Teaching Puberty: You Can Do It!

Growth & Development Curriculum Support for Grades 5 and 6

Appendix A

Anonymous Question Box

The discussion of body changes during puberty lessons will raise many questions for students – questions that they may be reluctant to ask openly in the classroom.

The anonymous question box is an important tool that will increase students' ability to get the information they need.

The questions students ask will also assist the teacher to evaluate their learning.

Strategies to help the teacher and students use the question box:

- All ground rules discussed in class apply to the question box including:
 - o do not use anyone's name in a question
 - o no question is a stupid question
 - the teacher is the only person who will look at the guestions in the box
 - o there will be no questions of a personal nature
 - use whatever word you know if you don't know the dictionary word
- Let students know when questions will be answered (e.g., at the beginning or end of each class, at the end of all sessions).
- Discuss and decide with students an appropriate, secure place in the classroom to put the question box.
- Reword any question that would disclose to other students the identity of the questioner.
- e.g., "I've got the biggest breasts in class and kids tease me. What can I do?" consider rewording to "Why do some kids tease other kids when their bodies start changing, and what can you do about it?"

Four Broad Categories of Student Questions:

- Requests for information
 e.g., When does puberty start? How are babies made?
- 2. Students looking for facts e.g., Am I normal? Is it okay to have a wet dream every night? I got my first period this summer and haven't had one since then is something wrong?
- 3. Permission-seeking questions
 - * students are requesting information that will help them make decisions about their behaviour (e.g., permission to make decisions and not engage in certain activities)
 - e.g., At what age can you start having sex?
- 4. Social Location questions
 - * although some questions may seem shocking or inappropriate to some teachers, it is important to consider the social location of the student and what life experiences may have prompted this student to ask this question in this way. We recommend the teacher attempts to consider the underlying core of the question and try to speak to that.
 - e.g., for a question such as "How many guys have you slept with?" consider that this student may be seeking information regarding the number of sexual partners that is permissive. An appropriate answer may be "individual adults make their own decisions about the number of sexual partners that they personally are comfortable with".

Other Information for Teachers

Students may ask questions that are an attempt to embarrass the teacher. Addressing the question in a straight-forward way diffuses the situation. For example, upon receiving the question "How many people have you had sex with?", the teacher can read the question and say "I won't answer that question. It is personal. We have ground rules in this class that say we will not ask personal questions. I can tell you that some people my age have never had sex; some have had sex with only one partner; some have had sex with many partners."

Each question can have an element of more than one group – it may seem shocking that a student in grade 5 would ask about blow jobs, but it may just be a simple request for information about something they have heard about but do not understand.

Some shock questions will be inappropriate for the classroom. Review the ground rules with students. If the language is shocking or inappropriate, reword the question. If the content of the question is inappropriate, indicate to the students that all questions in the box were not answered today. Then suggest that students speak to the teacher personally if they asked a question that was not answered and they still desire an answer for it.

If the question is a disclosure of sexual abuse (e.g. "Someone has been touching me down there."), reword the question to prevent students from trying to guess who asked the question. Change the question to "What happens if an adult touches a child's genitals?" or "What if an adult touches a young person in a sexual way?" In the answer, indicate that it is illegal for an adult or older teen to have sex with a child or make the child touch them in a sexual way. The adult or older teen that is touching someone inappropriately needs help. It is never the child's fault. Often the adult or older teen will tell the child they must keep it a secret. The child who is being touched or forced to do something must tell another adult that they trust, like a parent, teacher, or neighbour. They can also contact Kids Help Phone (www.kidshelpphone.ca or 1-800-668-6868) for advice on how to get help.

Teachers should review their school board's policy about sexual abuse disclosure before beginning Human Development & Sexual Health classes.

Suggestions for Answering Questions:

Review the questions in the box ahead of time to prepare the answers. Consult other teachers, the Durham Sexual Health Clinic (905-433-8901 for Oshawa and 905-420-8781 for Pickering), or your assigned school nurse if a question is difficult to answer.

Some teachers choose to use the following Four Point Plan in answering each question:

1. Self-Esteem

- encourage students to value themselves and to respect others
- remember, the way that a teacher answers a question will show that the question is valued and the person who asked it is respected (e.g. "This is a great question. I'm glad someone asked it.")

