



# Tool Kit for Educators and Service Providers 2016-17

Phone: 204.784.4010

Fax: 204.784.4204

E-mail: [teentalk@klinik.mb.ca](mailto:teentalk@klinik.mb.ca)

**teen talk**

 Klinik  
Community  
Health Education

Artwork by Melissa McKinnon

# Acknowledgments

We gratefully acknowledge the following sources that have influenced or contributed to these activities:

- Beyond the Basics: A Sourcebook on Sexual and Reproductive Health Education
- Breaking Barriers Through Education: A Guide for Facilitators
- Canadian Guidelines for Sexual Health Education
- Our Whole Lives: Sexuality Education for Grades 7-9, 10-12 and Young Adults and Adults
- Jessica Danforth & the Native Youth Sexual Health Network
- Vanessa AnakwudwabisayQuay, Peguis First Nation

## Toolkit Introduction

The Toolkit is a resource that is intended for service providers and educators who are looking for activities to run with youth in the areas of sexual and mental health, relationships, and substance use awareness. The activities, games, and brainstorms have both instructions as well as debriefs.

We recommend using the Toolkit together with the Teen Talk Service Provider Manual. The Manual provides background information that helps to create a bigger picture of the issues that face youth.

The activities in this toolkit are what Teen Talk uses with youth; they can be interactive and fun, and can help engage youth in the various topics. Ideally these activities complement other programming. Service providers can adapt the activities to better meet the needs of their youth.

We recognize that Indigenous communities and youth have their own cultural practices and traditional teachings about living a healthy life. Ideally, these activities complement existing community based teachings, cultural events, wellness days or other programming in the school or community.

It is our hope that you find this resource useful. If you have questions or suggestions, please contact us at [serviceprovide@klinik.mb.ca](mailto:serviceprovide@klinik.mb.ca).

## Teen Talk's Operating Principles

The operating principles are the foundation of how we work with youth at Teen Talk and are meant to be fundamental and relevant across our program and organization as a whole. Some are core values like pro-choice, feminist, sex positive, LGBT2SQ+ positive and using an anti-oppression, decolonizing lens. Others speak to the tools and strategies we use, like being youth friendly, strengths based and using a harm reduction approach. These are the promising practices we use and we encourage other service providers to become familiar with them by reviewing the introductory chapter of the Teen Talk Service Provider Manual.

# The Importance of Sexual Health Education

Sexual health is a key component of our overall health and well-being. In principle all people living in Canada, including youth, have a right to information, and the skills necessary to enhance sexual health. Enhancing our sexual health involves working towards a positive self-image and self-worth, integrating sexuality into mutually satisfying relationships, and preventing or treating sexual health outcomes such as sexually transmitted infections including HIV, pregnancy.<sup>1</sup>

Most people living in Canada become sexually active during their teenage years.<sup>2</sup> Our youth have higher rates of STIs than the general population<sup>3</sup> and specifically amongst Indigenous populations; colonialism has interrupted traditional sexual health practices which has result in higher rates of STI/HIV, unintended pregnancy and sexual assaults. Service providers such as teachers, health professionals, and front line workers are in a unique position to provide children, youth, and young adults with the knowledge, understanding, skills, and attitudes they will need to make and act upon decisions that promote sexual health throughout their lives.

Teen Talk has developed a comprehensive sexual health curriculum based on promising practices for sexual health. One notable document is the Canadian Guidelines for Sexual Health Information,<sup>4</sup> which provides a framework for implementing effective programming. The Guidelines embody an educational philosophy that is inclusive, respects diversity and reflects the fundamental basis of education in a democratic society. Effective sexual health education programs recognize that responsible individuals may choose a variety of paths to achieve sexual health and supports informed decision making by individuals.<sup>5</sup> These programs provide individuals with the knowledge, personal insight, motivation and behavioural skills that are consistent with each individual's personal values and choices.<sup>6</sup>

