;
- be aware of the differences in what they eat at home, at school, at friends' homes, and at restaurants;
- make an effort to drink water during the day at school, and avoid soft drinks;
- be aware of the amount of snacking they do at home between meals, and of the kinds of foods they choose;
- bring healthy snacks to school for eating between classes;
- make healthy choices when eating out in restaurants, and eat reasonable amounts.

Parents can

- help and support children in completing their one-day food records;
- teach children the value of striving for continuous self-improvement in all areas of life;
- talk about the ways that they use goals and goal setting;
- talk about barriers to healthy eating and assist children in brainstorming solutions;
- arrange that the family eat at least one meal together each day;
- ask children about what they have eaten at school and at friends' homes;
- encourage family members to drink sufficient amounts of water per day, and limit the amount of pop and sugary drinks;
- take children on grocery shopping trips and discuss food choices;
- teach children to read product labels for nutritional information;
- research with children nutritional information for favourite fast-food restaurants;
- let children make some choices while grocery shopping so they can practise choosing healthy snacks and meals.

Communities can

- provide nutrition education programs based on goal setting through regional health authorities and other organizations;
- offer information and support materials focussed on ***Eating Well With Canada's Food Guide;***
- create environments that support healthy eating and active living;
- lobby for the promotion of healthy food choices within schools, such as in vending machines, canteens, and cafeterias;
- discourage the widespread availability of less-nutritional foods, such as soft drinks and higher fat snack foods;
- provide vending machines with healthy snack foods;
- invite students to visit a local restaurant and discuss how to eat well away from home.

SMART

S — **SPECIFIC**
Is my goal to the point?

M — **MEASURABLE**
Can I show evidence that I have met my goal?

A — **ACTION PLAN**
What steps will I need to achieve this goal?

R — **REALISTIC**
If I work hard, can I reach my goal?

T — **TIME LINE**
Have I set a time line to reach my goal?

IDEAS FOR PROMOTING VALUES AND BELIEFS THAT SUPPORT HEALTHY CHOICES

Students can

- be aware that it is healthy and acceptable to communicate personal boundaries, values, and beliefs to friends and other adults;
- be clear about their own personal values and beliefs, and be able to articulate them
- recognize that others may have different boundaries, values, and beliefs, and that it is okay for them to be different;
- know how to refuse something that goes against personal beliefs about healthy choices, such as refusing the offer to try cigarettes or drugs;
- talk to parents about how to communicate values and beliefs in difficult situations;
- ask parents about their own values and beliefs in specific situations.

Parents can

- communicate their personal beliefs about health openly and clearly to children;
- help children articulate their beliefs about health;
- have family meetings to discuss important personal and health issues;
- talk to children about the importance of expressing their beliefs and making appropriate health choices.

Communities can

- promote tolerance of a variety of beliefs and values in the community;
- show respect and recognition for community youth who make appropriate health choices based on their values and beliefs.

NAME: DATE:

THE FEDERAL TOBACCO ACT

Many policies, acts, and laws contribute to health and safety practices. The Tobacco Sales and Access Act is one such act.

- The purpose of the federal Tobacco Act is to protect the health of Canadians, particularly youth, from the numerous problems and fatal diseases associated with tobacco use, and to increase public awareness of the health hazards of using tobacco products.
- The Act states that people must be 19 years or older to buy cigarettes. If a store employee is unsure how old a customer is he/she should request to see an official federal or provincial ID card.
- Cigarette papers, tubes, and filters are considered tobacco products. It is illegal to give or sell these products to minors (persons under the age of 19).
- The Act requires that all store owners post a sign stating that it is against the law to provide tobacco products to minors.
- It is illegal to furnish single cigarettes, or to sell cigarettes from an open package or in packages of fewer than 20, to anyone.

there's more →

THE FEDERAL TOBACCO ACT ... CONTINUED

- Tobacco products cannot be displayed. Tobacco products must not be visible before purchase.
- Vending machines that sell cigarettes are not allowed in places where there are people under 19.
- The maximum fines for Tobacco Act offences range from $3,000 to $50,000, depending on the offence. The actual amount of the fine is determined by a judge.

MUNICIPAL BYLAWS

Every municipality has the authority to create its own bylaws for tobacco. These bylaws can vary from "No Smoking" in municipally owned buildings, such as an ice arena, to "No Smoking" in any public place. For a copy of the bylaws in your community, contact your Town or City Office.

Adapted with permission from Health Canada. (2000). ***Teaming up for tobacco-free kids: Teachers' resource kit*** (Section V, Fact Sheet 7). © Minister of Public Works and Government Services Canada, 2002.

NAME: DATE:

HOW TO HELP A PERSON WHO IS CHOKING

1. Ask the person who is choking . . .***"Can you Talk?"*** If he or she is unable to speak, begin the Heimlich manoeuvre.

2. ***Stand behind the person***. Place the thumb side of your fist against the middle of the person's abdomen, just above the naval. Grasp your first with your other hand.

3. ***Give quick, upward thrusts into the abdomen***. Repeat the thrusts until the food or other object is coughed out.

Adapted with permission from National Fire Protection Association. (1998). ***Risk Watch,*** Grades Pre-K and K, Lesson 3: Choking, suffocation, and strangulation prevention. Quincy, MA: National Fire Protection Service.

IDEAS FOR PROMOTING RESPONSIBILITY FOR THE SAFETY OF SELF AND OTHERS

Students can

- volunteer as classroom helpers in primary or kindergarten classrooms within the school to learn how to relate to younger children;
- take a baby-sitting course offered through the school or community;
- begin learning child-care and safety skills by taking care of younger siblings;
- take a first-aid course;
- baby-sit with a trusted friend to learn and apply skills;
- begin with baby-sitting jobs close to home, for neighbours or relatives.

Parents can

- accompany children to a baby-sitting course or provide opportunities for children to take courses on their own or with friends;
- model proper child care in the home with younger siblings;
- ask children about their baby-sitting experiences;
- help young baby-sitters generate solutions to problems encountered while taking care of children.

Communities can

- provide baby-sitting courses through local agencies;
- provide youth first-aid courses through local agencies;
- develop youth child-care skills by allowing for supervised volunteer work in local day-care centres.

Information Letter For Parents/Guardians
Printed on School Letterhead

Dear Parent(s) / Guardian(s):

As you may be aware, a sexuality unit is one component of your child's grade 6 health curriculum.

This letter is to inform you that this outcome will be taught beginning _____.

The following learning outcomes will be addressed in the grade 6 curriculum:

- Describe physical, emotional, and social changes that occur during puberty.
- Identify the basic components of the human reproductive systems and describe the basic functions of the various components.

We encourage you to have discussions with your child to support their learning. If you have any questions or concerns, please feel free to contact the school.

_____
(Signature of Teacher/Principal)

SEXUAL HEALTH OUTCOMES SCOPE AND SEQUENCE

Grade 6

- ***Define Sexuality***
- ***Puberty***
- ***Female Reproductive System***
  - ***uterus***
  - ***vagina***
  - ***ovaries***
  - ***Fallopian tubes***
  - ***ova/ovum***
- ***Male Reproductive System***
  - ***testicles***
  - ***scrotum***
  - ***urethra***
  - ***penis***
  - ***sperm***
- ***Introduce***
  - ***Menstruation***
  - ***Sperm Production***
  - ***Fertilization***
  - ***Conception***
  - ***Pregnancy***
  - ***Fetal Development***

Grade 7

- Review Meaning of Sexuality
- Review / Expand Puberty
  - physical development
  - ***emotional development***
- Review / Expand Female Reproductive System
  - uterus
  - vagina
  - ovaries
  - Fallopian tubes
  - ova/ovum
  - ***cervix***
  - ***labia***
  - ***clitoris***
  - ***hymen***
  - ***vulva***
- Review / Expand Male Reproductive System
  - testicles
  - scrotum
  - urethra
  - penis
  - sperm
  - ***epididymus***
  - ***glans***
  - ***foreskin***
  - ***vas deferens***
  - ***seminal vesicle***
  - ***prostate gland***
  - ***Cowper's gland***
  - ***semen***
  - ***erection***
  - ***ejaculation***
- Review / Expand
  - Menstruation
  - Sperm Production
  - Fertilization
  - Conception
  - ***Implantation***
  - Pregnancy
  - ***Stages of Fetal Development***
  - ***Genetics -- Sexual Determination***
  - ***Fraternal Twins***
  - ***Identical Twins***
  - ***Gender Roles***
  - ***Decision Making for Responsible Sexual Behaviour (Focus on Abstinence)***

Grade 8

- Review Meaning of Sexuality
- Review / Expand Puberty
  - physical development
  - emotional development
  - ***sexual development***
  - ***social development***
- Review Female Reproductive System
  - uterus
  - vagina
  - ovaries
  - Fallopian tubes
  - ova/ovum
  - cervix
  - labia
  - clitoris
  - hymen
  - vulva
- Review Male Reproductive System
  - testicles
  - scrotum
  - urethra
  - penis
  - sperm
  - epididymus
  - glans
  - foreskin
  - vas deferens
  - seminal vesicle
  - prostate gland
  - Cowper's gland
  - semen
  - erection
  - ejaculation
- Review / Expand
  - Menstruation
  - Sperm Production
  - Fertilization
  - Conception
  - Implantation
  - Pregnancy
  - Stages of Fetal Development
  - Genetics -- Sexual Determination
  - Fraternal Twins
  - Identical Twins
  - Gender Roles
  - Decision Making for Responsible Sexual Behaviour (Focus on Abstinence)
  - ***Physical, Emotional, Sexual Abuse, and Neglect***
  - ***Sexual Orientation***
  - ***Responsibilities and Consequences of Being Sexually Active***
  - ***STIs (8)***
  - ***Basic Types of Contraceptives (7)***

Grade 9

- Review Meaning of Sexuality
- Review Puberty
  - physical development
  - emotional development
  - sexual development
  - social development
- Review Female Reproductive System
  - uterus
  - vagina
  - ovaries
  - Fallopian tubes
  - ova/ovum
  - cervix
  - labia
  - clitoris
  - hymen
  - vulva
- Review Male Reproductive System
  - testicles
  - scrotum
  - urethra
  - penis
  - sperm
  - epididymus
  - glans
  - foreskin
  - vas deferens
  - seminal vesicle
  - prostate gland
  - Cowper's gland
  - semen
  - erection
  - ejaculation
- ***Sexual Assault***
  - ***four basic types***
  - ***consequences***
- ***Safer Sex Practices***
  - abstinence
  - ***condoms (public health nurse condom demonstration)***
  - Contraception (review methods from grade 8)
  - lower risk sexual activity
- ***Pregnancy and Parenting***
  - ***process of pregnancy and birth***
  - ***myths and facts about pregnancy***
  - ***pregnancy risk and impact***
  - ***options for women who are pregnant***
- STIs and HIV
  - review STIs/HIV (Grade 8)
  - ***strategies to prevent or reduce sexual risk of STIs and HIV***

