



Activities Manual



K-BARTESKI for **SERC** SEXUALITY EDUCATION RESOURCE CENTRE MB

teen **talk**



Acknowledgments

Developed by:

Teen Talk and the Sexuality Education Resource Centre (SERC), in collaboration with Jessica Danforth & the Native Youth Sexual Health Network (NYSHN). 7th Edition, 2021.

Funded by:

Manitoba Health

The Royal Bank of Canada

Layout:

Amphibian Design, Teen Talk and SERC

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

- Beyond the Basics: A Resource for Educators on Sexuality & Sexual Health, 3rd Edition
- Breaking Barriers Through Education: A Guide for Facilitators
- Canadian Guidelines for Sexual Health Education
- Our Whole Lives: Sexuality Education for Grades 4-6, 7-9, 10-12 & Young Adults & Adults
- This resource would not be possible without the contributions, knowledge, gifts, and strengths of the people who have worked at Teen Talk over the years.
- The youth of Manitoba, who we learn from every day.

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CHAPTER 1

Introduction

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Introduction

This resource is intended for service providers 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 instructions, as well as debriefs.

We recommend using these Sexuality Education Resource Centre (SERC) activities together with the Service Provider Manual. The manual provides background information that helps to create a bigger picture of the issues that youth face.

The activities are what SERC uses with youth. They can be interactive and fun and can help engage youth in the various topics. Ideally, these activities complement other programming. This resource would not be possible without the knowledge, gifts, and strengths of the many people who have worked with the program since its founding. Service providers can adapt the activities to better meet the needs of their youth and community.

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 info@serc.mb.ca.

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What is Teen Talk?

Teen Talk is a Youth Health Education Program of the SERC. We provide prevention education services to youth from a strength-based, harm reduction perspective. We focus on issues under the broad topics of sexual and mental health and relationships and link youth to resources in their community. We adhere to the belief that by providing youth with accurate, non-judgmental information, they can make healthier decisions and choices for themselves.

For more information about SERC and Teen Talk, visit our websites, serc.mb.ca and teentalk.ca. See below for a list of counselling services.

Counselling Services & Help Lines

- **First Nations & Inuit Hope for Wellness Help Line**
Toll-Free: 1.855.242.3310
- **Human Trafficking Hotline**
Toll-Free: 1.844.333.2211
- **Kids Help Phone**
Toll-Free: 1.888.668.6868
Crisis Text Line: Text connect to 686868
Online Chat Support and Resources: kidshelpphone.ca
- **Klinic Crisis Line (24/7)**
Toll-Free: 1.888.322.3019 or 204.768.8686
- **Manitoba Farm, Rural & Northern Support Services**
Toll-Free: 1.866.367.3276 or Chat Support
Monday to Friday: 10am – 9pm
- **Manitoba Suicide Prevention & Support Line (24/7)**
Toll-Free: 1.877.435.7170
TTY: 204.784.4097
reasontolive.ca
- **Klinic Sexual Assault Crisis Line (24/7)**

Toll-Free: 1.888.292.7565 or 204.786.8631

- **SPEAK** (Suicide Postvention Education Awareness & Knowledge)
204.784.4064
- **Trans Life Line**
Toll-Free: 1.877.330.6366

Teen Talk's Operating Principles

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. Some are core values, like pro-choice, feminist, sex positive, 2STLGBQ+ positive and using an anti-oppression, decolonizing lens. Others speak to the tools and strategies we use, like being youth-friendly and strengths-based, and using a harm reduction approach. These are the promising practices we use. We encourage other service providers to become familiar with them by reviewing the introductory chapter of the Teen Talk Service Provider Manual.

Facilitation 101

The following are some useful facilitation tips when working with groups.

Roles of Facilitator

- Promotes a safe space where youth feel welcome and included
- Guides group discussion
- Provides structure to the group
- Assesses needs within the group
- Manages conflict and communication among members
- Supports the group in solving problems
- Helps members recognize and appreciate their strengths and differences

Helpful Facilitator Behaviours

- Spending time practicing
- Helping group members feel welcome
- Following an outline
- Actively listening
- Enforcing group norms
- Paraphrasing what youth are saying and summarizing
- Feeling calm and confident
- Encouraging participation and bringing people into the discussion
- Using humour appropriately
- Checking the pace and timing
- Asking questions
- Checking for understanding
- Showing flexibility

Less Helpful Facilitator Behaviours

- Making assumptions
- Lecturing
- Interrupting
- Ignoring inappropriate comments or behaviour
- Getting defensive
- Not providing resources
- Allowing people to dominate the group
- Putting people on the spot

Preparing for a Group Session

Before any session, it's helpful to prepare by finding out as much as you can about the youth you'll be seeing. Some questions to ask could be:

What is the age range?

How information is presented depends on the youth's age and developmental stage. The activities and curriculum in this binder are split into different age groups to meet developmental needs. Younger age groups focus on less information and more movement activities, while older age groups hold more

complex and abstract concepts. Remember to adjust your language to meet the needs of the group.

How many youth will there be?

For Teen Talk activities, the 'ideal' group size is 10-25 youth.

Larger groups can be difficult to interact and run activities with; likewise, if there are only a few youth, it can be difficult to run certain activities.

Are there any issues specific to the group?

This could include cognitive or developmental issues, language/literacy issues, and recent events facing youth such as a loss or suicide in the community, sports tournaments, or a festival/big event. Knowing the Treaty territory, community history, Original Language spoken, and impacts of resource extraction (like mining and hydro) is helpful in First Nation communities.

Which topic?

Choose one topic to focus on. People often want to share 'everything they know' and this can be overwhelming. Stick to 2-4 key messages. For example, in the STIs workshop, key messages on how to prevent STIs are abstinence, condoms/sex dams, and testing. Choose activities that teach your key messages.

How long should a session be?

It depends on the topic, how many activities you choose, how much time you have with them, and most significantly, the age and attention span of the youth. Teen Talk sessions run from an hour to two hours, with breaks when needed.

What resources will the group need?

When talking about relationships, mental health, or suicide, it is **essential** to provide youth with local resources where they can go for help if needed. At Teen Talk, we provide each youth a resource sheet with local resources.

What will I do if there is a disclosure of abuse?

Canadian laws obligate us to follow a duty to report process. Review your organization's policies and understand beforehand where you can refer youth in the event of disclosures. For reporting protocols in Manitoba, see *Reporting*

*of Child Protection & Child Abuse: Handbook & Protocols for Manitoba Service Providers.*¹

Will there be an adult present?

If you have been asked to speak to a group, ideally the supervising teacher or staff person will attend the session. This can help with group management and follow-up (if the youth ask questions or have concerns afterwards).

Workshop Introduction

How you introduce yourself and the topic sets the tone for the workshop or conversation. Below is the general format Teen Talk uses.

Introduce yourself. For example, Teen Talk would say, “Hi, my name is... We are here from Teen Talk. Teen Talk is a Youth Health Education Program. What we do is talk to youth about sexuality, STIs/HIV, mental health, and relationships.”

Try not to make assumptions. For example, in an STIs workshop, Teen Talk would say, “We are not assuming that everyone has an STI, has had sex, or is even interested in having sex. We are also not assuming that no one has. We give the same up-to-date, accurate information everywhere we go. It’s okay, if you do not think this information will be useful to you. All we ask is that you give other people a chance to hear what we have to say.”

Mention confidentiality. For example, “The only time we would share anything with someone else is if we are concerned someone could be hurt. Then we have to follow up to make sure everyone is safe.” (You could give the youth a confidential feedback form at the end of the session where they write down their questions for you to answer and let them know it is confidential.)

Link youth to resources. Youth-friendly health clinic, nursing station, Elders, school counsellors, Medicine Lodges, websites, etc. Be sure to mention the location and hours, services accessible to youth, any costs, and whether it is drop-in or by appointment only.

Create group norms. In each session, Teen Talk mentions, “During our time together, we want to create a safer space to talk about these things openly, so we have some group norms for all of us to follow. We each have the right to

- Expect privacy
- Participate
- Pass
- Ask questions
- Not be put down
- Have fun”

Acknowledge the Indigenous territory. Learning and acknowledging the Land shows respect for the youth and Nations we are supporting. Asking Elders or local community members, and even searching the internet and taking the time to learn the history of these Lands demonstrates our commitment to allyship. For example, “Part of respect for us is acknowledging The Land. Manitoba is Sayisi Dene, Cree, Oji-Cree, Dakota, and Ojibwe, otherwise known as Anishinaabe traditional territory. We are also in the heart of the Métis Nation. Now that Canada exists, we are all part of Treaty #__. We are grateful to live, play, and work on this Land. Thank you for having us in your class/space.” (For an Anishinaabe Land Acknowledgment, see “Land is Body, Body is Land,” in the Youth Sexuality chapter.)

Thinking Beyond Presentations & Workshops

Contributed and adapted from Jessica Danforth

Holding a workshop is great and there are many other less structured activities that can teach sexual and mental health and relationship information.

Being present at community activities: These could be events organized by us or those already happening. Have a table with resources or create an event like the HIV/AIDS walks.

Have kitchen table conversations/home gatherings: Smaller gatherings can help open up casual discussions. You can organize evening get-togethers, lunches, condom activities, etc. It is important to invite community youth and have ‘open hours’ outside of session times.

Have ways for quiet groups to participate: Group brainstorming works great with some groups, but having more options always helps. Examples can be passing out post-it notes for youth to write on, having smaller groups work on

a flipchart, sitting in a circle, giving youth paper to draw how they are feeling, etc.

Include coming of age ceremonies: Incorporate traditions, community, and teachings with HIV and sexual health education. Involve youth during their transition from youth to adulthood while teaching them to be strong and healthy.

Incorporate activities: For example, beading, moccasin making, birch bark baskets/biting, cedar weaving or carving, rattle making, and more. These activities can motivate people to be part of the discussion and may be good evening activities.

Encourage questions: Try an anonymous question box, hand out evaluations, be open and available, admit what you don't know, and make an effort to find out.

Include art-based activities: For example, fashion shows, incorporating art and poster making, newsletters, zines, blogs, and comic strips.

Incorporate cultural practices: For example, inviting Elders to open the session, and/or to participate in or observe sessions and activities, inviting drummers to open and/or close the day(s), and inviting local singers.

Remember to use humour and make it fun!

Summer Youth Camps & Gatherings

We realize that youth gatherings/camps take a lot of organizing and many people work tirelessly to make them happen. Here are some key things and tips to keep in mind when planning these events from frontline service providers and Teen Talk.

- Choose a location that is meaningful to the community and near water for extra fun.
- Consider transportation for all abilities.
- Make back-up plans and have extra supplies for all weather changes (hot, rainy, windy, cold).

- Stress fire and water safety. Make sure all campers have heard the rules. Keep buckets of water close by if it is dry out.
- Have extra funds in the budget for unplanned supplies/circumstances.
- Aim for a balance of gender in camp workers for youth to identify with.
- Prioritize local people and talent when organizing presenters and facilitators.
- Advise presenters/facilitators about the agenda for the day(s).
- Have extra people available to help out.
- Encourage Land clean-up. Hold an opening ceremony, bless the Land and speak to it, make youth teams and offer them points for collecting garbage and caretaking the Land. Have prizes for the winning team.
- Have handy supplies like duct tape, scissors, extra garbage bags, etc. available (especially good for rain).
- Have a good supply of water/food that can be cooked in all weather.
- Have lots of hearty snacks available, such as granola, cookies, jerky.
- Have pads/tampons, toilet paper, ear plugs, safer sex supplies, blankets, and new underwear available.
- Hand out condoms/safer sex supplies on the first night of camp.
- Hand out swag such as hoodies, reusable cups, shirts, sunglasses, etc.
- Have Elders teaching/camping and intergenerational learning/sharing.
- Have youth who are interested involved in set-up and organizing.
- Provide time, space, and supplies for youth to write or draw anything about identity, sexuality, sexual health, mental wellness, teachings that they've learned, things that give them strength, body image, etc.
- Have games and sports equipment such as volleyballs, beach balls, Frisbees, cards, dice, etc. available.
- Camp teams are a fun way to create healthy competition and mix up youth who would otherwise not meet new people. Divide youth into groups that don't normally mix in creative ways, such as using Clans (Unicorn, Turtle, Moon, Bear, Wolf, Sunshine, etc.). Give them camp chores and 'missions' (setting up tents, hauling water) as team building.
- Have camp team activities as well as large whole group activities so youth have the opportunity to make new friends in small groups and see their other friends in the large group.

Preparing a Resource Sheet

When presenting to a group, ideally you can hand out a resource sheet that lists some local places youth can go to for help and information. In preparing this sheet, consider the following:

Places to Call:

People and places that offer respectful support or services to youth.

- Public health nurse and traditional medicine person
- Elders
- Mental health, suicide, addiction, and HIV workers
- Guidance counsellors
- Cultural or spiritual or religious advisors
- Crisis centres or phone lines

Questions to Consider Asking:

- Are the people who work there or run the program youth-friendly? (Accepting, non-judgmental and confidential)
- Location, hours or days of the week, appointments, or drop-in?
- Do youth need an adult's permission?
- What is available and is there a cost? (Types of birth control, emergency contraception pill, pregnancy testing, STIs/HIV testing, pregnancy counselling on all 3 options, abortion referrals, etc.)
- Anything else you think is relevant to the youth in your community.

Additional Suggestions:




- Some communities are close enough to larger centres that youth may be accessing services there as well, so try to include relevant info on the next biggest town.
- Make enough copies for the number of youth you will be seeing (any extra resource sheets can be posted up and left around where youth hang out, like the arena, drop-in, school, etc.).
- Leave leftover resource sheets in community spaces such as rec centres, health centres, guidance counsellor offices, airports, grocery stores.

For a resource sheet template, contact Teen Talk, 204.982.7800 or info@serc.mb.ca. For the Teen Talk resource sheet, see teentalk.ca/service-providers/handouts-and-youth-resources/.

Handing out Feedback Forms

At the end of each session, the youth are given a form to provide feedback on the workshop. The form asks for their opinions, what was most useful, and any questions or comments they may have. Questions are answered in the subsequent session or via email if it is their last workshop. This form also gives Teen Talk insight into what knowledge the youth gained from the session. Teen Talk informs the youth that their comments are confidential, but not anonymous, and that we will follow up if someone is being hurt or hurting someone. In the event of a disclosure of abuse, see *Reporting of Child Protection & Child Abuse: Handbook & Protocols for Manitoba Service Providers*.²

Please check one only per question




	 Not at all	 Somewhat	 Yes
1. Did you learn new info today?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2. Will you use the info in your life?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3. Will you share info with others?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4. Was the info easy to understand?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

5. The most useful thing I learned today was _____

6. Comments or questions: _____

If this is your last workshop, we can email you an answer. Email: _____

Please check one only per question

	 Not at all	 Somewhat	 Yes
1. Did you learn new info today?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2. Will you use the info in your life?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3. Will you share info with others?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4. Was the info easy to understand?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

5. The most useful thing I learned today was _____

6. Comments or questions: _____

If this is your last workshop, we can email you an answer. Email: _____

Impact of Trauma & Trauma Exposure Response on Service Providers

Anyone can experience trauma or trauma exposure response, including service providers. Trauma is a person's experience of an event(s) or set of circumstances that have lasting adverse effects, e.g., accidents, loss, abuse, colonial processes.³ Trauma exposure response is when others become 'secondary victims' when they hear about or bear witness to potentially traumatic events from others. Trauma or trauma exposure can impact the way we see the world, our sense of safety and independence, our self-esteem, and intimacy with others.

Trauma and/or trauma exposure can be a significant issue and, left unresolved, can make it harder to be present and engage with youth. However, healing from trauma and/or trauma exposure is also possible. Organizations and service providers can help by being aware of potential negative impacts and by taking steps to address them.

At the organizational level, protocols that acknowledge trauma and trauma exposure, support debriefing, and promote staff wellness can help. At the personal level, we can practice self-compassion and awareness. We can acknowledge when we feel overwhelmed and ask for help or get support when we need to. We can try to find ways that help us restore balance or cope.

“You hear a lot of horrible stories that you cannot disregard, even with the professional training you get. I was taught many cleansing ceremonies by Elders. I made a ceremony on my own by mixing them together. It’s a meditation where you let in the light of the people that have come before us, knowing that our ancestors are there to guide us:

Close your eyes: I imagine the kind of day where the sun is bright behind the clouds. I imagine the clouds opening up and a very bright light coming down and in through to the crown of my head. The light represents the wisdom of the ancestors and it helps to suck out the thoughts of something or someone that has caused trauma in your life, almost like a vacuum.

Now, imagine the light vacuuming the thought out through the crown of the head and up into the clouds. Let the clouds close up now, taking the horrible thought with it.

Finally, let the light enter the crown of your head and into the body, permeating every inch of the inside of your body, bit by bit. Follow with 5 deep breaths.

It was hard at first, since I felt I owned the trauma, therefore, I had to do it over and over, but it works for me and the more I do it, the easier it gets.

The mind is a very powerful tool.”

*Daphne Lafreniere, Cree/Métis, Support Worker for Survivors of Residential Schools,
Opaskwayak Cree Nation*

For more on managing trauma and trauma exposure response, refer to the Manitoba Trauma Information & Education Centre.⁴

Checking in with your Values & Assumptions⁵

Excerpted from *Beyond the Basics: A Resource for Educators on Sexuality and Sexual Health*

Before facilitating discussions on sexuality and sexual health, it is helpful to reflect on your own values and to check in with your own assumptions about who is in your group, the families that students come from, and how students feel about themselves and relate to their own sexuality. Checking in with your own assumptions allows you to be more responsive to the discussions and dynamics of your classroom as they happen, rather than assume and anticipate what will happen.

What does it mean to 'check in' with your assumptions?

Everyone has assumptions. It is not negative or positive to have assumptions; however, assumptions can cause negative, harmful impacts to those around you if left unchecked. To check in with your assumptions is a process of self-examination. It involves recognizing that while something may be the 'norm' or true for you, it may not be the case for everyone else. It is also a process of making space between the assumptions you hold and how you choose to (or not to) express them. While the space is made, it becomes easier to reframe an assumed 'fact' that is rooted in your experience into a respectful/appropriate discussion.

Check in with your assumptions...

About Families

- Some youth live with their family, others live with their guardians, or in a foster home or shelter.
- Some youth have one parent/guardian, some have two, some have more.
- Some families have parents who identify as 2STLGBQ+.
- Some youth come from a divorced family and may or may not have one or more step families.
- Some youth have parents.
- Some youth are not biologically related to either parent.

- Some youth are a result of assisted reproduction technologies.
- Some youth come from a loving family; some do not.
- Some youth come from an emotionally, physically, or sexually abusive home.
- Some youth have diverse cultural and religious beliefs, which aren't necessarily apparent.
- Some youth have little or no personal freedom
- Some youth have little or no supervision at home.
- Some youth are unable to discuss sexuality and sexual health with their families.
- Some youth openly discuss sexuality and sexual health with their families.

About Bodies

- Some youth have little or no idea about how the body works, including sexual functioning.
- Genitals are diverse and most do not look like those depicted in textbooks and diagrams.
- Some youth have ambiguous genitals; some are intersex.
- Some penises are circumcised; some are not. Some vulvas have been cut; some have not (it may have included the labia and/or the clitoris).
- Genitals do not indicate what someone's gender identity is; someone's gender identity does not dictate what genitals they may have.
- Some youth who appear very large or small are entirely comfortable with their bodies.
- Some youth have visible disabilities; some have invisible disabilities.

About Gender and Gender Identity

- Some youth are questioning their gender and this may not be physically apparent.
- Some youth will identify with a gender other than the sex they were assigned at birth.
- Many youth will identify as women/girls and men/boys; some youth will not. Gender is an internal sense and is not binary (e.g., trans, androgynous, gender fluid, and an endless amount more).
- Assigned sex is not the same as gender identity.

- Some people might use different words for their bodies that more comfortably reflect their gender identity.
- We cannot make assumptions about a student's gender identity based on the way they look, dress, act, or by their name.
- Some youth have rigid ideas about gender regarding roles, norms, rights, responsibilities, and potential aspirations.

About Sexual Orientation

- Some youth identify as straight, or heterosexual. Some youth identify as lesbian, gay, and/or bisexual; some as queer; some as Two-Spirit; some as pansexual; some as asexual; and some may be questioning their sexual orientation. Sometimes these identities get shorthanded as 2STLGBQ+ and queer.
- Some 2STLGBQ+ youth do not reveal their sexual orientation to others, including family and friends.
- We cannot make assumptions about a youth's sexual orientation based on the way they look, dress, or act.
- Youth who are 'out' or who are perceived to be 2STLGBQ+ may not feel or be safe in their school. We cannot assume whether a student is 'out' by the way they look, dress, or act.
- Sexual orientation, like gender identity, is an identity that must be self-defined and self-disclosed.
- You cannot assume a youth's sexual orientation.

About Sexual Activity

- Some youth are sexually active; some are not. Some youth who are not currently sexually active have been sexually active in the past.
- Sexually active describes a wide variety of experiences. It includes masturbation and goes beyond vaginal, oral, and/or anal sex.
- Some youth may have experienced pregnancy and you cannot tell this only based on who decided to parent.
- Some youth have experienced non-consensual sexual activity (e.g., sexual abuse, sexual assault, and sexual coercion).
- There are limitless ways that survivors react to, cope, and deal with experiences of sexual violence.

Guidelines for Answering Questions about Sexuality⁶

Adapted from *Our Whole Lives: Lifespan Sexuality Education*

When answering anonymous questions about sexuality, keep in mind the development/maturity level, cultural background, and other visible or invisible diversity characteristics of the group. Also, do your best to identify the kind of question that is being asked and formulate your answer accordingly.

Information Questions

- Be honest. If you don't know the answer, say so; find the answer and report it at the next session. It's also okay to acknowledge when a question is a bit awkward. Come across as a real human being.
- Answer questions age-appropriately for pre-adolescent children. Give simple, fairly concrete answers. Don't give too much unnecessary information. Avoid jargon, use plain language.
- If you aren't sure what a youth is asking, you might ask, "What have you already heard about that?" or "Are you asking...?"
- Pre- and early adolescents ask a lot of "What happens" questions; for example, "What happens when you get your period?" Be sure to address both the physical changes as well as the emotional changes.
- After answering a question, ask, "Does that answer your question?" or "Was there more you wanted to know?"

"Am I Normal?" Questions

- These questions are typically disguised, so be on the lookout for them. Sometimes they are posed as general information questions or as "I have a friend who..." questions.
- Answer in a reassuring and comforting tone. Be sure to discuss the range of normal and individual differences.
- Never imply in a group setting that you've guessed that you're answering an "Am I normal?" question.

Value-Laden Questions

- Do not impose your own personal values on the group or be judgmental.
- Adhere to values of respect, responsibility, and inclusion.
- When controversial issues come up, always discuss the range of values. If participants voice only one point of view, it's your role to bring up other points of view (including those that may be counter to your own point of view).
- When a value-laden question refers to something "my parents told me," be sensitive to those beliefs and be careful not to criticize them, even if they are disrespectful. However, go on to depersonalize and say, "While that is a commonly held value, there are a range of values on that topic. For example, others believe that..."
- Encourage youth to discuss values with important people in their lives such as family, teachers, and peers.

Shock-Value Questions

- The point of a shock-value question is to shock you, knock you off balance, or embarrass you. The goal is not to get a real answer to a question. So, you must become 'unshockable.' If you are unshockable, the questioner will eventually stop the behaviour because it is unsatisfying. Your ability to be unshockable will increase with experience.
- Feel free to identify shock-value questions for what they are without missing a beat...and then move on.
- Remember, shocking questions are not always shock-value questions. What young people genuinely want to know about can sometimes be shocking to adults. Questions about explicit sexual behaviour can fall into this category and they deserve an honest answer. For example, "What is a blowjob?" can be answered with, "When someone puts their mouth on a penis to feel good."

Questions about Explicit Sexual Behaviour

- Answer explicit questions in a simple, honest, and sexuality-positive manner. The goal is to be straightforward and clear without being overly descriptive or provocative.

- Describe sexual behaviours in the context of respect, responsibility, and inclusion.
- Avoid using language that conveys the idea that sex = sexual intercourse.

General Guidelines

- Be accepting of questions. Convey the idea that all questions are okay to ask in whatever language youth already know. They may use slang or colloquial language because they do not know the scientific words. If they use slang you don't recognize, ask to be educated. Even if the question is anonymous, you can ask the group what the words mean. Use scientific language linked to the slang words in your answer. For example, "Flicking the bean is another way to say masturbation."
- Be aware that nonverbal communication can speak volumes; it can indicate delight and acceptance or distaste and disagreement. So, watch what you say nonverbally—work to avoid nonverbal cues such as wrinkled brows or frowns that can indicate judgment, disapproval, etc.
- Turn 'feeling' or opinion questions back to the group so that they can discuss their own ideas.
- Use the third person (people, folks, etc.) rather than the pronoun 'you' when answering very personal questions (from the question box) in a group setting.
- Use inclusive language, e.g., speak in gender neutral and sexual orientation neutral terms as much as possible. Use terms like partner, person, or someone rather than girlfriend, boyfriend, man, woman, etc. Don't give answers that are sexist and heterosexist.
- Keep the question box alive. Don't forget about it, because it's an excellent tool for making sure you address what youth really want to know.
- Don't forget the 'music.' The emotional content of your answer is as important as the informational content.

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 STIs, including HIV.⁷

Most people living in Canada become sexually active during their teenage years.⁸ Our youth have higher rates of STIs than the general population⁹ and specifically amongst Indigenous populations, colonialism has interrupted traditional sexual health practices, which has resulted in higher rates of STIs/HIV, unintended pregnancy, and sexual assaults.

Traditionally in Indigenous cultures, sexuality was seen as a gift and a source of great pleasure. Community adults openly taught children about their bodies, the moon time, and other sexual and reproductive passages. The Kokums (Grandmothers) were the keepers of the knowledge of herbal medicines for, among other things, birth control. This perspective was lost with the influence of the church and residential schools. The impact of the church-run schools, what the schools taught about sex, and the sexual abuse experienced there has made talking about sex taboo for many Indigenous people.¹⁰

Service providers such as teachers, health professionals, and frontline 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*,¹¹ 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 support informed decision-making by individuals. These programs provide individuals

with the knowledge, personal insight, motivation, and behavioural skills that are consistent with each individual's personal values and choices.¹²

Studies have consistently found that most parents and youth want sex education to be taught in schools. Human sexuality, puberty, birth control, and HIV/AIDS rank the highest as the most valuable topics of sexual health information.¹³ Youth have also mentioned that they want to learn more about healthy relationships, HIV/AIDS, pleasure, and communication skills.¹⁴ Research clearly demonstrates that providing youth with sexual health education does not lead to earlier or more frequent sexual activity.¹⁵

Effective programs have a positive impact on sexual health behaviours such as delaying or decreasing sexual behaviours and/or increasing condom or contraceptive use. The research also shows that condom and safer sex distribution programs can increase their use among sexually active youth and do not result in earlier or more frequent sexual activity.¹⁶ 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.¹⁷

Endnotes

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CHAPTER 2

Sexual Decision Making & Identity

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Land is Body, Body is Land Acknowledgment

Recommended Age: 12+

Goal

- To introduce youth to an Indigenous worldview of connection to Land, including sexuality.

Instructions

- Sitting in a circle, have youth get comfortable and read the following Anishinaabe Land Acknowledgement.

Note to Facilitators

- This Anishinaabe worldview of Body is Land Acknowledgment is contributed by Vanessa AnakwudwabisayQuay from Peguis First Nation. It is one understanding of many teachings from diverse populations of Indigenous Nations. It is to explore and give meaning to the commonly talked about Indigenous concepts such as “Land is Sacred,” “We belong to the Land,” “We are spiritually connected,” and “Water is Life.”
- For a non-Indigenous person, it is essential to remain culturally humble (i.e., respectful and reflective) when sharing knowledge from a culture that is not our own. This means sharing where the knowledge comes from, acknowledging the limitations of our knowledge of that worldview, continuously listening and learning, apologizing when misunderstanding, and prioritizing Indigenous presence and voices.

Visualization Disclaimer

“I’m going to ask you to go into your body, to think a little deeply about it for a few minutes, so if you don’t want to for any reason, please don’t.”

Visualization

- **“I want you to picture some Land you know. Could be anywhere, could be your backyard, a place you travelled to, your home, or even a piece of cement or sidewalk. Picture some Land you think is beautiful. Now go inside your body; your body is the same as the Land, ever connected.”**
- **“Water - Picture water on the Land. Can you locate the rivers, lakes, waterfalls in your body? Floods, currents, and gushing happen where in your body?”**
- **“Think of your veins, your genitals, your kidneys and bladder; anyone take a pee today? Think of your stream of tears flowing down. Are they sad or happy streams?”**
- **“Earth - Think of the stones and rocks on the Land, the grasses and the mosses growing and blowing in the wind and rains. Where in your body are these?”**
- **“Think of your bones, your toes, and the places your hair grows. What’s in between your toes and where are your swamplands? What’s in your bellybutton right now?”**
- **“To the Winds - See it blow the trees and rain across the Land. Where is the wind in your body? Take a deep breath in and let it out slowly making wind. Think of other places your body uses wind. Think of weather systems now. Where can a tornado happen in your body? Have you ever farted so loud you woke yourself up? LOL. Laughter! What is laughter but cleansing wind releasing through our body. Sometimes as loud as thunderstorms on the earth, we laugh. There is thunder in our body.”**
- **“Now locate the Fire in your body. Where does your heat and warmth come from? Picture a volcano. Ever had heartburn? Like the core of the Earth, our body warms us. There is fire**

and lightning in the body. Your synapses are firing away right now, telling each cell what to do.”

- **“Think back to the Land, the Earth, see the mountains, rolling hills, plains, caves, and crevices. Where in your body are your hills, your flat places, your caves, and crevices? When has your body felt tectonic plates move? Ever felt your body quake and tremble like the Earth?”**
- **“Now go back to that Land you started with; it doesn’t matter where you start, your body as that Sacred place which is the same as the Land, or the beautiful Land is Sacred so you know that your body is Sacred too. The Land and us, we are one and the same. What happens to the Earth happens to our body.”**
- **“Now think of your body as your territory. Know it in your stones and your bones. It’s my body, it’s my territory. My body, my territory. If you were to make Treaty with someone, to invite them into or onto your territory, how Sacred is that Treaty? It’s your body, your territory.”**
- **Miigwetch**

Debrief

- **“How was that? Does it make sense? Was there anything that stands out to you?”**
- **“What is ‘your body, your territory’ really talking about?”**
Consent.
- **“How was sexuality a part of the visualization?”** Bodies and the Earth have sexuality in their forms and their functions. Also, how we feel when we think about those forms and functions is part of our sexuality. Sexuality is a natural part of all living things. **How it comes out of each of us is unique and special based on who we are and the choices we make. Sexuality is as diverse as the Lands on the Earth.**
- When we know and accept that we are part of the Land and that it is part of us, it can connect us to deeper understandings. It can

also give us a sense of connection and belonging to something more powerful than ourselves. It can help us develop and maintain responsibility for taking care of ourselves, the environment, and each other.