2. Facts

- state the facts about the question
- dispel myths
- o if you do not know the answer, do research to find the answer

3. Values

- on many sexual health issues, value and opinions vary greatly (e.g., abortion, non-marital sex, homosexuality)
- answer questions in a way that enhances respect for self and others, and teaches students that it is okay to have different views

4. Responsibility

- students' actions have consequences for both themselves and others
- students are responsible for their own actions
- students are learning to take responsibility for their own health and wellness

Appendix B

Glossary

ableism discrimination in favour of able-bodied people

aggressive communication

a communication style in which someone expresses their needs or desires in a way that

disrespects, puts down, or violates the rights of others

anus the opening through which stool (feces/poop) leaves the body (note: the anus is part of

the digestive system, not part of the reproductive system)

assertive communication

a communication style that is respectful of the other person while standing up firmly for

yourself

assisted reproductive technologies

a general term referring to methods used to achieve **pregnancy** by artificial or partially

artificial means; includes AI (artificial insemination), IVF (in vitro fertilization), ICSI

(intracytoplasmic sperm injection), IUI (intrauterine insemination)

when a person is attracted to, or sexually interested in, people of both genders (male and

female)

bladder hollow, muscular organ in the pelvis that collects urine before it exits the body through

the **urethra** (note: the bladder is part of the urinary system, not part of the reproductive

system)

breasts glandular organs located on the chest; at **puberty**, if sufficient **estrogen** is produced, milk

glands and ducts develop for the possibility of feeding offspring

cervix the lower part of the uterus, with an opening into the vagina; the cervix must dilate open

to accommodate the birth of a baby

classism prejudice against or in favour of people belonging to a particular social class

clitoris a sex organ that is located between the labia at the upper end of the vulva; the only

function of the clitoris is pleasure

circumcision surgical procedure that removes the foreskin of the penis

cis (short for cisgender) a term used when a person does not change or does not want to

change their gender or sex; the male feels like a boy or man, and the female feels like a girl

or woman

conception the moment that a **sperm** and an **ovum** unite

crush slang term meaning 'a temporary affection'; often unidirectional

damp dreams

a release of vaginal fluid while sleeping

diversity the many unique characteristics that people possess to distinguish them as individuals

ejaculation the act of fluid coming out of the genitals during orgasm; this can happen during sex or

while asleep (nocturnal emission)

embryo the multicellular group of cells that develop into a **fetus** (from **conception** to 8 weeks)

erection when blood flows into the spongy tissue of the **penis**, making it harder and larger

estrogen a sex **hormone** made mainly in the **gonads**; it causes body changes during **puberty**

fallopian tube

tube that the **ova** pass through as they move from the **ovaries** to the **uterus**

fertilization the joining of a **sperm** cell and an ovum; if the fertilized ovum gets to the uterus and

implants inside, then pregnancy begins

fetus the unborn offspring of a mammal, from 8 weeks until birth

foreskin loose skin that covers the tip of the **penis**

gay when a male is attracted to, or is sexually interested in, other males. Gay can also be used to

describe women attracted to someone of the same gender, although lesbian is the more

common term for women

gender the social difference between men and women that is learned, and though deeply rooted

in every culture, is changeable over time, and has a wide variation within and between

cultures1

genderqueer

a person who does not subscribe to conventional **gender** distinctions, but identifies with

all, none, or a combination of genders

gender expansive

some people feel that the traditional ways of being a "boy" or "girl" do not fit for them. They

live their lives showing that there are many ways to be a girl, boy, both or neither²

gender identity

a person's internal sense or feeling of being male or female which may or may not be the

same as one's biological sex

genitals sex organs located on the outside of the body, including the vulva, clitoris, penis, and

scrotum

gonads the **testicles** and **ovaries**

heterosexual

when a person is attracted to, or sexually interested in, someone of the opposite gender

homophobia dislike or prejudice against homosexual people

homosexual when a person is attracted to, or sexually interested in, someone of the same gender

¹ Elementary Teachers' Federation of Ontario. (2007). Roots of equality: Gender-based violence (GBV): Workshop for grade 7 & 8 girls. Retrieved from http://www.etfo.ca