**** Bold type indicates new material for this grade level.***

INSTRUCTIONAL METHODS

The most effective ways to teach sexuality to your students

Role-Playing
- Provides opportunity for students to assume roles of others, therefore appreciating another's point of view
- Allows for a safe exploration of solutions and an opportunity to practice sexual health skills
- Tends to motivate students to learn
- Promotes and develops critical and creative thinking, attitudes, values, and interpersonal and social skills

Question Box
- Anonymity provides a way for students to ask questions related to sexuality without risking embarassment or self-consciousness
- Time between lessons allows teachers to prepare an answer ahead of time and to avoid being caught off-guard
- Capitalizing on "teachable moments" is effective and can enrich the classroom experience

Small Group Instruction
- Provides opportunity to think through an idea and exchange alternative ideas and viewpoints
- Increases students' self-confidence
- Enhances social and personal development

Class Discussions
- Help build a positive classroom climate
- Lead to student interest in sexual health
- Result in students' feeling more positive about themselves and the learning environment

Multi-media Experiences
- Keep group's attention
- Stimulate discussions
- Illustrate complex, abstract concepts

TEACHING TIPS

- Invite qualified members in the community (e.g., public health nurse) to support instruction (with administrative approval).
- Be willing to look for information to address topics or questions that students raise. Always stay within the boundaries of the authorized curriculum.
- Know where and when to send students for help.
- Establish ground rules in the first lesson and reinforce them regularly to ensure a safe and respectful class atmosphere.
- Reinforce the universal values, including honesty and respect for the rights and feelings of others, throughout the course.
- Present information in an unbiased, non-judgmental way, and focus on helping students develop the knowledge, skills, and attitudes that will empower them to make health-enhancing decisions.
- Talk about topics and answer questions using factual statements rather than value statements.

Value Statements:	***Factual Statements:***
It's wrong for people to be gay or lesbian.	Some people are gay or lesbian.
Too many young people are having sex.	Some young people are having sex.

- Remind students that value-based questions are personal and influenced by our families, friends, school, the media, culture, and religion, and encourage students to discuss these types of questions with their parents/guardians.
- Use exact terms and definitions (not slang) when talking about sexual health topics.
- Use gender-neutral terms such as "partner" instead of "boyfriend" or "girlfriend".
- Use icebreakers and humour to help students feel more comfortable.
- Encourage students to ask questions and to use the Question Box strategy.

SEX FACTS IN CANADA *(Compiled in 2006)*

Sexual Experience

- The average age at which both male and female Canadians have sex for the first time is 16.5.
- 28% of teens aged 15-17 report having had sexual intercourse at least once. By age 20-24, this increases to 80%.
- In a 2005 report, 41% of males aged 15-17 and 39% of those aged 18-19 reported having more than one sexual partner in the previous year.
- For females in the study, 29% of 15-17 year olds and 31% of those aged 18-19 reported having more than one sexual partner in the previous year.

Sex Education

- Young people turn to parents and guardians as a primary source of sexual health education.
- A survey among grade nine students in Canada revealed that school was most frequently cited as the main source of information on human sexuality/puberty/birth control and HIV/AIDS.
- Over 85% of parents agree that sexual health education should be provided in schools, as do 92% of high school youth.

Contraception

- Oral contraceptives (i.e., the pill) are the most common method of conception used by Canadian women who have had intercourse (32%), followed by condoms (21%).
- 39% of female grade nine students and 54% of grade eleven students used the pill the last time they had intercourse.
- The percentage of both male and female students who reported using a condom the last time they had sex decreased from grade nine to grade eleven.

Teen Pregnancy

- Among 15-19 year old Canadian females, the pregnancy rate declined from 41.7 per 1,000 in 1998 to 40.2 in 1999 and 38.2 in 2000.
- The number of teenaged women who gave birth has also declined, from 16.8 live births in 1997 to 12.1 in 2003.
- Though not scientifically conclusive, increased use of the birth control pill by females has corresponded with the drop in teen pregnancy rates.

Safer Sex

- Of sexually active adults aged 20-24, 44% reported having sex without a condom, compared with 33% of those aged 18-19 and 22% of those aged 15-17.
- 29% of males aged 15-19 and 44% of males aged 20-24 do not use condoms.
- For females, 51% aged 15-19 and 53% aged 20-24 do not use condoms.
- Of young people who reported in 2003 that they had had sex with multiple partners within the past year, approximately three in 10 had not used a condom the last time they had sex.

Sexually Transmitted Infections (STIs)

- The term sexually transmitted infection (STI) is now commonly used in place of sexually transmitted disease (STD) in order to include infections that may be asymptomatic.
- In 2003, 854,817 people aged 15-49 who have ever had sexual intercourse reported ever being diagnosed with a sexually transmitted infection.
- There are more than 25 classifications of STIs.
- STIs can lead to genital warts, blisters, infertility, spontaneous abortion, cancer, and death.
- While many STIs are curable, several are not, including Hepatitus B, genital herpes, Human Papillomavirus (HPV), and the Human Immunodeficiency Virus (HIV).

SEX FACTS IN CANADA . . . Continued

Human Papillomavirus (HPV)

- HPV is the world's most common sexually transmitted infection.
- Over 80 types of HPV have been reliably identified, but researchers believe there are likely over 200.
- It is estimated that 75% of Canadians will have at least one HPV infection in their lifetime.
- It is often referred to as a 'silent' infection, as most cases are asymptomatic.
- HPV is transmitted through vaginal, oral or anal sex, as well as skin-to-skin contact.
- HPV can cause skin warts, genital warts, pre-cancerous lesions, and lead to certain types of cancers.

Human Immunodeficiency Virus (HIV)

- From 1985 to 2005, a total of 60,160 positive HIV tests have been reported to the Public Health Agency of Canada.
- In Canada in 2005, approximately 30% of individuals with HIV were unaware of their infection.
- The average time between HIV infection and AIDS is 10 years.

Chlamydia

- Chlamydia is the most commonly reported STI in Canada.
- Close to 63,000 cases of chlamydia were reported in 2004, the highest number of cases since the disease became reportable in 1990.
- 40-70% of chlamydia cases present no symptoms. People may carry the infection for many years without knowing.
- From 1997 to 2004, rates in males rose from 58.7 to 129.5 per 100,000, more than doubling, while female rates increased by 57%, from 167.8 to 263.2 per 100,000.
- Females account for over two-thirds of all reported cases. Two-thirds of all reported cases are in the 15-24 age group.
- Consistent condom users (100% compliance) have significally lower rates of infection compared with inconsistent condom users (25-27% compliance).
- Serious long-term health consequences are attributed to chlamydia, including infertility, chronic pelvic pain, and ectopic pregnancy, which can be a life-threatening medical emergency.

Gonorrhea

- Gonorrhea is the second most commonly reported STI in Canada.
- Most men and women experience no symptoms.
- Reported rates have nearly doubled from 14.9 per 100,000 in 1997 to 28.9 per 100,000 in 2004.
- Different from chlamydia, more than 60% of reported cases are attributed to males.

Syphilis

- Syphilis affects 3.5 per 100,000 people in Canada, nearly nine times the rate in 1997 (0.4 per 100,000).
- Syphilis is escalating in both males and females, but more so in males. 2004 rates for men were 15 times higher than in 1997 (6.3 vs. 0.4 per 100,000).
- Male cases appear to be driven by those over 30 (82% of reported male cases and 72% of overall cases are attributed to men aged 30-59).

Source: www.sexualityandu.ca and The Society of Obstetricians and Gynaecologists of Canada

SETTING GROUND RULES

PROPER VOCABULARY

Use correct terms.

COMFORT & SAFETY

It is okay to feel uncomfortable.
It's okay to pass.
It is okay to ask a question anonymously using the question box.
We have the right to our own beliefs and opinions.
We are responsible for our own learning.

RESPECT OTHERS

Everyone has the right to participate.
Raise your hand before speaking.
Listen when others are speaking.
Do not interrupt.
We will be sensitive to diversity and be careful about making careless remarks.
We can disagree with another point of view or behaviour non-judgmentally.

PRIVACY & CONFIDENTIALITY

We will be as open and honest as possible, but we won't discuss personal issues.
What we share in this group is intended to remain confidential.

CLASSROOM CLIMATE

Here is a list of rules you might suggest to your students. They can be changed, discussed, or expanded upon. Rules make it easier for a climate of trust to develop as students come to know what is expected of them and their peers.

1. Be sensitive to the feelings and words of others. Everyone is entitled to an opinion.

2. Respect feelings, values, and opinions of others.

3. You have a right to skip your turn and not answer a question. We will not discuss personal behaviour in class.

4. Try to use exact terms. If you do not know the exact term, use the expression you know and I (the teacher) will tell you the appropriate term.

5. Do not personalize questions or situations. For instance, instead of saying "my aunt told me...," you should say "someone told me...."

6. Comments made by a student in class are not to be circulated throughout the school unless the student in question specifically asks for them to be. It is important to be discreet.

7. Questions submitted to the Question Box will be answered or an explanation will be provided for not answering particular questions.

8. It would be interesting for you to discuss the points raised in class with your parents. Be sure to relate them accurately.

9. Speak for yourself. Use "I" when expressing your feeling and opinions.

SEXUALITY IS . . .

- part of a person's entire life

★ how you feel about being male/female
★ how you feel about yourself
★ how you feel about your body
★ how you get along with others
★ your need for affection and closeness
★ your understanding of what is right and wrong
★ how you express love and affection
★ your feelings and decisions regarding sexual behaviour
★ the total expression of an individual's femaleness or maleness through
    - feelings
    - beliefs
    - attitudes
    - values
    - behaviours

Sexuality is expressed . . .

- caring for others
- personal appearance (dress)
- roles (family)
- sexual actions

"THEY TELL ME I'M GOING THROUGH PUBERTY"

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.

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

I don't mind some of the changes I'm seeing. In fact, some things I even like. I'm taller than I was last year. I know I'm smarter just because I'm able to think and write about what I'm going through now.

But then, there are some changes that aren't so good. Like BO, body odour. The first time I noticed it, I thought I had some kind of disease or something. Now I realize it's not too bad if I wash or use deodorant.

A really dirty trick though, is acne. I remember I was getting ready to go to a party, washing up and stuff, when I looked in the mirror and saw this big zit staring back at me. I held hot washcloths on it for a long time. It went down, but not the whole way. I went to the party anyway. I noticed that many other kids had the same or worse luck with their zits. I wonder how common this is.