Note to Facilitators: For more in-depth discussions

- **“How was sexual pleasure represented in the visualization?”**
Words like floods and gushing. Speaking of tectonic plates shifting, earthquakes, and trembling refers to arousal and orgasms. The beauty of the Land and body in their various forms can be a source of sexual pleasure. **Sexual pleasure is naturally occurring and meant to be healthy.**
- With Indigenous perspectives as the foundation of discussions, the importance of honouring Treaties in Canada can be made as we link it to consent. Coercion and the original intention of Treaties should be central to the discussion.¹
- Connection to Land protection and violence against Indigenous people can be explored.²

Exploring Your Name

Recommended Age: 12+

Goal

- To get youth to explore a piece of their identity and engage the power of their name.

Instructions

- Sitting in a circle, ask youth to go around answering the following question(s): **“What is your name?” “Do you have any story about your name?” “Can you share one thing about your name?” “Do you know your Spirit Name?”**

Probing Questions

- **“Where did your name come from?” “Who named you?” “Do you have more than one name?” “How did you get it?” “Is there a meaning to it?” “How do you spell it?”**
- Try not to ask for nicknames, as they are not always positive or appropriate. When they do come up, even if inappropriate, take it as a learning opportunity and talk about how we all have the right to be respected and called by what we choose, and more importantly, we have the power to choose what names we answer to.

Note to Facilitators: Spirit Names

- For a non-Indigenous person, it is essential to remain culturally humble (i.e., respectful and reflective) when sharing knowledge from a culture that is not our own. This means sharing where the knowledge comes from, acknowledging the limitations of our knowledge of that worldview, continuously listening and learning, apologizing when misunderstanding, and prioritizing Indigenous presence and voices.
- This exercise is contributed by Vanessa AnakwudwabisayQuay from Peguis First Nation. The following information is one

understanding of many teachings from diverse populations of Indigenous Nations.

- With Indigenous youth in particular, a Spirit Name or knowledge of names that are used in Indigenous cultures (sometimes still called an 'Indian name' within Indigenous communities) can be shared. Part of the teaching is every human being has a Spirit Name that tells us a lot about who we are, our Gifts, and the spirit we carry. It is said we all have a Spirit Name that is with us, whether we know it or not. If we wish to learn more about ourselves, it can be helpful to find out the name of the spirit that carries us. A way we may find our name is by using our Tobacco, as the sacred Medicine it is meant for, and offering it directly to Creator either by putting it in a Sacred (blessed) Fire or Water or out on a clean spot on the Earth (usually by a tree is good). Then we ask Creator for our name. Often when we ask directly, our answers come in mysterious ways or through our dreams and we have to be open to receiving our answers this way.
- A common way to get our name is to offer Tobacco to an Elder or Medicine person who has the Gift to have names revealed to them from the Spirits. Usually, this happens in a ceremony the Medicine person has been given and they can translate our name to us. Often the name our spirit carries has to do with nature and animals, so we watch that animal or specific part of nature to see what it does, how it reacts, and what it goes through. By learning about the name of our spirit, we can learn lots about our own qualities, characteristics, and responsibilities in life. The more we understand our spirit, the better we understand ourselves.
- This activity can have many positives by getting youth to explore their identity. Other positives often include being named after or by someone, funny stories, knowing who named you, nicknames, and hopes that were given with the name or even something as simple as a different spelling of a name. This activity can be open and inclusive of naming practices from all cultures and can be an opportunity to introduce Spirit Names for those who have not heard of such teachings.

Debrief

- Thank everyone for sharing their name.
- Our names are powerful.
- It is good to say our names aloud because there is power in acknowledging who we are and drawing on the power within each of us.

Family Tree

Recommended Age: 12+

Goal

- To encourage youth to explore the strengths and gifts carried within their relations in the hopes it may be helpful in identifying supports and their own strengths.

Have Ready

- Flipchart paper, markers, pictures, and tape.

Instructions

- Instruct the group to make a Family Tree or collage of names and talents. Look for the leaders, artists, caretakers, and educators. Have the youth think of the jobs their family members do, the employment they work at, but also all the skills and unpaid 'real life' work that their relatives do.
- Once completed and if youth are willing, ask them to share the strengths and gifts of their family with the group.
- Family can be defined as blood relatives, as well as 'family of our choosing.' For those without close ties to family, ask them to think of people in their lives whom they trust or admire and want to be like.

Probing Questions

- **“Who’s in charge when something big happens in the family?”**
- **“Who do people go to for advice or help?”**
- **“Who teaches us special skills like how to cook, drive, hunt, fish, sew, use the computer, dance, fix stuff, etc.?”**
- **“Who in your family is well known and active in your community?”**
- **“Who is always making people laugh?”**
- **“Who is always feeding everyone?”**
- **“Who is special to you? How come?”**

- **“What about generations back, what are the special stories you’ve heard about relatives who have passed on?”**
- **“Imagine some of your future relatives, what would they say about you in this Family Tree?”**

Debrief

- Participants get to keep their art and you can ask them to share as much or as little as they like.

Native Pride

Contributed by Jessica Danforth & the Native Youth Sexual Health Network

Goal

- To explore Native Pride.

Probing Questions

- **“What does it mean to have a shirt or hat that says, ‘Native Pride’?” “What does ‘respect’ look like?”**
- Talk about some reasons to be proud. For example, Two-Spirit teachings, knowing that we had stuff figured out about how to live on the land, how to respect our traditions and community, how to take care of each other and our bodies, rich histories, and wise ancestors. This goes back further than what we are taught in schools. We have access to this knowledge not only from books, but from blood memory and community stories.
- Talk about disrespect such as the role of gossip and rumour spreading in your community. Let’s talk about stopping gossip as a way of showing our Native Pride.
- Ask youth, **“Who are the strong people in your life?”** This could include friends or family who support you, make you feel safer and stronger, speak up even when it’s uncomfortable/not acceptable/appropriate, teach you, etc.
- **“Discuss Indigenous sexuality.”** A lot of times, we are so surrounded by negative images of Indigenous sexualities that we forget how sexy we are, on our own terms, and what being sexy looks like outside of these stereotypes and exploitation. Part of Native Pride is also reclaiming (taking back) the ways we love each other and ourselves.
- **“How do you see yourself or your community resisting ongoing colonization?”** Music (hip-hop, traditional), projects or groups of people speaking out, alternatives to mainstream, dreams you have for yourself and your community, experiences with language/culture/tradition that are empowering, etc.

Sexuality in Original Languages

Recommended Age: 12+

Goals

- To get youth to explore concepts of sexuality in their Original (Indigenous) Languages.
- To encourage people to speak their language.

Have Ready

- Copies of the following handout.
- Pens.
- Dictionaries/online.
- Prize for the winner (optional).

Note to Facilitators

- There may be diverse languages and dialects of a language present, so emphasis is not on accuracy or focusing on ‘the right’ answers. The goal is to build community by generating laughter and curiosity, while increasing Indigenous language use. It is not about getting translation or pronunciation correct. It is about being brave enough to try and say the words out loud. Giving people permission to speak, make mistakes, and ‘sound funny’ reduces barriers to learning. Creating a safer space where people are not shamed or made fun of is essential when revitalizing Indigenous languages. Ideally, this activity has multi-generations and a few fluent speakers present.

Instructions

- Ask youth to translate these words into their Original Language and remind them they can ask for help from friends, family, Elders, teachers, community members, etc. Activity can be done as individuals or in teams.
- The first to finish wins, or if time runs out, the person who has the most answers completed.

- Have a prize ready for the team or individual. To claim the prize, they must read some answers aloud.

Debrief

- If people used their electronics to access a translator or dictionary, it is okay; there is no such thing as ‘cheating’ when it comes to relearning our Languages. We relearn by any means necessary. Technology can be a helpful tool in strengthening our cultures.
- **“Do all of these words have to do with sexuality?”** Yes. Even a hippopotamus has sexuality. Sexuality is more than just what we think about when we think about sex. **Sexuality is about who we are, how we express ourselves, how we feel about ourselves, what we like and don’t like, as well as how we communicate and create relationships with the Land, each other, and all living things. Sexuality is natural and happens throughout our lives.** Whether we have sex or not is only a small part of sexuality.
- **“Why is hippopotamus hard to translate?”** Because we don’t have hippopotamuses on this Land. Our languages are very connected to the Land, which is why they contain so much knowledge. Also, Indigenous people are very adaptable and resourceful, which are keys to survival. A good example of this is how we figured out how to say hippopotamus even though there is no word for it in the Language. **“Anyone want to share what they came up with?” “How do you say hippopotamus in your Language?”** (Answers are usually very funny.)
- **“Why is orgasm or masturbate sometimes left blank when we do this exercise?”** Because of colonization, and in particular the sexual abuse that occurred/occurs and the shaming and stigmatizing of sexuality because of the Residential School Legacy, many people are not comfortable talking about these things.
- Since Europeans arrived, there has been a tremendous amount of shame put on sex and sexuality. It is important to know that the shame is not our fault and if we are not comfortable talking about these things, it is okay. What is important to remember is that within Indigenous cultures prior to colonization, sexuality was understood as a normal part of life and there are healthy ways,

including language, rituals, medicines, ceremonies, and intergenerational education systems, that direct us to develop a healthy sexuality.³

- **“Does anyone want to share what the word orgasm or masturbate translates to?” “If someone were to think in their Original Language, what does it mean?”** Often, answers given are along the lines of “to explode,” “a big relief,” “feel really good,” “playing with themselves.” Sometimes deeper understandings that speak to Original Understandings of healthy sexuality are revealed. For example, one answer that came out is one translation of ‘orgasm’ in Cree meaning “to undo someone.” There are lots of meanings to re-discover!
- It is important to speak and relearn Original Languages because contained in them is not only the knowledge, wisdoms, Original Understandings, and instructions from the Ancestors, but as we relearn and continue to **think** in our Languages, we restore our worldviews to their rightful places in the body, hearts, and minds of The People. This is key to recovering from the impacts of colonization and it brings healing to the Nations in a practical, tangible, life-affirming way that promotes pride and health.

Try to translate these words into your Original Language. Ask for help from friends, family, Elders, teachers, and community members.

Water

Earth

Friend

Condom

Fart

Hippopotamus

Respect

Laugh

Heart

Masturbate

Orgasm

Fire

Translate this example of asking for consent!

“Can I give you a hickey?”

Consent is Ask. Listen. Respect.

We might not get a yes every time, but we will never know unless we ask. Consent is important and builds healthy relationships.

Values Activity

Recommended Age: 12+

- Statements are adjusted for ages 12-13 and 14+.

Goals

- To discuss what values are and where they come from.
- To demonstrate how values can differ between individuals and can change over time.
- To examine how values influence our decisions and affect our perceptions when it comes to sexuality.
- To show how people and places may have contradictory values.
- To emphasize that no one should impose their values on another person.

Have Ready

- 'Values' statements.

Activity Introduction

- Ask youth, **“What is a value?”** A value is what is right or wrong for you, or what you believe in.
- Explain that everyone is going to pick three spots in the room to stand and move between. Spots can be one step over, or across the room. One spot represents 'Agree', one spot represents 'Disagree' and the third spot represents 'Neutral'. Only they will know which spot is which.
- Explain that you will read a series of statements.
- After each statement, the youth should move to somewhere between 'Agree-Neutral-Disagree' that they feel most accurately reflects their feelings about that statement. Explain that the 'Neutral' area includes not being sure what their feelings are, if they don't understand a statement, if they have never thought about their position on that particular statement, and/or if they do not want the rest of the group to know their position. *Note: This*

activity can be adjusted to the physical needs of the group, such as sitting and using thumbs up, down, and sideways.

- **Remind participants that this is a silent activity. This is important in maintaining a safer space where people feel comfortable participating.** This activity works best when people feel comfortable and respectfully express what they think. Aim for no talking, pointing, or laughing during the activity. Let youth know they will have a chance to share **after** the activity.

Values Statements: Ages 12-13

- In brackets after each statement are how Teen Talk would answer the statements based on our operating principles. (See the Introductory Chapter of the Teen Talk Service Provider Manual for Teen Talk’s Operating Principles.)
 - Suggested talking points for each statement are listed following the debrief and can be used in debriefing the exercise.
1. I believe that the media (Netflix, TV, movies, music, games, social media, etc.) accurately shows real life. (disagree)
 2. I believe that masturbation (touching yourself for sexual pleasure) is okay. (agree)
 3. I would feel comfortable starting a relationship or having sex with a person of a different culture or ethnic background. (agree)
 4. I believe that sex should be saved for marriage or for someone you love. (neutral)
 5. I am willing to support someone who is being sexually harassed. (agree)
 6. I believe it is okay to have sex without being in a dating relationship. (neutral)
 7. I am willing to speak up against someone being put down for who they are. (agree)
 8. I believe watching porn is okay. (neutral)
 9. I know best if or when I am ready for sex. (agree)
 10. I am confident I treat other people well, even when I disagree with them. (neutral)

Values Statements: Ages 14+

- In brackets after each statement are how Teen Talk would answer the statements based on our operating principles. (See the Introductory Chapter of the Teen Talk Service Provider Manual for Teen Talk’s Operating Principles.)
 - Suggested talking points for each statement are listed following the debrief and can be used in debriefing the exercise.
1. I believe that the media (Netflix, TV, movies, music, games, social media, etc.) accurately shows real life. (disagree)
 2. I believe that masturbation (touching yourself for sexual pleasure) is okay. (agree)
 3. I believe I have a responsibility to get tested for STIs if I am sexually active. (agree)
 4. I would feel comfortable starting a relationship or having sex with a person of a different culture or ethnic background. (agree)
 5. I believe that sex should be saved for marriage or for someone you love. (neutral)
 6. I believe it is okay to have sex without being in a dating relationship. (neutral)
 7. I am willing to speak out against transphobia and homophobia when I know it is happening. (agree)
 8. I believe watching porn is okay. (neutral)
 9. I am willing to support a friend who is having an abortion. (agree)
 10. I am willing to support a pregnant friend who is interested in adoption. (agree)
 11. I believe teens can be good parents. (agree)
 12. I know best if or when I am ready for sex. (agree)
 13. I am confident I treat other people well, even when I disagree with them. (neutral)

Debrief

- Ask youth, **“What did you think of the exercise?” “Have you thought about these issues before?” “Did you learn anything new about the group?”**

- **“Where do our values come from?”** Make a list of their responses; common ones include family, the Land, spirituality, religion, culture, self, media, friends, peers, school, past experiences, etc. We get different messages from different sources, and this can be confusing. Encourage youth to check in with how they personally feel and let them know they get to decide what fits best for them.
- It is important to think about our values because they influence the decisions we make, what we do, and how we take care of ourselves.
- **Values can change.** A part of maturing means finding your own values. This is often a process of mixing and matching the values of your family, culture, or religion with the values of your friends, the media, or your peer group with your own. Experiences can also impact values. Society’s values change over time. Fifty years ago, it was less common for people of different ethnic backgrounds to date or get married. Ten years ago, the room may have looked different when we talked about dating someone of the same gender. Societies and personal values are shifting.
- Remind the youth that each of us is allowed to have different ideas. **“Your values are entirely your business and you do not have to share them with others, especially if you feel unsafe.”**
- **“No matter what our values are, no one ever has the right to insult, harass, or physically hurt someone else because of what they believe. Making others feel unsafe is called harassment, and we all have the right to feel safe.”**

Suggested Talking Points for Values Statements

- Not all will need debriefing, but based on how the youth respond, you may want to address specific statements (e.g., homophobic or sexist values can be used as ‘teachable moments’).

I believe that the media (Netflix, TV, movies, music, games, social media, etc.) accurately shows real life.

The media often shows unrealistic expectations of how people should look and act. Often the relationships we see presented in the media are unhealthy. Media underrepresents many people and may

only show them as a stereotype. We all need to be critical of what we see in the media, and challenge what it presents to us as 'normal.'

I believe that masturbation (touching yourself for sexual pleasure) is okay.

Masturbation can be a safe and healthy part of someone's sexuality. Exploring our bodies can also be a good way to get to know yourself and what you like and don't like. Some people choose to masturbate, while others do not. We get to choose what is right for our bodies.

I believe I have a responsibility to get tested for STIs if I am sexually active.

Testing is an important part of taking care of our sexual health. If someone is sexually active, it's recommended to test every 6 months or with each new partner. Testing is completely confidential and free. Places like teen clinics are great because they do testing, have free protection supplies like condoms, and will answer any questions you might have.

I would feel comfortable starting a relationship or having sex with a person of a different culture or ethnic background.

People have a right to love, date, marry, or be attracted to whomever they choose. Have opinions/values changed over time/throughout history? Yes. At one point in history, interracial marriage was heavily discouraged, and the Canadian government used different policies to 'regulate' interracial marriage (e.g., Indian Act), and it was even illegal in the United States.⁴

I believe that sex should be saved for marriage or someone I love.

For some, sex is an intimate/special activity they would share with someone special to them. For others, sex may be more casual or not tied to marriage. Values differ among everyone, but neither is 'wrong or right,' just personal decisions.

I am willing to support someone who is being sexually harassed.

We have a right to express ourselves, our identity, and our sexuality. If someone is sexually harassed, it is not their fault. Ways to be supportive:

- Listen. Give them your full attention.
- Don't blame them. "You are not at fault here," or "They should have asked for your consent." (Commenting on their clothing, location, or behaviour doesn't help because it's not about them but about the person who did not respect consent.)
- Encourage them to speak out or make a complaint if they want to, but do not push them.
- Helpful things to say are, "I believe you. It's not your fault. What they did was wrong. I'm sorry that happened to you. I can listen if you want to share what's going on with you."

Sometimes our society excuses or justifies violence based on what someone was wearing, where they were, who they were with, etc. This is victim-blaming. In reality, no one ever does anything, says anything, or wears anything to deserve harassment or sexual assault. If you've experienced this, it is not your fault, and you deserve support. It is always the fault of the person who used violence. In fact, blue jeans are the #1 recovered article of clothing found after a sexual assault, which shows sexual assault is not about what someone is wearing. Assault and rape involve power and control.

(Note: If it comes up, address that sex trade workers do not deserve sexual assault. Sex trade workers have the right to decide whom they want to have sex with and when. It is never okay to force someone to have sex when they don't want to.)

Things to say to people negatively commenting on other peoples' attire include, "Well, they have a right to wear that. I'm glad I have the same right." "What you're saying sounds really judgmental."

I believe it is okay to have sex without being in a dating relationship.

For some, sex is an intimate/special activity they would share with someone special to them. For others, sex may be more casual or not tied to marriage. It is okay if casual sex is not for you, as values differ among everyone, but neither is 'wrong or right,' just personal decisions.

I am willing to speak up against someone being put down for who they are.

Sometimes we hear or see things that go against people's rights. It's important to think of safety first and speak out against discrimination when it won't bring more harm to the person or people experiencing it. If we see or hear discrimination happening, it's important to do something about it. Sometimes it's as simple as saying something like "that's not okay" or naming the discrimination. Other times, it means bringing extra support into the situation. For example, most schools have policies in place to protect students from discrimination like transphobia and homophobia, so telling a teacher or guidance counsellor or going up the school chain to the principal or superintendent might be needed. Most workplaces also have policies in place and their own management or human resources and levels of authority we can file complaints with.

I am willing to speak out against transphobia and homophobia when I know it is happening.

Sometimes we hear or see things that go against people's rights. It's important to think of safety first and speak out against discrimination when it won't bring more harm to the person or people experiencing it. Gender identities and sexual orientations are incredibly diverse, and no one has the right to hurt or put anyone down because of who they know they are or how we express ourselves. If we see or hear this happening, it's important to do something about it. Sometimes it's as simple as saying something like "that's not okay" or naming the discrimination. Other times, it means bringing extra support into the situation. For example, most schools have policies in place to protect students from transphobia and homophobia, so telling a teacher or guidance counsellor or going up the school chain to the principal or superintendent might be needed. Most workplaces also have policies in place and their own management or human resources and levels of authority we can file complaints with.

I believe watching porn is okay.

Porn can help people explore their sexuality. Simply watching porn will not cause an STI or pregnancy, so it is a safer activity. Problems arise when people try to learn from porn and think that what they

see is how sex should be in real life. It's important to remember when watching porn that it is made for entertainment and meant to please an audience, not the people in it. They cast actors with certain types of bodies, then put them into makeup fixed up by stylists. Lighting, scenery, sound, and camera people are directed for the best shot and many positions don't feel good in real life. There is lots of editing that goes into it and even in homemade or amateur porn, it is very staged and often fake. Plus, porn is often exploitive of the people in it, so being thoughtful about where we get it from and who is making money from it is important.

I am willing to support a friend who is having an abortion.

Believing someone who is pregnant has the right to choose what happens with a pregnancy in their body is called being pro-choice. Being pro-choice means that we support people who are pregnant in whatever decision they make, even if it is different from what we would choose. Ways to be supportive are keeping confidentiality, listening to them, going with them to appointments, understanding their experience is different from yours (i.e., this is not the time to share your values, stories, or experiences with pregnancy options), believing that they are making the right choice for themselves, respecting their decision, asking them what they need, and following through if you are able.

I am willing to support a pregnant friend who is interested in adoption.

It can be nerve-racking to ask for information that is important to us. We have a right to health information and info on pregnancy options. In Manitoba, a teen clinic is a good place to start to ask questions and find support about any pregnancy options, including adoption. Child and Family Services (CFS) and Adoption Options are the agencies that deal with adoptions in Manitoba. Because many people have negative experiences with CFS, having supportive people with you and taking notes on what is said when meeting with a CFS worker are good ideas. Finding, asking for, and receiving information from reliable sources are skills we can work on.

I believe teens can be good parents.

Many teen parents are discriminated against or are stigmatized. What do babies/children need? Love, food, shelter, etc. Can teens provide these things? Yes. Teen parents may need extra resources to help them be great parents, whether community resources outside the home, or from friends and extended family. If someone is not prepared to have a child or deal with an unplanned pregnancy, it's important to be using birth control (such as condoms and/or hormonal birth control) or abstinence.

I know best if or when I am ready for sex.

Every person knows themselves best and can choose if/when the time is 'right' for them. What does 'ready' mean? Having the communication skills to talk about birth control and STI prevention, being able to communicate your expectations of how sex will change/not change your relationship with that person, making sure you and your partner get tested for STIs, having birth control and an STI prevention plan in place, feeling comfortable communicating boundaries, etc. are all things that might help you decide if you're ready for sex. Also, some people might not be interested in sex ever. The point is, we each know best for ourselves and there are many things to consider.

I am confident that I treat other people well, even when I disagree with them.

The good thing about our values is we each get to figure out our own. Because we are deserving of respect and the ability to believe in what we want, we also must respect others' rights to their values and what they believe in. There are healthy ways to disagree with each other without hurting or putting each other down. This can make for interesting discussions and can lead to learning from each other. If we are unable to treat people well for what they believe in, we need to leave the situation, so we don't hurt anyone.

Body and Identity Rights Group Brainstorms

Recommended Age: 12+

Goals

- To identify sexual and reproductive rights that we all have.
- To empower youth to be responsible for their sexual and reproductive health.

Have Ready

- 2-3 flipchart papers, one for each group.
- Write 'Body and Identity Rights' as a heading.
- Markers and tape.

Instructions

- Divide the group into 2-3 smaller groups and provide each one with a flipchart and markers.
- Ask youth to write what rights and responsibilities they have when it comes to their body and identity. If they are stuck, prompt them with questions around rights for sexual health, reproductive health, sexual identity, etc.
- Have each group share their flipchart and tape to the front of the room.
- Debrief by adding any missing items from the bolded list below.

Debrief

- **Sexual Health: accurate information, confidential medical services, safer sex supplies such as condoms and birth control**
That's why we always let youth know about teen clinics or the places to go to get birth control and health services.
- **Three Legal Options: abortion, adoption, and parenting**

The person who is pregnant has the right to decide what happens with a pregnancy in their body because it is their body and life that stands to be the most affected. There are many values about abortion; however, as a legal option, it validates all values. No one has the right to stop a person who is pregnant from having an abortion or force them to have an abortion.

- **Sexual Orientation/Identity**

You have the right to have a crush on/date/love or be interested in having sex with any gender you want. Some people also don't have any interest in having sex with other people and that's okay too. Someone who has very little or no interest in sex may identify as asexual. A person's sexual orientation can be fluid and change throughout their lifetime.

- **Attraction**

You have the right to have a crush on/date/love anyone you want. Everyone has their own personal tastes and preferences. For instance, you may be attracted to people who are funny and tall, or outgoing and fat, or brainy and sporty, or thin and soft-spoken. Sometimes people date even when they don't want to or feel pressured to date even though they are not attracted to that person, because they feel peer pressure or are scared of what their friends or family might think/do.

- **Gender Identity**

Everyone has the right to their own gender identity. A person may identify as trans or non-binary when they identify with a gender other than the one they were assigned at birth. When someone identifies with a gender assigned at birth, it is when what the doctor says based on genitals (it's a boy or girl!) is actually right for that person. This is gender assignment, but gender isn't about our genitals. It's about who we know ourselves to be. People have the right to identify as male, female, trans, non-binary, Two-Spirit, or another gender-related term of their choosing, and to live free of harassment.

- Two-Spirit is an English term for Indigenous peoples' knowledge of gender. It can mean a person who walks between genders, one who carries the gifts of both males and females, or one who is

gender unique (not specific to any gender), and/or to identify as an Indigenous 2STLGBQ+ person. When Europeans arrived in North America, they introduced homophobia and transphobia to many Indigenous nations. Today, many Indigenous peoples are reclaiming this old understanding that there are more than two genders.

- Terms may have different meanings to different people. There are certain terms some folks don't like to use or call themselves and ones they do. If you're not sure, it's best to ask the person what they would like to be called. There are also more expressions than the ones we've mentioned that people like to call themselves.
- **Culture**
People also have a right to understandings from their own cultures and the Original Teachings of their Ancestors. There is much to learn from being curious, and practicing and celebrating the cultures we belong to. We have a right to explore sexuality in our own worldview.

“Why Do Teens Have Sex,” “Why Don’t Teens Have Sex,” & “Fun & Safe Activities” Group Brainstorms

Recommended Age: 14+

Goals

- To brainstorm reasons why youth do and don’t have sex.
- To brainstorm ‘fun and safe’ activities and discuss abstinence as a choice.

Have Ready

- Three pieces of flipchart paper, one for each brainstorm above. Write the name of each flipchart at the top.
- Markers and tape.

Instructions

- This exercise may be done in small groups or as a large group activity. For small groups, hand out flipcharts and markers and give youth ~10 minutes to write out as many responses as they can. Other options are to set the flipcharts around the room and have youth contribute to each list independently, or in teams as a relay race! The former options are better for producing discussion, and the latter are good for creating an independent or team movement activity.
- Invite the groups to present their flipcharts or read them aloud yourself if there are no volunteers.
- If doing as a large group, ask youth, **“Why do teens have sex?”** and write down their responses. Followed by, **“Why don’t teens have sex?”** and then, **“What are fun and safe activities?”** Preface this last flipchart with, **“What do we mean by safe?”** (Activities that are no risk for STIs/HIV and pregnancy.) Note: If not already on the flipcharts, the bolded responses (see below) should be added and addressed when debriefing.

Sample Flipcharts

Why Do Teens Have Sex?

- **Want to**
- **Feels good**
- **Are ready** (this is a good place to explore what it means to be ready for sex, see below)
- **Are horny**
- **Use drugs/alcohol** (mention that people sometimes make different choices when drunk or high)
- **To keep their partner**
- **Peer pressure**
- To rebel against parents/authority
- Want to have a baby
- To attain status
- Are in love
- To prove sexual orientation
- Forced, physically or verbally (important to debrief that this is sexual assault, explain that it's not their fault if they have been assaulted, and provide resources where people can go for help, e.g., Clinic Sexual Assault Crisis Program 1.888.292.7565, adults they trust, etc.)

Debrief

- Acknowledge that there are many reasons why youth choose to have sex. Ideally, we want youth to reflect on their motivation.
- If youth mention being forced to have sex, explain that it's not their fault and provide resources. See consent piece of "Consent & Other Things to Talk about Before Sex" activity.
- Encourage youth to check in with their own values. Ask youth, "**What does it mean to be ready for sex?**" (or making out or dating). Being ready can include checking in with thoughts, feelings, and the physical body.⁵
- At Teen Talk, we encourage youth to think about the following as being ready for sex:

- Figuring out what sexual activity means to them
- Knowing what's important to them
- Figuring out how comfortable they are with the idea of a sexual relationship
- Figuring out how it may affect their relationship
- Talking about consent with their partner
- Being able to talk about limits and boundaries (what they want/don't want) with their partner
- Having information about birth control (if applicable) and protection from STIs/HIV
- Thinking about pregnancy options (if applicable)
- Understanding how pregnancy happens (if applicable) and how STIs/HIV are spread
- Feeling comfortable with condoms/sex dams
- Getting tested for STIs/HIV
- Feeling okay with their body

Why Don't Teens Have Sex?

- **Don't want to**
- **Not ready**
- **Scared of STIs/HIV**
- **Scared of pregnancy, if applicable**
- **Too busy/no time**
- **Not interested**
- **Past experience** (If youth bring up sexual assault, explain that it's never a person's fault if they have been assaulted and provide resources where people can go for help, e.g., Clinic Sexual Assault Crisis Program, 1.888.292.7565)
- **Have poor body image**
- **Beliefs (religion/culture/spirituality)**
- **Partner doesn't want to**
- Future goals
- Don't have a partner
- Afraid of parents finding out
- Rumours
- Values
- Not comfortable with partner/body

Debrief

- Normalize all the reasons people have for not having sex.
- Let youth know that any reason someone has for not having sex is okay. No one should ever feel pressured to have sex or do anything sexually they aren't comfortable with.
- Ask youth, **“What are some signs that someone may not be ready for sex?”**
 - You feel pressured
 - You or your partner needs to get drunk or stoned to do it
 - You're not sure about it
 - You can't talk about it with your partner
 - You don't have a way to protect yourself from STIs and pregnancy (if applicable)
- When it comes to sexual activity, there are many ways to show affection, and sex is only one way. The biggest sexual organ is the skin, followed by the brain. We are only limited by our imaginations, and this would lessen the emphasis on 'doing it' or 'not doing it.'

Fun and Safe Activities

- Kissing
- Holding hands
- Massage
- **Masturbating**
- Talking
- Touching
- Common interests
- Hugging
- Hickies
- Hanging out with friends
- Watching movies
- Going for coffee/tea
- Playing bingo, card games
- Going for a walk
- Playing sports
- Phone sex/sexting
- Instant messaging
- Braiding each other's hair
- Ski-Doo ride/4 wheeling/boat ride
- Oral/anal sex (**requires debriefing, see below**)

Debrief

- Normalize all the ways that people show affection.
- Normalize masturbation as an activity that can give pleasure, with or without a partner, that has no risk of pregnancy or STIs.
- If the youth include oral or anal sex on the flipchart, debrief how STIs (including HIV) can also be spread that way. Let the youth know that oral sex can be made safer with condoms and sex dams (used on the clitoris, vulva, anus, or scrotum) and anal sex can be made safer with condoms, lube, and communication.
- Use the list to show that abstinence or not having any type of sex doesn't have to be limiting or boring!