² HRC Foundation. (2019). LGBTQ+ definitions for children. Welcoming Schools - Human Rights Campaign. Retrieved from https://welcomingschools.org/resources/definitions-lgbtq-elementary-school

hormones chemical messengers made in the body – **estrogen**, **progesterone**, and **testosterone** are

the sex hormones that start the changes of puberty

internet safety

the security of people and their information when using the world wide web (also known

as cyber safety)

intersex a general term used for a variety of conditions in which a person is born with a

reproductive or sexual anatomy that does not seem to fit the typical definitions of female

or male³

labia the inner and outer folds (lips) of skin that surround the vaginal opening; the outer pair

is larger and hair grows on them, while the inner pair is smaller and made of a mucous membrane. These folds of skin help cover and protect the **vagina** and the **urethra**

lesbian when a female is attracted to, or sexually interested in, other females

LGBTQ acronym for Lesbian, Gay, Bisexual, Trans*, Queer or Questioning; people often use LGBTQ

to mean all of the communities included in the acronym LGBTTTQQIAA (Lesbian, Gay, Bisexual, Transgender, Transsexual, TwoSpirit, Queer, Questioning, Intersex, Asexual, Ally)

menstruation

the periodic discharge of bloody fluid from the **uterus** (also known as a period)

menstrual cup

a reusable silicone cup, worn internally to collect menstrual flow

nocturnal emission

an **ejaculation** of **semen** when sleeping (also known as a wet dream)

orgasm an intense, pleasurable whole body feeling that happens at the height of sexual

excitement

ovary gonad that stores **ova** (see ovum) – most female bodies have two ovaries (one on each

side of the **uterus**) at the ends of the **fallopian tubes**

ovulation when an **ovum** is released from the ovary – usually 14 days before the next period of

menstruation

ovum the female reproductive cell – stored in the **ovaries** and released on a monthly cycle (also

known as 'egg cell')

passive communication

a communication style in which someone avoids expressing their feelings or opinions and

standing up for themselves

penis the sex organ on the outside of the body between the legs – made of soft, spongy tissue

and blood vessels; the penis is very sensitive and can give a feeling of pleasure when it is

touched

³ Intersex Society of North America. (2008). Frequently asked questions. Retrieved from www.isna.org/faq

pituitary gland

small, pea-shaped organ at the base of the brain; responsible for growth and for producing hormones that communicate with other glands – during **puberty**, it causes the **testicles** and **ovaries** to produce hormones responsible for the developmental changes

pregnancy the period of time from **conception** to birth

progesterone

a sex hormone made mainly by the ovaries; it causes body changes during puberty

prostate a gland below the **bladder** in males which releases **seminal fluid**

puberty the period of change and development when children's bodies start to mature and

become adult-like

pubic hair the hair that grows around the **genitals** starting at **puberty**

rectum the final section of the large intestine, ending at the anus (note: the rectum is not part of

the reproductive system, but is part of the digestive system)

scrotum the soft sac of wrinkled skin that covers and protects the **testicles**

self-esteem a person's overall sense of worth or personal value

semen the whitish, sticky fluid that contains **sperm** and comes out of the **penis** during

ejaculation

seminal fluid the fluid component of semen, excluding the sperm

seminal vesicles

a pair of small tubular glands that produce seminal fluid

sexual intercourse

often refers to penetrative sex involving the **penis** and **vagina**, but can mean any type of sexual activity that involves the penetration of an orifice including the mouth (oral sex) or anus (anal sex)

sexual interference

when a person under the age of 16 is touched for sexual purposes

sexual orientation

describes whether a person is attracted to someone of the same gender, opposite **gender**, or both; **sexual orientation** may or may not change over time (**homosexual**, **heterosexual**, or **bisexual** are terms often used to describe someone's sexual orientation)

sperm the male reproductive cell – made and stored in the **testicles**

spermatogenesis

sperm production – this process begins when a male is part way through **puberty** (after the growth spurt and growth of the genitals and **pubic hair**/underarm hair)

testicles the two small egg-shaped organs where **sperm** are produced and stored; protected inside

of the **scrotum** and located behind the **penis**

testosterone

a sex hormone that is made mostly by the gonads; it causes body changes at puberty

toxic shock syndrome

a rare, life-threatening illness caused by toxins made by bacteria – tampons left inside of the body too long are associated with these bacteria