There's one thing I get a little embarrassed about. It's even hard for me to say this. When I was at the party the other night, I was with someone I like (and I'm not mentioning any names). I got this new feeling. It was strange but kind of nice. They tell me it's normal. Is it?

They tell me I'm going through puberty. That means I have to go to school with my zits and my BO But, I'm taller and smarter. I think I'll survive.

Do you think Chris is a boy or a girl, or are you unsure?

C. Cooperman and C. Rhoades. (1983). ***New methods for puberty education***. © 2007 - Calgary Health Region - www.teachingsexualhealth.ca

Grow taller

Skin gets oily

Acne (pimples)

Voice changes

Hair grows on face

Hair gets oily

Hair grows in underarms

Hair grows on genitals (pubic hair)

Sweat glands develop

Breasts develop

Hips get bigger

Shoulders get wider

Start producing sperm

Penis grows bigger

Testicles get bigger

Body starts producing sex hormones

Wet dreams

Erections happen out of the blue (penis gets hard)

Sperm can be released from penis (Ejaculation)

Start releasing eggs (Ovulation)

Periods (Menstruation)

Mood swings

Start having sexual thoughts

Start having sexual feelings

Start producing vaginal discharge

Can become interested in having a boyfriend or girlfriend

Friendship becomes more important

Sometimes feel lonely and confused

Stronger feelings of wanting to be liked and to "fit in"

Want more independence

Thinking about the future

Concerned about looks (appearance)

PUBERTY CHANGES ANSWER KEY	BOY	GIRL	BOTH
Grow taller			X
Skin gets oily			X
Acne (pimples)			X
Voice changes			X
Hair grows on face	X		
Hair gets oily			X
Hair grows in underarms			X
Hair grows on genitals (pubic hair)			X
Sweat glands develop			X
Breasts develop*			X
Hips get bigger		X	
Shoulders get wider	X		
Start producing sperm	X		
Penis grows bigger	X		
Testicles get bigger	X		
Body starts producing sex hormones			X
Wet dreams	X		
Erections happen out of the blue (penis gets hard)	X		
Sperm can be released through penis (Ejaculation)	X		
Start releasing eggs (Ovulation)		X	
Periods (Menstruation)		X	
Mood swings			X
Start having sexual thoughts			X
Start having sexual feelings			X
Start producing vaginal discharge		X	
Can become interested in having a boyfriend or girlfriend			X
Friendship becomes more important			X
Sometimes feel lonely and confused			X
Stronger feelings of wanting to be liked and to “fit in”			X
Want more independence			X
Thinking about the future			X
Concerned about looks (appearance)			X

*Breast development is related to an increase in the estrogen hormone. Males normally produce some estrogen in the adrenal glands and testes. Nearly one in two boys experiences temporary enlargement of the breasts during puberty.

Canadian Federation for Sexual Health. (2005). ***Beyond the basics: A sourcebook on sexuality and reproductive health education***. Ottawa: Author. c 2007 - Calgary Health Region - www.teachingsexualhealth.ca

PUBERTY - PHYSICAL CHANGES

Adapted with permission from J. Campbell. (1988). ***Sexuality: An education resource book***. Canada: Globe/Modern. P. 260.

W-6.9

WHAT IS PUBERTY?

Puberty is the period during which the individual becomes physiologically capable of reproduction, and secondary sexual characteristics develop. It is a stage of rapid body growth and rapid development of body functions.

This period begins early in the teenage years. Females usually begin puberty before males, but both experience much change during this time.

Each individual's development is unique. There are wide individual differences in the age at which puberty begins, the amount of growth which takes place, and the speed of development. These differences are natural.

Heredity, the characteristics carried in the chromosome messages of the parents, plays a major role in the growth and development of the offspring. Hair colour, eye colour, height and stature are just a few characteristics that are influenced by inherited factors. During puberty, the whole child matures and takes on a more adult look.

Other factors influence the growth and development of a person. The quality of nutrient intake plays a major role. Poor nutrition has a serious negative effect on a person's growth and development.

GROWTH AND DEVELOPMENT

Growth and development are terms that often appear together but have separate and distinct meanings. Growth refers to the increase in size of a body part. For example, an individual grows in height as bones, corresponding muscles, and other body parts grow. Development refers to the increased function, activity or maturity of an organ or gland. For example, the reproductive organs develop during puberty.

PHYSICAL CHANGES DURING PUBERTY: FEMALE

For females, there is much sexual development during the years of puberty. Between the ages of 10 and 18, the first menstrual period occurs. This and many other physical changes that the female experiences during puberty are directly related to estrogen and progesterone secretions. Girls may experience vaginal discharge up to one year before menstruation begins.

During puberty, there is rapid physical growth. Girls gain both height and weight. The hips widen as the pelvis becomes broader and padded with fat. The breasts enlarge as fat is deposited and the duct system develops. The sweat glands begin to secrete and body odour becomes more noticeable. As well, sebaceous glands secrete oil, more than the skin ducts can handle. These ducts can become plugged, causing blackheads and whiteheads which, if infected, turn to pimples and acne.

Also with puberty comes the growth of pubic hair and hair in the armpit. As well, soft, pale facial hair appears, and hair begins to grow on the arms and legs.

The size of the reproductive organs increases.

PHYSICAL CHANGES DURING PUBERTY: MALE

For males, first ejaculation usually signifies puberty. Most development for males begins at 10 to 12 years of age and continues for several years. Many of the changes in this period can be attributed to testosterone secretions.

Puberty is a period of rapid physical growth. Both height and weight gains result as bones thicken and lengthen. The shoulders and chest broaden. There is an increase in muscle tissue and strength, sometimes initially accompanied by a lack of co-ordination.

Puberty also brings about changes in the skin and sweat glands. Sweat glands begin to secrete and body odour becomes noticeable. The oil secretions from the sebaceous glands plug some skin ducts, and blackheads, whiteheads, pimples, and acne may appear.

Pubic hair begins to grow. Underarm hair soon follows. Later in adolescence, facial hair, beard and other body hair will appear. Finally, there will be an indentation of the hairline, a masculine trait.

There is an increase in size of reproductive and other organs.

One noticeable and significant change is that of the voice. During puberty, the larynx enlarges and the vocal cords lengthen. The male voice will eventually be lowered by an octave, but likely not before the sometimes embarrassing occurrence of rough pitch and sudden octave change known as "cracking." This is caused by the sudden shortening of the vocal cords as one speaks. As the vocal cords develop and mature, this becomes much less likely to happen.

During puberty, the male becomes capable of sperm producing and ejaculation, and experiences nocturnal emissions.

MENSTRUAL CYCLE

Menstruation is a visible sign of puberty in females. This menstrual cycle will continue more or less regularly for the next 30 to 40 years of a woman's life.

Once every 28 days, on average, the female body releases an egg and prepares itself for the possible implantation of this egg if it becomes fertilized. To do this, an egg is stimulated to grow and the uterus lining prepares for implantation. About 21 days later, if no fertilization takes place, the uterus sheds its lining to become menstrual flow. This mixture of cells, blood, and mucus forms the menstrual discharge. Total discharge is approximately 200-250 mL (although this can vary), with blood being only 35-50 mL of the menstrual fluid.

For most women, a cycle of 28 days is common. However, wide variations are possible; menstrual cycles may range from 20-40 days. Menstrual flow can last for as little as two days or as long as seven days; five days is the average.

The first menstrual flow can occur at any time between the ages of 10 and 16. Girls should be informed about menstruation before age 10. They can experience vaginal discharge up to one year before their first period begins.

It is common for teenagers to experience irregular menstrual flows of varying duration. In adolescence, the estrogen level is still fluctuating greatly; a teenager may experience one menstrual flow and then wait several months for another one. As well, a teenager may not be ovulating even though menstruation occurs. This can occur because the body is producing enough estrogen to create a lining for the uterus, which is then discharged, but not enough progesterone for ovulation to occur. Teenagers who are menstruating will not be able to tell whether or not they are ovulating. It may take several years for the menstrual cycle to become regular, but it is usually established by the age of 18.

SECONDARY SEXUAL CHARACTERISTICS

FEMALE

- pubic hair
- facial hair
- underarm hair
- other body hair
- breast development
- menstruation
- widened hips
- changes in body contours
- softened skin

MALE

- pubic hair
- underarm hair
- other body hair
- facial hair (beard)
- indentation of hairline
- widening of shoulders and chest
- muscular development
- changes in body contours
- voice change
- toughened skin

Adapted with permission from ***Sexuality: An education resource book***. Pp. 39, 43- 46.

STUDENT NAME: _____

PARENT/ADULT SUPPORT: _____

ADVICE CORNER

Now that you know more about puberty, you will find that your friends come to you for advice on all sorts of things. Below are some of their questions. What will you tell them?

STEP ONE: Pick four questions you know the answer to. Check the box on the side that says "Student Expert." Write your answer in the space provided.

STEP TWO: Interview a parent or supportive adult to find out how they would answer the remaining four questions. Check the box on the side that says "Adult Expert." Write the adult's answers in the space provided.

Q: I don't like my hair because it's too oily. What suggestions do you have?

Student Expert 0 Adult Expert 0

A:

Q: I don't want to shave yet, but other people keep telling me I should. What advice would you give?

Student Expert 0 Adult Expert 0

A:

Q: I feel so bad—my friends told me that I stink after gym class. What can I do?

Student Expert 0 Adult Expert 0

A:

Q: I am embarrassed about having to buy my first bra. What might I do?

Student Expert 0 Adult Expert 0

A:

Q: My skin is always breaking out. I bought some medicine, but it's not working. Can a doctor give me a pill for this?

A:

Student Expert	Adult Expert
0	0

Q: I get such bad cramps when I get my period. Do you have any suggestions for me?

A:

Student Expert	Adult Expert
0	0

Q: Some of my friends are starting to use tampons instead of pads when they menstruate. How do I decide which would be best for me to use?

A:

Student Expert	Adult Expert
0	0

Q: This person on my track team has feet that smell just gross after every practice. Should I tell him to see a doctor?

A:

Student Expert	Adult Expert
0	0

PUBERTY INTERVIEW

Structure:	Homework assignment: interview with an adult
Time:	20 minutes in class
Materials:	Puberty Interview handout

Note: Some young people may be unable to complete this assignment with their parent(s) or guardian(s). Allow them the opportunity to complete the assignment with another trusted adult.

Procedure

1. ***State*** that puberty can be an exciting, confusing, and tumultuous time. This activity will encourage participants to seek out a same-sex adult, whom they trust in order to gain his/her support and discuss changes associated with puberty.

2. Some of these questions may be too personal or embarrassing for some adults to answer. ***Encourage*** participants to share the interview guide with the adult prior to the interview. That way, the adult can prepare what questions s/he is willing and able to answer and discuss.