‘Fun & Safe Activities’ Relay Race

Recommended Age: 12-13

Goals

- To brainstorm ‘fun and safe’ activities and discuss abstinence as a choice.

Have Ready

- Two pieces of flipchart paper, one for each group. Write “Fun Activities with No Chance of STIs or Pregnancy?” on each paper.
- Markers and tape.

Instructions

- Tape flipcharts around the room on opposite sides, with space for youth to line up.
- Divide group into two and invite them to line up in front of their flipchart paper.
- Explain this will be a relay race. The team with the most answers wins. The marker is like a baton. Each person writes an answer and passes the marker back to the next person. Keep going until time is called. Remind youth that spelling doesn’t count, but legibility will. *Note: Allow enough time for a minimum of 1 answer from each youth. Ideally, this activity runs for 2-3 minutes.*

Sample Flipcharts

Fun and Safe Activities

- Kissing
- Holding hands
- Massage
- **Masturbating**
- Talking
- Touching
- Common interests
- Hugging
- Hickies
- Hanging out with friends
- Watching movies
- Going for coffee/tea
- Playing bingo, card games
- Going for a walk
- Playing sports
- Phone sex sexting
- Instant messaging
- Braiding each other's hair
- Ski-Doo ride/4 wheeling/boat ride
- Oral/anal sex (**requires debriefing, see below**)

Debrief

- Normalize all the ways that people show affection.
- Normalize masturbation as an activity that can give pleasure, with or without a partner, that has no risk of pregnancy or STIs.
- If the youth include oral or anal sex on the flipchart, debrief how STIs (including HIV) can also be spread that way. Let the youth know that oral sex can be made safer with condoms and sex dams (used on the clitoris, vulva, anus, or scrotum) and anal sex can be made safer with condoms, lube, and communication.
- Use the list to show that abstinence or not having any type of sex doesn't have to be limiting or boring!

Additional Activities

Ideally, this activity can be followed by:

- Sexual Readiness Brainstorming Activity
- Consent & Other Things to Talk about Before Having Sex Brainstorm

Sexual Readiness Reflection

Recommended Age: 12+

Goal

- To explore what it means to be ready for sex.

Have Ready

- Sexual Readiness worksheet.
- Flipchart paper and markers.

Instructions

- Hand out a worksheet for each person to complete as homework or individually during the session. Youth may write on their worksheet, or simply think about their responses.
- Reassure youth that no one will be asked to share their list. The worksheet is for their reference only.

Debrief

- Ask youth, **“What is the ‘right age’ for sexual activity?”** It depends. The right age will be different for everyone. Being ready can include checking in with thoughts, feelings, and body.⁶
- Ask youth, **“What does it mean to be ready for sex?”** Let youth share their thoughts and flipchart the responses (see below).
- If someone is choosing not to have sex or isn’t ready for sex yet, that is totally okay. Sometimes reflecting on these things can help a person see when they don’t feel ready for sex.
- Let youth know that thinking about these things or talking about them with a partner can happen at any time.

Sample Flipchart

What does it mean to be ready for sex?

- Figuring out what sexual activity means to them

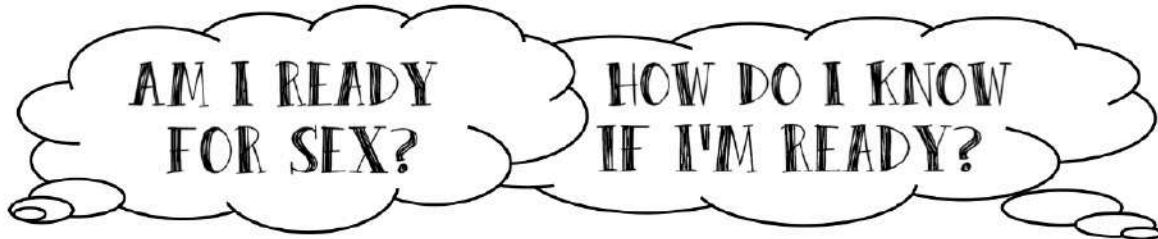
- Knowing what's important to them
- Figuring out how comfortable they are with the idea of a sexual relationship
- Figuring out how it may affect their relationship
- Being able to talk about consent and limits and boundaries (what they want/don't want) with their partner
- Having information about birth control (if applicable) and protection from STIs/HIV
- Understanding how pregnancy happens and considering pregnancy options (if applicable)
- Understanding how STIs/HIV are spread
- Feeling comfortable with condoms/sex dams
- Getting tested for STIs/HIV
- Feeling comfortable with their body

Additional Activities

Ideally, this activity can be followed by:

- Consent & Things to Talk about Before Having Sex Brainstorm

Teen Talk's Sexual Readiness Handout



I might feel ready for sex when...

- I can talk with partners about sex even when it's awkward
- I know where to get safer sex supplies (condoms, sex dams, birth control, etc.) and know how to use them
- I understand the basics of anatomy, STI/HIV prevention, testing, and how pregnancy happens
- My partners and I can talk about pleasure, comforts, and boundaries
- I can use consent

You could check all of these and still not be ready for sex

Trust what is in your heart and in your mind. You know what is right for you.

I might not feel ready when...

- I can't talk with partners about sex, condoms, birth control, sex dams, pregnancy, or testing
- I don't have enough info on things like anatomy, STI/HIV, or pregnancy
- It doesn't fit with my values/religion/spirituality
- It's not something that interests me



Consent & Other Things to Talk about Before Having Sex Brainstorm

Recommended Age: 12+

Goals

- To explore the negotiations that can happen when people have decided to have sex.
- To highlight the rights, responsibilities, and risks involved with having sex.
- To discuss consent:
 - Explain consent.
 - Explore coercion, and how alcohol/drugs impact consent.
 - Emphasize support after a sexual assault and offer resources.

Have Ready

- Write on a flipchart/whiteboard: Things to talk about before having sex.

Instructions

- Ask the group, “**What are some things to talk about with a partner before having sex?**” Validate their answers and add the following points if not mentioned by youth.

Sample Flipchart

Things to Talk about Before Sex

- **Comfort and Boundaries**
Normalize that there may be sexual activities youth want to try or like doing, and other activities they are not comfortable with.

- **Pleasure**
Sex should feel good for everyone. Checking in before and during sex (consent) is also part of pleasure and making sure that everyone is having a good time.
- **Expectations**
Encourage youth to ask themselves what dating and sex means to them and their partner(s). For some people, sex means being in a committed relationship together, while for other people it is a more casual thing. For example, dating does not automatically equal sex and vice versa. It might be helpful for youth to ask questions like, “How will this affect our relationship?”, “Would we have different expectations after sex/making out?”, etc.
- **Birth Control (if having penis-vagina sex)**
Highlight the importance of using birth control with penis-vagina sex if trying to avoid pregnancy. Ask youth, “**Where can you get birth control supplies?**” Mention also if someone is drinking and having sex, it is important to use birth control because alcohol can harm the fetus. Note: Project Choices is a free program in Winnipeg that explores alcohol, sex, and birth control. It is a brief service that offers information and individualized feedback to help girls and women make healthy decisions for themselves about alcohol use and contraception. For more info, call 204.784.4072.
- **Pregnancy Options (if having penis-vagina sex)**
No birth control is 100% effective and the 3 legal options in Canada are abortion, adoption, and parenting. People may have different values about which is the right pregnancy option, but the person who is carrying the pregnancy should make the final decision, as their body and life are most affected.
- **STIs, HIV, and Getting Tested**
STIs can be passed on with any type of sex. Let youth know, “**Many STIs/HIV show no signs, which means getting tested is the most accurate way to know if someone has an STI.**” Asking someone when the last time they were tested was and offering to go together can be a great way to talk about STIs without sounding judgmental.
- **Condoms and Sex Dams**
Highlight that condoms/sex dams protect us and our partners from STIs/HIV.

- **Consent** (short version if covered beforehand)
“Ask first, and only yes means yes. Consent is ongoing, which means you can change your mind anytime, and is also why it’s important to check in with your partner during sexual activity to make sure they are into what’s happening. It’s about asking, looking, listening, and respect.”

Debrief Consent

- When it comes to sexual situations, **“Does anyone know what the word consent means?”** Consent is clear permission, which means that only yes means yes. It’s a voluntary agreement, which means it’s not something that one person does to another, but rather it’s something that people decide to do together.
- **“Consent is about looking, asking, listening, and respecting. For example, let’s say that you want to kiss someone. What would consent sound like? What would you say?”** Can I kiss you? I’d really like to kiss you. (Anything they say that is respectful.) You might be thinking this is kind of weird or hard or seems really awkward, but the more we do it, the more natural it becomes.
- **Let’s practice asking for consent about something non-sexual.** Look to the person next to you and ask them about one activity you want to do this weekend. For example, “Do you want to go have lunch/play video games/go swimming, etc. with me?” **Truth is, we are using consent all the time.** “Did any of you hear a yes?” Great. “Did anyone hear a no?” That is going to happen sometimes.
- **Part of asking for consent is listening to the response and respecting what they say/want. It’s also important to pay attention to what they’re doing non-verbally.**
- “If you ask if you can touch someone’s bum and they say yes, it’s bum touching time! If they say maybe later, I’m not sure, or nothing at all, what does that all mean?” No. **Sometimes hearing a no can feel hard or we might feel kind of rejected. Even though those feelings are normal, it’s our responsibility to deal with our feelings and respect the person who is saying no.**

- **Consent is also ongoing. This means that you have a right to say no at any time.** Doing check-ins during an activity is important. Check-ins sound like, “Is this okay?” or “Do you like it when I...” Check-ins are part of pleasure; they let us know what feels good for the other person, but they also let us know if someone wants to stop. **If someone ever looks uncomfortable, then it’s a good time to stop and check in.** So, if in the middle of bum touching, someone wanted it to stop, what would have to happen? Stop. If someone says “stop”, or “wait”, looks uncomfortable, or is pulling away, stop and check in with them. This could sound like, “You don’t seem really into this.” **If you are unsure, always stop and ask.**
- Asking for consent can be fun and sexy, and figuring out ways to talk about consent that feels comfortable for you can help. We know that it can be more complicated than just asking or saying ‘yes’ or ‘no.’ People don’t always talk about touching/sex before it happens; sometimes people communicate non-verbally, through eye contact and body language. **Ultimately, consent gives both people a chance to say whether they are into something and is part of creating trust and respect in our relationships.**
- So, we just talked a lot about what consent is, now we’re going to share some things that consent is not. **Consent is not coercive, which means trying to change someone’s no into a yes by pressuring, nagging, or using guilt.** It’s also not okay to try to change someone’s no into a yes through alcohol or drugs, or to wait until someone is drunk or high to ask them for consent. What’s the most respectful thing to do if people are drunk or high? Wait until they are sober, bring them water, help them get home, or watch over them, etc. **Ultimately, consent doesn’t count when people are drunk or high.** That doesn’t mean that every time there is drinking and sex it’s a sexual assault, but we do know that it happens. **What’s important to know is that any unwanted sexual attention or contact is not okay.**
- **If you have ever experienced sexual assault, it is never your fault.** It doesn’t matter where you were, who you were with, what you were wearing, or if you were drunk or high. If someone chooses to assault another person, it’s always the fault of the person who is choosing to use violence.

- **People have a right to be believed and get support. No one must go through recovering from that experience alone.** It can help to talk to someone you trust. You can access support for you or a friend. If you know someone or have a friend who has experienced a sexual assault, a couple of good things you can say are: “It’s not your fault,” and “I’m sorry this happened.” You can ask them how you can support them, and you can also give them information about the Sexual Assault Crisis Program (SACP). **The Klinik Sexual Assault Crisis Line is a great resource that people can call if they need to talk. You can also call the line if you’re feeling upset or unsure about a sexual experience. It is open 24/7 and free to call from anywhere in Manitoba. Their phone number is 1.888.292.7565 or 204.786.8631. If someone needs to go to the hospital or a clinic after an assault, a counsellor from SACP can be there to support them.**

Debrief

- These conversations may feel a little awkward at first, but the more we try to have them with our partner(s), the more open and honest relationships can be. It doesn’t guarantee that our partners will always be a perfect match, but it can help us decide if we want to be sexually active with someone.

Appendix: Educational Curriculum Connections

Our curriculum ties to the Manitoba Government learning outcomes. The following language used is not our own. For more information, please visit www.edu.gov.mb.ca/k12/cur/physhlth/

Grade 7

K.3.7.B.6a Establish safety guidelines to protect self and others from sexually abusive situations (e.g., pornography, incest, stalking, prostitution, sexual assault...).

K.3.7.B.6b Demonstrate an understanding of skills (i.e., problem solving, conflict resolution, communication, assertiveness, anger management skills) in dealing with case scenarios related to sexually abusive situations and ways to seek help.

K.5.7.E.3b Identify the effects of social influences (e.g., styles related to dress, hair, make-up, jewellery; cultural rituals; gender equity; harassment, nudity; violence against women...) on sexuality and gender roles.

K.5.7.E.3c Identify responsibilities (e.g., respect, abstinence...) and sources of support (e.g., parents, nurses, doctors, counsellors, helplines, community health services, religious leaders, recommended books...) with regard to sex-related health issues.

S.5.7.A.5 Apply a decision-making/problem-solving process in case scenarios for making informed decisions regarding responsible sexual behaviours (e.g., abstinence, pregnancy prevention, safer sex practices...).

K.4.7.A.3 Explain the benefits of using the decision-making/problem-solving process for making responsible and health-enhancing personal decisions (e.g., prevents impulsive and/or negative decisions, contributes to long-term health...).

Senior 1-4

K.4.S1.B.4 Identify examples of potentially dangerous situations and effective strategies for avoidance/ refusal.

K.4.S1.B.2b Identify appropriate social behaviours for developing meaningful interpersonal relationships.

S.4.S1.A.2 Design, Implement and Evaluate an action plan for making a decision based on personal values and beliefs related to physically active and healthy lifestyle practices.

K.5.S1.E.2b Examine the psychological implications of sexual activity and teenage pregnancy, and responsibilities regarding prevention

K.5.S1.E.3b & K.5.S2.E.3b Examine the influences on making decisions for responsible sexual behaviour.

K.5.S1.E.3a Describe social factors affecting human sexuality.

K.5.S2.E.3a Examine sexuality as it is portrayed in the media

S1 2.1.1 identify and describe the stages of physiological growth and development in adolescents and how each stage can be nurtured

S1 2.1.2 distinguish between puberty and adolescence

S1, S2, S4 2.3.2 evaluate the role of abstinence in relationships, e.g., mental health, pregnancy prevention, physical health—STIs, emotional health

S1 5.2.3 identify and evaluate adolescent mental and physical health issues, e.g., depression, health issues—STIs, alcohol and drug abuse, learning disability, physical disability, family abuse or violence, personal or family illness

S1 5.1.4 define, classify, and determine personal values and goals

S1 5.1.5 examine how decisions affect one's well-being

Endnotes

- ¹Pratt, D., & Bone, H. (2014). *Untuwe pi kin he who we are: Treaty elders' teaching volume 1* (Vol. 1, p. 160). Treaty Relations Commission of Manitoba and the Assembly of Manitoba Chiefs Secretariat.
- ²Indigenous Climate Action. (2018, March 19). *Violence Against the Land is Violence Against Women*. Indigenous Climate Action. <https://www.indigenousclimateaction.com/entries/violence-against-the-land-is-violence-against-women>; Honor the Earth. (n.d.). Chasing out the spectre of man camps... In *Honor the Earth* (pp. 1–2). https://www.honorearth.org/man_camps_fact_sheet; Laboucan-Massimo, M. (2018, March 8). Climate justice must include gender justice. *David Suzuki Foundation One Nature*. https://david Suzuki.org/story/climate-justice-must-include-gender-justice/?utm_campaign=stories-womensDay-en-08mar2018&utm_source=facebook&utm_medium=page-link
- ³“Traditionally in Indigenous cultures sexuality was seen as a gift and a source of great pleasure. Community adults openly taught children about their bodies, the moon time, and other sexual and reproductive passages. The Kokums, Grandmothers, were the keepers of the knowledge of herbal medicines for, among other things, birth control. This perspective was lost with the influence of the church and residential schools. The impact of the church-run schools, what the schools taught about sex, and the sexual abuse experienced there has made talking about sex for many Indigenous people taboo.” From Aboriginal Nurses Association of Canada, & Planned Parenthood Federation of Canada. (2002). *Finding our way: A sexual and reproductive health sourcebook for Aboriginal communities* (p. 339). Aboriginal Nurses Association of Canada.; Thoms, J. M. (2007). Leading an extraordinary life: Wise practices for an HIV prevention campaign with Two-Spirit men. In (pp. 1–68). 2 Spirits.
- ⁴Thompson, D. (2009). Racial ideas and gendered intimacies: The regulation of interracial relationships in North America. *Social & Legal Studies*, 18(3), 353–371. <https://doi.org/10.1177/0964663909339087>
- ⁵Calgary Sexual Health Centre. (2013, April 29). *Sex without regret: Checking in with “head, heart, body.”* Centre for Sexuality. <http://calgarysexualhealth.ca/2013/04/sex-without-regret-checking-in-with-head-heart-body/>
- ⁶Ibid.

CHAPTER 3

Anatomy and Puberty Activities

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“Bits and Pieces” Teen Talk’s Anatomy Section

Recommended Age: 12+

Goals

- To review and explain how genitals and the reproductive system work.
- To show how birth control works in the reproductive system.
- To destigmatize body parts.

Have Ready

- Anatomy pictures. (See pictures at the end of this section for examples.)

Instructions

- Let youth know that some of the terms we will use are technical words that don’t always match the names we might give our own body parts (e.g., trans, gender fluid, or intersex youth). **We want to support everyone in using the language that feels best for them. We each get to decide what we call our own body parts.**

Note to Facilitators

- A typical Teen Talk approach is to take a topic that requires information-giving (lecture style) and to make it interactive by getting youth to guess or participate by answering questions. The following activity is one way this strategy can look, but it can be modified depending on their willingness to participate. You may find it helpful to ask more or fewer questions. *Note: Remember that this is a perfect opportunity to illustrate sex-positivity, inclusive language, and a youth-friendly approach by showing comfort talking about genitals. This can take some practice.*

Anatomy of a Body with a Vulva

- Note: We avoid calling this a ‘female’ body, as many Two-Spirit, transgender, and gender non-conforming people may have a vulva and not identify as female.
- Let the youth know that most pictures of anatomy are limited in their use of colour, body shape, body hair, size, etc. Teen Talk says something like, “These are drawings that can help us learn about anatomy. Everyone’s genitals look different/unique (skin colour, body size, pubic hair, etc.). Whatever you look like is okay. If you don’t feel comfortable looking at these drawings, it’s okay to look away.”
- Show the pictures and point to the various parts. **Share the following information with the youth:**

External Picture

This person has 3 openings below the waist. They are the anus, vaginal opening, and the urethra.

Anus

What comes out of there? Gas/farts and feces/poop – everybody has these functions.

What could go in? Finger, penis, sex toy. **It is up to the owner of the anus to decide what (if anything) goes in. If they say it’s a no, then nothing should go in.** Some people use their anus for sex, and others do not. It is a personal choice. **If someone chooses to use their anus for sex, there are a few things to know about.** First, it is important to **use extra lube** before inserting anything into the anus. It is also important that **nothing moves from the anus to another opening without being washed well.** The anus naturally has bacteria inside of it, but other body parts do not like these bacteria. **Finally, sex toys must be designed for safe use with the anus, which means having a wider base or a handle.** This is because the anus does not have a natural stopper and things not designed for safe use with an anus may get accidentally stuck.

Vaginal Opening

What comes out of there? If a person chooses to carry a pregnancy to term and has a vaginal birth, a baby can. Also, vaginal fluids

including sex fluids (which is a way to clean itself and stay healthy), and period/blood/Moon Time. Note: The term 'Moon Time' refers to traditional Indigenous teachings of womanhood and often particularly refers to the menstruation cycle as it coincides with rhythms of the Earth and cycles of the Moon. Vaginal fluids can change throughout the menstrual cycle, and there could be more sex fluids present if someone is turned on or orgasms. Note: Some youth may say pee/urine; this is a common misconception, as pee comes from a different opening. FYI: Vaginal discharge can also indicate where a person is in their menstrual cycle.¹

What could go in? Fingers, penis, toys, tampons, certain types of birth control. **It's up to the owner of the vagina to decide what (if anything) goes in. It's always about consent.**

Urethral Opening (or pee-hole)

What comes out of this opening? Pee/urine. As part of arousal, some people with this body may ejaculate sex fluid near the urethra (called the Skene's gland).

What could go in? It's a pretty small opening, so usually nothing goes inside. If anything were to go in, it would have to be very clean because there's a risk of infection.

Clitoris

Just above the urethral opening is a nub of flesh. Does anyone know what that is called? Clitoris, clit. Only a small part of the clitoris is visible. The clitoris is much larger, but most of it is inside the body.

Does anyone know what the clitoris is for? For pleasure, including orgasm. A person can touch themselves or give consent to someone else to touch their clitoris for pleasure. FYI: The clitoris interacts with over 15,000 nerve endings throughout the whole pelvic area. It is created of the same sort of erectile tissue, called corpus spongiosum, that the head of a penis has. During sexual arousal, the clitoris swells with blood and becomes slightly larger and usually more sensitive.²

The outside area (the part you can see) of this person's body is called the vulva. The vulva has two large 'lips' called the labia.

Everyone's vulva and labia are unique, and come in different colours, lengths, and sizes.

Internal Picture

Vagina

This is an internal view of the vagina, which is made of muscle. It may be different lengths/widths. If somebody is sexually aroused, the vagina may lengthen.

Cervix

The cervix is at the end of the vagina. It stops things from going further into the body. The cervix has a small opening that allows sperm and menstrual blood to pass through it. The cervix can also open (dilate to 10 cm) during the birthing process. It is impossible to lose a tampon or condom in the vagina or for a penis or sex toy to go inside the uterus because of the cervix. FYI: It is safe for people who are pregnant to have vaginal sex because the fetus is on the other side of the cervix. FYI: The opening of the cervix is widened by medical staff for certain medical procedures such as inserting an IUD.

Ovaries, Fallopian Tubes, and Uterus

These are the ovaries, which is where eggs are stored. People with this body are born with a set number of eggs. Eggs are released (ovulation) according to the person's cycle and can be released more than once per cycle.

These are the fallopian tubes. When an egg is released from the ovaries, it travels to the fallopian tubes. If there is unprotected penis-vagina sex or if a condom breaks, sperm will travel through the cervix to the fallopian tubes. The egg and sperm may hook up, creating a fertilized egg that will travel to the uterus.

This is the uterus. The lining of the uterus is made up of blood vessels and tissue, which thicken as part of the menstrual cycle. If an egg is fertilized and successfully attaches to this lining (implantation), this is when we would say a pregnancy has occurred. If an egg is not fertilized or the fertilized egg cannot attach to this lining, then a pregnancy will not happen and the lining will be shed by the body, becoming period blood, as part of the menstrual cycle. Note: Make clear the difference

between ovulation and menstruation. Note: To remain consistent with pro-choice terminology, use 'fetus' versus 'baby' when in the womb/uterus and 'carry to term' when discussing birthing.

If penis-vagina sex is happening, are there any days that people cannot get pregnant?

(No.) There are more likely days and less likely days, but there are no days where someone could not get pregnant. This is because cycles may vary from month to month, making it difficult to know when the ovaries will release an egg, and also because sperm may live in the body for up to five days.³ **If you are interested in having penis-vagina sex and do not want to create a pregnancy, then it is important to use condoms and/or birth control each time.**

Anatomy of a Body with a Penis

How many openings does this person have below the waist? Two.

Anus

The same things may come out and some people with this body may choose to use their anus for sex. **The same safety tips apply around using an anus for sex.**

Penis

What is this? (A penis.) **Every penis looks different;** they come in a variety of curves, colours, and sizes. This picture shows an uncircumcised penis (foreskin intact), but they can also be circumcised (foreskin removed, usually as an infant). The second opening, the urethra, is at the tip of the penis.

What comes out of this opening? Ejaculate (cum), pre-ejaculate (pre-cum), and pee/urine.

What could go in? Like all urethras, it's a pretty small opening, and it's important to remember that whatever goes in has be very clean, as there is a risk of infection.

Testicles

What are these? Testicles.

What holds the testicles in? Scrotum.

What do they make? Sperm. The testicles are kind of like a sperm factory. FYI: Some people only have one testicle. If something like testicular cancer is caught early on, a testicle may be removed.

Why does a penis become erect? (Aroused/thinking about sex.) Sometimes erections also happen for no reason at all, especially during puberty. This is a normal and healthy thing for the body to do. When the penis becomes erect, blood rushes to the area and makes the penis hard (i.e., there's no bone in 'boner,' no wood in 'woody').

The second thing that happens to the penis upon erection is that it secretes pre-ejaculate or pre-cum. Pre-cum may contain sperm or an STI/HIV (if the person has one), so it can create a pregnancy and/or transmit an infection. **This is why 'pulling-out' is not an effective way to prevent pregnancy/HIV/STIs. Putting a condom on a penis before it goes near anyone's mouth, anus, or vagina reduces the chances of transmitting an STI/HIV or creating a pregnancy.** FYI: Pre-ejaculate is created by the Cowper's gland to lubricate the urethra, neutralize acidity so that sperm can survive, and facilitate the flow of semen during ejaculation. Sperm and STIs/HIV may exist in pre-ejaculate due to having been left in the urethra from prior ejaculation.⁴

When an erection occurs, sperm in the testicles start to move up a tube called the vas deferens. The sperm pass through three glands (the two seminal vesicles and the prostate gland), which add fluid and more energy, becoming semen. As part of peak arousal, the penis may ejaculate/cum by releasing the semen from the urethra. FYI: Semen is different from sperm in that it consists of protein that allows sperm to live longer and travel faster and further. Semen can have millions of sperm in it.

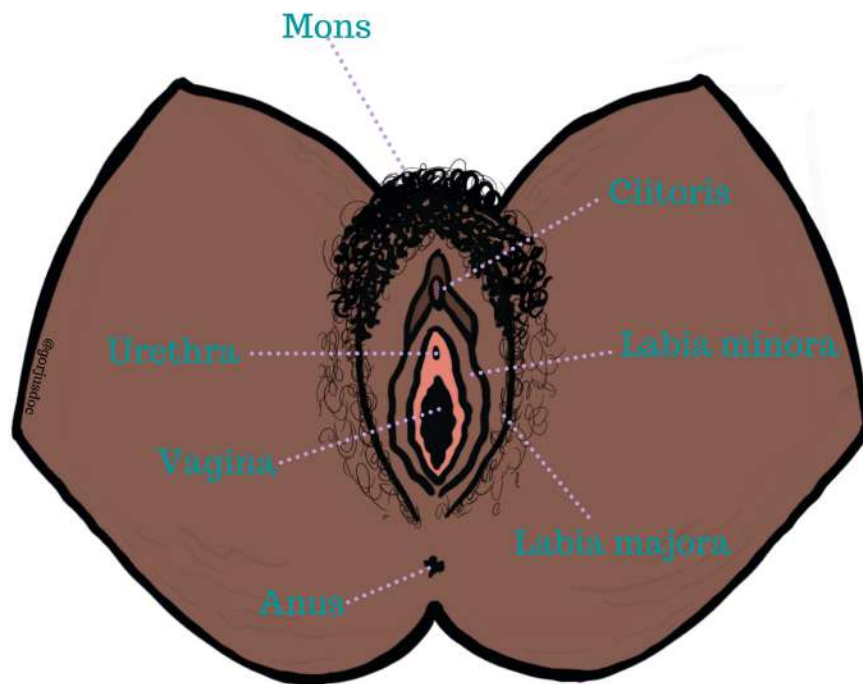
One of the glands we mentioned is the prostate gland. **It is close to the anus and can be a place of pleasure for someone with this body.** Some people like to stimulate the prostate through the anus. Again, this is a personal choice.

Can someone ejaculate (cum) and urinate (pee) at the same time? Ejaculating and urinating at the same time is impossible. The bladder is where the urine is stored. When the penis gets erect, there is

this trap door (valve) to the bladder that closes. It is possible to pee with an erection, but it would not happen accidentally. FYI: 'Morning wood' or morning erections are technically night-time erections that happen three to five times per night. They are part of the body's natural cycle during sleep.