trans*

a term used when a person does change or does want to change their gender or sex. This may include transsexual people who want to change their physical body through hormones or surgeries, transgender people whose gender changes but not necessarily their body, and **genderqueer** people who see themselves as a combination of both masculine and feminine or neither

transphobia dislike or prejudice towards trans* people

Two-Spirit

an English term coined to reflect specific cultural words used by First Nation and other indigenous peoples for those in their cultures who are gay or lesbian, are trans*, or have multiple gender identities; historically, Two-Spirit persons were spiritual leaders and healers and were revered by their community4

urethra

the small tube that carries urine from the **bladder** to the outside of the body; the urethra is usually located either at the tip of the penis or just above the opening to the vagina (below the **clitoris**) (note: in male bodies, the urethra is part of the reproductive system and urinary system)

uterus

the hollow, muscular organ that is found inside the lower pelvic area; it is connected to the fallopian tubes and opens into the vagina via the cervix. This is the place where a fetus grows during a **pregnancy**

wet dream

a release of **semen** and **seminal fluid** from the penis while sleeping (also known as nocturnal emission)

vagina

muscular, tunnel-like organ that leads from the opening in the vulva to the cervix

vas deferens tubes that allow sperm to travel from the testicle to the urethra

vulva

external genitals, including the labia and the clitoris

zygote

the cell formed by the union of the ovum and sperm, that may divide and grow into an

embryo and eventually a fetus

Toronto District School Board, Gender Based Violence Prevention. (2014). Definitions. Retrieved from http://www.tdsb.on.ca/ AboutUs/Innovation/GenderBasedViolencePrevention/LinksandResources.aspx

Appendix C: Facial Expressions (1)



Appendix C: Facial Expressions (2)



Appendix C: Facial Expressions (3)



Appendix C: Facial Expressions (4)



Appendix C: Facial Expressions (5)



Appendix C: Facial Expressions (6)



Appendix C: Facial Expressions (7)



Appendix C: Facial Expressions (8)



Feelings List

disturbed	uninterested	restless	frustrated
shocked	surprised	troubled	aggravated
uncomfortable	uneasy	unsettled	annoyed
impatient	irritated	angry	worried
heartbroken	hurt	lonely	terrified
miserable	sad	depressed	unhappy
moody	panicked	gloomy	joyless
frightened	crushed	disappointed	afraid
embarrassed	ashamed	distracted	guilty
bored	resentful	disgusted	tired
horrified	upset	lost	tense
anxious	nervous	hesitant	stressed out
helpless	confused	pain	jealous
miserable moody frightened embarrassed bored horrified anxious	sad panicked crushed ashamed resentful upset nervous	depressed gloomy disappointed distracted disgusted lost hesitant	unhappy joyless afraid guilty tired tense stressed out

affectionate	compassionate	friendly	loving
sympathetic	tender	warm	alert
curious	thrilled	fascinated	interested
intrigued	confident	merry	good-humoured
content	joyful	glad	cheerful
delighted	empowered	open	proud
safe	secure	excited	amazed
eager	energetic	lively	enthusiastic
passionate	peaceful	calm	comfortable
fulfilled	mellow	quiet	relaxed
relieved	satistifed	trusting	renewed
rested	revived	involved	stimulated

Appendix E: Assertive Communication

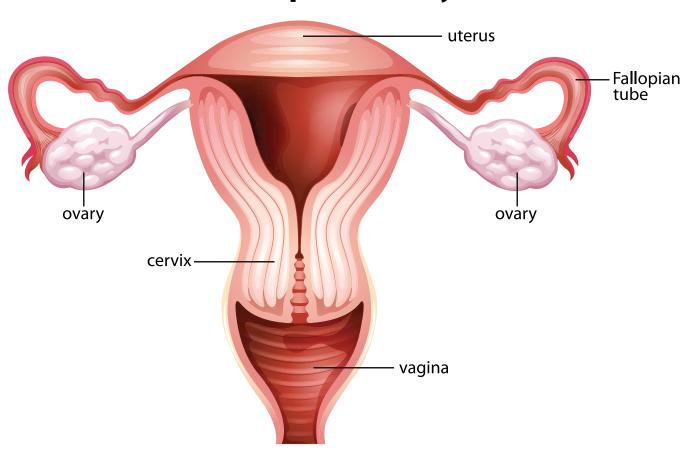
Ass	Assertive Communication Formula:					
l fe	eelwhen	_and I want				
Ехс	ample: I feel upset when I'm made fun of and I want you to stop.					
Dir	rections: Using the assertive communication formula write an	assertive statement for each situation				
1	Your sister is playing her music too loud.					
	Tour sister is playing her masic too load.					
2	Varia annia in altra a la santa anno farile antiga de al anno an	. la., & ., ., ., l., ., ., ., ., ., di ala/k al a ik				
2.	Your cousin is always blaming you for leaving the door open	but, you know you alan't do it.				
2	A friend calls you stunid when you make a mistake					
3.	A friend calls you stupid when you make a mistake.					
1	A friend keeps borrowing your new marker without asking.					
4.	A mena keeps borrowing your new marker without asking.					