3. Rather than handing in a completed interview guide, ***ask*** participants to hand in the Declaration of Completion. That way, privacy is maintained for the participant and the adult s/he interviewed, while proof is provided that the homework exercise was completed.

4. ***Conclude*** with the following questions:

   - How easy/difficult was the activity?
   - Did the answers surprise you?
   - What did you learn by doing this activity?

Adapted with permission from R. Patriquin. 1995. ***Growing together***! Amherst: Cumberland County Family Planning

PUBERTY INTERVIEW

Instructions: Pick an adult of the same sex, (one whom you trust) to interview. Using the following questions as a guide, discuss the following questions:

1. What is the best thing about growing up?

2. How old were you when you started puberty? What changes did you experience?

3. How did you handle the stress and embarrassment sometimes felt during puberty?

4. How did you feel about boys/girls when you were my age?

5. What did you like best about your body and your looks when you were my age?

6. When did you start to feel grown up?

7. When did you have your first kiss?

(Detach and hand in this slip only)

We completed the "Puberty Interview" homework assignment.

_____ _____

Participant Parent/Guardian/Trusted Adult

Adult Comments: Please write any comments you may have about this activity.

_____

_____

_____

From ***Beyond the basics: A sourcebook on sexuality and reproductive health education***

PUBERTY

RED LIGHT/GREEN LIGHT/YELLOW LIGHT

MATERIALS: 10 to 15 statements that are either facts or myths about puberty, printed on a transparency. Pieces of red, yellow, and green paper, approximately 1 x 2 in. or 8 x 11 in. in size.

TIME: 30 minutes (part 1), and 10-15 minutes for question and answer period (part 2).

INSTRUCTIONS: Explain to the students the difference between fact and myth (give example). Tell the students that there will be a list of statements and they must determine if each statement is fact, myth, or unclear. When the statement is shown, they will hold up a green card, red card, or yellow card. Green = fact, red = myth, yellow = uncertain. They must be prepared to defend their decisions.

VARIATIONS OF THIS EXERCISE:

Var. #1. Each student will have his/her own coloured cards. They will make their own decisions and raise the cards to signify their choices.

Var. #2. Each table will have big coloured cards and students will decide as a group which card they will hold up and why.

RED LIGHT/GREEN LIGHT/YELLOW LIGHT/ INSTRUCTIONS QUESTIONS AND STATEMENTS

1. It is possible to know when you are starting puberty.
2. Puberty is a natural development and happens to everyone.
3. The circulatory and respiratory systems do not change during puberty.
4. Primary sex characteristics include voice changes in boys.
5. The endocrine system controls the level of hormones in your body.
6. Girls move through puberty at an earlier age than boys.
7. Testosterone is the main female hormone in puberty.
8. Estrogen leads to muscle growth, body and facial hair, and other male characteristics.
9. The uterus changes during pregnancy, not the stomach.
10. You cannot swim, take Phys. Ed, or do gymnastics during your period.

ANSWERS

1) F	2) F	3) M	4) M	5) F
6) F	7) M	8) M	9) F	10) M

MALE AND FEMALE REPRODUCTIVE SYSTEMS

Fertilization

Fertilization is the union of one male sperm and one female ovum. It is the action that allows the species to survive by procreation.

In the female, each ovum has a lifespan of about 24-48 hours, so fertilization must take place shortly after ovulation. At that time, the ovum is usually still in the upper portion of the Fallopian tube.

In the male, the lifespan of sperm is also about 24 hours. Once deposited in or near the vagina, sperm make their way through the uterus into the Fallopian tubes. The sperm can last in the vagina up to 72 hours. Sperm travel by movement of their own tails and with the help of the muscles in the uterus.

Fertilization usually takes place in the Fallopian tubes. More than one sperm is necessary for fertilization. The acrosome at the head of the sperm gives off an enzyme that breaks down a protective coating or membrane on the ovum. Many sperm are needed to produce enough of this enzyme. After that is done, one sperm enters the ovum, causing fertilization. The body and tail of the sperm are lost; only the head, carrying the chromosomes, enters the ovum.

If no sperm enters the ovum, there is no fertilization and menstruation will occur.

Immediately after the sperm enters the ovum, a new barrier is created to prevent further sperm from penetrating.

Fertilization is the union of the 23 chromosomes in the sperm with the 23 chromosomes in the ovum to create a cell of 46 chromosomes. These 23 pairs of chromosomes are part of the first cell of the new individual. This cell is known as a zygote.

The fertilized cell now contains a blueprint for all the growth and development to occur in that person. These instructions are carried in the deoxyribonucleic acid (DNA), which makes up the chromosomes. Every cell of the body will have the same blueprint, the same set of chromosomes, in its nucleus. Thus, each time a new cell is created, the same blueprint message is replicated, because the entire set of instructions is carried in the nucleus of each cell.

The chromosomes from the parents contain genes that are the hereditary factors. The child will inherit a number of charcteristics from the genes of each of the parents. Possible inherited factors include colour of eyes, hair and skin, physical form of the face and body; tallness or shortness; blood grouping; and certain personality characteristics.

The sex of the child is determined at the moment of conception. One of the 23 chromosomes in the sperm is a sex chromosome; one of the 23 chromosomes in the ovum is a sex chromosome. When the nucleus of the sperm and the nucleus of the ovum unite, the sex of the child is set. Two types of sperm are produced; one carries the X sex chromosome, one carries the Y sex chromosome. Equal amounts of each type of sperm are produced.

Fertilization . . . Continued

The ova carry only one type of sex chromosome, the X type. If an X sperm fertilizes the ovum, the result is an XX conception, a female. If a Y sperm fertilizes the ovum, the result is a male, an XY conception.

Male Reproductive System

The major features of the male reproductive system are the testicles, scrotum, urethra, and penis (of which the glans and foreskin are part).

The testicles or testes (singular: testicle or testis) are oval in shape. They are about 4 cm in length and 2.5 cm in diameter. Each testicle holds an epididymis, which is a long, thin, winding tube through which sperm travel as they mature. Males have two testicles of about equal size. They are contained in the scrotum, which is a saclike container outside the body.

The testicles produce sperm and secrete hormones. To help the testicles in their production of sperm, the scrotum regulates temperature. Sperm is most effectively produced at 1-2 degrees Celsius below body temperature, which accounts for the location of the testicles outside the body cavity. The scrotum has many sweat glands and sweats frequently. The muscles in the scrotum contract to pull the testicles closer to the body for warmth. When these muscles relax they allow the testicles to move away from the body to reduce their temperature.

The urethra is a tube that leads from the bladder through the prostate gland, where it is joined by the ejaculatory duct. The urethra continues through the penis to open to the outside. The urethra is a passageway for both sperm and urine.

The penis looks like a single tube, but in fact it is three cylinders held together by connective tissues. Each tube is made of spongelike erectile tissue, which can fill with blood to cause an erection. When erect, the penis can be 8.5-20 cm in length and 2-5 cm in diameter.

The glans is the conelike expansion at the end of the penis. The foreskin is a fold of skin that covers the glans. Circumcision is the act of removing the foreskin. It is an elective surgical procedure that is often performed in the first few days after birth.

Female Reproductive System

The female's reproductive system is contained inside her body, rather than being external and visible as is the case with the male. The main features of the female's internal genitalia are the ovaries, the Fallopian tubes, the uterus (of which the cervix is part), and the vagina.

Females have two almond-shaped ovaries about 3.5-5 cm in length. The ovaries are located inside the lower abdomen.

The ovaries manufacture egg cells and secrete hormones. Usually, one egg cell matures each month, with each ovary producing on alternate months.

Female Reproductive System . . . Continued

Fallopian tubes are shaped something like trumpets and are about 7.5-12.5 cm in length. Females have two Fallopian tubes. The flared end of each tube is located near an ovary. The tubes extend to corners of the uterus. The Fallopian tubes move the eggs from the ovaries into the uterus.

The uterus, sometimes called the womb, is a pear-shaped, muscular pouch. It is found between the bladder and the rectum in the pelvic cavity. Each month, the lining of the uterus thickens in preparation for a fertilized egg. If no fertilization takes place, the lining is shed in the menstrual flow. The narrow lower portion of the uterus is called the vagina.

The vagina is a muscular tube that extends from the cervix to the external genitalia. The vagina is about 7.5-10 cm in length. In normal resting state, the walls of the vagina almost touch. The vagina can expand to four or five times its normal size in childbirth. It adapts to the size of the penis during intercourse. Also, it adapts to the size of a tampon during menstruation. The vagina serves as a passageway for sperm travelling into the female reproductive system, for a baby travelling out of the body, and for menstrual flow travelling out of the body. The inner two-thirds of the vagina have few nerve endings, hence little sensation can be felt.

The main features of the female's external genitalia are the labia, clitoris, and hymen. Together they form the vulva.

The labia are soft folds of skin surrounding the opening of the vagina. The outer labia are called the labia majora. These are two folds of heavy skin, the outer surface covered thickly by hair. The inner labia are called the labia minora. They are the two smaller folds of skin between the labia majora. One portion of the labia minora overhangs the clitoris and protects it. The clitoris is a small cylindrical projection between the labia minora and above the urethra opening. The clitoris is supplied with many blood vessels and nerve endings. It receives and transmits sexual stimulation.

FEMALE REPRODUCTIVE SYSTEM

FEMALE REPRODUCTIVE SYSTEM

THE MENSTRUAL CYCLE

Beginning of cycle
(menstruation)

Ovum starts to mature
(lining begins to thicken to
prepare for possible pregnancy)

Release of mature ovum
(ovulation)

Ovum travels to uterus

Beginning of next cycle
(menstruation)

CONCEPTION

MALE REPRODUCTIVE SYSTEM

* Not part of the reproductive system.

MALE REPRODUCTIVE SYSTEM

SPERM PRODUCTION

* Not part of the reproductive system.

BOYS AND PUBERTY

Structure: Presentation by educator with large group discussion
Time: 45 minutes
Materials: Blackboard or flipchart; "Male Anatomy" worksheet; male reproductive system resource sheet

Procedure

1. ***Introduce*** the topic by reviewing general male changes and feelings (especially embarrassment) and need for respect.

   Make the following statement:

   Although men do not have babies, they take part in reproduction, and thus their reproductive organs must grow and develop to make this possible. Today we will learn the parts of the reproductive system, and how they change at puberty to make reproduction possible.