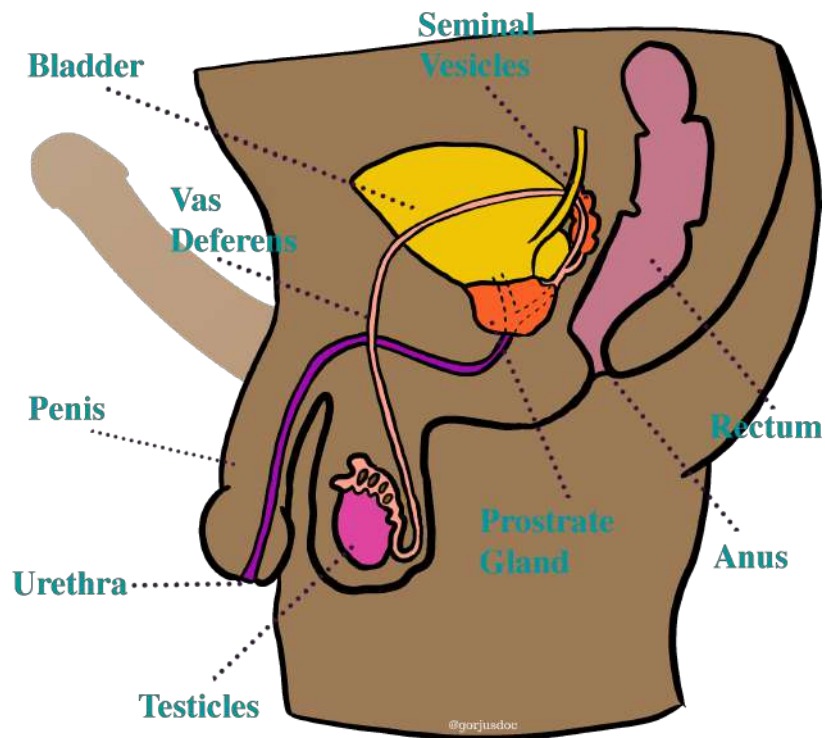
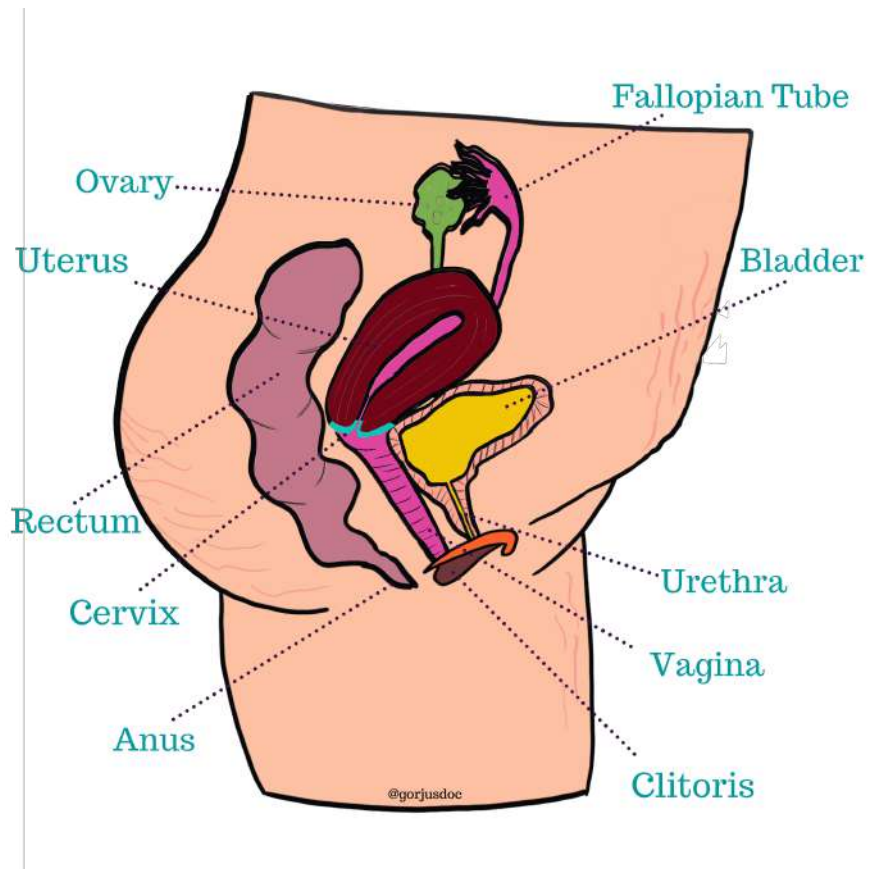
Anatomy Answer Key

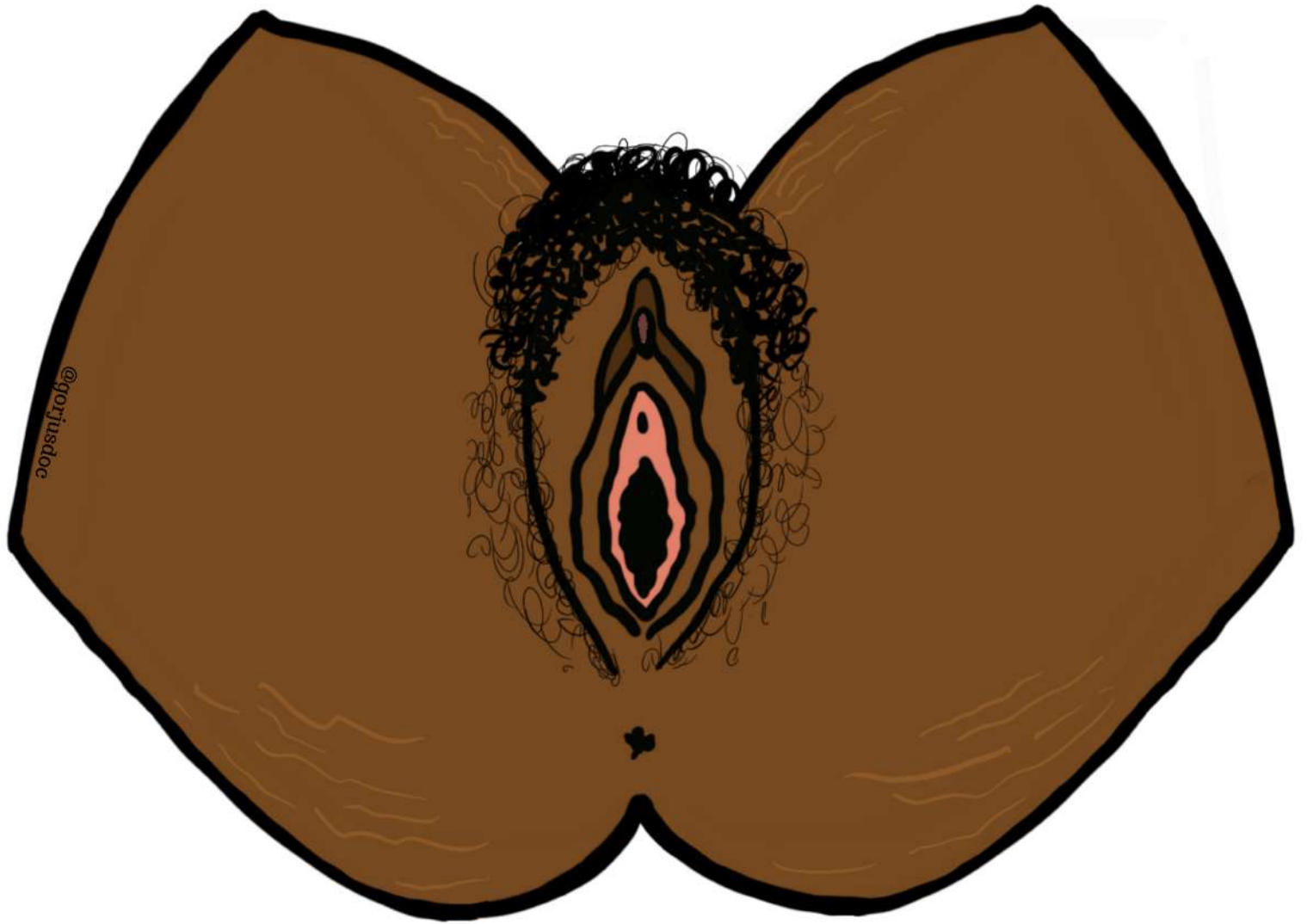
The vulva is the outer genital area.

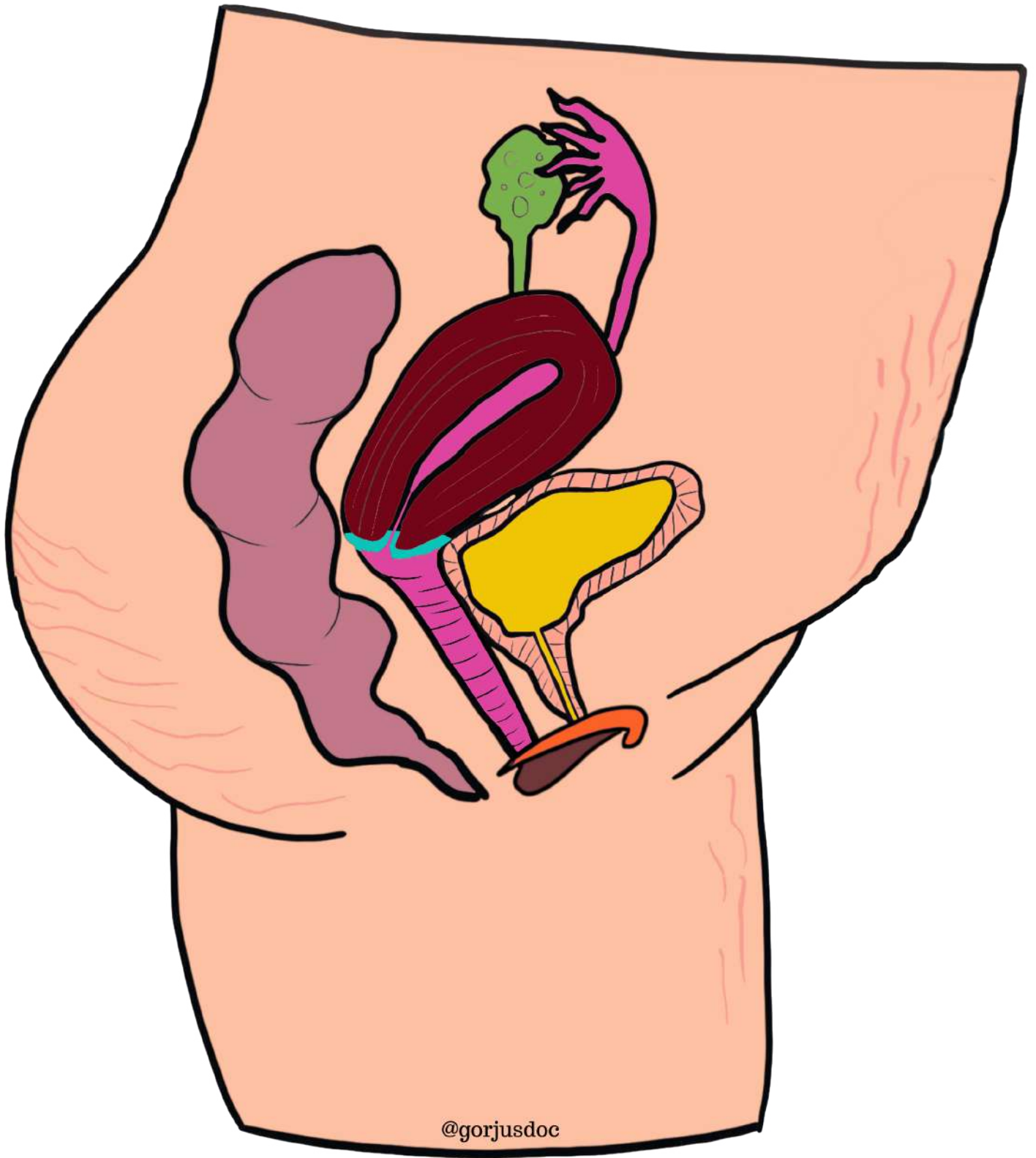


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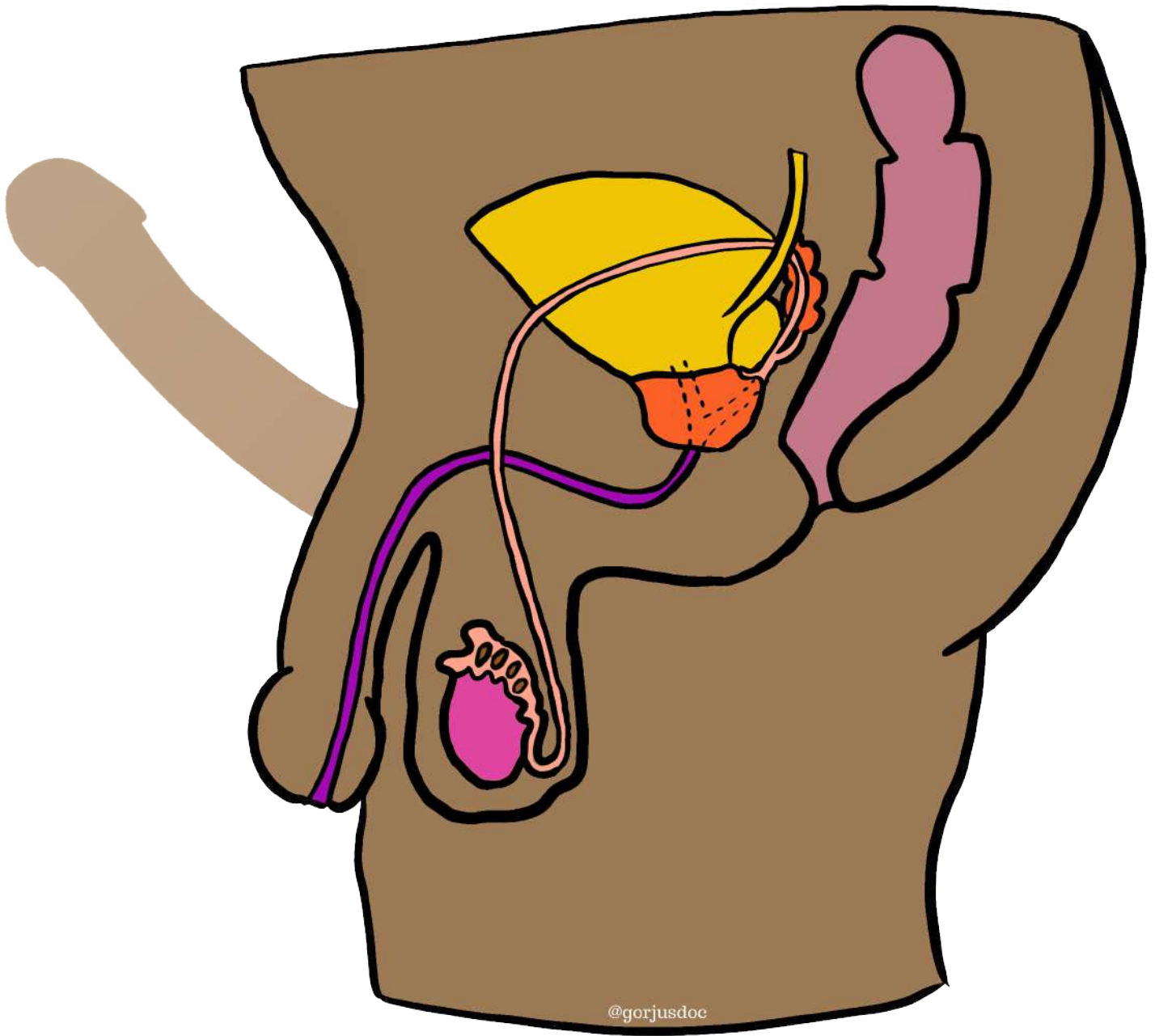
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“Anatomy on Your Back” Card Game

Recommended Age: 12+

Goals

- To review anatomy.
- To understand the important role that many of our body parts can play in sexual activity and intimacy.

Have Ready

- Body part cards; see example cards below.
- “Bits and Pieces” anatomy pictures available to debrief, answer questions, or clarify where body parts are located.

Instructions

- Select enough cards for the number of participants. Make sure there is a mix of reproductive and non-reproductive body parts in the cards you select.
- Tape a card onto each person’s back.
- Ask youth to guess the body part on their card by walking around and asking the others questions that can be answered with either ‘yes’ or ‘no’. For example, **“Is it on all bodies?” “Is it above the waist?” “Is it below the head?” “Is there more than one?”** etc.
- When they have guessed the body part correctly, they can stick the card on their front and get a new card if there are any left, or help others guess their parts.
- Invite youth to ask you for a hint if they are really stuck.

Note to Facilitators

- It can be helpful to show the participants how to play the game by getting someone to tape a card on your back and then asking the group ‘yes’ or ‘no’ questions until you guess correctly.

Debrief

- Have the anatomy pictures ready to answer questions and review.
- Questions to ask the group:
 - **What did you think of the activity?**
 - **What does 'your' body part do?**
 - **Where is it located?**
 - **Which parts were really hard to guess?**
 - **Which parts do you want to know more about?**
- Ask youth, **“Was there a body part you were surprised to see in a game about sexual anatomy?”** All body parts can be considered sexual parts (the brain, eyes, feet, etc.). Sex is about affection, communication, and intimacy, and there are many different ways that people can be sexual or show affection. This also means that when people are choosing abstinence, there are many parts of the body that can be used for pleasure without any risk of STI transmission or pregnancy.
- Explain that by knowing the technical names of our body parts and how our bodies work, we will be more aware of how to communicate with partners about sex, how to talk to doctors about health concerns, how to prevent infections, how to read birth control instructions, and how to prevent pregnancy, if applicable.
- Ask the youth, **“What is the biggest sex organ?”** Either the brain or the skin. We have nerve endings all over our body, and a brain that creates our thoughts and desires. This reminds us that pleasure is experienced in many different ways with more than just the genitals and we are only limited by our imagination.

anus	vulva
arms	legs
ears	toes
cervix	vas deferens

eyes

foreskin

scrotum

labia

nipples

vagina

testicles

fingers

brain

uterus

ovaries

penis

breasts

nose

clitoris

urethra

Anatomy Vocabulary

Recommended Age: 10-13

Goals

- To review anatomy parts.
- To normalize saying body parts.

Have Ready

- Definition cards.
- Tape.

Instructions

- Note: Optional for younger classes; you can write out the list of body parts on the board. Cross off the word once correctly guessed. Older groups may guess without the added cue.
- Explain that you will hand out cards with definitions of different body parts. If someone receives a card, their job will be to read out the card. Other youth in the group will listen to the definition and guess which body part it is. Note: For younger groups, it can be helpful to remind them that only one person should speak at a time so that everyone can hear.

Debrief

- **Penis:** Organ on the outside of a body that carries out urine or semen.
- **Uterus:** Pear-shaped organ where a fetus grows into a baby until it is born.
- **Ovaries:** Two oval organs inside a body that hold ova, or egg cells.
- **Vagina:** A tube made of muscle that a baby may pass through when being born.
- **Scrotum:** Sack of skin that holds two testicles.
- **Testicles:** Two balls that hang in the scrotum, where sperm is produced.
- **Hormones:** Chemicals in the body that cause puberty to begin.

- **Fallopian Tube:** Tube that carries an egg cell from an ovary to the uterus.
- **Urethra:** The opening on a body that pee comes out of.

Organ on the outside of a body that carries out urine or semen

Pear-shaped organ where a fetus grows into a baby until it is born

Two oval organs inside a body that hold ova, or egg cells

**Sack of skin that holds
two testicles**

**Two balls that hang in the
scrotum, where sperm is
produced**

**Chemicals in the body that
cause puberty to begin**

**The opening on a body
that pee comes out of**

**Tube that carries an egg
cell from an ovary to the
uterus**

**Tube made of muscle that
a baby may pass through
when being born**

Puberty Changes Relay

Recommended Age: 10-13

Goals

- To examine the physical and emotional changes of puberty.
- To normalize the changes that happen in different body types.

Have Ready

- Flipchart paper.
- Markers and tape.

Instructions

- Post two flipchart papers on the wall with the title 'Changes During Puberty'.
- Explain that we are going to have a relay race between two groups. The goal is to write down the changes, both physical and emotional, that can happen during puberty. The team with the most answers wins.
- The marker will be the baton; write one thing down and then pass the marker back.
- Divide the class into two groups and have each group line up by one flipchart.

Additional Activities

Ideally, this activity should be followed by:

- Puberty Changes Drawing

Puberty Changes Drawing

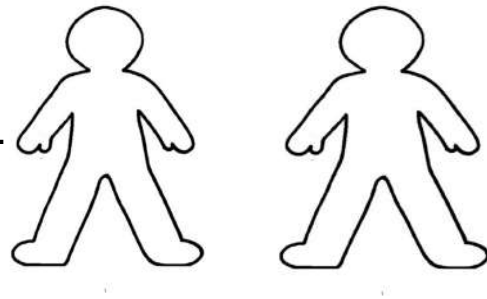
Recommended Age: 10-13

Goals

- To examine the physical and emotional changes of puberty.
- To normalize the changes that happen in different body types.

Have Ready

- Flipchart paper.
- Cut out body part signs.
- Cut out puberty changes cards.
- Tape.



Instructions

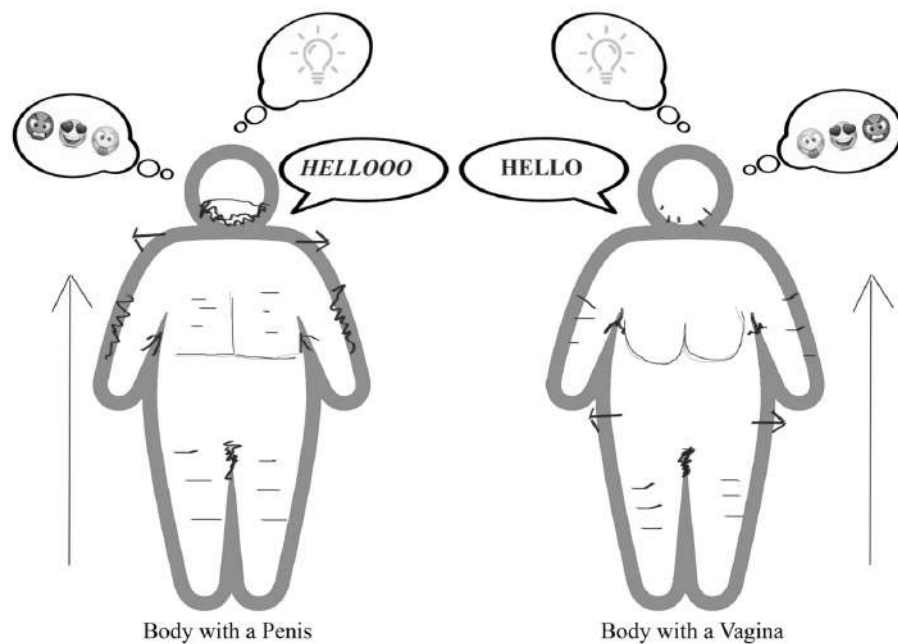
- Note: This activity works well after the Puberty Changes Relay, as it builds a list of possible body changes that can be used while creating the drawings.
- Draw a large outline of two bodies on a flipchart paper. (See example.) Beside one, write 'Body with a Vagina' and beside the other, write 'Body with a Penis'.
- Post the outline of the body.
- Ask the group about what changes happen to the body during puberty. Do these changes happen to both bodies, a body with a vagina or a body with a penis?
- Add doodles to each body as answers come up. This adds a visual element to the explanation. See the example below of a completed drawing.
- **Grow Taller (Both).** Some folks grow a lot, some folks only a little. Sometimes this happens quickly, and you may get cramps (sore muscles) because of how quick your body is changing.
- **Deeper Voice (Both).** The larynx, also known as our voice box, grows larger during puberty, which makes our voices deeper. On some bodies, when the larynx grows larger, it sticks out at the

front of the throat. This is what's called an Adam's apple. An Adam's apple is often more noticeable on bodies with a penis because their larynx usually grows larger than on bodies with a vagina. This is also why often, but not always, bodies with a penis get noticeably deeper voices. There may be an awkward in-between time where your voice feels screechy or cracks as it moves from being higher to lower. This is totally normal and will pass over time.

- **Hips Widen (Body with a vagina).** Both bodies go through muscle and bone changes, but bodies with a vagina usually get wider hips during puberty. This is all part of the body getting ready to be physically able to give birth, should someone choose to in the future.
- **Shoulders Broaden (Body with a penis).** Both bodies go through muscle and bone changes, but bodies with a penis usually have their shoulders broaden.
- **New Emotions (Both).** Puberty is a time of many changes, including having new and more complex emotions. Some of this is about the changes that happen as we grow into adults, and some of this has to do with all the extra hormones helping our body change. We might start getting crushes on people or find our emotions change a lot from moment to moment.
- **New Thoughts (Both).** Puberty is a time of growing from a kid into an adult. Part of this means starting to have new and more complex thoughts. We might start to understand things in a way we didn't before, or maybe we think of things in a totally different way than we used to.
- **New Body Hair (Both).** Both bodies grow new and more hair, including in the armpits, on the arms, legs, chest, face, back, and genitals. Some folks end up with a lot of hair, and some folks barely any at all. Often, bodies with a penis get more hair than bodies with a vagina do, especially on the face, but not always. Some bodies with a penis barely get any hair, and some bodies with a vagina get a bunch.
- **Chest Changes (Both).** Both bodies change and grow in the chest, although it is often a bit more noticeable in a body with a vagina.

Bodies with a vagina grow breasts, while bodies with a penis have changes in chest muscles.

- **Erections (Body with a penis).** Erections can happen from sexy touching, sexy thoughts, but also in the middle of math homework! These random erections are a natural part of puberty and will go away on their own.
- **Ejaculation/Discharge (Both).** Around this time, bodies may start having ejaculation and/or wet dreams. This is fluid or discharge that happens during arousal, including masturbation or sexy dreams.
- **Menstruation/Moon Time Starts (Body with a vagina).** Also known as a period, puberty is usually the beginning of someone's menstruation cycle. Cycles can vary in length from month to month, especially when you are younger. Many cultures have special teachings about periods. Connecting with Elders and knowledge keepers can be a great place to learn about them.



Debrief

- Puberty is the process we go through to grow from a child into a young adult.
- During puberty, lots of physical and emotional changes happen. There may also be extra responsibilities and roles that come during puberty.
- Explain that getting a period (also referred to as Moon Time by many Indigenous cultures) signals that ovulation (releasing an egg) has started. *Note: a person can get pregnant even before getting their first period.*
- Some people/cultures may also have special traditions/rituals or rites of passage when it comes to beginning menstruation, such as the Berry Fast, for example. Vision Quests can also be a rite of passage that some young men engage in as they transition into the next life stage. See the Youth Sexuality chapter of the Teen Talk Service Provider Manual for more information.
- Explain that changes in our bodies and emotions are caused by hormones, which, unless we are on medication, are beyond our control.
- Emotional changes (in particular, feeling attraction or horny) may contradict with the other factors (e.g., a youth's or other's values about sex), so it can be a confusing time.
- Acknowledge the mixed feelings youth may have about puberty. Let youth know that although puberty can make people feel awkward or self-conscious at times, it can also be an exciting, special time where some might feel happy and proud.

Genital Salad Game

Recommended Age: 10+

Goals

- To destigmatize body parts and normalize using technical words for genitals.
- To energize group through body movement.

Have Ready

- Chairs in a circle with no other furniture or barriers in the way. You need one fewer chair than the number of people playing.

Instructions

- Have students sit in a circle (without desks), facing each other.
- Assign each participant a body part name (penis, vagina, or anus).
- Stand in the middle of the circle and explain that the person standing in the middle of the circle will call out a body part name. When that body part is called out, participants who have been assigned this group will stand up and switch chairs. Whoever is left standing will move to the middle of the circle and call out the next body part name.
- 'Genital salad' can be called out for all participants to change spots.

Appendix: Educational Curriculum Connections

Our curriculum ties to the Manitoba Government learning outcomes. The following language used is not our own. For more information, please visit www.edu.gov.mb.ca/k12/cur/physhlth/

Grade 5

K.5.5.E.1a Describe the structure and function of the reproductive and endocrine systems of human beings (e.g., pituitary gland, estrogen, testosterone, progesterone, menstruation and spermatogenesis, fertilization, sexual intercourse...).

K.5.5.E.1b Identify the physical changes associated with puberty and the importance of personal hygiene practices (e.g., growth of body hair, changes in body shape, hormones, acne, body odour, menstruation, erection, ejaculation, emissions, use of sanitary products...).

K.5.5.E.1c Describe how heredity (e.g., chromosomes, DNA...) influences growth and characteristics that contribute to personal identity (e.g., height, eye colour, bone structure, hair colour, body build, individual growth patterns, features, fraternal and identical twins...).

K.5.5.E.2 Identify the social- emotional changes associated with puberty (e.g., sexual attraction, fluctuation of moods, insecurities...).

K.5.5.E.3c Identify the responsibilities (e.g., change clothing for physical activities, bathe frequently, use deodorant, use sanitary products, respect private spaces, keep personal matters private, show consideration for others, respect differences, do not ridicule...) associated with physical, social, and emotional changes during puberty (e.g., body odour, menstruation, erections, emissions, peer pressure, social etiquette, insecurity...).

S.5.5.A.5 Apply a decision-making process in case scenarios related to issues associated with puberty (e.g., timing of physical changes, teasing

related to different developmental rates, being discreet, respecting privacy of others, being sexually active, showing affection...).

Grade 7

K.5.7.E.1a Describe the human reproductive systems as they relate to fertilization and fetal development (e.g., names of the genitals, union of sperm and egg, stages of fetal development at each trimester, sexual intercourse...).

K.5.7.E.1b Explain the human reproduction process and recognize myths related to fertilization (e.g., can't get pregnant the first time, when intercourse is interrupted, when using contraception, if douching immediately afterward, and in certain body positions...).

K.5.7.E.3a. Recognize the importance of sexual abstinence as a responsible decision for the adolescent male and female (e.g., abstinence prevents STIs and AIDS; parenthood entails many personal responsibilities; teenage pregnancy puts the baby at risk, affects career choices, and can have traumatic psychological and sociological effects...).

K.5.7.E.3b Identify the effects of social influences (e.g., styles related to dress, hair, make-up, jewelry; cultural rituals; gender equity; harassment, nudity; violence against women...) on sexuality and gender roles.

K.5.7.E.3c Identify responsibilities (e.g., respect, abstinence...) and sources of support (e.g., parents, nurses, doctors, counsellors, helplines, community health services, religious leaders, recommended books...) with regard to sex-related health issues.

Senior 1-4

K.3.5.B.4 Identify available community supports that promote safety and community health.

K.5.S1.E.2b Examine the psychological implications of sexual activity and teenage pregnancy, and responsibilities regarding prevention

K.5.S1.E.3b Examine the influences on making decisions for responsible sexual behaviour.

K.5.S1.E.3c & K.5.S2.E.3c Review personal responsibilities and sources of support with regard to sex-related health issues.

K.5.S1.E.1a and K.5.S2.E.1a Review the anatomy and physiology of the reproductive system of human beings.

K.5.S1.E.1b Describe the potential consequences and risks associated with sexual behavior and different types of contraceptive methods

S1, S2, S4 2.3.1 describe the male and female reproductive systems and the process by which fertilization takes place

S1, S2, S4 2.3.2 evaluate the role of abstinence in relationships, e.g., mental health, pregnancy prevention, physical health—STIs, emotional health

S1, S2, S4 2.4.1 differentiate between various contraceptive options, e.g., abstinence, male condom, male condom plus spermicide, female condom, birth control pill, no vaginal intercourse, diaphragm and jelly, cervical cap, spermicides, IUCD, sponge, Depo-Provera, Norplant, vasectomy, tubal ligation, rhythm Method)

Endnotes

¹Corinna, H. (2020, April 15). *Innies & Outies: The vagina, clitoris, uterus and more*. Scarleteen. <https://www.scarleteen.com/article/bodies/anatomy/pink-parts-female-sexual-anatomy>

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³Wilcox, A. J., Weinberg, C. R., & Baird, D. D. (1996). Timing of sexual intercourse in relation to ovulation. *Obstetrical & Gynecological Survey*, 51(6), 357–358. <https://doi.org/>

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CHAPTER 4

Birth Control Activities

IN THIS CHAPTER

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“Why Don’t & Do Teens Use Birth Control” Brainstorm

Recommended Age: 12+

Goals

- To share accurate information about birth control methods.
- To explore some of the barriers that youth face to using birth control.
- To have a discussion on the reasons youth have for using or not using birth control.
- To identify important things to think about when choosing to use birth control.

Have Ready

- Write on three separate flipcharts: “Why do teens use birth control (including condoms)?” “Why don’t teens use birth control?” “Things to think about when choosing a birth control method.”
- Markers.

Instructions

- Divide the youth into three groups.
- Give each group some markers and one of the flipcharts.
- Introduce the topic, “**What does birth control do?**” “**What are the different types of birth control?**” (pills, patches, condoms, internal condoms, depo, IUD/S, etc.) Mention that while all these can be used for penis-vagina sex to prevent pregnancy, condoms and internal condoms also prevent STIs/HIV and should be used for other types of sex. Note: For STI protection, use a sex dam for mouth on clitoris, vulva, anus, testicles.
- Instruct the groups to write down as many answers as possible. Rotate the flipcharts to another group.
- When the groups are finished, post the lists up in the room and read them over with the whole group, adding to the lists as more suggestions are made.
- If not mentioned by the youth, add the bolded points below.

Sample Flipcharts

Why Don't Teens Use Birth Control?