Appendix G: Anatomical Diagrams (1)

Internal Female Reproductive Organs

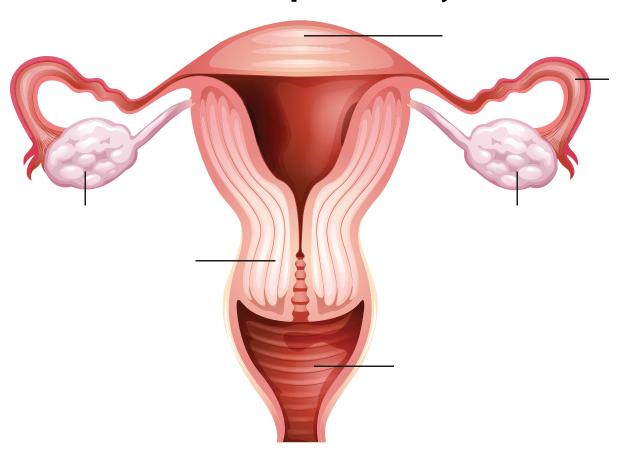
Female Reproductive System



Appendix G: Anatomical Diagrams (2)

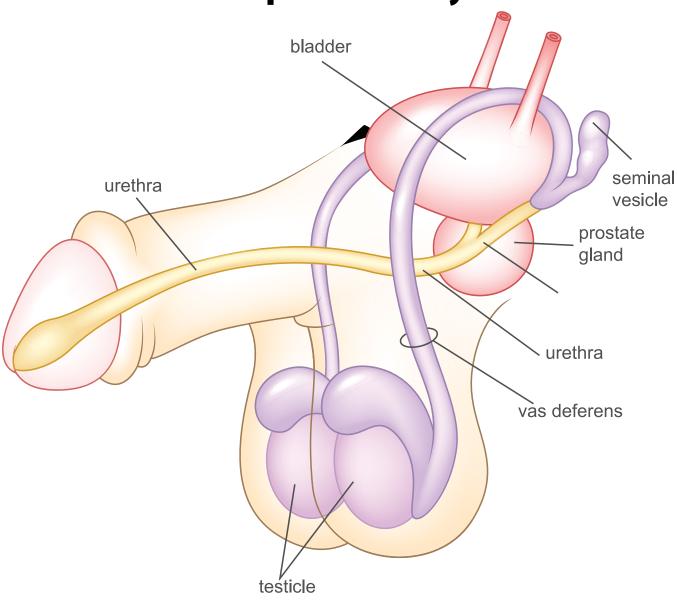
Internal Female Reproductive Organs

Female Reproductive System



Internal Male Reproductive Organs

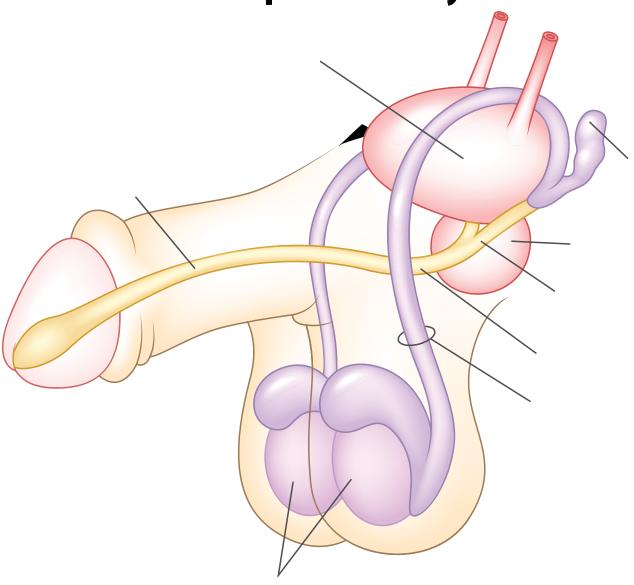
Male Reproductive System



Appendix G: Anatomical Diagrams (4)