2. ***Ask*** participants what external changes boys experience during puberty.
   - Adam's apple will begin to show.
   - Shoulders and chest will grow bigger.
   - Muscles will become bigger.
   - Hair on face will appear.
   - Body hair appears for some boys (e.g., underarms, face, pubic area, later maybe on chest/back).
   - Voice changes for some boys.
   - Testicles gradually grow a little larger.
   - Penis will grow longer and wider as the rest of the body grows.
   - Boys will begin to have erections and "wet dreams" (sperm produced for reproduction).
   - Breast development will occur. This fact comes as a surprise to most students. Some boys will find that the area around one or both nipples can feel sore and may swell. This is because boys have some female hormones in their body. The soreness and swelling usually go away. This is normal.
   - Feelings of sexual attraction emerge.
   - Sudden mood changes occur.
   - Weight gain will occur before growth spurt.

BOYS AND PUBERTY . . . CONTINUED

3. ***Ask*** participants the following question:

   - Why do some boys get some breast swelling when they are going through puberty?

   As a group, discuss the following scenario:

   - Someone has some breast swelling. When you change for gym or swimming, other boys are making comments such as "You're turning into a girl" and "Look at those boobs." You know this makes your friend feel terrible and it makes you feel bad. What can you do?

4. ***Discuss*** the external and internal male reproductive organs. During the discussion you may wish to have students complete the worksheet on labelling the reproductive system.

   External Genitals

   Penis
   - The penis is a tube-like organ of spongy tissue (***Teacher note: leave rest of information about penis until later).***
   - The urethra runs lengthwise through the centre of the penis.
   - The head of the penis is called the glans; its function is one of sexual pleasure.

   Testicles
   - Male sex glands (2) are held in a sac called the scrotum.
   - They are on the outside of the body to keep temperature cooler than body temperature for healthy sperm production.
   - Sometimes one can grow faster than the other at puberty.
   - One hangs lower—this is normal.
   - The area is very sensitive and easily damaged and should be protected e.g., during sports activities. This is why one should never deliberately kick anyone in the testicles.
   - A man needs only one testicle to be fertile (able to reproduce).
   - At puberty, testicles begin to produce hormones and sperm.

BOYS AND PUBERTY . . . CONTINUED

Sperm

- Sperm are special cells produced in testicles at puberty.
- They are very small (over 300 million in 15 mL of semen).
- Millions are made every day.
- They mix with fluid in glands to form a white sticky fluid called semen.
- They swim up the vagina, through the uterus to the Fallopian tube, to fertilize an egg.

Internal Reproductive Organs

Vas Deferens

- This tube carries sperm out of the testicles.

Prostate Gland

- At puberty this gland starts producing a fluid in which sperm are kept alive.
- Sperm + fluid = a substance called semen.

Urethra

- This tube is located in the penis.
- It has two branches— one to the bladder, one to the vas deferens.
- Two substances which come out of the urethra are urine and semen; they cannot come out at the same time.
- When the penis is ready to release semen, a valve blocks off the branch to the bladder so that urine cannot escape.

Seminal Vesicles

- They are two small pouches behind the bladder that produce fluid.
- This fluid mixes with sperm and other fluid to produce semen.

5. ***Review*** some of the changes at puberty:

Teacher note: Some of this may have been covered while explaining the reproductive system.

- Production of sperm in the testicles
- Growth of penis and testicles
- Production of fluid in the prostate gland

BOYS AND PUBERTY . . . CONTINUED

6. ***Ask*** what starts happening more often to a boy's penis at puberty.

   Explain erections:
   - The penis gets bigger, harder, and stands out from the body.
   - Babies have erections, sometimes before birth.

7. ***Ask*** why erections happen.
   - Sexual thoughts send a message to the penis which thickens and sticks out from the body.
   - Spongy tissue fills up with extra blood.
   - Erections happen for physical reasons even before puberty.
   - An erection can happen when you least expect it or want it (e.g., first thing in the morning; during sleep; when vibrations occur, as when riding a bus) and is not always related to sexual thoughts.
   - An erection can be frightening and embarrassing.
   - It is important to realize that it is a normal process of growing up.
   - An erection does not mean an ejaculation must occur; an erection will go away on its own.
   - The size of the penis varies but all sizes work well. There is less of a difference in size when the penis is erect.
   - The penis continues to grow as you do.

8. ***Lead*** a discussion by asking the following questions:

   Some boys talk about having a "boner." Is there a bone in the penis?
   What is an erection?
   How old are boys when they get their first erections?
   What causes a boy to get an erection?

9. ***Discuss*** the following true anecdotes:

   A boy would often get an erection when he was sitting watching an exciting hockey game.

   A teenager would sometimes get an erection when he was concentrating on getting ready to run and do a high jump.

   - Why do you think this happened?
   - Were they thinking sexy thoughts?

BOYS AND PUBERTY . . . CONTINUED

- How do you think they felt when this happened?

10. ***Ask*** participants to describe ejaculation:
    - An ejaculatlation is the release of semen from the penis during an erection.
    - There are millions of sperm in one ejaculation.
    - Usually there has to be some extra stimulation of the penis for this to happen (e.g., during sexual intercourse or masturbation, this is an orgasm).
    - Ejaculation may happen during sleep (wet dream).
    - A boy knows he is producing sperm once he has started to have ejaculations.

11. ***Discuss*** the possibility of reproduction once a boy can ejaculate. Explain the difference between ejaculation and urination, using the following exercise:
    - Tell participants to breathe in through their mouths.
    - Ask where does the air go?
    - Tell participants to swalllow some saliva.
    - Ask where does it go? Why doesn't their breath go into their stomach or their saliva go into their lungs? (Because valves open or close the right passageways—usually.)
    - The same thing happens when a boy ejaculates or urinates.

12 ***Discuss*** wet dreams. Ask participants if they know what a "nocturnal emission" is?
    - Ejaculation of semen during sleep is a nocturnal emission.
    - It is one time that semen comes out without any extra touching of the penis.
    - It can be frightening and embarrassing.
    - It is important to understand that it is a normal part of growing up.
    - It does not matter how many you have; some boys don't have them, some adults may have them.

13. ***Define*** masturbation.
    Masturbation means the deliberate stroking of the sex organs.
    - Masturbation is normal if you do, normal if you don't.
    - A boy may masturbate to the point of orgasm before he reaches puberty but will not ejaculate until sperm is produced in the testes.

BOYS AND PUBERTY . . . CONTINUED

14. ***Explain*** circumcision.
    - It is important to mention the difference between one penis and another.
    - Usually circumcision would be done soon after birth.
    - It is the removal of the covering over the end of the penis.
    - Whether or not circumcision has occurred, there is no difference in sensation and performance.
    - Circumcision is something they will have to decide about if they are parents.
    - There is no health reason to have it done (not medically necessary, but a personal choice). Boys who have not been circumcised should cleanse beneath the foreskin of the penis regularly.

15. ***Explain*** jock itch.
    - It is important to keep yourself clean and the skin dry (e.g., use of baby powder).
    - Sometimes sweaty underwear or jockstraps can lead to a scaly, itchy rash in the genital area.
    - It can be treated with anti-fungal preparations available at the drugstore without a prescription.
    - If the problem persists, see your doctor.

Adapted with permission from Regional Niagara Public Health Department. (1999). ***Growth and development lesson plans for Grades 5 & 6***; and Toronto Public Health. (1998). ***Changes in you and me!***

GIRLS AND PUBERTY

Structure: Presentation by educator with large group discussion
Time: 45 minutes
Materials: Blackboard or flipchart; "Female Anatomy" worksheet; female reproductive system resource sheet

Procedure

1. ***Introduce*** the topic with the following statements:
   Up until now, we have been discussing external changes at puberty. Today we will learn about the changes that happen inside the female body at puberty.

   We can see external changes quite easily, but there are many more changes happening internally which are also important. It is sometimes more embarrassing to discuss these parts because they are more private.

   (Review the ages that boys and girls go through puberty, if necessary.)

   We know that puberty happens to prepare males and females to be able to reproduce. (What do the words "reproduce" and "reproduction" mean? To make a baby, make another similar to the first.)

   When we talk about the reproductive organs, we are talking about the parts of the body that help reproduction happen.

   Today, we will learn about the reproductive organs of the female and how they change at puberty to make it possible for a woman to reproduce.

2. ***Ask*** students about visible changes to girls:

   Breasts develop (breasts may feel sore at times, one breast often develops before the other breast, it can take 3-5 years before breasts are fully grown, breasts are often unequal in size, e.g., one may be bigger than the other).

GIRLS AND PUBERTY . . . CONTINUED

Breast size is primarily determined by genes, and can be affected by nutrition, pregnancy, and/or surgery. Breasts produce milk after pregnancy. A woman's breats can be a source of sexual pleasure.

- ♥ Height and weight increases are normal and healthy. (Because weight is an issue for many young women, be positive when you talk about this change.)

Explain that we all need fat for nutrition and energy. About 25% of the female adult body is fat and 15% of the male adult body is fat; 23% of the female body is muscle and 40% of the male is muscle. This means, generally, that men have more strength (can lift more) and run faster.

Women can endure some kinds of physical stress more easily than men. Women, in general, can survive famine, cold, and drought better and do very well in endurance sports (long-distance swimming, marathons).

- Hips broaden to prepare for the delivery of a baby.

- Armpit hair and pubic hair develop, and hair grows on the legs and arms.

Discuss the following questions:
What are breasts for?
What determines whether a girl will have small breasts, medium-sized breasts, or large breasts?

GIRLS AND PUBERTY . . . CONTINUED

Why might a girl worry about what size her breasts become?
Why do a girl's hips get wider but a boy's don't?

3. ***Introduce*** the female reproductive system.

During the discussion you may wish to have participants complete the worksheet on labelling the reproductive system.

Orient participants to chart being used — e.g., front view or side view and where these organs are located on the body.

External Genitals/Vulva
This is often incorrectly called the vagina.
- The vulva consists of labia majora and labia minora (outer and inner folds of skins) and clitoris.
- They function as protection for the internal sex organs.

Clitoris
- The clitoris is a small, sensitive organ located above the opening to the vagina.
- Its function is one of sexual pleasure.

Three openings
- There are three external openings: the urethra, the vagina, and the anus.

4. ***Define*** masturbation.
Masturbation means the deliberate stroking of the sex organs.
- Masturbation is normal if you do, normal if you don't.
- Females do not ejaculate the same as males do.
- Glands in the vulva and vagina release fluids when a female becomes sexually aroused.

GIRLS AND PUBERTY . . . CONTINUED

5. ***Introduce*** the internal reproductive organs.

Vagina
- This organ leads to the other internal reproductive organs.
- It is used for menstruation, intercourse, and childbirth.
- It is not used for urination; an opening just above the vagina called the urethra is used for this purpose.
- A thin membrane (the hymen) surrounds the vaginal opening, but may not be noticeable in some.

Uterus
- The uterus is also called the womb.
- It is a special place in a woman's body where a baby grows.
- It is very low in the abdomen, nowhere near the stomach, about the size of a fist.
- The uterus, not the stomach enlarges during pregnancy.