Studies have consistently found that the majority of parents and youth want sex education to be taught in schools.<sup>7</sup> The topics of human sexuality, puberty, birth control and HIV/AIDS rank the highest as the most valuable source of sexual health information.<sup>8</sup> Research clearly demonstrates that providing youth with sexual health education does not lead to earlier or more frequent sexual activity.<sup>9</sup> Instead, effective programs have a positive impact on sexual

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health behaviors such as delay or decrease sexual behaviors and/or increase condom or contraceptive use.<sup>10</sup> In addition, the research shows that condom distribution programs can increase condom use among sexually active youth and does not result in earlier or more frequent sexual activity.<sup>11</sup> In general, there is growing recognition that sexual health education can make a significant positive contribution to the health and well-being of the community.<sup>12</sup>

# Endnotes

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<sup>1</sup> Sex Information and Education Council of Canada (SIECCAN). (2010). *Sexual Health Education in Schools: Questions & Answers 3<sup>rd</sup> Edition*. Retrieved from [www.sieccan.org/pdf/she\\_q&a\\_3rd.pdf](http://www.sieccan.org/pdf/she_q&a_3rd.pdf).

<sup>2</sup> Maticka-Tyndale, E. (2008). Sexuality and sexual health of Canadian adolescents: Yesterday, today and tomorrow. *The Canadian Journal of Human Sexuality*, 17, 85-95.

<sup>3</sup> Public Health Agency of Canada. (2012). Report on Sexually Transmitted Infections in Canada. [www.phac-aspc.gc.ca/sti-its-surv-epi/rep-rap-2012/sum-som-eng.php](http://www.phac-aspc.gc.ca/sti-its-surv-epi/rep-rap-2012/sum-som-eng.php), accessed December 2015.

<sup>4</sup> Public Health Agency of Canada. (2008). *Canadian Guidelines for Sexual Health Education*. Retrieved from [www.phac-aspc.gc.ca/std-mts/index-eng.php](http://www.phac-aspc.gc.ca/std-mts/index-eng.php).

<sup>5</sup> *Ibid.*

<sup>6</sup> *Ibid.*

<sup>7</sup> *Ibid.*

<sup>8</sup> Frappier, J-Y Kaufman, M., Baltzer, F. et al. (2008) Sex and sexual health: A Survey of Canadian youth and mothers. *Pediatric and Child Health*, 13, 25-30. Retrieved from [www.pulsus.com/journals/pdf\\_frameset.jsp?jnlKy=5&atlKy=7736&isArt=t&jnlAdvert=Paeds&advertiFHCTp=\\_NP&sTitle=Sex and sexual health: A survey of Canadian youth and mothers, Pulsus Group Inc&Hctype=Consumer](http://www.pulsus.com/journals/pdf_frameset.jsp?jnlKy=5&atlKy=7736&isArt=t&jnlAdvert=Paeds&advertiFHCTp=_NP&sTitle=Sex and sexual health: A survey of Canadian youth and mothers, Pulsus Group Inc&Hctype=Consumer).

<sup>9</sup> Kirby, D., Laris, B. A., & Rolleri, L. (2007). Sex and HIV education programs: Their impact on sexual behaviors of young people throughout the world. *Journal of Adolescent Health*, 40, 206-217. Retrieved from [www.jahonline.org/article/S1054-139X\(06\)00601-X/fulltext](http://www.jahonline.org/article/S1054-139X(06)00601-X/fulltext).

<sup>10</sup> *Ibid.*

<sup>11</sup> Blake, S.M. Ledsky, R., Goodenow, C., et al. (2003) Condom availability programs in Massachusetts high schools: Relationships with condom use and sexual behavior. *American Journal of Public Health*, 93, 955-962. Retrieved from [www.ncbi.nlm.nih.gov/pmc/articles/PMC1447877/](http://www.ncbi.nlm.nih.gov/pmc/articles/PMC1447877/).

<sup>12</sup> World Association for Sexual Health. (2008). *Sexual health for the millennium*. [www.worldsexology.org/millennium-declaration](http://www.worldsexology.org/millennium-declaration). Kirby, Laris and Rolleri, 2007.