- **Not having sex/not dating**
- **Did not plan to have sex**
- **Rumours/gossip** (fear of being judged, leading to not carrying safer sex supplies and/or birth control)
- **2STLGBQ+** Note: They may just write 'gay/lesbian.' Normalize same-sex and transgender relationships and make sure the youth know that condoms and sex dams are important for preventing STIs and HIV, even when there isn't a risk of pregnancy. Also note that if someone is trans, has a uterus, and is on hormones, pregnancy may still be possible. They should talk with their health care provider about what options make sense for their body.
- **Want to have a baby** (You may discuss reasons why youth may want to have a baby: to keep partner, pressure from family/community, are ready to, to feel loved and give love.)
- **Drunk/High**
- Don't know where to get it (have limited access)
- Haven't talked to/afraid to talk to partner about birth control
- Prevented from using birth control by partner or family (discuss that teens should have the right to use birth control if they choose)
- Concerned about confidentiality
- Aren't comfortable using birth control
- Values/religion
- Not comfortable with their bodies
- Don't know how to use birth control
- Cost
- Afraid parents/caregivers will find it
- Side effects/allergies

Why Do Teens Use Birth Control?

- **Don't want to get pregnant**
- **Don't want to get an STI/HIV** (condoms and sex dams will help protect against STIs/HIV)

- **Trying to show respect/care about themselves and their partner**
- **Future goals/plans**
- **Regulate their period or lessen cramps** (hormonal birth control only)
- **Control acne** (hormonal birth control only)
- Their friends are using birth control
- Parents/caregivers/partners/doctor pressure them to

Things to Think About When Choosing a Birth Control Method

- **Effectiveness**
- **Comfort with body and partner**
- **Allergies/side effects**
- **Availability/access** (Where to get it and how much?)
- **Concerns about anonymity**
- **What if the birth control fails?** (Normalize talking to a partner beforehand about abortion, adoption, and parenting, and sharing feelings about these options. Ultimately, the person who is pregnant has the right to decide, as their body and life stand to be most affected.)
- Type of relationship
- Is it covered by non-insured health benefit?
- How does it fit into my life? (Drinking, forgetful, etc.)

Debrief

- There are many reasons youth have for using/not using birth control and these are some important things to think about when choosing a birth control method.
- Remind youth that they can get more information about birth control methods and safer sex from a health care provider at teen clinics, health centres, or nursing stations, which can help someone make a decision about what birth control is best for them.

Additional Activities

Ideally, this activity can be followed by:

- Birth Control & Condoms Scavenger Hunt
- Hormonal Birth Control Demonstrations
- Plan B: Emergency Contraception Demonstration
- Condom Demo & Internal Condom Demo (see STI chapter)

Birth Control & Condoms Scavenger Hunt

Recommended Age: 12+

Goal

- To introduce commonly used birth control methods in an interactive, fun, and tactile way.

Have Ready

- As many of the following items as possible (always include bolded items or pictures of them).
 - **Birth control pills (3- and 4-week packs)**
 - **The patch**
 - **NuvaRing**
 - **Depo vial**
 - **IUD/S**
 - **One lubed condom**
 - **ECP box**
 - One non-lubed condom
 - More condoms
 - Lube bottle or packs

Instructions

- Set up birth control scavenger hunt ahead of the session by hiding items around the space you are using. Note where you have hidden items so you can tell the youth how many things there are to find. This will also help you keep track when talking about each option.
- Advise the youth that the items you have hidden are for demonstration only, and if they want their own, they can access them at the teen clinic, health centre, or nursing station.
- Use the items for demonstrations and discussion once found. Include the participants as much as possible, and allow them to pass the methods around to one another, and hold them up to

show what they have found. For example, you can ask the group questions like:

- **“Who thinks they found a hormonal method of birth control?”**
- **“Who found condoms?”**
- **“Does anyone have something they are unsure of what it is?”**
- **“How do you think this method is used?”**

Additional Activities

Ideally, this activity is an introduction to the following sections:

- Hormonal Birth Control Demonstrations
- Plan B: Emergency Contraception Demonstration
- Condom Demo & Internal Condom Demo (see STI chapter)

Hormonal Birth Control ‘What Am I’ Activity

Recommended Age: 14+

Goals

- To explain what hormonal birth control is and how it works.
- To demonstrate common hormonal birth control used by youth.
- To highlight the importance of following instructions, side effects, and medication interactions.

Have Ready

- If possible, demonstration versions of the pill, Depo Provera, the patch, NuvaRing, ECP, and IUD/S.¹ If unavailable, you could also use images. (See following pages.)

Instructions

- Explain that the group is going to play a guessing game. You will read out a description of a type of birth control and youth can guess which one it is.
- Each type has up to three statements. Read one at a time until the youth guess the correct type.

The Pill

1. I’m used for three weeks.
2. I’m taken every day, at around the same time of day.
3. For the fourth week, some people like to have a reminder that has no hormones in it.

FYI: The pill becomes effective after the first month of use.

The Ring

1. I go inside the vagina.
2. I’m very flexible.

3. I slowly release hormones over three weeks.

The Patch

1. I'm worn on the body for one week at a time, three weeks in a row.
2. I'm very sticky.
3. I pass hormones into the body through someone's skin.

One problem with the patch is that it only comes in this one colour. We know most of the world is not this colour, but unfortunately, the company only makes the patch for white bodies. **This is an example of racism. Racism is part of birth control's history and present.** From its invention when it was tested on Puerto Rican women without their informed consent² to ongoing stories in Canada of Indigenous women being put on birth control without their consent.³ **Birth control has done a lot of good by allowing people choices for their body, but it must always come with consent.**

Depo

1. I'm taken at a health care clinic.
2. I work for around 84 days.
3. My nickname is 'the shot'.

IUD

1. I must be inserted at a health care clinic.
2. Depending on the brand, I can last from 2-½ to 5 years.
3. I can be made with hormones or with copper.

Emergency Contraceptive/ECP (Plan B)

1. I am the only birth control used after sex happens.
2. I can be taken up to 5 days after sex.
3. You can buy me at most pharmacies without a prescription.

Additional Activities

Ideally, this activity is an introduction to the following sections:

- Hormonal Birth Control Demonstrations
- Emergency Contraception Demonstration
- Condom Demo (see STI chapter)
- Internal Condom Demo (see STI chapter)

Hormonal Birth Control Demonstrations

Recommended Age: 12+

Goals

- To explain what hormonal birth control is and how it works.
- To demonstrate common hormonal birth control used by youth.
- To highlight the importance of following instructions, side effects, and medication interactions.

Have Ready

- If possible, demonstration versions of the pill, Depo Provera, the patch, NuvaRing, ECP, and IUD/S.⁴ If unavailable, you could also use images. (See following pages.)

Instructions

- Share the following information with the youth.
- You can make a short list of key points (e.g., follow directions, other medication can reduce effectiveness, side effects, does not protect from STIs/HIV) on the board or on a flipchart paper, and go into as much or as little detail as needed per method for your group.
- **“What types of hormonal birth control have you heard of?”** Explain that these birth control methods contain synthetic lab-made hormones (versions of estrogen and/or progesterone) that someone who can get pregnant would put into their body.
- If someone with a vulva chooses to take hormonal birth control, it increases the amount of hormones in the body, which prevents the egg from being released (ovulation). No ovulation means no pregnancy. Hormonal birth control is very effective at preventing pregnancy, 91-94% for a typical user.⁵ Note: If pregnancy does occur with hormonal birth control, it is usually due to incorrect use.

Important things to remember about hormonal birth control:

Follow Directions

- **The pill** is taken at the same time every day for three weeks out of four. If a pill is missed, or taken at a different time of day, then hormone levels may drop, causing the ovaries to release an egg. In the fourth week, no hormones are taken and this is when someone's period would usually occur. The four-week pack has the same pills for the first three weeks, and for the last week has a 'reminder' pill that does not contain any hormones. FYI: The pill becomes effective after the first month of use.
- **The patch** is worn on the body for a week at a time, for three weeks. The hormones are slowly released through the skin. It's very sticky and should not fall off in the shower or while swimming. It's important that the patch not be worn on the breasts or forehead, as this is too close to vital organs (heart and brain). The patch is only available in this one colour, but we know that not everyone in the world is this colour. This is an example of racism because they do not make a clear patch. That being said, the patch is still an effective birth control option.
- **The NuvaRing** is worn inside the vulva/vagina for three weeks. At the end of three weeks, the person would remove the ring and go a week without using it. This is usually when their period would occur. Then they would start a new ring for another three weeks.
- **Depo** is a shot/needle given by a health care provider. It lasts for 84 days. It's important to go for your next shot by the end of the 84 days to keep the hormone levels up.
- **IUD/S**, an intrauterine device or system, is a small device that is inserted into the uterus by a health care provider to prevent pregnancy. It has two horizontal arms which are folded during insertion, and then unfold into a T-shape. Some are made with hormones (IUS), and some are made with copper (IUD). Copper IUDs work by affecting the way sperm moves, so sperm cannot

meet up with the egg. Depending on the type, IUDs can be effective for 2-5 years. There is a higher upfront cost to IUDs, but they do last longer than other types of birth control. Most health plans, social assistance programs, and Non-Insured Health Benefits (NIHB) will reimburse the cost of an IUD. Women's Health Clinic also has a program to help reduce the cost of an IUD.

Other Medications Can Reduce Effectiveness

- Certain medications, both prescribed and over-the-counter, can reduce the effectiveness of hormonal birth control. Call a pharmacy at any time to ask how medication can affect different types of birth control. If medication does affect the birth control, it is important to use a back-up method. Drugs and alcohol do not interfere with birth control, unless a person forgets to take/use it or the pill is thrown up.

Side Effects

- **Hormonal birth control can have side effects.** These can include regulating periods, lighter periods (people who have painful menstrual cramps are often given the pill to ease this), no periods at all (common with Depo), spotting (bleeding other times than period days), weight change (loss/gain) (Note: If it comes up, you may want to briefly address how pressure from the media to be thin can affect our reproductive rights and choices), tender breasts, more/less acne, migraines, mood swings, decreased sex drive, and a risk of (increased) depression. Tell your health care provider if you have a history of depression, because estrogen can make depression worse. Although less common, some may experience more serious side effects. Go to the emergency department if you feel suddenly hot or cold, have shortness of breath, blurred vision, dizziness, etc., as these are serious side effects.
- Depo has also been linked to a decrease in bone density⁶, so you might consider taking calcium and vitamin D, using weights to strengthen your body, and quitting or reducing smoking, alcohol use, and caffeine intake. You should talk with your health care

provider if you have any concerns. FYI: Weight gain can be from a normal growing and changing body. If there are sudden weight increases or decreases, speak to a health care practitioner. Depo can lead to some weight gain, since progesterone can stimulate the appetite.

- If someone has bothersome side effects, encourage them to go back to their health care provider or a teen clinic for advice and/or another brand of pills/hormonal birth control, or try a non-hormonal method of birth control. With Depo, they will have to wait out the 84 days, as it is already in their body. FYI: People who smoke should mention this to their health care provider if discussing birth control options.
- “Hormonal birth control does not provide any protection from STIs.” “What does?” Condoms and sex dams.

Additional Activities

Ideally, this activity can be followed by:

- Emergency Contraception Demonstration
- Condom Demo (see STI chapter)
- Internal Condom Demo (see STI chapter)

Hormonal Birth Control Images

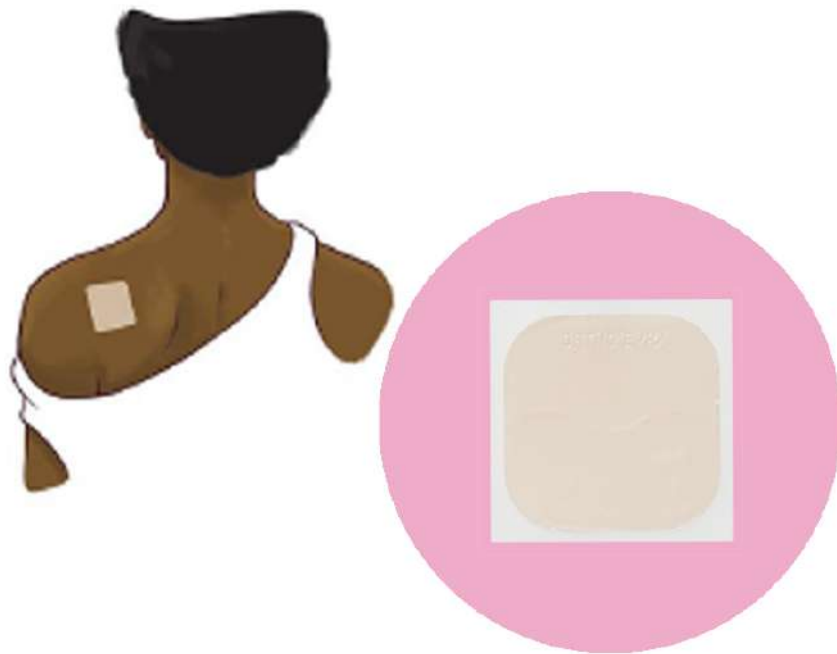
The Pill



The NuvaRing⁷



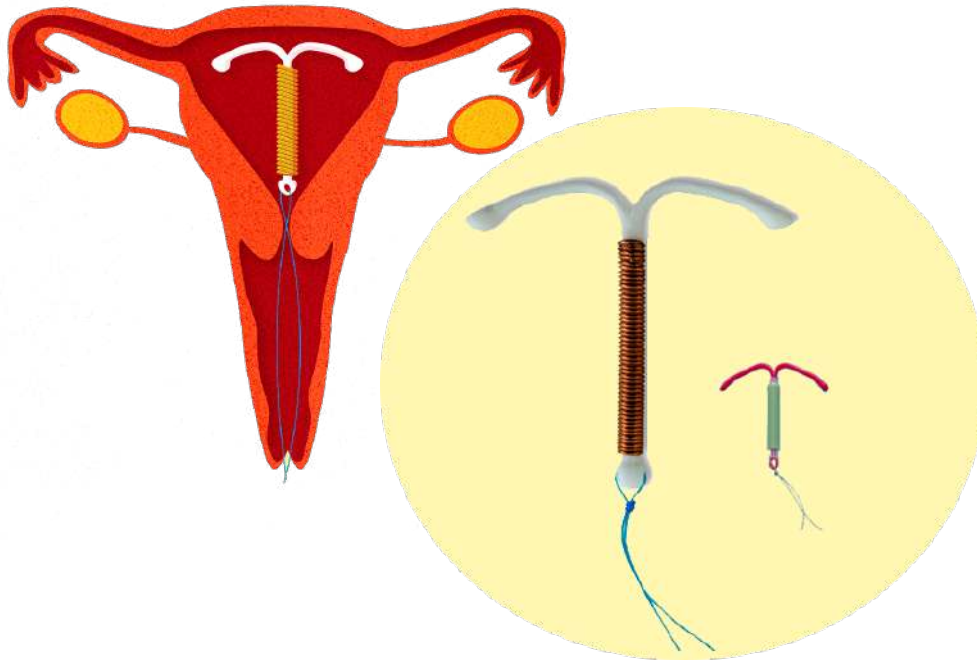
The Patch⁸



Depo Provera⁹



The IUD/IUS¹⁰



Emergency Contraception: Plan B



Emergency Contraception Demonstration

Recommended Age: 12+

Goal

- To explain what Emergency Contraception is, how it works, and where to get it.

Instructions

- Ask the youth, **“What type of birth control can be used if a condom breaks, there was no protection, or there was a sexual assault?”** Emergency Contraception, or ECP for short (Plan B or other brands), is the only birth control you can take after unprotected sex. If you did not use protection for whatever reason, you can try to prevent a pregnancy with ECP.
- ECP stops ovulation or slows the egg’s travel down the fallopian tube, making the lining of the uterus slippery and creating a thick mucus plug. ECP may be used up to 5 days after unprotected penis-vagina sex; however, the sooner it is taken, the more effective it is. **“It is most effective when used within 24 hours. Plan B is recommended for up to 72 hours, but can sometimes still be effective up to the fifth day.”** If someone is already pregnant, ECP will not harm the pregnancy. Note: Plan B is 95% effective when started within 24 hours of unprotected sex. The effectiveness decreases with each subsequent 24 hours, going down to 61% effectiveness if taken within 48-72 hours.¹¹
- Some of the potential side effects are nausea and spotting. Explain that some people feel nauseous after taking ECP because of the high hormone dosages, while others are not affected. If the pills are thrown up or diarrhea occurs within two hours of taking ECP, the pills will need to be taken again. ECP will not cause abortion and does not prevent sexually transmitted infections.
- **“Where can you get ECP?”** If youth want to access ECP, encourage them to call the health centre or hospital ahead of going. Where there are teen clinics, teens can access ECP even on non-teen clinic days. FYI: In Winnipeg, Plan B is also available at the pharmacy without a prescription, but costs anywhere from

\$25 (Superstore) to \$42 (Shoppers Drug Mart). FYI: Plan B is less effective in people weighing 165 lbs (75 kg) or more and may not be effective in people weighing more than 176 lbs (80 kg). If your weight is 165 lbs (75 kg) or more, talk with a health care provider about your options.¹²

- **Within 3-4 weeks of taking ECP, a period should occur. A pregnancy test should be done if this doesn't happen.** The sooner someone finds out they are pregnant, the better, as they can have access to all three pregnancy options.

Additional Activities

Ideally, this activity can be done together with:

- Hormonal Birth Control Demonstrations
- Condom Demo (see STI chapter)
- Internal Condom Demo (see STI chapter)

Appendix: Educational Curriculum Connections

Our curriculum ties to the Manitoba Government learning outcomes. The following language used is not our own. For more information, please visit www.edu.gov.mb.ca/k12/cur/physhlth/

Grade 7

K.5.7.E.1a Describe the human reproductive systems as they relate to fertilization and fetal development (e.g., names of the genitals, union of sperm and egg, stages of fetal development at each trimester, sexual intercourse...).

K.5.7.E.1b Explain the human reproduction process and recognize myths related to fertilization (e.g., can't get pregnant the first time, when intercourse is interrupted, when using contraception, if douching immediately afterward, and in certain body positions...).

K.5.7.E.3a. Recognize the importance of sexual abstinence as a responsible decision for the adolescent male and female (e.g., abstinence prevents STIs and AIDS; parenthood entails many personal responsibilities; teenage pregnancy puts the baby at risk, affects career choices, and can have traumatic psychological and sociological effects...).

K.5.7.E.3b Identify the effects of social influences (e.g., styles related to dress, hair, make-up, jewelry; cultural rituals; gender equity; harassment, nudity; violence against women...) on sexuality and gender roles.

K.5.7.E.3c Identify responsibilities (e.g., respect, abstinence...) and sources of support (e.g., parents, nurses, doctors, counsellors, helplines, community health services, religious leaders, recommended books...) with regard to sex-related health issues.

S.5.7.A.5 Apply a decision-making/problem-solving process in case scenarios for making informed decisions regarding responsible sexual behaviours (e.g., abstinence, pregnancy prevention, safer sex practices...).

K.4.7.A.3 Explain the benefits of using the decision-making/problem-solving process for making responsible and health-enhancing personal decisions (e.g., prevents impulsive and/or negative decisions, contributes to long-term health...).

Senior 1-4

K.3.5.B.4 Identify available community supports that promote safety and community health.

K.4.S1.B.2b Identify appropriate social behaviours for developing meaningful interpersonal relationships.

K.5.S2.A.2 Demonstrate knowledge of healthy lifestyle practices that contribute to disease/ illness prevention, including mental illness/ disorders.

K.5.S1.E.2b Examine the psychological implications of sexual activity and teenage pregnancy, and responsibilities regarding prevention

K.5.S1.E.3b Examine the influences on making decisions for responsible sexual behaviour.

K.5.S1.E.3c & K.5.S2.E.3c Review personal responsibilities and sources of support with regard to sex-related health issues.

K.5.S1.E.1a and K.5.S2.E.1a Review the anatomy and physiology of the reproductive system of human beings.

K.5.S1.E.1b Describe the potential consequences and risks associated with sexual behavior and different types of contraceptive methods

K.5.S2.E.1b Identify and assess the advantages and/or disadvantages of different contraceptive methods

S1, S2, S4 2.3.1 describe the male and female reproductive systems and the process by which fertilization takes place

S1, S2, S4 2.3.2 evaluate the role of abstinence in relationships, e.g., mental health, pregnancy prevention, physical health—STIs, emotional health

S1, S2, S4 2.4.1 differentiate between various contraceptive options, e.g., abstinence, male condom, male condom plus spermicide, female condom, birth control pill, no vaginal intercourse, diaphragm and jelly, cervical cap, spermicides, IUCD, sponge, Depo-Provera, Norplant, vasectomy, tubal ligation, rhythm Method)

Endnotes

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- ¹⁰Planned Parenthood. (n.d.). *IUD*. https://www.plannedparenthood.org/uploads/filer_public_thumbnails/filer_public/b5/0e/b50e7066-37bd-46d9-ba27-83805cfddf91/whitebg-iud-learn.jpg_1200x900_q75_subsampling-2.jpg
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CHAPTER 5

STI/HIV Activities

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STI Risk Game: Higher Risk, Lower Risk, No Risk

Recommended Age: 12+

Goals

- To reinforce that STIs are about behaviour.
- To demonstrate harm reduction by highlighting ways of reducing risks.

Have Ready

- At least 5 youth.
- Higher Risk, Lower Risk, No Risk, and risk scenario cards.
- Tape for posting signs and cards on the wall.

Instructions

- Post Higher Risk, Lower Risk, and No Risk signs around the room.
- Pick as many cards as you think you have time for. Pick cards from each category and choose a variety of couples and individuals.
- At Teen Talk, we introduce the activity by saying, **“We are going to do an activity that looks at someone’s risk for getting an STI. There are three categories: Higher Risk, Lower Risk, and No Risk. Higher risk means there is a higher risk of spreading STIs. Lower risk means people are finding ways to reduce the risk. No risk means there is no chance of spreading STIs.”**
- Hand out cards to small groups or individual volunteers, give them a few minutes to read the card and decide, then ask them to post their cards under Higher Risk, Lower Risk, and No Risk.
- You might read one card out loud to the group as an example and ask, **“Where should this card go?”**
- If any of the youth are unsure about where the cards should go, encourage them to take their best guess.

Debrief

- Starting with Higher Risk, read out each scenario and ask, **“Is this card in the right place?” “Why?”** and **“How could this behaviour be made less risky?”** emphasizing using condoms or sex dams and getting tested.
- Debrief any cards that are not in the right category and reposition them. For talking points, see the table below. *Note: Oral sex is higher risk for some STIs, but lower risk for HIV transmission.*
- Address the Lower Risk category. You might ask, **“Is the Lower Risk category an okay place to be?”** Yes. If someone is choosing to have sex, the Lower Risk category is a great place to be. No risk is not the end goal for everyone, and this category shows that someone can be sexually active and make positive choices to protect their and their partner’s sexual health. People may move around at different moments in their life and between different sexual encounters. Each time someone has sex is a new time to choose what category to fall under.
- Reducing risk is communicating with our partners, using condoms and sex dams, regular STI testing, practicing abstinence, etc. **It is important to always use condoms/sex dams with a sexual partner and get tested regularly for STIs if you are sexually active.**

Additional Activities

Ideally, this activity can be followed by:

- Condom Demo/Internal Condom Demo/Sex Dam Demo
- Condom Competition/Play Stations

Correct Card Placement and Debriefs

Higher Risk (Activities where bodily fluids are exchanged)	Lower Risk (Activities with condoms and sex dams, getting tested, using clean needles)	No Risk (Activities where no bodily fluids are being exchanged)
<p>Tanner:</p> <ul style="list-style-type: none"> • Could talk about safer sex with a partner; it's never too late. <p>Michelle and Rick:</p> <ul style="list-style-type: none"> • Could start using condoms/sex dams to prevent STIs from oral sex. <p>Stephanie:</p> <ul style="list-style-type: none"> • Could use condoms for all types of sex and get tested to reduce her risk. 	<p>Dev:</p> <ul style="list-style-type: none"> • Using protection for oral sex. <p>Brian:</p> <ul style="list-style-type: none"> • Using protection for sex and was tested for STIs. • He is cured, but could get it again from unprotected sex. <p>Teresa:</p> <ul style="list-style-type: none"> • She uses condoms and hormonal birth control and gets tested for STIs. <p>Kate and Isabelle:</p> <ul style="list-style-type: none"> • Use protection for oral sex and have been tested. <i>Note: explain sex dam briefly if needed, demo to follow later in the workshop.</i> <p>Jake:</p> <ul style="list-style-type: none"> • Uses condoms for sex and asks for consent. 	<p>Alex:</p> <ul style="list-style-type: none"> • Masturbating is totally safe. <i>Note: Alex is gender neutral.</i> <p>Allison:</p> <ul style="list-style-type: none"> • Not having sex and was tested for STIs. • Sometimes people have sex and then decide to wait to have sex again for any number of reasons. <p>Joey:</p> <ul style="list-style-type: none"> • Kissing and touching above the waist are totally safe. <p>Tyler:</p> <ul style="list-style-type: none"> • Not having sex. • Feels pressure to be having a lot of sex. • Would be disrespectful if he was also naming names. • Assuming only people who have a lot of sex get STIs puts us more at risk of getting one.

Alex



Alex is not dating right now. They like to masturbate sometimes.

Tyler



Tyler brags to his friends that he has had a lot of sex. He's never been with anyone sexually, but because of the way he talks, people assume he has an STI.

Dev



Dev just broke up with his ex and is seeing someone new. He hated condoms but started using them after he had gonorrhea last year. Now he always carries condoms and is getting used to how they feel.

Teresa



Teresa has sex with guys and girls. She uses condoms and is on the pill. She also goes to a teen clinic for free condoms and gets tested for STIs regularly.

Kate and Isabelle



They just started dating and are planning on going to get tested for STIs. They learned how to make sex dams out of condoms at a Teen Talk workshop. They make a new one each time they have oral sex.

Michelle and Rick



Michelle and Rick like to make out. They have oral sex without using condoms or sex dams, and are waiting to have other types of sex.

Stephanie



Stephanie enjoys having vaginal and anal sex. She has not been tested for STIs. She only uses condoms for vaginal sex.

Tanner



Tanner didn't talk to his new partner about condoms. Now he thinks it's not worth it because they have already had sex.

Allison



Allison had sex with her first boyfriend. Since their break-up last year, she got tested for STIs and has decided to wait to have sex again until she feels more ready.

Jake



Jake asks for consent from a partner before sex happens. He was taught how to use a condom properly and uses one every time he has sex.

Joey



Joey's religion teaches that sex should be saved for marriage. Kissing and touching (above the waist) are okay for him and his girlfriend.

Brian



Brian and his first boyfriend have been dating for eight months. They use condoms every time they have oral sex.

Lower Risk

Higher Risk

**No
Risk**

HIV Risk Activity: Higher Risk, Lower Risk, No Risk

Recommended Age: 12+

Goals

- To teach high-risk behaviours.
- To teach what activities are safest and why.
- To highlight ways of making higher risk activities safer.

Have Ready

- At least 5 youth.
- Create 'Higher Risk,' 'Lower Risk,' and 'No Risk' signs.
- Activity cards (create large cards using the list below).
- Tape for posting signs and cards on the wall.

Instructions

- Use the sample list below and make activity cards. Write or type out one activity (e.g., kissing) per paper.
- Make and post the 'Higher Risk,' 'Lower Risk,' and 'No Risk' signs around the room.
- Pass out the cards.
- Instruct the youth to read their card, then post it under the sign they think best describes the level of risk.
- You might read one card out loud to the group as an example and ask, "**Where should this card go?**"
- If any of the youth are unsure about where the cards should go, encourage them to take their best guess.

Debrief

- Starting with Higher Risk, debrief the activity by reading each of the cards.
- **Higher Risk:** When unsafe bodily fluids are transmitted: sex fluids (semen, pre-ejaculate, vaginal fluid, rectal fluid), blood, or breastmilk.

- **Lower Risk:** When condoms, sex dams, or clean needles (as opposed to *new* needles) are used.
- **No Risk:** Where there is no exchange of unsafe bodily fluids.
- If any cards are in the wrong category, move them to the appropriate level of risk.
- Debrief each card under Higher Risk by asking, “**How could this be made lower or no risk?**”
- Highlight the activities under Lower and No Risk to show that there are many low-risk or no-risk activities to do with a partner.
- Clarify that while oral sex is low or no risk for HIV transmission, it is a high-risk activity when it comes to other STIs. (Oral sex with a condom is considered no real risk for HIV.)
- By doing this activity, we can practice assessing risk when it comes to HIV transmission and learn how high-risk activities can be made lower risk by using condoms or new needles.

No Risk:	Lower Risk:	Higher Risk:
<p>Grinding (with clothes on) Kissing Massage Holding hands Using your own sex toys Touching breasts/chests Heavy petting (above the waist, under the waist above the clothes) Watching each other masturbate Masturbating on your own Using new needles Mutual masturbating (without exchanging bodily fluids)</p>	<p>Sex with a condom Cleaning and re-using needles Oral sex without a sex dam* Oral sex without a condom*</p>	<p>Sex without a condom with someone you love Sex without a condom and pulling out before you cum Penis-vagina sex without a condom Penis-anus sex without a condom Sharing needles for drug use Sharing sex toys Cumming near partner's genitals Sharing needles for steroids Sharing tattoo/piercing needles</p>

Additional Activities

Ideally, this activity can be followed by:

- Condom Demo
- Internal Condom Demo
- Sex Dam Demo
- Condom Competition
- Condom Play Stations

Condom & Sex Dam Communications Activity

Recommended Age: 12+

Goals

- To have youth identify responses when negotiating condom and sex dam use with a partner.
- To normalize and practice communication between partners, increasing the likelihood of safer sex.

Have Ready

- Write two or three excuses on each flipchart, leaving space in between for youth to write their responses.
- Additional flipchart paper.
- Markers and tape.
- Printed Excuses/Responses cards, if using option B or C.

Instructions

Option A: Brainstorming Activity

- Divide youth into small groups, or this activity can also be done as a large group brainstorm, or individual reflection. Ask youth to imagine a situation where they are ready to have sex and want to use a barrier. Pass out the flipcharts and have them come up with responses to the excuses. Encourage youth to write helpful responses that could encourage condom/sex dam use. Depending on time and barring any offensive responses, ask for volunteers to read out their flipcharts (or read them out yourself if the group is quiet). Debrief the responses, adding the responses on the next page, if needed.

Option B: Excuses/Responses Card Match-Up

- While it is preferable for youth to come up with the responses, an alternative activity (for groups that may benefit from a bit more tactile activity vs. a discussion and list) would be to print out the cards on the following pages, and have the youth match the response to the excuse. This can be done in small groups, or the

excuses can be taped to a wall or flipchart to complete as a whole group.

Option C: Condom Responses Competition

- For a more movement-based activity, print multiple sets of cards in distinct colours. Hide the responses cards around the space. Split the group into teams and give each team the excuses cards. The teams will then compete to find all of their cards, and then match them to the excuses. Once they have matched all of their responses cards to the excuses, they will have to bring you the 'make your own response' card and tell you what they would say if they wanted to use protection and their partner did not. The first team to complete the challenge wins!