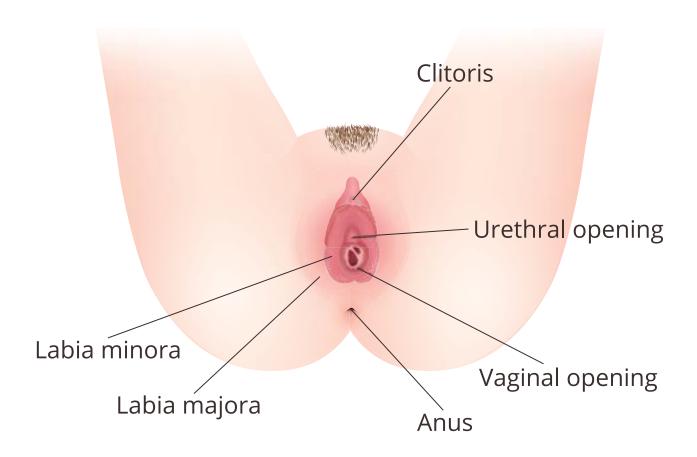
Internal Male Reproductive Organs

Male Reproductive System



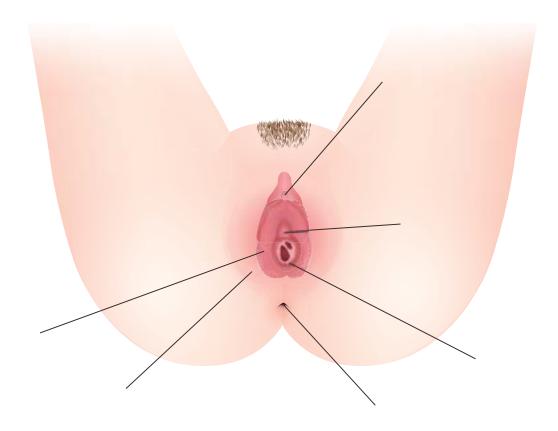
External Female Reproductive Organs

ANATOMY Female External Genital Organs



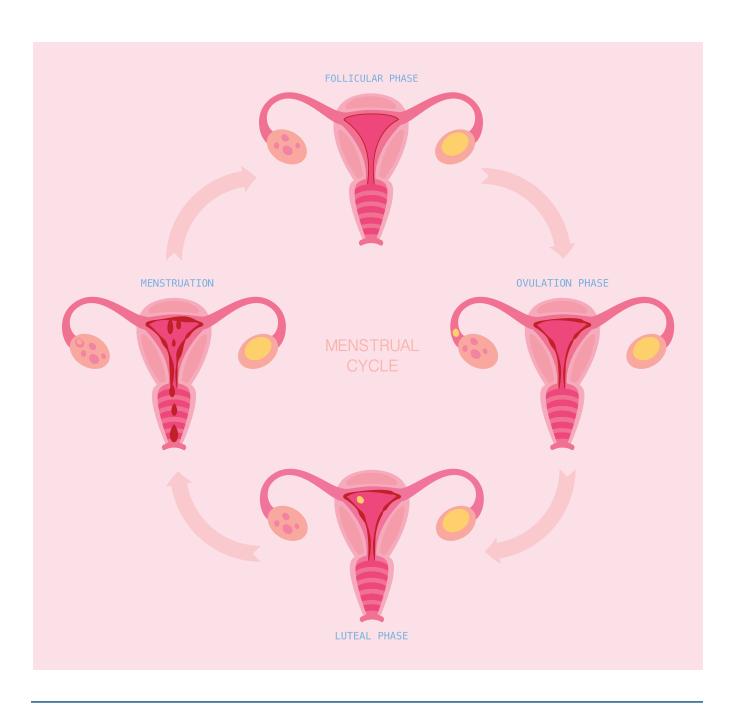
External Female Reproductive Organs

ANATOMY Female External Genital Organs



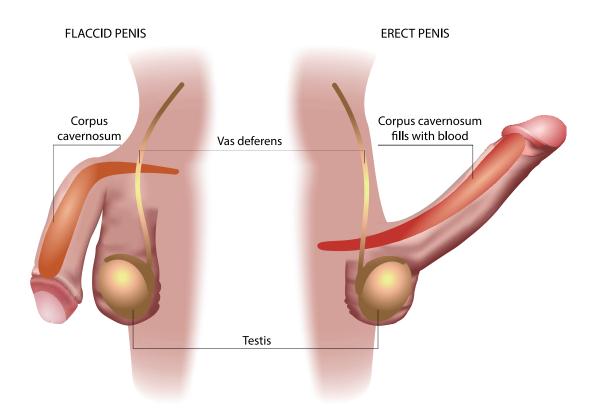
Appendix G: Anatomical Diagrams (7)

The Menstrual Cycle



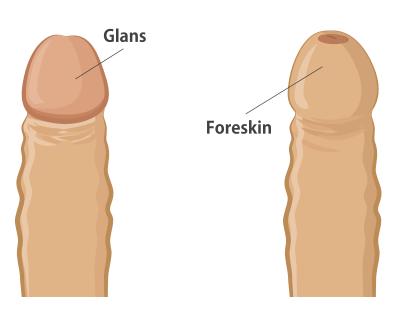
Appendix G: Anatomical Diagrams (8)

Penis



CIRCUMCISED PENIS

UNCIRCUMCISED PENIS



Appendix H

LETTER FROM CHRIS

My name is Chris and I want to tell you what's happening to me. It seems like 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 of the things 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 supposed to happen 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 great. Like B.O. (body odour). The first time I noticed it, I thought it was coming from someone else! Now I realize it's not too bad if I wash often, use deodorant, and change my shirts and socks before they get stinky!

A really dirty trick, though, is acne. I remember I was getting ready to go to a party when I looked in the mirror and saw this big zit staring back at me! I went to the party anyway. I noticed that many other kids had the same or a worse time with their zits.

There's one thing I get kind of embarrassed about. When I was at the party the other night, I was with someone I "like" (I'm not mentioning any names). I got this funny feeling "down there." It was strange, but felt good at the same time. I wonder if that's normal.

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

How to Handle Harassment in the Hallway