Fallopian tubes
- Two tubes on either side of the uterus are called Fallopian tubes.
- Each is a passageway from the uterus to an ovary.

Ovaries
- Females have two ovaries.
- They are reproductive glands.
- They start producing hormones at puberty.
- They hold about 250,000 ova (eggs) until puberty when they start being released—one per month.

Ovum
- An ovum is also called an egg cell.
- It is a special cell which, when united with a male sperm cell, can create a baby—a process called fertilization.

Girls are born with their reproductive organs, but these organs do not start to develop and function until puberty.

GIRLS AND PUBERTY . . . CONTINUED

Tell participants to imagine a very small pear.

Explain that this is the usual size of a mature woman's uterus.

Have participants put a fist where they think the uterus is found in a woman's body.

Explain that the uterus is low down in the pelvis and can grow and stretch in pregnancy—up to the woman's rib cage.

Ask participants where they think their stomachs are. How many were told that babies grow in their mother's stomach? Is this true?

6. ***Discuss*** changes in reproductive organs at puberty.

Vaginal Secretions
- They keep the vagina clean and healthy.
- They signal one of the early changes in puberty. For example, a girl may notice some liquid (or secretions) on her underwear or on toilet paper. It varies from whitish and pasty to clear and slippery. This means a girl's body is starting to mature and her period will be starting.
- Bad odour, itchiness, or unusual discharge may indicate an infection or poor hygiene.

Ovulation
- Once ovaries start producing hormones, the message is given to start releasing one ovum, once a month from one ovary.
- Usually a girl cannot feel this happening.
- If an egg is not fertilized in a day or so, it dissolves.

Menstruation
- The uterus must prepare for growth of a baby if fertilization occurs.
- Hormones from ovaries send message to the uterus to grow a thick, soft lining of tissue and blood.

GIRLS AND PUBERTY . . . CONTINUED

- This lining contains nutrients that would be needed to nourish the egg and sperm if fertilization occurred.
- If the egg is not fertilized in the Fallopian tube, the lining is not needed to nourish a baby, so a message from the ovary (by hormone) tells the uterus to shed the lining. This is called menstruation (having a period), and girls usually menstruate once a month for five to seven days.
- Once the lining is completely shed, a new lining begins to grow.
- Soon another egg is released, and if fertilization does not occur, the egg dissolves and that lining is shed. This continues to happen over and over again. That is why we call it the menstrual cycle.
- This is a normal change of puberty—something to be proud of—not something dirty or bad ***(discuss negative attitudes and language)***.
- Some women experience menstrual cramps which can be relieved with medication.

7. ***Discuss*** personal care during menstruation, using the following script:
   - Menstruation is a normal change of puberty, not a sickness. Usually one can continue to participate in regular daily activities (e.g., physical education classes, gymnastics, swimming).
   - Personal hygiene (i.e., bathing) is even more important at this time as oil secretion from hair and skin may increase and menstrual blood may get dried in pubic hair.
   - Sanitary pads or tampons are used to absorb menstrual fluid.
   - The teacher may want to show samples and explain their use.
   - Always wipe from front to back to help prevent infection.

8. ***Discuss*** the following questions:
   - Why does a girl get a period?
   - How long does a period usually last?
   - What does a girl use to absorb the menstrual blood?
   - How does a woman decide which type of menstrual product she will use?

GIRLS AND PUBERTY... CONTINUED

9. ***Discuss*** the following points:
   - Various sizes of pads are available, as the flow varies.
   - Pads have an adhesive strip which sticks to underwear.
   - It is necessary to wear protection 24 hours a day.
   - Pads should be changed frequently, approximately every 3-4 hours.
   - Pads should be disposed of in a wastebasket, not in a toilet (wrap pad in toilet paper first).
   - Scented pads may irritate some people's skin.

   Tampons
   - Swimming requires the use of tampons.
   - With tampons, menstrual fluid is absorbed within the vagina.
   - Tampons are often not used by girls when a period first starts.
   - Tampons should be changed every 3-4 hours (stress this point).
   - Tampons are held in place by the vagina; they can't get lost or fall out.
   - A very strong string is used to remove the tampon.
   - Dispose of a used tampon in a wastebasket (wrap in toilet paper first).

Adapted with permission from Regional Niagara Public Health Department. (1999). ***Growth and development lesson plans for Grades 5 & 6***; and Toronto Public Health. (1998). ***Changes in you and me***!

THE STORY OF THE MENSTRUAL CYCLE

Read the following story. Each time there is a choice check off the one that is true.

Once upon a time, there was a female reproductive system. Each month, the

☐ uterus ☐ vagina

invited a thick, soft lining to grow along its walls—a lining made up of tissue and blood that contained the nutrients that would be needed to nourish a fertilized

☐ ovary. ☐ ovum.

Once the lining had grown, it waited for the ovaries to do their job. You see, the ovaries contained special reproductive cells, each called an

☐ ovum. ☐ cervix.

Each month, one of the reproductive cells would reach maturity and be released from the

☐ ovaries. ☐ Fallopian tubes.

This month, it was the right one that got to release a reproductive cell. The left one would have to wait until the next month. After the reproductive cell was released it went toward the

☐ ovaries ☐ Fallopian tubes

which waved their numerous arms, grabbed the reproductive cell that had just been released, and gently guided it into one of the tubes. The reproductive cell travelled slowly down the tube. After about a day of travel, it began to dissolve. When it had disappeared, the brain sent a message to the

☐ ovum ☐ lining

telling it that a fertilization hadn't occurred, so it could leave the uterus. Slowly, it passed through the

☐ vagina, ☐ cervix,

into the

☐ vagina, ☐ cervix,

and out of the female's body. As soon as the lining was gone, the uterus invited a new lining to start to grow. This time around, it would be the left

☐ ovary ☐ uterus

and the left

☐ vagina ☐ Fallopian tube

that would do all the work. Then the process would start all over again. This process is called the menstrual cycle.

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SPERM PRODUCTION STORY

Read the following story. Each time there is a choice check off the one that is true.

Once upon a time, there was a pair of testicles. They were held in a special sac called the

☐ scrotum. ☐ seminal vesicle.

This sac could hold the testicles close to the body to keep them warm, or let them hang away from the body to keep them cool. The testicles made special reproductive cells called

☐ sperm. ☐ semen.

Once these cells were made, they would wait to be released from the testicles. Sometimes, they would wait so long that they dissolved. Other times, they would be released from the testicles, make a journey through the male reproductive system, and leave the male's body. The sperm leaving the penis is called an

☐ erection. ☐ ejaculation.

On the day in question, it just so happened that the sperm got to be released from the body. First, the penis became larger, longer, and firmer until it stuck out from the body. When the penis gets this way it is called an

☐ erection. ☐ ejaculation.

This is a normal process of growing up, and can happen for physical reasons, because of sexual arousal, or during a wet dream. Next, the sperm travelled up a tube called the

☐ vas deferens. ☐ urethra.

Along the way, it mixed with the seminal fluid, which was made in the

☐ testicles ☐ seminal vesicles.

Once these two fluids mixed, they decided to call themselves

☐ semen. ☐ urine.

Together they traveled from the vas deferens into a tube called the

☐ seminal vesicle. ☐ urethra.

This tube has two branches, one from the bladder and the other from the vas deferens. When the penis is ready to release semen, a valve blocks off the branch to the bladder so

☐ semen ☐ urine

cannot escape. Only one of the two fluids can pass through the urethra at a time. By this time, the semen was almost at the end of the journey. After travelling through the vas deferens and the urethra, the semen was released from the penis in a process called

☐ erection. ☐ ejaculation.

The erection went away, and the penis became smaller and softer.

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THE FIRST TRIMESTER

The first trimeter (or first 3 months) is a critical time in the baby's life. It's a time of rapid growth and development. It's also a time when the baby is most susceptible to such hazards as smoking, drugs, and x-rays.

1 day

The sperm and ovum unite.

7 to 10 days

The fertilized ovum becomes implanted in the lining of the uterus. The placenta begins to form.

2 weeks

The embryo is now a layered disc on the uterus wall. The mother misses her menstrual period.

4 weeks
0.4 g (0.01 oz.)

The beginnings of the embryo's eyes, ears, nose, spine, digestive tract, and nervous system are present. The tube for the future heart starts beating.

8 weeks
22-24 mm (1 in.)
1 g (.036 oz.)

The fetus now has all the organs that a full-term baby would have. The heart is functioning. Bone formation begins.

12 weeks
9 cm (3.5 in.)
15 g (1/2 oz.)

The baby's sex can be distinguished. "Baby" teeth buds are present. Fingernails and toenails are forming. Immature kidneys secrete urine to the bladder. The fetus can now move in the amniotic fluid, but can't be felt by the mother.

THE SECOND TRIMESTER

During the second trimester, or the second three months of the fetus's life, the brain develops considerably. In fact, most of the brain's development occurs during the period from now until 18 months after birth. During the second trimester, though, the fetus cannot live outside the mother's body because its respiratory and cardiovascular systems are not developed enough.

16 weeks
16 cm (6.5 in.)
100g (4 oz.)

The face looks more human, the head has hair, and the ears stand out. Between the eighteenth and twentieth weeks, the fetal heart can first be heard with a stethoscope. The baby's movements may be felt by the mother. (The mother may not feel the baby's movements until 18 to 20 weeks, especially with the first pregnancy.

17 weeks

The baby begins to store some of the mother's antibodies, which slowly increase until birth.

20 weeks
25 cm (10 in.)
300g (10 oz.)

Eyebrows and eyelashes appear. A fine downy hair (lanugo) appears all over the baby's body and may still be present at birth. The baby's skin is thin, shiny, and covered with a creamy protective coating called vernix. Oil glands appear. The baby's legs lengthen, and the baby can move its legs well. Teeth develop — enamel and dentine are being deposited (can begin as early as 14 weeks). By the end of the fifth month, the baby is about half the length of a newborn baby.

THE THIRD TRIMESTER

During the third trimester, or the last three months of pregnancy, the baby could survive if delivered before full term, but would need special care. The closer to full term, the more ready the baby is to cope with the birth process and to exchange the shelter of the uterus for life in the outside world.

28 weeks 35-37 cm (14 in.) 1100 g (2 lb. 5 oz.)	The baby's body is still lean, but the skin is less wrinkled and red. The baby can now store iron, calcium, and other nutrients.
32 weeks 40-42 cm (16 in.) 1800-2100 g (4 lb. - 4 lb. 7 oz.)	The baby's skin is pink and smooths out as the fat forms under it. The baby develops a sense of taste. The baby becomes aware of sounds outside the mother's body. A boy baby's testicles begin their descent into the scrotum. The pupils in the baby's eyes can react to light.
36 weeks 45-47 cm (18 in.) 2200-2900 g (4 lb. 11 oz. - 6 lb. 5 oz.)	The baby's body is rounded and usually plump. The downy hair on the baby's body begins to disappear. The baby's blood has a high concentration of hemoglobin (this may occur as early as 28 weeks). The baby's skin is smooth, pink, and covered with a greyish-white cheeselike substance (vernix). The baby continues to increase the store of maternal antibodies and thus resist some diseases.
40 weeks 45-55 cm (18-22 in.) 3200 g + (7 lb. +)	Head hair is usually present. The testes of male babies are now in the scrotum, and the labia majora of female babies are now developed.