Sample Excuses (to write on flipcharts)

- | | |
|-----------------------------|---------------------------|
| 1. It doesn't feel as good. | 2. I'm on the pill. |
| 3. Don't you trust me? | 4. I'm allergic to latex. |
| 5. I'll pull out. | 6. It's our first time. |
| 7. The condom won't fit. | 8. I don't have anything |
| 9. I don't have any. | (STIs). |

Potential Corresponding Responses

1. We can relax and enjoy more with condoms/sex dams because we won't be so worried; Adding lube can make it more fun; Sex with a condom/sex dam will feel better than no sex; No sex without one.
2. The pill doesn't protect us from STIs/HIV.
3. I trust you and want to be safer; Can't tell by looking if there is an STI.
4. There are condoms/sex dams that are non-latex.
5. Pulling out doesn't always work because of pre-cum, I want to be extra sure. FYI: You might need to explain the pull-out method: the penis removed from partner before ejaculation. It doesn't protect against STIs. It's not a reliable method of birth control.
6. We've never been tested; I want to be safe.
7. Let's try or get another size or brand; Internal condoms fit everyone.
8. Let's get tested together, but until then, we'll use condoms/sex dams.
9. I have or we can go get some from... (local resource).

Debrief

- Ask the group, **“Why would we get you to think up these responses?”** Conversations with a partner about safer sex can be difficult, and we don’t always see examples of condom/sex dam discussions in real life or media. In fact, we usually see kissing and making out that turns into sex without talking about safer sex (or consent). Some may not know what talking about safer sex could sound like or might not have thought about it before.
- Even if we have condoms or sex dams and know how to use them, we need to communicate with our partners to have safer sex. This exercise allowed us to practice communicating our need to use condoms or sex dams. If a partner is respectful, they will respect your need to use condoms or sex dams. FYI: Research has shown that condom use declines over time in relationships.¹

Additional Activities

Ideally, this activity can be followed by:

- Condom/Internal/Sex Dam Demos
- Condom Competition and Play Stations

Excuses: Print on white/different colour paper than responses

It doesn't feel as good.

I'm on the pill.

Don't you trust me?

I'm allergic to latex.

I'll pull-out.

I don't have any STIs.

Condoms don't fit.

I don't have any.

It's our first time.

Make your own excuse!

Responses: Print on white/different colour paper than excuses

I can enjoy sex more with condoms because then I don't have to worry.

Condoms can make sex last longer.

**Adding lube can make it
feel better.**

**I trust you will respect that
I want to use condoms.**

Make your own response!

I have a condom!

**We have never been tested
and I want to be safe.**

**The pill doesn't protect us
from STI/HIV.**

Make your own response!

**Pulling out doesn't always
work because of pre-cum.**

Condom Demonstration

Recommended Age: 12+

Goal

- To demonstrate how to put on a condom correctly.

Have Ready

- Condoms.
- One or two woodies or other demonstrator tool.

Introduction

- Putting on a condom is a learned and important skill for making sex safer. Anyone can practice putting on a condom, whether or not they have a penis; a banana, bingo dabber, sex toy, or carrot could work.
- Practicing can make using condoms seem more natural, which makes people more likely to use them in real life.
- Tell youth, **“Condoms are a type of barrier method that physically stops sex fluids from mixing. Condoms reduce the risk of STIs/HIV and can help prevent pregnancy.”**
- Condoms can be used on a penis or on a sex toy (depending on its shape). Using condoms on sex toys is recommended if people want to share their sex toys. Change the condom between bodies.
- Condoms can break as a result of not leaving room at the tip of the penis and inadequate storing. Normalize all penis sizes, shapes, colours, circumcised or not by explaining that the demonstration tool (often a woody) is not what an actual penis should look like. You might say, **“Real penises come in different sizes and colours. Some have foreskin and some don’t (are circumcised). Whatever someone has is totally fine.”**
- Note: There are a lot of little details we teach youth when we do a condom demo, but the most important things to remember are pinching the tip, rolling it all the way down, and knowing where youth can get them for free.

Checking the Condom

- Check the condom for rips, holes, tears, or other damage, the expiry date, and writing that says, “Helps reduce the risk of STIs.”
- Ask youth, **“Where are safe places to store condoms?”** Answers could be anywhere it won’t get too hot or squished; drawer, shirt or hoodie pocket, bag, or in lockers at school.
- Check the type of condom. Lubricated condoms are already slippery. Additional water-based lube can also be added to lubricated condoms. Non-lubricated condoms are dry and mainly used for oral sex. Add water-based lube for insertive sex (penis or sex toy in vagina or anus).
- Most condoms are made of latex, which some people are allergic to. Non-latex condoms are made from a type of plastic and can be more expensive. Community clinics and nursing stations often have condoms available for free.

Opening the Condom

- Along the top of the condom package are usually ridges. Using your fingers, open the condom package, take out the condom and check to see that the ‘ring’ is visible on the outside. If not, flip it so that the ring is on the outside.
- You might show how a condom that is ‘inside out’ won’t roll down. **“If I put the condom on the wrong way on a penis, is it okay to flip the condom around?”** No. The condom won’t roll down on the penis or sex toy, and if it’s a penis, the pre-cum is now on the outside of the condom, so it’s best to use a new condom.²
- Encourage carrying more than one condom, just in case a condom needs to be thrown out.

Putting the Condom On

- If using on a penis, pinch the tip of the condom to leave room for the ejaculate (cum). Demonstrate a three-finger pinch. Ask youth, **“Why do you need to pinch the tip?”** To get the air out, so there is room for the semen. One of the main reasons why condoms break is from not pinching the tip.

- Pinch a full inch of the tip of the condom. Hold the pinch to keep the air out and roll the condom down to the base. (If it's going on an uncircumcised penis, the foreskin would be pulled back a little before rolling the condom down.)
- If a condom is put on a penis correctly, the tip should look like a baggy toque or hat. (On a sex toy, pinching at the tip is not required.)
- Only use one condom at a time.
- Once sex is done for whatever reason, remove the penis or sex toy while holding the condom by the elastic ring. This helps to stop the condom from rolling off. Remember, the penis will begin to soften and the condom will be looser after ejaculation, so it is important to remove soon after ejaculation.
- Throw used condoms in the garbage and use a new condom every time.

Debrief

- If you have two woodies, have youth practice putting a condom on a woody. Make it into a friendly competition to see who can follow all the steps.
- Remind students where they can get free condoms and safer sex supplies.
- Let youth know about the emergency contraception pill or Emergency Contraceptive (ECP). At Teen Talk, we would say, **“If a condom broke, there was no protection, or there was a sexual assault, the emergency contraceptive pill, ECP, or Plan B, is a form of birth control that can be taken after unprotected penis-vagina sex. ECP is very effective birth control if used within the first 72 hours. It can be taken up to 5 days after unprotected penis-vagina sex, but becomes less effective as time passes.”**³
- For more information on ECP, see the Birth Control chapter.

How to Put a Condom on a Penis

How to Use Condoms



Open condom wrapper and remove condom



Pinching an inch, use your other hand to roll the condom on

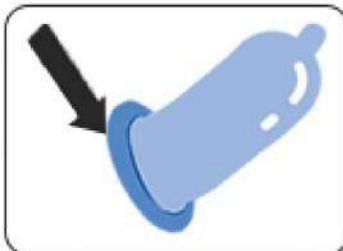
Use water or silicone based lubes for added pleasure. Never use products like vaseline, cooking oil, or lotions. They might break the condom.



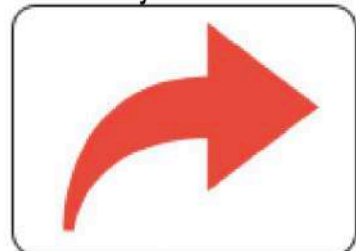
Make sure the ring is on the outside and roll the condom down a little



Pinch the tip of the condom with 2 fingers and your thumb



When sex is done, hold the condom at the base while removing penis or sex toy



Turn away from partner before removing to avoid splash STIs or pregnancy

Internal Condom Demonstration

Recommended Age: 12+

Goal

- To demonstrate how to use an internal condom.

Have Ready

- Internal condom.
- Demonstrator penis or woody.

Introduction

- Internal condoms protect against STIs, HIV, and pregnancy. They can be used internally, either in the vagina or anus.
- If using with a vagina, an internal condom can be inserted up to 8 hours before sex happens.
- Internal condoms are available at some nursing stations, health centres, and most drugstores.
- Most are made from plastic (non-latex) and come lubricated.

Using an Internal Condom

- Check the expiry date on the package and make sure there are no rips, tears, or holes in the condom.
- Take out the condom; it will already be lubricated.
- If inserting into the vagina, make sure the inner ring is at the closed end, squeeze the inner ring and gently guide it up into the vagina. If inserting into the anus, just remove the inner ring.
- Insert a finger inside the condom and push the inner ring up as far as it will go (this also ensures the condom is not twisted).
- The outer ring should remain on the outside of the body. (At Teen Talk, we show how the condom is inserted by 'inserting' one into a closed hand.)
- Insert a woody into the condom to show that it's important to make sure the penis or sex toy goes into the condom.

Taking Out the Condom

- When sex is done or if there is ejaculate in the condom, remove it by twisting the ring on the outside and gently pulling it out. The twisting prevents sex fluids from leaking out when the condom is removed.
- All condoms should be disposed of in the garbage.
- All condoms are made to be used once only. Using two condoms at the same time causes friction and can reduce effectiveness.

Additional Information

- There is an emergency contraception pill that can help prevent a pregnancy. It's most effective in the first 72 hours, but can be taken up to 5 days after penis-vagina sex.⁴
- For more information on ECP, see the Birth Control chapter.

How to Use an Internal Condom in the Vagina

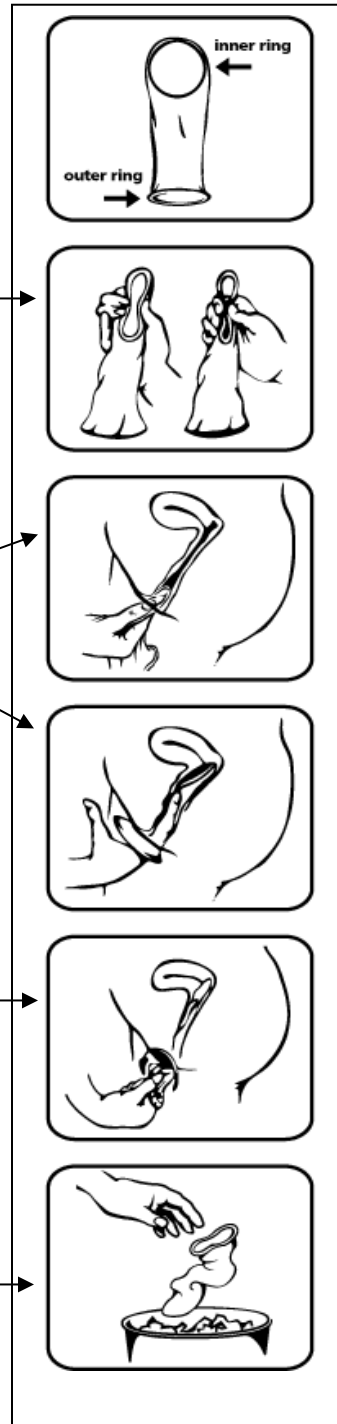
(Remove the Inner Ring for Anal Sex)

Squeeze the flexible inner ring at the closed end of the condom.

Push the inner ring into the vagina as far as it will go.

To remove the condom, twist the outer ring and gently pull the condom out to avoid spilling the semen.

Dispose of the condom in the garbage (not in the toilet).



Sex Dam Demonstration

Recommended Age: 12+

Goal

- To demonstrate how to make a sex dam out of a condom.

Have Ready

- Condom.
- Scissors (optional).

Introduction

- A sex dam is a sheet of latex/polyurethane that can be made from a condom or bought ready-made.
- Dams are used for making oral sex safer from the risk of STIs.
- Dams are typically used on the vulva (the outside of the vagina), anus, or scrotum. (All parts except the penis.)

Instructions

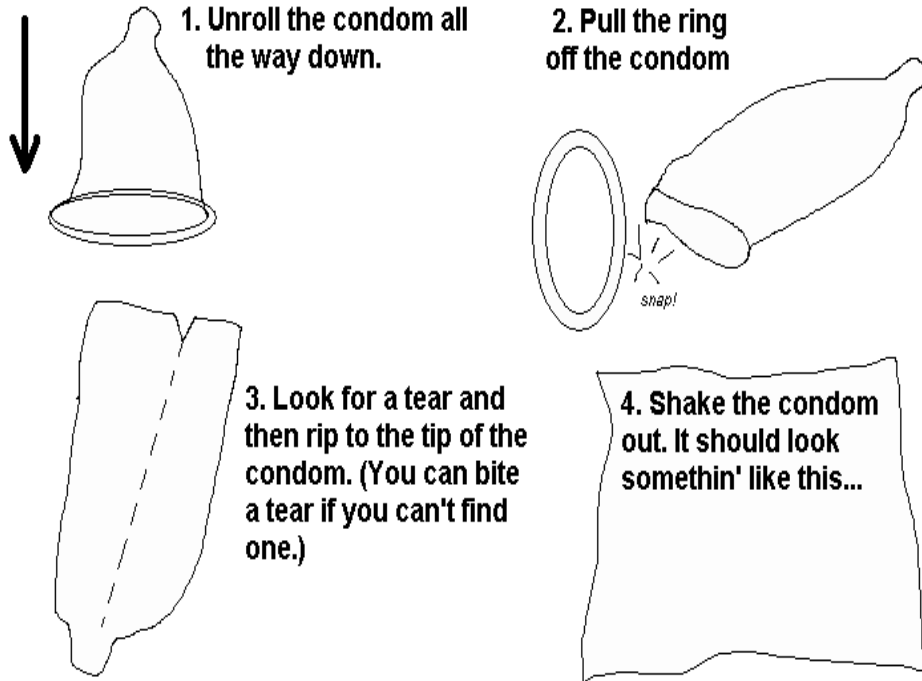
- To make a sex dam without scissors, take a condom out of the package and unroll the condom all the way down.
- Pull the ring off the condom.
- Rip the condom down one side to the tip of the condom.
- Open up the condom; it should now be one sheet. (See picture.)
- To make a sex dam with scissors, take a condom out of the package.
- Using scissors, cut off the tip of the condom, then cut the ring and unroll.

Additional Information

- The dam can be held in place by either partner.
- The dam is to keep sex fluids separate, so don't flip it over during oral sex.

- Applying lube to the receiving parts before placing the sex dam overtop may increase sensation while still staying safer!

How to Make a Sex Dam



Condom Competition

Recommended Age: 12+

Goals

- To encourage youth to practice putting on a condom.
- To correct common mistakes (not pinching the tip, not being able to roll it down, etc.).

Have Ready

- Condoms and 2 or more woodies.

Note to Facilitators

- This exercise normalizes condoms and that using them properly takes practice.
- This is a great activity for smaller groups, where each youth has an opportunity to practice if they feel comfortable doing so.
- Show them a quick condom demo first to highlight the steps and then let them practice. (See the condom demonstration.)

Instructions

- Normalize all penis sizes, shapes, with or without foreskin, by explaining that the demonstration tool is not what an actual penis should look like.
- You might say, “**Real penises come in all shapes, sizes, and colours. Some are circumcised, some are not, and *none* are supposed to be this hard.**”
- Get comfortable putting on a condom, and be able to show others this skill.
- Ask for two volunteers and explain they will ‘compete’ with each other to see who can put a condom on properly. Whoever does it correctly in the least amount of time ‘wins.’

- Hand out woodies and condoms to the youth. They can put the condoms on, two participants at a time, while their peers talk them through it, if necessary.

Debrief

- Congratulate all the youth for participating, as it can be hard to practice putting on a condom (alone or in front of others!).
- Debrief with youth by asking how it felt to put a condom on while under pressure.
- Discuss different strategies to make using condoms easier, like: practising, either on themselves (if they have a penis), or on a banana, sex toy, bingo dabber, etc.; becoming comfortable with their body; making sure they are ready; having extra condoms with them (in case they make a mistake); and if they are with a partner, making sure that consent has been given.

Condom & Sex Dam Play Stations Activity

Recommended Age: 12+

Goals

- To get youth comfortable with condoms and sex dams.
- To challenge myths about condoms and sex dams.

Have Ready

- Flipchart paper, markers, instructions for each station, lots of condoms (including internal condoms), a ruler, a wooden penis/banana/bingo dabber, non-lubed condoms.
- Print out condom stations (the sheets following the instructions).
- Have extra condoms for this activity. If participants make a mistake, they may need to use more than one condom, and some people like to try the activity a few times.

Instructions

- Tell the group that you have set up stations to challenge some myths about condoms (and to have fun). (See below for how to set up the stations.)
- Break them into small groups and have one group per station. Then rotate them through all the stations.
- Explain the instructions at each station and work together to complete the task.

Stations Set-Up

- Set up station 1 with plenty of condoms/sex dams.
- Set up station 2 with plenty of condoms and a ruler.
- Set up station 3 with plenty of condoms and a woody (or banana, bingo dabber, etc.).
- Set up station 4 with plenty of non-lubed condoms.
- Set up station 5 with condoms, including internal condoms, and sex dams and a woody.

- Set up station 6 with 'excuses' flipcharts and markers. Have two or three excuses written on each flipchart and have enough flipcharts for each group to work on or use the printed cards from the Condom & Sex Dam Communications Activity.

Sample Excuses (to write on flipcharts)

1. It doesn't feel as good.
2. We already use the pill.
3. Don't you trust me?/Don't you love me?
4. I'm allergic to latex.
5. I'll pull out.

FYI: You might need to explain the pull-out method: the penis removed from partner before ejaculation. It doesn't protect against STIs. It's not a reliable method of birth control.

6. I don't have anything (STIs).
7. The condom won't fit.
8. It's our first time.
9. I don't have any.

Station #1: How much can you feel through a condom/sex dam?

1. With the help of another person, place a condom/sex dam on your fist. Beware of sharp fingernails!
2. Close your eyes and ask the person to touch the back of your hand with their finger. Can you feel the person's finger touching you?
3. Have your teammate blow air on your hand. Can you feel it?

Station #2: How big can a condom get?

1. Stretch the condom as big as you can without breaking it.
2. Measure the condom when it is fully stretched.

3. How big around did the condom get?
4. How long did the condom get?

Station #3: Practice putting a condom on a woody

1. Before you open a condom, what three things should you look for on the package?
2. Steps to putting on a condom:
 - Open the condom package.
 - Pinch the tip with three fingers.
 - Roll the condom to the base.

Station #4: How to make a sex dam

1. Open the condom package after checking the expiry date.
2. Unroll the condom.
3. Pull the ring off the base of the condom.
4. Look for a tear at the base of the condom or rip one with your teeth, then tear down the rip to the 'reservoir tip', but not past the tip.
5. Hold the dam on both sides and have your partner raise their hand, palm facing towards you.

Station #5: Teach a friend how to use condoms/sex dams

1. Demonstrate how to use condoms/sex dams correctly to your friend.
2. Next, get them to do it, explaining the steps to them as you go.

Station #6: Communicating condom/sex dam use with a partner

1. Read and respond to the excuses on the flipcharts.

Note: This conversation is between people who really like each other, and keep in mind, you are trying to convince someone to use protection.

Debrief

- Ask youth, **“Was that fun?”**
- **“What did you learn about condoms/sex dams today?”**
- **“Is it hard to demonstrate how to use condoms or make a sex dam?”**
- **“How would being high or drunk affect someone’s ability to use a condom or sex dam correctly?”**

Debrief for Station #6: Communicating condom/sex dam use

- Ask the group, **“Was it easy to think up responses?”**
- Conversations with a partner about safer sex can be difficult. We don’t always see examples of safer sex communication in real life, TV/videos/movies. In fact, we usually see kissing and making out that turns into sex without talking about safer sex (or consent).
- Even if we have protection and know how to use it, we need to get comfortable talking about safer sex. This exercise allows us to practice communicating our need to use condoms/sex dams.
- Remind youth that if a partner is respectful, they will respect your need to use protection.

Potential Corresponding Responses

1. We can relax and enjoy more with condoms/sex dams because we won't be so worried; Adding lube can make it more fun; Sex with a condom/sex dam will feel better than no sex; No sex without one.
2. The pill doesn't protect us from STIs/HIV.
3. I trust you and want to be safer; Can't tell by looking if there is an STI.
4. There are condoms/sex dams that are non-latex.
5. Pulling out doesn't always work because of pre-cum, I want to be extra sure. FYI: You might need to explain the pull-out method: the penis removed from partner before ejaculation. It doesn't protect against STIs. It's not a reliable method of birth control.
6. Let's get tested together, but until then, we'll use condoms/sex dams.
7. Let's try or get another size or brand; Internal condoms fit everyone.
8. We've never been tested; I want to be safe.
9. I have or we can go get some from... (local resource).

Condom Line-Up Game

Recommended Age: 12+

Goals

- To educate youth on how to use condoms properly.
- To energize a group.

Have Ready

- Condom line-up cards.

Instructions

- The Condom Line-up Game gets a group moving by asking them to arrange the 'steps to putting on a condom' into the proper order.
- Choose enough cards for the number of people you have in the group.
- Have the cards mixed up and give each player a card.
- For this scenario, tell the youth, **"Everyone involved has consent and it's woven throughout and ongoing."** Let them know they have several minutes to arrange themselves in the proper order in a line, holding their cards in a visible place. Alternatively, have them arrange the cards in the proper order on a designated space (like a table, a wall, etc.).

Debrief

- Ask youth, **"Does this look like a good order?" "Does anyone want to move any of the cards?" "Where can you get free condoms close by?"** Be specific with location, hours of operation, names of people they can get them from, etc.
- Ask who has the 'talk about using a condom' card and mention the value of talking about safer sex before sex happens. It can be easier to have a clear conversation ahead of time. Remind them that condoms can be introduced into a relationship at any time,

even if people have already had sex without condoms. Mention that condoms are the only method that helps prevent STIs.

- Find the 'relax' card. People often put it at the very end of the series, but 'relax' can go anywhere in the line.

Card Placement

External Condom

Note: Steps 5-7 are interchangeable

1. Talk with a partner about having sex.
2. Buy or get condoms.
3. Store condoms away from heat.
4. Get consent.
5. Check condom pack for expiration date.
6. Check condom for type.
7. Check condom for rips or holes.
8. Open the pack.
9. Make sure condom isn't inside out.
10. Roll condom down one notch.
11. Use a three-finger pinch.
12. Hold your pinch, and roll the condom down onto the penis or sex toy.
13. When done sex, hold the condom rim before removing penis or sex toy from your partner.
14. Turn slightly away from your partner and take condom off.
15. Throw the condom away.

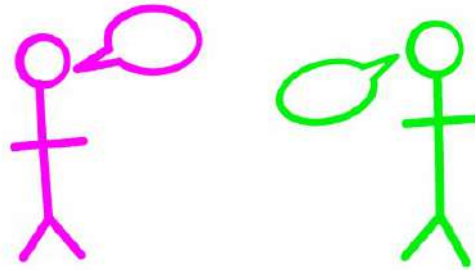
Internal Condom

1. Talk about using an internal condom.
2. Buy internal condoms.
3. Check expiry date.
4. Get horny (could go in other places in the order).
5. Open condom package.
6. Squeeze the ring.
7. Insert the condom.
8. Put two fingers into condom.
9. Make sure penis/sex toy enters.

10. Ejaculation/orgasms or not.
11. Hold on to the rim of the condom.
12. Twist the condom.
13. Throw condom away.
14. Relax (could go anywhere in the order).

Condom Line-Up Cards

Talk with a partner about having sex



Buy or get condoms



Store condoms away from heat or place it might get squished



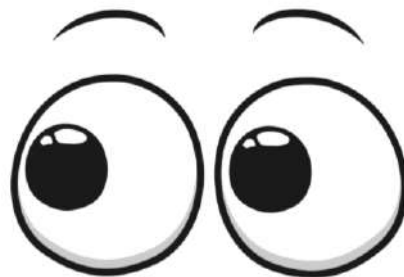
Get consent



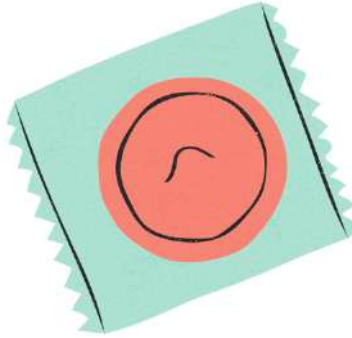
Check condom for expiration date



Check condom for type



Check condom for rips or holes



Open the pack



Make sure condom isn't inside out



Roll condom down one notch



Use a three-finger pinch



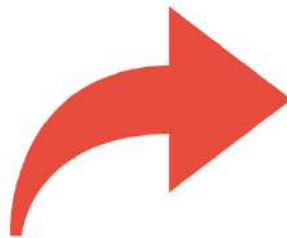
Hold your pinch, and roll the condom down onto the penis or sex toy



**When done sex, hold the condom rim
before removing penis or sex toy from
your partner**



**Turn slightly away from your partner and
take condom off**



Throw the condom away



Condom Line-Up Cards (for Internal Condom)

Talk about using an internal condom

Buy an internal condom or visit a location that has them

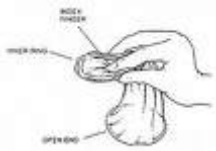


Check expiry date

Open condom package



Get horny!



Squeeze the ring inside for the vagina or take the ring out for the anus

Insert condom into vagina or anus (Can be put in up to 8 hrs.)



**Put two fingers into
condom to make sure it's in
straight**

**Make sure toy or penis enters
condom**

Ejaculation (cum), orgasms...



(or not)

Hold on to the rim while the partner pulls out the condom

Twist the condom and pull it out of the body

Throw condom away



Relax!!!



Teen Talk's "Sexual Jeopardy" Game

Goals

- To have fun while educating and reinforcing information learned about sexual health topics, including STIs, HIV, birth control, condoms/sex dams, and consent.
- To increase group participation.

Have Ready

- Create Sexual Jeopardy game board pieces.
- Sexual Jeopardy questions and answers (see following pages).
- Poster-size sheet of card stock for attaching the game board pieces (optional).
- Tape for posting game on the wall.
- Prize(s) for winning team (optional).

Instructions

- Divide the group into two teams and have them choose team names.
- Decide which team will go first.
- Have the teams take turns choosing a category and points value and answering a question.
- Keep score on a chalk/white board.
- Encourage each team to huddle and work together to come up with the correct answer.
- If one team guesses incorrectly, you may want to give the other team a chance to 'steal' if they know the correct answer.
- There is no need to ask every question, the game can be as brief or extended as needed.
- At Teen Talk, we like to play a final 'Bonus Jeopardy' round, where each team chooses a number of points to wager and a youth from each team comes to the front to do a condom race demo.

Sexual Jeopardy Game Board

Note: This page shows an example of how the game board can be laid out.

Sexual Jeopardy

Prevention	STI	HIV	Bonus
100	100	100	100
200	200	200	200
300	300	300	300

Prevention Questions

Prevention for 100

Q: What is the only 100% effective way to prevent STIs, HIV, and pregnancy?

A: Abstinence and not taking part in risky behaviour like sharing needles.

Q: Which method of birth control also protects against STIs and HIV?

A: Condoms (internal and external).

Q: What are 3 things to look for on a condom package?

A: Expiry date, type of condom, damage to the package.

Prevention for 200

Q: Where are 3 places you can get condoms and safer sex supplies? Include at least one place they are free.

A: Possible answers: teen clinics, community health centres, pharmacies, 7-Eleven, some schools.

Q: What are 3 things that can make sex safer?

A: Going for STI/HIV testing, asking for consent, talking with your partner, and using condoms and/or sex dams.

Q: What are 5 activities that are NO RISK for STIs or the possibility of creating a pregnancy?

A: Possible answers: massage, hugging, masturbating, dry humping (with pants on), holding hands, abstaining from sexual activity with a partner.

Prevention for 300

Q: What is something you could say to encourage someone to use a condom?

A: Take any good line they say.

Q: How do you make and use a sex dam?

A: 1. Take a condom and check the expiry date, guarantee, type, and damage.
2. Gently rip open the package. 3. Rip or cut off the tip. 4. Rip or cut the side of

the condom and unroll into a rectangle. 5. Make sure to keep each person's fluids on their own side.

Note: Can ask youth to demonstrate too, if time allows.

Q: What are 3 things that can destroy a latex condom?

A: Possible answers: Vaseline, oil, hand lotion, grease, heat, friction, sharp things.

STI Questions

STI for 100

Q: What is the most common STI in Manitoba that often has no symptoms?

A: Chlamydia. It, as well as gonorrhea, have very high rates in Manitoba. Both are spread through unprotected oral, vaginal, and anal sex. They are both curable STIs, meaning someone would take antibiotics to be cured. If left undetected in the human body for a long period, they could cause scarring that impacts someone's ability to create or carry a pregnancy in life.

Q: Which STI is small parasitic insects that feed off human blood?

A: Pubic lice (crabs). Pubic lice are transmitted through skin-to-skin contact (genitals rubbing) or sex. They can also be transmitted by sharing clothes, towels, or soft cloth items. The cure is a shampoo from the pharmacy that kills pubic lice and their eggs. Someone would have to wash all their bedding, clothes, and towels and use a dryer on a hot setting.

STI for 200

Q: How can you support someone who has an STI?

A: Listen to them, don't judge them, respect their privacy, learn more about STIs and stigma, ask how/if you can help.

Q: What STI is often associated with pain when you pee?

A: Gonorrhea. It is a curable STI, meaning someone takes antibiotics to be cured. If left undetected in the human body for a long time, it could cause permanent damage.

Q: What are 2 places on the body that a sex dam can be used to prevent STIs?

A: Vulva, clitoris, vagina, anus, scrotum, and mouth.

STI for 300

Q: What are the 5 SIGNS of an STI? You do not have to get the exact words we used, but you do need to have their meaning.

A: Skin changes, irritation when peeing, genital itching, noticeable pelvic pain, sex organ discharge.

Q: What are 5 important steps to putting a condom on correctly?

A: Answers may include check expiry date, note type of condom, make sure it protects against pregnancy and STIs/HIV, open carefully, make sure it's facing the right way (with the ring on the outside), pinch the tip, roll onto penis/sex toy all the way down to the base.

Q: Which body parts can be tested for STIs?

A: Penis, vagina, anus, mouth, skin around genitals.

HIV Questions

HIV for 100

Q: What are 3 things you could do or say to encourage someone to get tested?

A: Possible answers: say you will go with them (and/or get tested too), describe the testing process to them so they're not afraid, tell them the earlier they get tested the easier it is to treat if they do have an STI, tell them about good places to go that are the most convenient for them (teen clinics), tell them it will be confidential and non-judgmental, etc.

Q: Name 2 bodily fluids that are NOT a risk for HIV transmission.

A: Possible answers: sweat, spit/saliva, tears, urine, etc.

Q: What is the type of test for HIV?

A: A blood test.

HIV for 200

Q: What are 3 ways that someone can reduce their risk of getting HIV?

A: Safer: using condoms and getting tested regularly.

Safest: abstinence and not sharing needles.

Q: How soon can people with HIV transmit the virus to others?

A: Immediately. As soon as someone contracts HIV, it doesn't matter if they have symptoms or not, they can still pass the virus.