It is vital to stop harassment immediately! Remember that homophobic, transphobic and gender-based put-downs and actions hurt everyone. Homophobic, transphobic and gender-based put-downs and actions are bullying. Bullying hurts the person targeted, the witnesses, and the person bullying. Act right away! Do not let harassment – verbal or physical -go on for even a minute. Make it clear that Harassment Is Never Okay!

STOP the harassment or hurtful behaviour

Interrupt the hurtful behaviour or comment

Make sure everyone in the vicinity can hear you. You want everyone – all the youth and adults nearby- to know that all young people are safe in this place

Do NOT pull the student aside for a confidential discussion- stopping the harassment should be as public as the harassment has been.

IDENTIFY the harassment. NAME the hurtful behaviour

Label the behaviour: "you just put someone down based on perceived (sex, race/ethnicity, sexual orientation, gender identity or expression, age, health status etc.)" Or "You just shoved someone."

Put the spotlight on the behaviour. Do NOT say anything to imply that the person being harassed belongs to the group named above. Everyone needs to understand that what was said or done is unacceptable.

EXPLAIN why the behaviour is hurtful and prohibited

Identify the offense and its consequences: "Homophobic name calling is hurtful to everyone who hears it. At this school, we respect everyone and are responsible for the impact of our words/behaviours."

ASK for a change in future behaviour

Personalize the response: "Chris, please think about what you say. This language isn't what we would expect of you."

Quietly, check in with and reassure the person who was harassed: "Are you okay? Do you want to talk with me or someone else? Please let me know if this happens again, and I will take further action. Everyone should feel safe and be safe here. What happened was totally unacceptable, and you are very important to all of us."

Appendix J

It's Your Duty!