Adapted from ***Baby's best chance***. (1997). (5th ed.). Province of B.C. © 2002 - Calgary Health Region - ww.teachingsexualhealth.ca

FRATERNAL TWINS

Adapted from ***Sexuality: An education resource book***. P. 302. © 2002 Calgary Health Region - www.teachingsexualhealth.ca

IDENTICAL TWINS

Single Egg
and Sperm

Divides

Common Placenta

Girls

Boys

Adapted from ***Sexuality: An education resource book***. P. 301. © 2002 Calgary Health Region - www.teachingsexualhealth.ca

CHOOSE YOUR REACTION

NAME:

DATE:

TWO KINDS OF SITUATIONS I MANAGE SUCCESSFULLY ARE

1. _____

2. _____

TWO KINDS OF SITUATIONS I WOULD LIKE TO MANAGE BETTER ARE

1. _____

2. _____

USE THE FOLLOWING FLOWCHART TO OUTLINE THE TYPE OF SITUATION YOU WOULD LIKE TO MANAGE BETTER.

A SAMPLE IS DONE FOR YOU.

R-6.1

NAME: DATE:

HOW DO I EXPRESS MYSELF?

CHECK THE STATEMENTS THAT DESCRIBE HOW YOU EXPRESS THE FOLLOWING FEELINGS. USE THE LINES TO LIST OTHER WAYS YOU MIGHT REACT.

WHEN I FEEL ANGRY, I

- ☐ TALK ABOUT IT TO A FRIEND
- ☐ BREAK SOMETHING
- ☐ PRETEND NOT TO BE
- ☐ SULK
- ☐ SHOUT
- ☐ GO FOR A JOG
- ☐ TAKE DEEP BREATHS
- ☐ _____
- ☐ _____
- ☐ _____

WHEN I FEEL SAD, I

- ☐ TALK ABOUT IT
- ☐ CRY
- ☐ TELL MYSELF I'M SILLY
- ☐ GO OFF ALONE
- ☐ HIDE THE FEELING
- ☐ FIND SOMETHING TO DO
- ☐ _____
- ☐ _____
- ☐ _____

WHEN I'M AFRAID, I

- ☐ TELL MYSELF I'M SILLY
- ☐ TRY NOT TO BE
- ☐ TALK ABOUT IT
- ☐ CRY
- ☐ _____
- ☐ _____

WHEN I FEEL BORED, I

- ☐ BUG SOMEONE
- ☐ COMPLAIN
- ☐ BLAME OTHER PEOPLE
- ☐ HIDE THE FEELING
- ☐ TALK ABOUT IT
- ☐ DO SOMETHING USEFUL
- ☐ _____
- ☐ _____
- ☐ _____

PUT A STAR BESIDE YOUR BEST STRATEGIES FOR HANDLING EACH OF THOSE FEELINGS.

HOW I RECOGNIZE MY FEELINGS

I KNOW I'M FEELING ANGRY BY _____

I KNOW I'M FEELING SAD BY _____

I KNOW I'M FEELING FRIGHTENED BY _____

CHOOSING A PLACE AND TIME

SAFE PLACES TO EXPRESS MY FEELINGS

- _____
- _____
- _____

SAFE TIMES TO EXPRESS MY FEELINGS

- _____
- _____
- _____

BARRIERS TO COMMUNICATION

- Message overload—We hear too much speech every day to listen carefully to all of it; we must let our attention wander sometimes.
- Preoccupation—We are busy thinking about something else, which seems more important to us at the time.
- Rapid thought—We are able to understand speech much faster than people are capable of speaking, so our minds tend to wander in the "wait time."
- Lack of effort—Listening carefully is hard work and some people are unwilling to expend the effort to do it well.
- External noise—There are distractions all around us and they make it difficult to pay attention to others.
- Hearing problems—Some people have physiological hearing problems. This can cause frustration for both speaker and listener.
- Faulty assumptions—We sometimes make assumptions that prevent us from listening. For example, if someone is speaking about a topic we are familiar with, we may think we've "heard it all before." Some people will assume that a topic is not important and will stop paying attention.
- Lack of apparent advantages—Sometimes we don't see the advantage of listening to others because we see a bigger advantage in talking. Persuasive speech lets you influence others and can win attention and respect. Talking lets you release energy in a way that listening can't. Since speaking seems to be more advantageous, people often miss the advantages of listening.
- Pretending—We seem to listen but have something else on our minds.
- Stage-hogging—We are only interested in talking about our own ideas and do not care what anyone else has to say.
- Selective listening—We pay attention to only things that interest us.
- Insulated listening—We purposely do not pay attention to something we do not want to hear, like reminders about a job that has to be done.
- Defensive listening—We think that everything the other person says is an attack on us.
- Ambushing—We listen carefully to collect information that can be used against the person at a later date.
- Insensitive listening—We don't try to look beyond the words of a person to understand things that are not being said. We just listen to the words and take them at surface value. For example, when you ask how your friend is and she says "fine" but has tears in her eyes and a shaky voice, you are an insensitive listener if you only hear her say she's "fine" and don't realize that her body language tells you she is upset.

IDEAS FOR PROMOTING ACTIVE LISTENING AND IMPROVING COMMUNICATION SKILLS

Students can

- be aware that listening is a skill that requires practice;
- be aware that there are many things people do that make them poor listeners;
- be aware that part of having a good relationship with friends, family members, and teachers is being a good listener;
- practise active listening at home during family meetings;
- practise active listening when talking to friends who are upset or need to talk;
- practise active listening when discussing issues with parents.

Parents can

- model active listening in family conversations;
- set family meetings to practise better listening skills as a group;
- paraphrase children's spoken messages carefully;
- use I-messages to communicate feelings;
- be aware that children need to have their feelings acknowledged.

Communities can

- provide family workshops on listening and communication skills;
- model active listening (e.g., volunteers in youth clubs and associations).

BARRIERS TO COMMUNICATION

ADD TWO MORE COMMUNICATION BARRIERS TO THIS LIST.

	TO OVERCOME THESE BARRIERS . . .		
TYPES OF COMMUNICATION BARRIERS	I CAN THINK	I CAN SAY	I CAN DO
PUT-DOWNS (CRITICIZES, HURTS OTHERS' FEELINGS)			
INTERPRETING (MAKES JUDGEMENTS ABOUT WHAT OTHERS SAY AND DO)			
TALKING "ME ME" (TALKS ONLY ABOUT HIMSELF OR HERSELF ALL THE TIME, SHOWS NO INTEREST IN OTHERS)			
ADVISING (TELLS PEOPLE WHAT TO DO AND HOW TO DO IT, THINKS "I KNOW BEST")			
INTERRUPTING (SHOWS LACK OF RESPECT FOR OTHERS BY CUTTING IN WHEN THEY ARE SPEAKING)			

THE TRUTHS ABOUT SENIORS

- Chronological age is just that—a method of measuring how many years the body has been around, not how the body performs or feels, or how the brain thinks. The hair may go grey in later years, but personalities don't.
- We don't expect all youth to dream and act alike. Why should we expect anything different from people who've had more time to gather diverse life experiences?
- Only a small fraction of seniors live in continuing care centres or other collective dwellings.
- Most seniors live in private homes with their spouses, families, or friends.
- About one-quarter of seniors live alone.
- One in five seniors lives in a low-income situation.
- Only a small percentage of seniors report incomes over $40,000.
- Seniors spend more time thinking about the past than other age groups mainly because they have so much more past to look back on.
- Many seniors take advantage of continuing brain power to go back to school or learn new trades in their retirement years.
- Seniors may have fewer time constraints after retirement, but many seniors face daily challenges, such as retirement itself, relocation, illness, decreased income, loss of spouse and/or friends.
- Despite these anxieties, many seniors show remarkable resilience in adapting to changes around them.
- Many seniors maintain excellent memories and cope with all kinds of challenges.
- When a senior acts forgetful or confused, people assume they are senile. When a younger person acts the same, people tend to ignore the confusion. Seniors' confusion may be due to medication, fatigue, stress, or illness.
- Most seniors cherish their independence and try to remain in their own homes and survive on their own incomes as long as possible.
- Home care and other services do not make seniors dependent. In fact, these services help many seniors live in their own homes longer and remain independent because of these supports.
- Many seniors have a hard time accepting help. Asking for assistance is often the best thing to do in order to prevent future problems and improve life quality.

Adapted with permission from Alberta Council on Aging. (1999). Myth slaying. In ***Senior friendly toolkit*** (2nd ed). Edmonton, AB: Alberta Council on Aging. Pp. 1-3.

IDEAS FOR PROMOTING CROSS-AGE RELATIONSHIPS

Students can

- teach seniors how to use e-mail;
- organize and participate in school activities involving cross-graded teams;
- organize a senior/junior dance (for some dances, have seniors choose junior partners; and juniors choose senior partners);
- engage in mentorships with younger students or adults in the school;
- volunteer at a local seniors' home;
- volunteer at a local day-care centre;
- offer group baby-sitting services for a variety of community functions;
- volunteer to tutor younger children in the school or neighbourhood;
- plan activities for younger students within the school;
- volunteer as lunch monitors or helpers in classrooms of younger children;
- volunteer as playground supervisors at school and in the neighbourhood;
- volunteer in school day-care programs or breakfast programs;
- invite an adult to a school event;
- read one of your favourite stories to an adult.

Parents can

- spend time with teens and their families;
- volunteer as mentors in the school;
- encourage teens to spend time with grandparents and older relatives when possible;
- encourage outings with other families;
- with their children, visit three households in the neighbourhood and say hello;
- get to know neighbourhood youth (get together once a month to play games or recreational sports);
- become a classroom assistant or tutor;
- eat lunch in a school cafeteria with youth;
- teach a young person a skill, such as knitting, carpentry, gardening;
- become a study buddy;
- befriend a single parent and help nurture the children.

Communities can

- provide supervised cross-age relationship opportunities for teens in local day-care centres or seniors' homes and drop-in centres;
- provide support to volunteer coaches, group leaders, instructors in local youth clubs;
- support and supervise businesses or activities run by teens;
- organize activities and scheduled times for whole families at local pools, skating rinks, parks.