Q: When should people get tested for HIV?

A: Every time you change partners, any time you engage in risky behaviour, or every 6 months, depending on your lifestyle.

HIV for 300

Q: What are 4 unsafe behaviours/activities that can pass HIV?

A: Unprotected vaginal or anal sex, sharing sex toys, sharing needles (any type), and breastfeeding (for the infant).

Q: What are 3 ways to support someone living with HIV?

A: Learn about HIV and stigma, hang out and have fun, offer to go with them to appointments or support groups, ask if you can help with anything, help to find resources, listen if they need to talk, etc.

Q: How long does it take for HIV to show up on a blood test?

A: 1-3 months after the point of infection. This is called the window period.

Bonus Questions

Bonus for 10

Q: What is the definition of consent?

A: A voluntary agreement for any sexual activity (or any activity that includes your space or body), only yes means yes, you must ask, etc.

Q: Why would someone who's not having sex/penis-vagina sex, choose to use hormonal birth control?

A: Possible answers: to regulate their period (make it come at the same time each month), to lessen period cramps, to decrease acne, etc.

Q: Name the location of a teen clinic or public health nurse.

A: Whatever correct statement they give.

Bonus for 20

Q: Certain medications (such as antibiotics, antacids, anticonvulsants, and some herbs like St. John's Wort) are known to have an effect on what?

A: The birth control pill. These medications (and some others) can decrease the effectiveness of the pill, making it more likely that someone could get pregnant.

Q: How long should you wait to pee before having an STI test?

A: 1-2 hours.

Q: What is the only method of birth control that can prevent pregnancy up to 5 days after unprotected sex and where can you get it?

A: Emergency Contraceptive Pill (or Plan B/Morning After Pill), obtained at teen clinics, some nursing stations, pharmacies.

Bonus for 30

Q: What are 3 things you need to talk about before sex?

A: Possible answers: Pregnancy prevention (birth control), condom use, STI testing, consent, pleasure and boundaries, expectations, what if birth control fails, etc.

Q: What is one advantage of the internal condom over the external condom?

A: Any of the following: Can be inserted up to 8 hours before sex, doesn't require a hard penis, alternative to latex if someone is allergic, added protection against STIs that are transmitted by skin-to-skin contact (such as herpes and genital warts).

Appendix: Educational Curriculum Connections

Our curriculum ties to the Manitoba Government learning outcomes. The following language used is not our own. For more information, please visit www.edu.gov.mb.ca/k12/cur/physhlth/

Grade 7

K.5.7.E.3a. Recognize the importance of sexual abstinence as a responsible decision for the adolescent male and female (e.g., abstinence prevents STIs and AIDS; parenthood entails many personal responsibilities; teenage pregnancy puts the baby at risk, affects career choices, and can have traumatic psychological and sociological effects...).

K.5.7.E.3b Identify the effects of social influences (e.g., styles related to dress, hair, make-up, jewelry; cultural rituals; gender equity; harassment, nudity; violence against women...) on sexuality and gender roles.

K.5.7.E.3c Identify responsibilities (e.g., respect, abstinence...) and sources of support (e.g., parents, nurses, doctors, counsellors, helplines, community health services, religious leaders, recommended books...) with regard to sex-related health issues.

K.5.7.E.4a Identify the causes, nature, methods of transmission (e.g., sexual intercourse, body fluids, contaminated needles, number of sexual partners...) and methods of prevention of AIDS and HIV infection (e.g., sexual abstinence, monogamous relationship with uninfected person, use of condoms...).

K.5.7.E.4b Identify the common STIs (e.g., genital herpes, gonorrhoea, chlamydia...), their symptoms, and means of prevention (e.g., sexual abstinence, monogamous relationship with uninfected person, use of condoms...).

S.5.7.A.5 Apply a decision-making/problem-solving process in case scenarios for making informed decisions regarding responsible sexual behaviours (e.g., abstinence, pregnancy prevention, safer sex practices...).

K.4.7.A.3 Explain the benefits of using the decision-making/problem-solving process for making responsible and health-enhancing personal decisions (e.g., prevents impulsive and/or negative decisions, contributes to long-term health...).

Senior 1-4

K.3.5.B.4 Identify available community supports that promote safety and community health.

K.5.S2.A.2 Demonstrate knowledge of healthy lifestyle practices that contribute to disease/ illness prevention, including mental illness/ disorders.

K.5.S1.E.3c & K.5.S2.E.3c Review personal responsibilities and sources of support with regard to sex related health issues.

K.5.S1.E.1b Describe the potential consequences and risks associated with sexual behaviour and different types of contraceptive methods

K.5.S1.E.4a Examine behaviours that may decrease the risk of contracting HIV, and behaviours that increase the risk of Contracting HIV

K.5.S2.E.4a Explain health issues related to HIV/AIDS

K.5.S1.E.4b Describe the symptoms of, effects of, and treatments for the most common sexually transmitted infections

K.5.S2.E.4b Describe ways to prevent STIs to promote the health of society

S1, S2, S4 2.3.2 Evaluate the role of abstinence in relationships, e.g., mental health, pregnancy prevention, physical health—STIs, emotional health

S1 5.2.3 identify and evaluate adolescent mental and physical health issues, e.g., depression, health issues—STIs, alcohol and drug abuse, learning disability, physical disability, family abuse or violence, personal or family illness

S1, S2, S4 2.3.2 Evaluate the role of abstinence in relationships, e.g., mental health, pregnancy prevention, physical health—STIs, emotional health

Endnotes

¹Fisher, W. A., & Boroditsky, R. (2000). Sexual activity, contraceptive choice, and sexual and reproductive health indicators among single Canadian women aged 15-29. *The Canadian Journal of Human Sexuality, 9*(2), 79-93.

²Killick, S. R., Leary, C., Trussell, J., & Guthrie, K. A. (2010). Sperm content of pre-ejaculatory fluid. *Human Fertility, 14*(1), 48-52.

³Planned Parenthood. (2016). *Emergency contraception*. Planned Parenthood.
<https://www.plannedparenthood.org/learn/morning-after-pill-emergency-contraception>

⁴Ibid.

CHAPTER 6

Relationships Activities

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Space Invaders Activity

Contributed by Jessica Danforth & the Native Youth Sexual Health Network and adapted by Teen Talk

Recommended Age: 14+

Goals

- To discuss consent: explain consent, lack of consent and coercion, how alcohol/drugs impact consent, and provide sexual assault resources.
- To explore the idea of personal space.

Have Ready

- A big space that can fit all youth standing shoulder to shoulder in two rows facing each other. There should be at least 15 feet between the two lines of participants.

Instructions

- Ask the youth to partner up and to stand across from one another.
- Explain to the youth that we will be using an activity to explore personal boundaries and consent.
- Ask youth to, **“Stand across from your partner. Decide who will be ‘the walker’ and who will be ‘the stander’.”**

Part 1 of 3

(no talking or body language, just facial expression)

- **For this exercise, the walker will move towards the stander. They need to successfully communicate with one another to ensure that the walker does not enter into the stander’s personal space. When the walker stops, they must move their entire body up to their furthest step. There is a catch, though! In this first part, the stander can only communicate their**

personal space with their facial expressions. No talking, hand gestures, or other body language.

Debrief

- **“How was that for everybody? Hands up standers, whose walker is currently inside their personal space?”** Ideally, several. **“Why do you think this is?”** Walker couldn’t tell/didn’t notice that they were in their partner’s space, there was no talking, and there was no other body language.

Part 2 of 3

(Switch roles, no talking, but can use body language/facial expression)

- **Okay, part 2. Same instructions, same partners, except we’re going to switch roles. Walkers become standers, standers become walkers. Now in this part, you can use your body language and hand gestures, but still no talking!**

Debrief

- **“How was that for everybody? Hands up standers, whose walker is currently inside their personal space?”** Probably a bit better than part 1. **“What do you think could make this better?”** Talking, if the walker went slower. **“Why do you think solely relying upon body language sets us up for miscommunication?”** No one is a mind reader; you can easily misinterpret body language.

Part 3 of 3

(switch roles, talking/body language/facial expressions allowed and encouraged)

- **Okay, last part. Switch back to your first roles. Now, this time we want to see verbal communication between the walker**

and the stander! Talk to one another and negotiate those boundaries! Use your body language and facial expressions too!

Debrief

- **“How was that? Hands up standers, whose walker is currently inside their personal space?”** Should be the best result. **“What made this one the most successful? Even if someone is inside someone else’s personal space, why is it different this time around?”** They got permission/consent.

Consent Debrief

- This is how Teen Talk explains consent: **When it comes to sexual situations, “Does anyone know what the word consent means?” Consent is clear permission, which means that only yes means yes. It’s a voluntary agreement, which means it’s not something that one person does to another, but rather it’s something that people decide to do together.**
- **Consent is about asking, listening, and respecting.** For example, let’s say that you want to kiss someone, what would consent sound like? What would you say? Can I kiss you? I’d really like to kiss you. (Anything they say that is respectful.) You might be thinking this is kind of weird or hard, or it seems really awkward, but the more we do it, the more natural it becomes.
- **Let’s practice asking for consent about something non-sexual.** Look to the person next to you and ask them to join you in an activity you want to do this weekend. For example, “Do you want to have lunch together, go swimming, play video games, etc. with me?” Truth is, we are using consent all the time. “Did any of you hear a yes?” Great. “Did anyone hear a no?” That is going to happen sometimes.
- **Part of asking for consent is listening to the response and respecting what they say/want. It’s also important to pay attention to what they’re doing non-verbally.**
- “If you ask if you can touch someone’s bum and they say yes, it’s bum touching time! If they say maybe later, I’m not sure, or

nothing at all, what does that all mean?” No. **Sometimes hearing a no can feel hard or we might feel kind of rejected. Even though those feelings are normal, it’s our responsibility to deal with our feelings and respect the person who is saying no. Consent is also ongoing. This means that you have a right to say no at any time.** So, if in the middle of bum touching, someone wanted it to stop, what would have to happen? Stop. If someone says ‘stop’, or ‘wait’, looks uncomfortable, or is pulling away, stop and check in with them. This could sound like, “You don’t seem really into this.” **If you are unsure, always stop and ask.**

- Asking for consent can be fun and sexy, and figuring out ways to talk about consent that feels comfortable for you can help. We know that it can be more complicated than just asking or saying ‘yes’ or ‘no.’ People don’t always talk about touching/sex before it happens; sometimes people communicate non-verbally, through eye contact and body language. **Ultimately, consent gives both people a chance to say whether or not they are into something and is part of creating trust and respect in our relationships.**
- So, we just talked a lot about what consent is, now we’re going to share some things that consent is not. **Consent is not coercive, which means trying to change someone’s no into a yes by pressuring, nagging, or using guilt.** It’s also not okay to try to change someone’s no into a yes with alcohol or drugs, or to wait until someone is drunk or high to ask them for consent. What’s the most respectful thing to do if people are drunk or high? Wait until they are sober, bring them water, help them get home, or watch over them, etc. **Ultimately, consent doesn’t count when people are drunk or high.** That doesn’t mean that every time there is drinking and sex it’s a sexual assault, but we do know that it happens. **What’s important to know is that any unwanted sexual attention or contact is not okay.**
- **If you have ever experienced sexual assault, it is never your fault.** It doesn’t matter where you were, who you were with, what you were wearing, or if you were drunk or high. If someone chooses to assault another person, it’s always the fault of the person who is choosing to use violence.

- **People have a right to be believed and get support. No one has to go through recovering from that experience alone.** It can help to talk to someone you trust. You can access support for you or a friend. If you know someone or have a friend that has experienced a sexual assault, a couple of good things you can say are: “It’s not your fault,” and “I’m sorry this happened.” You can ask them how you can support them and you can also give them information about the Sexual Assault Crisis Program. **The Klinik Sexual Assault Crisis Line is a great resource that people can call if they need to talk. You can also call the line if you’re feeling upset or unsure about a sexual experience. It is open 24/7 and free to call from anywhere in Manitoba. Their phone number is 1.888.292.7565 or 204.786.8631. If someone needs to go to the hospital or clinic after an assault, a counsellor from the Sexual Assault Crisis Program can be there to support them.**

Gender Roles Activity

Recommended Age: 12+

Goals

- To discuss gender roles and stereotypes.
- To illustrate how gender stereotypes can lead to unhealthy relationships and contribute to violence against women, girls, and non-binary people.
- To broaden the concept of what gender and gender expression can be.
- To challenge the limitations and discrimination created by gender scripts.

Have Ready

- Write on flipchart/whiteboard: Gender Roles (stereotypes) with the subheadings Man and Woman in columns.
- Two sticky notes per youth and pens.

Activity Introduction

- Tell youth, **“Let’s start by breaking down the idea of gender roles. Unfortunately, we live in a society that often only recognizes two genders: men and women. That’s called a gender binary.”** A binary is a system that only has two options. A role is something that you play. Just like characters in a show or movie, gender roles or scripts tell us how we are supposed to act as ‘males’ and ‘females.’ Gender roles are based primarily on stereotypes, which are taught to us by media and society around us.
- **We know that, in reality, there are many ways to express our genders and it goes way beyond female and male.** The issues that we will be talking about around unhealthy relationships and abuse often stem from the binary and the way that we’re taught to fit into specific gender roles. That’s why we will be starting our discussion by talking about ‘male’ and ‘female’ gender roles.

Instructions

- Ask youth, “**How are boys or men expected to be and act like in the world? What are the messages they get?**” Have youth write a response on a sticky note and stick it on the board.

Sample Flipchart

Gender Roles (Stereotypes)

Man

- Be strong
 - Don't cry
 - Don't show emotions, except anger (even when sad)
 - Want sex all the time
 - Be aggressive
 - Do physical job
 - Be the boss
 - Be rich/successful
 - Dominate situations
- **“If he does show emotions, what does he sometimes get called?”** Weak or effeminate. These words can be harmful and are often homophobic and sexist. When guys get called names for showing emotions, it can make people hide those feelings or feel ashamed for having feelings.
 - **“How are girls or women expected to be and act in the world? What are the messages they get?”** Have youth write a response on a sticky note and stick it on the board. Examples may include:

Gender Roles (Stereotypes)

Woman

- Weak
- Over-emotional
- Care for and nurture others
- Serve others
- Don't voice opinions
- Not supposed to want sex
- Cry a lot

- Expected to be passive communicators
 - Expected to be a 'good girl' or 'nice'
- Ask youth, **"If she does act assertively, what is she called?"**
Bossy or a bitch. Again, these words can be harmful, and are often homophobic and sexist.
 - **Why are gender roles unhelpful or even harmful?** There is a lot of pressure put on everyone to buy into gender roles. And we are often put down and discriminated against if we do not fit into these gender roles/scripts, like if a woman voices her opinion, a man shows his emotions, etc. **Gender roles do not help us meet our needs, because they limit us to playing a role instead of being who we are. The roles represent only two extremes of gender, when in reality someone could be anywhere in between or identify outside of the gender binary altogether and be excluded. Regardless of the gender of people in a relationship, there can be power imbalances because of different stereotypes like masculine/feminine, aggressive/passive, etc.**
 - **We can see in this example that everyone loses out.** It hurts all of us because it can make it harder for us to communicate respectfully and honestly within our relationships. Men/guys have a harder time speaking about their fears and are taught to communicate aggressively to fit the male gender role. Women/girls are told that their voices don't matter and that they should put other people ahead of themselves. Anyone who doesn't identify with those labels is invisible.
 - **This often leads to unhealthy or even abusive relationships. When we are discussing relationships, we can see how these gender roles can lead to violence against women, girls, and non-binary people.**
 - **What could it be like if everyone was encouraged to use healthy communication in a relationship?** (Would folks feel scared of their partner? Would they feel safe to say what they felt? Would they be listening to each other?)
 - Healthy, respectful communication.
 - Respectful conflict, where people feel heard and not threatened.
 - People feel good and respect relationship boundaries.

- Feel safe with one another and comfortable being vulnerable.
- Both partners can share their emotions in a calm and respectful way.
- No abuse.
- **When we challenge gender roles, it gives us more power to say what we really want for ourselves. We can also figure out ways to communicate and negotiate our sexual boundaries and desires in a respectful way.**

Types of Abuse Awareness Activity

Recommended Age: 12+

Goal

- To teach youth which behaviours are abusive.

Have Ready

- Create types of abuse cards: emotional, sexual, physical, spiritual, and financial.
- Create abusive behaviours cards (see below for examples).
- Tape and wall space to post the cards.

Instructions

- Provide a disclaimer, mentioning these issues can be hard to talk about and that it is okay for them to draw, 'zone out,' etc.
- Post types of abuse (emotional, physical, sexual, spiritual, and financial).
- Pass out behaviour cards and let youth post their card where they think it fits best.

Note to Facilitators

For simplicity, verbal, psychological, and mental abuse are combined in 'emotional abuse.' We use the types of abuse as general headings to categorize behaviours, knowing that all forms of abuse are connected.

Emotional and financial abuse are just as damaging as other types of abuse.

Sample Abusive Behaviour Cards

Emotional Abuse

- Guilt-tripping
- Isolation (being kept away from other people)
- Insults

- Manipulation
- Controlling
- Threatening suicide

Physical Abuse

- Throwing objects/punching walls/trashing a room
- Threats (their partner or family)
- Restraining (blocking doorways, holding your wrists, etc.)
- Hitting and pinching

Sexual Abuse

- Getting them drunk/stoned to have sex with them
- Forcing oral, anal, or vaginal sex, or any intimate activity
- Unwanted 'sexting'
- Sexual remarks/derogatory language
- Pressuring their partner into sexual activity
- Not stopping when a partner wants to stop
- Sexual pranks (snapping bra straps, pulling down pants)
- Sexual harassment

Spiritual Abuse

- Making fun of their beliefs
- Discouraging partner from following their beliefs
- Shaming them for going to ceremonies or practicing their spirituality
- Having spiritual beliefs forced on them

Financial Abuse

- Stealing
- Blackmail
- Not letting their partner have a job or go to school
- Bribery (their partner or their friends or family)
- Forcing them to work

Debrief

- Read out or ask for volunteers to read out the cards.
- For each type of abuse, ask the group, “**Are these cards in the right spot, or should any be moved?**”
- Pick and choose which cards to explain in more detail. Depending on the age and experience of the group, you might choose some of the examples from the lists below.

Emotional Abuse

*Emotional abuse is sometimes minimized because it doesn’t involve physical harm; however, it is often the underpinning of control in an abusive relationship.

- **Guilt-tripping:** Making someone doubt themselves.
- **Isolation (being cut off from other people):** It can make them feel like they have nobody to talk to and it becomes harder to seek help.
- **Insults**
- **Controlling:** Is often caused by jealousy and anger. Explore the difference between feeling jealous or angry and *acting* on the emotions by trying to control their partner or intimidate them and make them feel scared. This does not always happen in person; people use their partner’s phones, Facebook, email, or other social media to try and control them or to check up on what they are doing/who they are talking to. At Teen Talk, we ask youth, “**What is a healthy way to deal with jealousy and anger?**” **Healthy ways of dealing with jealousy are recognizing it is a normal emotion and understanding we are capable of healthy and respectful reactions no matter what the situation.**
- **Threatening suicide:** This is a powerful form of control and is often used to control a partner. If someone is threatening suicide, they need outside help from adults, ideally ones who are trained in suicide prevention.

Physical Abuse

*Causing or threatening to cause bodily harm.

- **Throwing objects/punching walls/trashing the room:** These behaviours may not cause physical pain, but they do create fear and intimidation.
- **Threats (to their partner or family):** Threats may or may not cause physical or emotional pain, but they do create fear and intimidation.
- **Restraining (blocking doorways, holding your wrists, etc.):** Even though we get the message sometimes that holding wrists and trying to 'passionately' solve our problems is 'romantic,' everyone should have the freedom to leave a situation if they want to.
- **Hitting, pinching, etc.**

Sexual Abuse

*Any unwanted sexual contact or attention.

- **Getting someone drunk/stoned to have sex with them:** Legally, consent does not count when under the influence of drugs and/or alcohol. Alcohol is a very common date rape drug. If someone has been assaulted while drunk/ high or sober, it's important to get support. Reinforce key messages: if someone was sexually assaulted when they were sober or drunk/high, it's never their fault.
- **Forcing oral, anal, or vaginal sex**
- **Forcing any kind of intimate activity:** This includes forced prostitution, forced watching or making pornography, forced sexting or stripping, or forced sex with friends.
- **Spreading rumours**
- **Unwanted 'sexting':** Sending or sharing unwanted sexual text messages, Facebook posts, or nude pictures, or being pressured to send them.
- **Sexual pranks or hazing (pantsing, bra snapping, etc.):** Humiliates the person and makes them feel ashamed.

- **Sexual remarks/derogatory language** ('slut', 'ho', etc.): These derogatory words/labels increase someone's chances of being assaulted and make it harder to go for help.
- **Sexual coercion:** Coercion is when someone pressures, threatens, or takes advantage of the other person to turn their 'no' into a 'yes.' It's not okay to pressure someone into any sexual activity. Any kind of coercion is assault. This includes pressuring someone to send naked pictures of themselves, or pressure to sext. Coercion also includes getting or waiting for someone to be drunk or high in order to have sex with them.
- **Not stopping when a partner wants to stop:** Everyone has the right to say no to sex or making out at any point, right before, or during sexual activity, even if the other person really wants it to continue.
- **Sexual harassment:** This includes any unwanted sexual behaviour, actions, or words. Some examples are sending someone unwanted sexual text messages, Facebook posts, or nude pictures, especially when it is repeated after they've been asked to stop. It would also include spreading rumours, and sexual remarks or any humiliating or insulting comments related to a person's gender, sexuality, or body parts, such as being called a ho or slut. Harassment also includes sexual hazing or pranks (snapping bra straps, pulling down pants as humiliation based on one's sexuality or body).

When talking about sexual abuse, it is important to also talk about consent and sexual assault resources. **What is written below is how Teen Talk explains consent:**

- When it comes to sexual situations, **"Does anyone know what the word consent means?" Consent is clear permission, which means that only yes means yes. It's a voluntary agreement, which means it's not something that one person does to another, but rather it's something that people decide to do together. "Consent is about asking, listening, and respecting. For example, let's say that you want to kiss someone. What would consent sound like? What would you say?" Can I kiss you? I'd really like to kiss you. (Anything they say that is respectful.) You might be thinking this is kind of weird or hard, or**

it seems really awkward, but the more we do it, the more natural it becomes.

- **Let's practice asking for consent about something non-sexual.** Look to the person next to you and ask them if they would like to join you in an activity you want to do this weekend. For example, "Do you want to have lunch together, play video games, go swimming, etc. with me?" **Truth is, we are using consent all the time.** "Did any of you hear a yes?" Great. "Did anyone hear a no?" That is going to happen sometimes.
- **Part of asking for consent is listening to the response and respecting what they say/want. It's also important to pay attention to what they're doing non-verbally.**
- "If you ask if you can touch someone's bum and they say yes, it's bum touching time! If they say maybe later, I'm not sure, or nothing at all, what does that all mean?" No. **Sometimes hearing a no can feel hard or we might feel kind of rejected. Even though those feelings are normal, it's our responsibility to deal with our feelings and respect the person who is saying no. Consent is also ongoing. This means that you have a right to say no at any time.** So, if in the middle of bum touching, someone wanted it to stop, what would have to happen? Stop. If someone says 'stop', or 'wait', looks uncomfortable, or is pulling away, stop and check in with them. This could sound like, "You don't seem into this." **If you are unsure, always stop and ask.**
- Asking for consent can be fun and sexy, and figuring out ways to talk about consent that feels comfortable for you can help. We know that it can be more complicated than just asking or saying 'yes' or 'no.' People don't always talk about touching/sex before it happens; sometimes people communicate non-verbally, through eye contact and body language. **Ultimately, consent gives both people a chance to say whether or not they are into something and is part of creating trust and respect in our relationships.**
- So, we just talked a lot about what consent is, now we're going to share some things that consent is not. **Consent is not coercive, which means trying to change someone's no into a yes by pressuring, nagging, or using guilt.** It's also not okay to try to change someone's no into a yes through alcohol or drugs, or to wait until someone is drunk or high to ask them for consent.

What's the most respectful thing to do if people are drunk or high? Wait until they are sober, bring them water, help them get home, or watch over them, etc. **Ultimately, consent doesn't count when people are drunk or high.** That doesn't mean that every time there is drinking and sex it's a sexual assault, but we do know that it happens. **What's important to know is that any unwanted sexual attention or contact is not okay.**

- **If you have ever experienced sexual assault, it is never your fault.** It doesn't matter where you were, who you were with, what you were wearing, or if you were drunk or high. If someone chooses to assault another person, it's always the fault of the person who is choosing to use violence.
- **People have a right to be believed and get support. No one has to go through recovering from that experience alone.** It can help to talk to someone you trust. You can access support for you or a friend. If you know someone or have a friend who has experienced a sexual assault, a couple of good things you can say are: "It's not your fault," and "I'm sorry this happened." You can ask them how you can support them and you can also give them information about the Sexual Assault Crisis Program. **It's a great resource that people can call if they need to talk. You can also call the line if you're feeling upset or unsure about a sexual experience. It is open 24/7 and free to call from anywhere in Manitoba. Their phone number is 1.888.292.7565 or 204.786.8631. If someone needs to go to the hospital after an assault, a counsellor from SACP can be there to support them.**

Spiritual Abuse

- **Making fun of their beliefs**
- **Discouraging their partner from following their beliefs**
- **Shaming them for going to ceremonies or their spirituality**
- **Having spiritual beliefs forced on them**

Financial Abuse

- **Stealing**
- **Blackmail**

- **Not letting their partner have a job or go to school:** Debrief that both of these things allow independence/allow them to form other relationships/increase self-esteem/education and by not having access to these, it can isolate them from current and potential friends and peers.
- **Bribery (partner or their friends or family)**
- **Forcing them to work**

Additional Activities

Ideally, this activity can be followed by:

- Action Planning Activity
- Qualities of a Healthy Relationship Brainstorm
- Fun and Single Relay Race

Relationship Spectrum Activity Group Movement

Recommended Age: 12-13

Goals

- To emphasize healthy relationship characteristics.
- To address unhealthy relationship myths.

Have Ready

- Healthy, Unhealthy, and Unsure signs.
- Tape.

Activity Introduction

- Post Healthy, Unhealthy, and Unsure signs in different areas of the room.
- Ask youth, **“Why do people start dating in the first place?”** Want to have someone to hang out with (companionship), are attracted to them, like each other, etc. **“What is good about relationships?”** Having fun, spending time with someone, having someone to trust, having support (someone who is there for you), affection, being respected, they are exciting, etc. **Relationships are defined as healthy when they include things like equality, respect, assertive communication, trust, and feeling accepted for who you are.**
- Explain that you will read out different situations that could happen in a relationship. Youth will walk to the sign that they believe fits with what was read. If they think it sounds healthy, walk to the healthy sign. If they think it sounds unhealthy, walk to that sign. If they aren’t sure or don’t want to participate, walk to the unsure sign. Each person gets to decide for themselves where to walk. After each statement, talk about it as a group.
- Note: Statements are in bold, the correct answer is in brackets, followed by the debriefing. Adjust activity to the physical needs of the youth. This can also happen as sitting and standing, or thumbs up/down/sideways.

You and your partner miss each other, but enjoy spending time apart. (Healthy) Having a good time without your partner is an okay thing to do. We still get alone time, time with friends, and time with family. It can even mean you have lots more to tell each other when you are together.

When there is a disagreement, your partner uses the silent treatment or blocks you on social media. (Unhealthy) The silent treatment or blocking someone during a disagreement sends the message that one person gets to decide when disagreements can happen. It's a way of trying to control the other person. Remember, controlling someone is a form of emotional abuse, which is never okay. The silent treatment is different from taking time alone to calm down. In a healthy relationship, disagreements will happen, and sometimes taking time apart to calm down is helpful, but first partners will communicate with one another that they need some time apart and will talk later.

You and your partner start making out. It feels like your partner isn't really into it, but they don't ask you to stop. You stop anyways and ask them if they are okay. (Healthy) Check-ins are an important part of consent. We all have the responsibility to pay attention to body language. If we aren't sure if someone is into what's happening, stop and ask them. Respect their answer.

Your partner texts you a lot during the day and gets mad if you don't answer. (Unhealthy) Everyone deserves space, even from their partner. Feeling as though you don't have enough is a sign that your boundaries are not being respected. People don't owe us responses to our messages. Our partners don't have to respond right away; they may be busy and that's okay.

Your best friend talks about you behind your back. (Unhealthy) It's not okay to spread rumours or gossip about other people. In a healthy relationship, we respect the privacy of the other person. The only exception is if we are worried someone is being hurt or may hurt themselves or others. In this case, it is important to bring a trusted adult into the conversation.

You and your partner decide to have sex. You talk about it beforehand, make a plan to protect yourselves, review boundaries, and both give consent. (Healthy) Having sex is a personal choice. Healthy relationships that

include sex also include taking care of each other's sexual health, setting boundaries, and giving consent.

You sent a sexy text to someone, and your partner finds out. They get mad and throw your phone. It breaks. (Unhealthy) Both people in this relationship are acting unhealthily. If you are interested in someone else, it is respectful to end things with your current partner. While being angry may be understandable in this situation, this does not give your partner the right to throw your phone. It is their responsibility to handle their anger in a respectful way, which means talking about how they feel hurt and waiting until their anger settles.

You and your partner don't tell each other everything, but you share a lot and trust each other. (Healthy) Sometimes, we hear that there are no secrets in a relationship, but healthy relationships have respectful boundaries built on trust. In a healthy relationship, partners understand that we don't have to tell our partners everything and that some things, like passwords to our phones or social media, are private and that's okay.

Your partner lets you use their phone for something, and you start looking through their photos and messages. (Unhealthy) We all have the right to privacy in our relationships. Who we text or what photos we keep is our own business. It is never okay to start looking through someone's phone.

Your partner hits the wall and/or throws things when they are angry. (Unhealthy) This is a type of physical abuse. Physical violence includes violence around a person because it feels scary and sends the message that more abuse could follow. Anger is a normal human emotion and can happen in healthy relationships. How we take care of our anger is what matters. **What are some healthy ways to handle feeling angry?** (Take responsibility for our feelings, go for a walk, take a break, talk to someone else, journal, art, etc.).

Your partner tells you that you're great just the way you are. (Healthy) In healthy relationships, partners accept each other for who they are. No one tries to change the other person.

You try to make your partner jealous to see if they care. (Unhealthy) Trying to make someone jealous is not part of a healthy relationship. Jealousy does not tell us if someone cares. Jealousy is a complicated emotion that is

about self-esteem, past experiences, and fear of losing someone. **What are healthier ways to ask for support, affection, or attention from a partner?** (Talk with them about our needs and ask them about their needs.)

Your partner is jealous of one of your friends. They ask you not to hang out with that friend anymore. (Unhealthy) If they are feeling jealous, that is their own emotion to process. They do not have the right to say who we can and cannot hang out with. Trying to control who our partners talk with is abuse, which is never okay. In healthy relationships, partners support one another about having friends.