A Guide to Reporting Child Abuse & Neglect

The Ontario Child, Youth, and Family Services Act states that members of the public, including professionals who work with children, must promptly report any suspicions that a child is or may be in need of protection to a Children's Aid Society. A person has an ongoing duty to report when there are additional reasonable grounds to suspect abuse or neglect, or risk of abuse or neglect, even if he or she has made previous reports with respect to the same child.

Please refer to your school board policies and procedures for additional information.

What do I report?

PHYSICAL ABUSE includes all acts by a caregiver that results in physical harm to a child.

SEXUAL ABUSE occurs when a person uses his/her power over a child and involves a child in any sexual act. This sexual act is intended to gratify the needs of the abuser. Touching is not the only criteria in defining sexual abuse.

EMOTIONAL ABUSE is a pattern of overt rejecting, isolating, degrading, terrorizing, corrupting, exploiting, denying emotional responsiveness, and punishing a child's attempts to interact with the environment.

NEGLECT is the chronic inattention or omission on the part of the caregiver to provide for the basic emotional and/or physical needs of the child, including food, clothing, nutrition, adequate supervision, health, hygiene, safety, medical and psychological care and education. The child who does not receive adequate emotional, cognitive and physical stimulation, physical care and nutrition may experience lags in development. (Child neglect may be easily confused with poverty or ignorance, or may be associated with parents who are overwhelmed with other problems. However, because chronic neglect results in physical and emotional harm to a child, it cannot be ignored, whatever its cause).

EXPOSURE TO FAMILY VIOLENCE includes witnessing or hearing violent acts or threats of physical, sexual, or emotional harm between intimate partners or family members. This may include direct involvement or experiencing any aftermath. (All incidents of family violence must be reported. The child does not have to be present to be impacted by it).

What do I do when I suspect abuse or neglect?

Do not investigate. You may need to clarify the nature of the complaint. If this is a third party disclosure, do not interview the victim. The responsibility to report lies with the employee or volunteer who suspects abuse or neglect. Do not discuss your concerns prior to making the call to a Children's Aid Society.

What if I'm unsure if I should make a report to a Children's Aid Society?

If you are in doubt about whether or not to make a report, consult a Children's Aid Society intake worker. They will decide if you need to make a report.

What do I do when I report abuse or neglect to a Children's Aid Society?

When making the call be objective and non-judgmental when describing what you have seen or heard or what your suspicion is based upon.

What should I ask when I contact a Children's Aid Society?

- Will an investigation be undertaken as a result of the report? If yes, who, how and when should the parents be contacted?
- 2. Will the student be interviewed?
- 3. Do the investigators plan to come to the school or home? When? Will they be investigating or only consulting?
- 4. May the student go home at lunch or after school? If the student attends child care, can they be released to the child care? What information can be shared with the child care?
- 5. Are there any instructions for the supervision/release of the student? What happens if the parent/ guardian arrives at the school?
- 6. What, if any, information should be shared with the student and/or family about having made the referral?
- 7. What is the name and number of the Children's Aid Society worker?
- 8. Will my name be disclosed?

Children's Aid Societies:			
Durham Catholic Children's Aid Society 905-576-6150 ext. 22850	Jewish Family & Child Services (416) 638-7800		
Children's Aid Society 905-433-1551	Dnaagdawenmag Binnoojiiyag Child & Family Services (705) 295-7135		

What are my next steps?

 Inform the principal or supervisor that you have reported abuse or neglect to a Children's Aid Society or Police.

Complete the following forms:

- Record of Report of Abuse or Neglect (Form 560A) sent in sealed envelope to Area Chief of Social Work and
- Attendance Notice of Report to Children's Aid Society (In OSR) signed by Principal (Form 560B)

Appendix K

For further resources, please visit:

Durham Region Public Health, Sexual Health Promotion: www.durham.ca/teachingHDSH.

Ontario Ministry of Education: http://www.edu.gov.on.ca/eng/

OPHEA (Ontario Physical and Health Education Association): http://www.ophea.net/

Or contact your school public health nurse.

Adapted with permission from Toronto Public Health (October 2022)



Durham Health Connection Line | 905-668-2020 or 1-800-841-2729 durham.ca/sexualhealth

If you require this information in an accessible format, contact 1-800-841-2729.