CONSIDER THE ALTERNATIVES

DECISION-MAKING SITUATION OR CONFLICT TO BE RESOLVED: _____

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_____

1 OPTION: _____

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POSSIBLE CONSEQUENCES:

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2 OPTION: _____

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POSSIBLE CONSEQUENCES:

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3 OPTION: _____

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POSSIBLE CONSEQUENCES:

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4 OPTION: _____

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POSSIBLE CONSEQUENCES:

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CLIQUES

Acceptance and membership in a group is something most adolescents consider important. In their book ***Cliques*** (2001), Giannetti and Sagarese write about the social order within middle and junior high schools, the bullying and teasing that has become part of young people's lives, and suggestions for turning situations around. No matter where a child fits within the junior social order, all children are affected by the social order in one way or another.

CLIQUE

A clique is a small exclusive group within a larger group. Some children become members of a group of friends through acts of kindness and earn their peers' esteem in positive or legitimate ways. However, this is not always the case. Diannetti and Sagarese describe a clique as "a group that revolves around more than camaraderie. Cliques deal in social power. Formed around a leader or two, the pack lets it be known that not everybody is welcome. Certain children are dubbed worthy while others are judged not good enough. Excluding becomes a primary activity. The mentality is like a junior country club. The guest list to this invitation-only party is always changing" (p.14).

CLIQUES IN MIDDLE AND JUNIOR HIGH SCHOOLS

- The popular crowd: This is the "cool crowd" filled with the beautiful, athletic, charming, and affluent students. This group makes up about 35 percent of the population. They have the most friends, socialize the earliest in school, and appear to be having fun. They have prestige. But they also have other worries, such as whether or not they will continue to look and act "right" so they will be able to stay in the group.
- The fringe or "wannabes": This group is made up of the 10 percent of students who hover around the outside of the popular crowd, copying their dress and style, trying to be accepted. At times they are invited in, but only temporarily. When they are made part of the "cool crowd," they usually compromise their true friends but feel it is worth it for even short-term acceptance.

there's more ➜

CLIQUES . . . CONTINUED

- The middle friendship circles: Another 45 percent of students fit into this group. Students in the middle friendship circles form groups with a small circle of friends. They are the most satisfied and content, and usually have the strongest sense of self-worth even though they are considered to have lower status than the popular kids. Sub-groups within the group have their own identities and cultures that set them apart. Some care about being seen as different, others do not.
- The loners: The last 10 percent of students fit into this group of boys and girls who have no friends. They sit alone, looking on at all the others who have group status and friends. Most of them wish to be involved in a group but believe they will never be accepted. Many of these children have potential that has not yet been realized—by themselves or their peers.

ADVANTAGES OF POSITIVE GROUP MEMBERSHIP

- feeling of belonging
- place to make friends
- opportunities to learn to deal with peer pressure
- practice for dealing with cliques in teen and adult years

DISADVANTAGES OF CLIQUE/ALLIANCE MEMBERSHIP

- Conformity is learned through having to follow strict rules about things such as whom to talk to, sit with, or dress like.
- Those who are not part of the clique feel like outcasts.
- Being asked to leave the group can be painful.
- Some individuals may sacrifice their own wishes and styles to be accepted because they are not strong enough to stand up for themselves.
- Cliques can provide an arena for bullying.
- Students who want to do what's right will often sit in silence rather than stand up for someone who is being ridiculed in order to avoid being ridiculed themselves.

IDEAS FOR PROMOTING POSITIVE GROUP INFLUENCE

Students can

- learn to identify the various small cliques within their school or grade;
- recognize that membership in positive groups allows them to develop relationships, learn skills from others, and choose responsible friends;
- recognize that memberships in some groups can have negative consequences (for example, when group members require them to break a rule or go against their personal values in order to fit in);
- develop personal ideas about what makes a good friend or group of friends;
- make conscious choices about who their friends are, based on their personal ideas about friendship and acceptance;
- learn when not to compromise for the sake of the group;
- talk to parents or mentors if issues regarding cliques and alliances create problems at home, at school, or in the community.

Parents can

- learn to listen attentively when children talk about social issues, and take them seriously;
- help children identify the cliques in their school and their positions in the social order;
- be accepting of their children's friends and aware of children's need to belong;
- encourage children to have a variety of friends and provide opportunities for them to meet other youth in various settings;
- offer to transport and supervise children and their friends for group activities;
- talk to children about who their friends are and why they have chosen them;
- help children generate their own ideas about friendship and group membership;
- recognize that membership in cliques can be a training ground to help teens learn how to deal with peer pressure;
- have an open and fair family discussion if there is a concern about children's associations.

Communities can

- support proposals for youth centres and activities to provide safe and entertaining places for teens and pre-teens to gather with friends;
- build youth recreational facilities in areas where adult supervision is possible;
- provide youth clubs and associations through local agencies, allowing children to meet and form a variety of groups and friendships.

GROUP DECISION MAKING

DECISION MAKING

Decision making is an important part of the problem-solving process. In groups, individuals need to feel that their voices have been heard so that they can accept group decisions. The method used to reach a decision or resolve a conflict will determine the support for that decision later on.

Johnson and Johnson (1975) outline five major characteristics of an effective group decision:

- resources of the group members are well used
- time is well used
- decision is of high quality
- decision is put into effect by all members of the group
- problem-solving ability of the group is enhanced.

ADVANTAGES AND DISADVANTAGES OF GROUP DECISION MAKING

ADVANTAGES

- increased input—generally speaking, two heads are better than one and three heads are even better than two
- increased diversity—groups usually guarantee a diversity of opinions
- increased acceptance—a group decision is more likely to be accepted

DISADVANTAGES

- increased time to make a decision
- pressure on individuals to conform
- potential domination of some group members

FACTORS THAT AFFECT GROUP DECISION MAKING

Group decision making is more difficult if

- there are unresolved conflicts between group members
- members have loyalties to others outside of the group who disagree with the group goals and ideas
- there is not enough time to make an effective group decision.

there's more ➜

GROUP DECISION MAKING ... CONTINUED

METHODS OF GROUP DECISION MAKING

Decisions can be made by
- agreement of the entire group (consensus);
- majority vote and majority rule (which may seem like a democratic way to handle differences of opinion but is really a win/lose situation and can harm a group's productivity and damage relationships within the group);
- the member with the most authority after a group discussion of the issues;
- the member with the most authority without a group discussion;
- the minority of group members

CONSENSUS

The most effective decisions are those made through consensus. This method of group decision making is also the most time-consuming. Working toward consensus is a win/win situation and the process builds group productivity and relationships. Though individuals may not have chosen the final decision, they will be able to accept and support it because they were involved in the process.

Consider the following guidelines for assisting groups in creating consensus.
- Members should present positions as clearly and logically as possible while listening to and considering the reactions of others.
- When dealing with important issues, avoid decision-making strategies that don't build consensus, such as majority rule, tossing a coin, or averaging members' positions.
- Seek out differences of opinions. Differing points of view can increase the information the group has to work with.
- Aim for a win/win solution. Look for the solution that is the most acceptable alternative for all members.
- Ensure that underlying assumptions are addressed and that all members participate.

Adapted with permission from D.W. Johnson and F. P. Johnson. (1975). ***Joining together: Group theory and group skills***, 1/e. Boston: Allyn and Bacon, Pp. 58-62, 64-65.

there's more ➜

GROUP DECISION MAKING . . . CONTINUED

SAMPLE MODEL OF GROUP DECISION MAKING

One effective group decision-making technique involves the following steps:

- The group clearly states the problem or issue.
- Before discussion begins, each person writes down his or her ideas relating to the issue.
- Each member presents his or her ideas to the group until all original ideas are exhausted. All ideas are recorded. Group members suggest as many alternatives as possible in a given time frame, without criticism. The strength of this technique comes from the fact that one idea leads to another.
- The group discusses each idea and, with a focus on clarifying the suggestion, asks relevant questions. The list is usually reduced as some suggestions tend to overlap.
- Each member silently and independently ranks the compiled list.
- The final decision can be made by selecting the alternative with the highest ranking. Many groups discover that the top three or four solutions have features that can be blended into the final decision.

NAME: DATE:

INFLUENCES ON DECISION MAKING

QUESTIONS YOU NEED TO ASK TO HELP YOU MAKE THIS DECISION.

ESSENTIAL SKILLS for LIFE and WORK

Essential Skills	Learning Outcomes
Reading Text	- to scan for specific information/to locate information - to skim for overall meaning/to get the gist - to read the full text to understand and to learn - to read the full text to critique or to evaluate
Use of Documents	- read and interpret information - enter information - create document to display information
Writing	- to organize/remember - to keep a record/to document - to inform/to request information - to persuade/to justify a request - to present an analysis or comparison - to present an evaluation or critique - to entertain
Numeracy	- money math - scheduling or budgeting and accounting math - measurement and calculation math - data analysis math - numerical estimation
Oral Communication	- to greet - to take messages - to provide/receive information, explanation, direction - to seek/obtain information - to co-ordinate work with that of others - to discuss (exchange information, opinions) - to persuade - to facilitate/animate - to instruct, instil understanding or knowledge - to negotiate/resolve conflict - to entertain
Thinking Skills	- problem solving - decision making - job/task planning and organizing - use of memory - finding information

ESSENTIAL SKILLS for LIFE and WORK

Essential Skills	Learning Outcomes
Working with Others	- the ability to work in pairs or teams to promote efficiency and productivity - the ability to mentor others or accept instruction from others - the ability to assume different roles in a team (i.e., leader) - the ability to work with co-workers of both genders and from a variety of cultures
Computer Use	- basic information entry/no software knowledge required - use of familiar software functions - use of advanced software features to perform multiple tasks/operations - extensive use of software features and packages/integration of tasks - expertise in programming and network design/set-up
Continuous Learning	- as part of regular work activity - from co-workers - through training offered in the workplace - through reading or other forms of self-study - through off-site training
Critical Thinking	- this 10th essential skill is currently under development

IDEAS FOR PROMOTING VOLUNTEERISM AND SERVICE LEARNING

Students can

- observe how they help others through participation in volunteer activities;
- volunteer in primary classrooms;
- volunteer to do tasks, such as feeding pets and shovelling the walk, for trusted neighbours while they are away or unable to do them on their own.

Parents can

- model service by volunteering in the school, community, or neighbourhood;
- talk about good experiences in volunteer positions or tasks;
- ask children about their class volunteer experience;
- plan a volunteer task as a family, starting with helping out people in the family or neighbourhood;
- aid children in selection of items for donation;
- reward children for volunteering to do tasks for each other within the family.

Communities can

- support organizations, such as Big Brothers or Big Sisters, that demonstrate benefits of volunteering;
- involve elementary classes in local charities, such as presentation of holiday hampers through local service clubs.