You feel jealous sometimes in your relationship, but trust your partner and know how to take care of your uncomfortable feelings. (Healthy) Do people feel jealous sometimes? Yes, just like anger, it is a normal human emotion. In a healthy relationship, we take responsibility for our feelings of jealousy. If our partner is trying to make us jealous, that is unhealthy and not okay to do, but we can still choose to deal with our feelings in a healthy way. Sometimes, taking time and space apart is a good idea. We may need time to calm down and to 'let go' of the fear or insecurities we are feeling. Things to do can be taking a walk, going for a ride, listening to music that is soothing, and talking it through with someone we trust.

You tell a joke about your friend. Afterwards, you hear that the friend's feelings were hurt. It was only a joke, though, so you don't apologize. (Unhealthy) Sometimes, we say things that hurt another person's feelings. It doesn't matter if our intention was a joke, what matters is that someone was hurt by our actions. When we hurt someone, we must take responsibility for our actions and apologize.

You and your partner disagree about some things, but know how to communicate about and resolve the issue. (Healthy) All relationships have moments where people disagree or don't get along. How you handle these conversations is what matters. Even when angry, there should always be respect and trust. You might need to take some time apart to calm down if emotions are getting too high or if there is lots of yelling. Compromising is part of working through things as well. Healthy relationships aren't about always getting your way, but they are about feeling respected and safe.

Additional Activities

Ideally, this activity can be followed by:

- Action Planning Activity
- Qualities of a Healthy Relationship Brainstorm
- Fun and Single Relay Race

Relationship Activity Movement Signs

HEALTHY

UNHEALTHY

UNSURE

Relationship Spectrum Activity Group Discussion¹

Recommended Age: 14+

Goals

- To provide an opportunity to define, discuss, and identify the distinctions between healthy, unhealthy, and abusive relationship scenarios.
- To highlight what a supportive relationship can look like.

Have Ready

- Relationship scenario cards (see below).

Activity Introduction

- Ask youth, **“Why do people start dating in the first place?”** Want to have someone to hang out with (companionship), are attracted to them, like each other, etc. **“What is good about relationships?”** Having fun, spending time with someone, having someone to trust, having support (someone who is there for you), affection, being respected, they are exciting, etc. **Relationships are defined as healthy when they include things like equality, respect, assertive communication, trust, and feeling accepted for who you are.**
- **If things like trust or respect are missing, then we would define that as an unhealthy relationship. On a more extreme end, if there is an element of fear or violence, we would call that an abusive relationship. Abuse is always a choice.**
- **Provide a disclaimer, mentioning these issues can be hard to talk about and that it is okay for them to ‘zone out,’ draw, etc.**
- Tell youth that for this next activity, we’re going to look at different scenarios that could play out in a relationship. We have to decide and discuss which category we believe the relationship goes into and why. The categories are Healthy, Unhealthy, and Abusive. We’ll hear from the group with the card first, then we’ll open up the discussion to the rest of the group.

Instructions

- Choose which statements to use for this activity (approximately 6-12). The statements you choose will depend on how much time there is, and which scenarios may be most relevant for the group.
- Make sure cards from each type are addressed.
- Divide youth into smaller groups of 2-3 and hand out scenarios, asking youth to think about what type of relationship it is – healthy, unhealthy, or abusive.
- Priority for each card is for youth to share their thoughts and discuss. Cards can be debriefed as necessary.

Healthy

My partner is happy for me when I do the things I enjoy, even if it's not with them.

The things you enjoy should be important to your partner, even if they are different from what they enjoy or if they can't be there. Your partner can be supportive of your hobbies and activities by being interested, encouraging, helping, and giving you the space to pursue things that are important to you.

My partner and I are comfortable sending naked pictures to each other.

If consent is happening, then sharing pics is okay, with the understanding that they are not to be shared with anyone else. It would not be okay if one person was pressuring their partner or sending or sharing the photos without consent. Consent can be withdrawn at any time, including if the relationship ends.

Check out thatsnotcool.com for help to stop digital dating abuse. Also, it is not your fault if someone is sharing your pictures. Talk to an adult you trust if your pics are being seen without your consent or check out the website needhelpnow.ca.

Some ways to be safer with sexting are: not including your face or distinguishing features in the photo, using apps where the picture is only temporary, not sharing someone's photo, turning your location services off, etc.

FYI: It is against the law in Canada to send sexual pictures or videos of anyone who is, or appears to be, under 18 years old. This includes taking and sending sexual pictures or videos of yourself. According to section 163.1 of the Canadian

Criminal Code, sexual pictures, or videos, of people under 18 years old, or who look like they are under 18 years old, are child pornography. However, the Supreme Court of Canada decided in 2001 that young people have a right to express themselves sexually by creating and sharing sexual images of themselves, as long as it is 100% consensual, the images stay private (are not shared or distributed by the person who receives them to someone else who was never supposed to see them), it falls within the ages of consent, and there is no physical or sexual assault or abuse depicted in the image or video.²

You and your partner miss each other, but enjoy spending time apart.

Having a good time without your partner is an okay thing to do. We still get alone time, time with friends, and time with family. It can even mean you have lots more to tell each other when you are together.

You and your partner don't tell each other everything, but you share a lot and trust each other.

You have enough respect for each other to understand what information should be shared – hobbies and mutual interests – and what should not be shared, like passwords to social media sites and PIN codes to bank accounts. You understand boundaries are necessary for a healthy relationship.

You feel jealous sometimes in your relationship, but trust your partner and know how to take care of your uncomfortable feelings.

*Do people feel jealous sometimes? Yes. In healthy relationships, it's important to take responsibility for our feelings. **Healthy ways of dealing with jealousy are recognizing it is a normal emotion and understanding we are capable of healthy and respectful reactions no matter what the situation.** If our partner is trying to make us jealous, that is unhealthy and not okay to do, but we can still choose to deal with our feelings in a healthy way. Sometimes, giving ourselves time and space is a good idea. We may need time to calm down and to let go of the fear or insecurities we are feeling. Things to do can be taking a walk, going for a ride, listening to music that is soothing, and talking it through with someone we trust. **Sometimes in relationships, we find our feelings of jealousy are because of actual things our partner has done, like cheating or not telling us the truth. We might have to decide if the relationship is still the one for us.** If it's not, that is an okay choice, and we may have other relationships in the future. **However, if we are choosing to stay in a relationship that brings up our feelings of jealousy, we need to figure out ways to handle those feelings in a healthy and respectful way.***

Unhealthy

I try to make my partner jealous to see if they care about me.

Jealousy is not a good way to gauge how much someone cares for us. Jealousy is a complicated emotion that is about self-esteem, past experiences, and fear of losing someone. There are healthier ways to ask for support, affection, and attention from a partner. Trying to make someone jealous is not part of a healthy relationship.

Your partner texts you a lot during the day and gets mad if you don't answer. *Everyone deserves space, even from their partner. Feeling as though you don't have enough is a sign that your boundaries are not being respected. People don't owe us responses to our messages. Our partners don't have to respond right away; they may be busy and that's okay.*

You had a really good day, but don't tell your partner because you know they won't want to hear about it.

Feeling the need to leave things out or hide things from your partner might mean there is a lack of support. If you feel worse or taken down after sharing your good feelings with a partner, it might be a sign of abuse. In a healthy relationship, your partner thinks your happiness is important. A supportive partner takes the time to hear about your day.

It Depends

My partner likes to give me hickies to show how much they love me.

There are many ways to show love that do not include physical markings. If hickies are being used to show that a person is 'taken' or 'owned' by their partner, that is control and abuse, not love. If someone enjoys hickies and gives consent, then this can be healthy. One part of this card that sounds like a warning flag is the 'to show how much they love me' bit. Are hickies a practical way to show love or care? (No.) What is a much easier way to show love? (With our words.)

My partner doesn't participate in my spirituality with me.

Everyone has a right to their own spirituality. That also means that no one should be forced to participate in a religion or spirituality if they don't want to. In some relationships, partners practice different religions or spiritualities and are totally okay with that.

But if someone is put down because of their beliefs, feels like they can't practice their spirituality because of their relationship, or their partner is using religion or spirituality to control or manipulate them, it is abuse. In a healthy relationship, people feel free to practice their beliefs, even if they are different from their partner's.

On a larger scale, Residential Schools on this land were examples of spiritual abuse. These were places where Indigenous children and youth were forced to go by the Canadian government. The goal was to assimilate the children into white Christian culture, and in the process, have them not be 'Indian' anymore. There were many ways the government tried to do this, and we still see this racist idea existing in our society, often showing itself in the news/media and commonly through Canadians' opinions in social media.

Abusive

My partner hits the wall and/or throws things when they are angry.

It is not okay for a partner to use intimidation, even if they are angry and you are in a disagreement. Whether the anger is directed at you or not, anger should not be scary. This is abuse because it feels scary and sends the message that more abuse could follow.

It can help to think of anger as a secondary emotion. A primary feeling is what is felt right before we feel angry. We always feel something else first before we get angry. We might first feel afraid, attacked, offended, disrespected, forced, trapped, or pressured. If any of these feelings are intense enough, we think of the emotion as anger. In a healthy relationship, people still get angry, but find ways to take responsibility for their feelings that don't scare their partner. Developing a relationship with oneself can help us to learn how to manage our feelings.

My partner asks to borrow money all the time and doesn't pay me back.

Not returning the money that has been lent to them is also financial abuse. You have no obligation to lend or give money to anyone if you don't want to, your partner included. Financial abuse is using money to control another person. In a healthy relationship, partners understand their money is their own and don't feel guilt or pressure to 'share' it.

FYI: If someone is doing sex work, they have rights too. People under 18, by law, are not allowed to sell sex (for money, drugs, food, protection, etc.). Not only would this fall under sexual and financial abuse, but partners or other people involved are guilty of sexual exploitation if this is happening.³

My partner makes fun of my job and makes me feel bad for working weekends.

Everyone has the right to work and earn money if they want to. If a partner is making you feel bad for working or intentionally trying to ruin your experience or reputation, then it would be considered financial abuse.

When there is a disagreement, your partner uses the silent treatment or blocks you on social media.

The silent treatment sends the message that the partner it's used on is not even worth talking to (dehumanizing) and leaves them with no option of a solution. It is used as a method of control and for one person to have power over their partner. In a way, it's deciding that only one partner gets to be mad. This is abuse. In a healthy relationship, if there are disagreements, people often let their partner know they need to 'take time' to cool down. That way, they are more able to find solutions.

My partner refuses to wear a condom.

Everyone has the right to be safer and use protection when having sex. If one partner wants to use a condom, not using one or pressuring them not to is sexual abuse.

When we have an argument, my partner hides my stuff so I can't leave.

If someone is keeping you somewhere against your will, it is abuse. We have a right to leave a situation safely. In a healthy relationship, taking time and cooling down can help people come back together in a clearer headspace to work things out.

FYI: Canada's Criminal Code section 279 (2) defines forcible confinement as everyone who, without lawful authority, confines, imprisons or forcibly seizes another person.⁴

Debrief

- Sometimes different types of abuse happen at the same time, and this can make it hard to tell which type of abuse is happening.
- Trusting ourselves, our instincts, and our feelings can help us figure out where we are on the relationship spectrum. **No matter where we land, we can all work at building healthier relationships, keeping in mind abuse is a choice and, in that situation, sometimes ending a relationship is the healthiest choice we can make.** If people recognize they are using abuse, it's a good thing, because then we can choose to change our behaviour and learn to become supportive partners. **We are all deserving of having healthy boundaries, support, and respect in our relationships.**

Additional Activities

Ideally, this activity can be followed by:

- Action Planning Activity
- Qualities of a Healthy Relationship Brainstorm
- Fun and Single Relay Race

Relationship Activity Spectrum Cards

My partner is happy for me when I do the things I enjoy, even if it's not with them.

My partner and I are comfortable sending naked pictures to each other.

You and your partner miss each other but enjoy spending time apart.

You and your partner don't tell each other everything but you share a lot and trust each other.

You feel jealous sometimes in your relationship but trust your partner and know how to take care of your uncomfortable feelings.

I try to make my partner jealous to see if they care about me.

Your partner texts you a lot during the day and gets mad if you don't answer.

My partner doesn't participate in my spirituality with me.

You had a really good day but don't tell your partner because you know they won't want to hear about it.

My partner likes to give me hickies to show how much they love me.

My partner hits the wall and/or throws things when they are angry.

My partner asks to borrow money all the time and doesn't pay me back.

My partner makes fun of my job and makes me feel bad for working weekends.

When there is a disagreement, your partner uses the silent treatment or blocks you on social media.

My partner refuses to wear a condom.

When we have an argument, my partner hides my stuff so I can't leave.

“Is this Abuse or Warning Sign of Abuse?” Activity

Recommended Age: 12+

Goals

- To learn about abusive behaviours and warning signs.
- To provide an opportunity to discuss myths surrounding who can be affected by dating violence.
- To emphasize the importance of ‘trusting your gut.’

Have Ready

- Warning sign cards (see below for examples).

Instructions

- Divide youth into groups of 2-3 people.
- Choose a variety of scenarios and pass out cards.
- Ask youth to try to imagine that they are hearing these statements from a good friend who is in a dating relationship. Remind them that abuse can happen in all types of relationships between any gender of folks who are dating. Ask youth to decide if the behaviour is abusive, a warning sign, or whether it depends, and explain why they thought that.

Warning Signs Cards

Verbal/Emotional Abuse

My partner gets jealous when I talk to (or text) certain people. (Warning Sign/It Depends)

Jealousy is a normal feeling that most people sometimes have. It’s not your job to ‘fix’ the feelings or make them go away (e.g., you don’t have to stop talking to people/texting, going on social media, or going to parties to make your partner feel better). In healthy relationships, it’s important to take responsibility for those feelings. **Healthy ways of dealing with jealousy are recognizing it is a normal emotion and understanding we are capable of healthy and respectful reactions, no matter what the situation.**

My partner puts me down in front of my friends and apologizes after, or will say they were just joking. (Abuse)

Insults or put-downs are disrespectful and emotional/verbal abuse. If people are insulting or humiliating you in private or in front of your friends, and then say 'just kidding,' it doesn't take the hurt of those comments away. If you decide to date someone, you have a right to be respected.

My partner is unhappy with the way I look or dress. (Warning Sign)

The only person you have to please with the way you look is yourself. If you and your partner continually argue about your appearance or your partner tries to control what you wear, this can be abusive. No one has the right to control your appearance. Telling someone how to dress (or what to do) is controlling behaviour. Your partner should be happy with the person you are and not try to mould you into someone else. Trust your feelings and talk to your partner about what their comments are really about.

Physical Abuse

My partner held my wrists once when I tried to leave. (Abuse)

Restraining is physical abuse. We may get unhealthy messages from the media that holding wrists and trying to 'passionately' solve problems is 'romantic,' but no one should keep you somewhere against your will. You have the right to safely leave any situation. A partner who holds your wrists or arms, blocks your way, locks car doors, or prevents you from leaving in any way is behaving abusively. It is not romantic, it's controlling.

My partner hits the wall and/or throws things when they get angry. (Abuse)

It is not okay for a partner to act scary or to use intimidation, even if they are angry or if you are having a fight. This is abusive behaviour, whatever gender your partner is. Trust your own instincts when it comes to your feelings of fear or discomfort.

Spiritual Abuse

My partner makes fun of my spiritual beliefs. (Abuse)

Having different spiritual beliefs is okay. However, if someone is being made fun of because of their spiritual beliefs, feeling like they can't practice their spiritual beliefs, or being forced to change their beliefs, this is abuse.

Sexual Abuse

My partner refuses to use a condom/sex dam. (Abuse)

Everyone has the right to have safer sex. If someone is always making excuses for not wanting to use a condom/sex dam, or lies about using one, it means they are not respecting their partner. If someone wants to use a condom/sex dam, not using one or pressuring them not to is sexual abuse.

My partner likes to give me hickies. (It depends)

Hickies can be a fun, no-risk way of showing affection if there is consent. However, hickies (and other markings) can be controlling and abusive if there isn't consent. It's important to ask and talk about what each partner is comfortable with and to respect boundaries.

My partner asked me to send them naked pictures. (It Depends)

Asking is okay, as long as they are respecting the answer. If consent is happening (meaning both people feel comfortable), then sharing pics is okay, with the understanding that they belong to the person(s) in the photo, and are not to be shared with anyone else. Also, if you take pictures/videos, avoiding identifying features, such as your face, markings, tattoos, etc., and using messaging apps that delete pictures/videos once viewed can help you stay protected. If the answer is no and your partner keeps asking or pressuring you, this is disrespectful, controlling, and abusive behaviour. It is not okay to pressure to send or share the photos without consent. Consent can be withdrawn at any time. Check out www.thatsnotcool.com for help to stop digital dating abuse. It is not your fault if someone is sharing pictures without permission. If someone has shared your pics, talk to an adult you trust or check out www.needhelpnow.ca.

Financial Abuse

My partner wants to borrow money all the time and doesn't pay me back.

(Warning Sign)

This is an example of financial abuse. Giving money willingly to a partner is fine. The abusive aspect of this scenario is the fact that the partner is asking to borrow money and then not returning it. You have no obligation to lend/give money to anyone if you do not want to. Situations where you feel you want to give your partner money, but they are not asking for it, are different than when your partner doesn't pay you back when they ask for a loan. You should

be talking with your partner about your feelings about spending money on them when they have none. Feelings of guilt/responsibility may or may not indicate a situation where one partner is being taken advantage of.

My partner buys nice things for my friends and family. (It Depends)

If the person is just trying to be nice and buying presents for your family and friends, it is not abusive. However, if someone is nice to their partner's parents, family, and friends, but treats their partner badly when they are alone, this is an example of abuse. This situation makes it harder to leave because everyone is telling you to stay with the abusive partner since they appear to be so nice.

Debrief

- We often hear reasons or excuses when people act abusively. **“What types of reasons do people give for behaving abusively?”** They can't help it, they were drunk, they just 'lost control', this is how relationships are, they were 'just joking', because they love you, they are just trying to 'protect' you, etc. These are all excuses. Excuses blame the person who is being abused, and the person using abuse is not taking responsibility for their behaviour. Using abuse is a choice.
- If someone is experiencing abuse, it is not their fault.
- Sometimes abuse in relationships can be hard to identify and is not as obvious. Encourage youth to trust their feelings and instincts when it comes to their relationships. If youth feel confused/unsure about the relationship or feel gross/scared/trapped because of things that are happening, trust their instincts as a primary warning sign of abuse, and get help/support.

Additional Activities

Ideally, this activity can be followed by:

- Action Planning Activity
- Qualities of a Healthy Relationship Brainstorm
- Fun and Single Relay Race

Media Literacy Activity

Recommended Age: 12+

Goal

- To increase critical thinking skills and media literacy when it comes to representation and messages in mainstream media.

Have Ready

- Write: 'Media Messages' with 'What do people look like?' 'About relationships?' 'About sex?' in three parts of a flipchart.
- Optional: Find and show age-appropriate examples of unhealthy relationships in the media.

Instructions

- Ask youth to brainstorm popular types of mainstream media. Some examples are social media, music videos, reality shows, video games, news, or movies. Flipchart one or two of their favourites on the left-hand side of a flipchart paper.
- Ask youth, **"What do the people in the media look like? What are the relationships like? What messages do we get about sex?"**
- Write the themes that come out of the discussion on a flipchart.

Media Messages

What do people look like?

- Guys are 'buff' and girls are thin with big boobs. If there are fat people, they are portrayed as funny/not sexy.
- Majority of characters are white, heterosexual, and able-bodied.
- Indigenous stereotypes: e.g., gang member, Indian princess, warrior/brave, chief.

About relationships:

- Jealousy, cheating on partners, multiple sex partners, yelling, arguing, and 'drama' is seen as normal.
- Violent/abusive or over-romanticized undying love.
- Love hurts, should be super intense, "I can't live without you."
- Stalking, violence, men surrounded with multiple women who are portrayed as objects or property.
- Mainly heterosexual relationships.

About sex:

- Girls are sexual objects.
- Guys are only interested in sex.
- Sex is always rough or wild.
- No safer sex, e.g., no condoms/sex dams, no talk about STIs.
- People start kissing and then it progresses to sex without asking for consent or talking about boundaries.
- Sexual assaults on women, and specifically Indigenous women, are seen as normal.

Debrief

- We get a lot of unhealthy messages about relationships, sexuality, and what it means to be Indigenous from the media.
- With the exception of APTN, when it comes to depictions of Indigenous people, most often mainstream news coverage is

negative and mainstream media uses stereotypes or completely ignores and doesn't show Indigenous people or couples at all.

- Mainstream media also almost never shows 2SLGBQ+ people.
- The harm that comes from seeing mostly harmful stereotypes is that we might start believing what we see and forgetting positive knowledge and ways of being that we aren't seeing.
- Racism by omission happens when there are no Indigenous characters or representation. It leaves us with no healthy role models and makes it seem like Indigenous people are in the past and don't need to be concerned with modern day things.
- Media messages are rarely referred to as 'unhealthy.' In fact, they are often depicted as 'normal.' If we are being taught that it is normal to not ask for or use consent, not talk about safer sex or get tested, what are some possible problems that can happen? Some answers are: sexual assault, needs not getting met, STIs, unplanned pregnancy.
- **“What are the risks in thinking that it is normal not to have trust or respect in a relationship?”** You might expect unhealthy behaviour from your partner or use unhealthy behaviour in your relationship. You might not know that something is not okay, and therefore are less likely to get help.
- Other questions to ask youth could be, **“What are sexual relationships like in the media? Do we see people talking about safer sex? Do we see people using good examples of consent? Do the characters talk about the possibility of pregnancy or STIs and HIV/AIDS?”**
- **“What can we do to resist the harmful messages in the media?”** Be critical of what you watch, watch less TV, seek out inclusive media, look for Indigenous-created literature and art (check out APTN and NCI), challenge what we see and hear, talk to others about how the media can be damaging, educate ourselves in our culture, traditions, ceremonies and languages, find and be healthy role models, tell our own stories and remind ourselves and others that media is designed to 'entertain' and is not real life or instructions on 'how to have a healthy/happy life.'

Additional Activities

Ideally, this activity can be followed by:

- Qualities of a Healthy Relationship Brainstorm
- Fun and Single Relay Race

Dating Violence Action Planning Activity

Recommended Age: 14+

Goal

- To teach practical examples of what people can do to get help.

Have Ready

- Write: “What can you do if your partner is abusive?” “How can you help a friend who is being abused?” “What can you do if you are abusing your partner?” on three flipcharts or a white board.
- Markers and tape.

Instructions

- Provide a disclaimer, mentioning these issues can be hard to talk about and that it is okay for them to draw, ‘zone out’, etc.
- Divide the youth into 3 groups and give each group a flipchart and markers. Give each group a flipchart with one of the following sample flipchart headings below. Facilitate within the small groups and get them to brainstorm the answers. Rotate the groups through the flipcharts ‘speed dating’ style, if time allows. Have one person/some people volunteer to read the list to the whole room and then debrief as a whole group.
- Remind them that the key things to think about are: safety, changing behaviour, and how and where to get support.
- When they are done with the flipcharts, post them and go through them as a large group so extra answers can be added from the other groups and information can be shared.
- If you are not breaking into groups or if time is short, you can have the youth brainstorm as a large group and write the answers on a flipchart. Three key overarching messages, if short on time, are:
 - Talk to someone you trust about it
 - End the relationship, if possible

- Know it isn't your fault if you are being abused/Accept responsibility if you are abusing your partner

Sample Flipcharts and Debrief

What can you do if your partner is being abusive? (1st flipchart)

- **Tell someone you trust and/or a counsellor about what is going on.** You can call the Klinik Crisis Line (204.786.8686) or even go talk to someone you trust.
- **Know it is not your fault.**
- **End the relationship if you can.** Make a safety plan: try to do it in a public place or somewhere that you feel safe. This could also be through text/email/phone.
- **If you're not ending the relationship, make a safety plan for what you will do if you are in an emergency.** Think about how you will manage if you decide to stay in the relationship.
- Check in with your family, friends, and people you trust regularly.
- Remember, you deserve to be safe at all times, in any situation.
- Talk to your partner, but recognize that they may not change their behaviour.
- **Try to find and spend time focusing on things that give you strength.**
- Look for activities that help you connect to yourself. This could be connecting to your culture, practicing your religion (if you have one), or anything that makes you feel good or learn about yourself.
- **We know not everyone ends abusive relationships. There can be many reasons why it might be hard to leave an abusive relationship.** They could also still like, love, or care for their partner, even though they are being abusive. Their partner could also threaten to hurt them, their friends/family, themselves, or even threaten suicide.
- **If a partner threatens suicide when you talk about breaking up with them, it is emotional abuse. This is a form of control.** We are not responsible for another person's life and are not helping them or ourselves if we stay in a relationship for fear they may harm themselves. **Ultimately, any person thinking of**

suicide needs help and support from more than just one person. We cannot be their sole means of support, but we can let an adult we trust know what's going on.

What can you do if you are abusing your partner? (2nd flipchart)

- Take responsibility for your own behaviour/admit you have a problem. If you are feeling bad about the way you have reacted or treated someone, that might actually be a good thing. It means that you are learning about yourself and you can work to change your behaviour.
- End the relationship.
- Talk to someone about it, like a counsellor, crisis line, family member, or friend. Remember that abuse is behaviour, not a personality trait, and can be changed.
- Ask for help, get some support, find ways of coping and healing.
- Recognize when you are getting angry or feeling controlling. Learn your warning signs (feel hot/flushed, clenched fists/jaw, can't concentrate, etc.).
- Learn ways to calm yourself (take a deep breath, count to ten, go for a run/bike ride, call or talk to a friend, make a 'cool down' playlist, meditate, etc.). When thinking of ways to calm down, it's important to ask yourself, **"Does this activity turn my volume up or down?" If it turns your volume up, try something else.**
- Try to learn different ways of communicating and expressing your feelings (mindfulness, positive self-talk, etc.).
- Drop-in counselling.
- Join support groups to help deal with your feelings.
- Men's Resource Centre (16 years old and up in Winnipeg).
- EVOLVE at Klinik (for men over 18 years of age in Winnipeg).
- Note: For male identified facilitator, if comfortable doing so, use the following: The abuse that happens to girls and women and non-binary people is most often caused by boys/men. That makes it a 'guys' issue. One of the most important things that guys can do is to treat everyone with respect all of the time, even when it's 'just the guys.' We're not saying that all guys hurt others, but it is everyone's, including boys'/men's, responsibility to stop it. See

Healthy Relationship For Guys under the toolkit for more activities.

Abuse is complex. In some relationships, one person is clearly hurting the other, but there can also be relationships where both people use and experience abuse. Two wrongs don't make a right. **Neither person deserves to be abused, and each person is still responsible for their own actions.** Either one or both people can choose to not use abuse, to get help, and to end the relationship while they do the work of healing.

The abuse that happens to girls and women is most often caused by boys/men. That makes it a guys' issue. **One of the most important things that guys can do is to treat girls and women with respect all the time, even when it's just the guys.** We're not saying that all guys hurt girls, but it is everyone's, including boys'/men's, responsibility to stop it.

Helping a friend (3rd flipchart)

- If you are helping a friend, can they use all the same resources we've just talked about? Of course.

If a friend is being abused:

- Listen without blaming. It is okay to state your concern for your friend, because they may not realize how alarming their situation is. However, if you try to make decisions for your friend, you are trying to control them, which is similar to what their partner is doing. Criticism and judgment are unhelpful. Criticism can also add to the silence, making it harder for your friend to get help and for you to provide support.
- Tell an adult you trust.
- Let them know it is not their fault.
- Spend time together, have fun.
- You can call the Clinic Crisis Line (204.786.8686) or talk to someone you trust.
- Be supportive by helping them create a safety plan and checking in with them as often as you can.

- Talk to a counsellor.
- Call a crisis line.
- It might seem obvious to people on the outside that an abusive relationship needs to end, but for all these reasons and more, it might be more complicated for the person dealing with the abuse. **The bottom line is that a person can't leave the relationship until they decide they are ready. If we want to be supportive, we need to be understanding of their choices.**

A friend is abusing their partner:

- Approach your friend and ask them how they are feeling about the situation. Let them know it's okay to feel upset, but let them know that their behaviour is not okay.
- Help them find resources.
- Go with them to get help.
- If you're worried about the safety of their partner, tell someone.
- It is also important to get support for ourselves when we are supporting other people so we can stay mentally well and deal with any feelings that come up.

If you see abuse happening: (verbal)

- Scenario: You are in the hallway. You see a couple arguing, then you see a person push their partner into a locker and call them names.
- Pay attention to your feelings.
- Do something to show that you have witnessed the behaviour and are not okay with it.
- Say something ("that's not cool").
- Create a distraction (be loud, drop your gear).
- Ask either person if they are okay or need help.
- Let the person who is hurt know they "didn't deserve that."
- Tell an adult.
- Find someone you trust to talk to about your feelings and what you've witnessed.

Additional Activities

Ideally, this activity can be followed by:

- Qualities of a Healthy Relationship Brainstorm
- Fun and Single Relay Race

Healthy Relationship Worksheet and Discussion

Recommended Age: 12-13

Goals

- To identify characteristics of a healthy relationship.
- To encourage youth to expect a healthy relationship as a means to avoiding abuse.

Have Ready

- Blank paper and pens.
- Flipchart paper.

Instructions

- Hand out a pen and paper.
- Ask youth to think about someone they enjoy being around. This could be a family member, friend, partner, or someone else.
- Have youth write down three reasons they enjoy being around this person. Allow a few minutes for youth to work on this.
- Go around the room, asking each youth to share their answers. Flipchart their responses. *Note: As a time and space saver, put a checkmark beside repeated answers.*
- Identify common themes as you build the list, like trust, respect, laughter, etc.

Debrief

- Look at this big list of healthy qualities!
- **Who here deserves to be around someone like this?**
(Everyone) This also means that we have a responsibility to offer these qualities to the people in our lives.
- If someone is not treating you well, that is not your fault. If you are worried about your safety, or feel like they are hurting you or could hurt you, it is important to let a trusted adult know.

Qualities of a Healthy Relationship Brainstorm

Recommended Age: 14+

Goals

- To identify characteristics of a healthy relationship.
- To encourage youth to expect a healthy relationship as a means to avoiding abuse.

Have Ready

- Write 'Qualities of a Healthy Relationship' on a flipchart paper.
- Large post-it notes (or squares of scrap paper), markers, and tape.

Instructions

- Hand out a marker and paper or post-it notes to everyone.
- Ask, **"What are we looking for in a healthy relationship?"**
- Get the youth to brainstorm the things that they would want in a healthy relationship and ask everyone to write one quality on their paper and post it on the flipchart.
- This activity may work well as a whole group brainstorm or go-around where each person gets to add a quality to the list. With a quiet, smaller group, this activity can be done as a drawing activity. Ask youth to draw or write out their version of a healthy relationship, or write a letter to their future or current partner (everyone needs a paper and pencil). Invite any of the youth to share what they have created and explain their drawing to the rest of the group.

Sample Flipchart

What Are Qualities of a Healthy Relationship?

- **Respect** - Partner has the right to make their own decisions. Treating each other well, even in disagreements. Supportive partners honour our relationships with ourselves.

- **Like/love/care** - Genuinely liking, loving, or caring for each other.
- **Acceptance** - Being able to be yourself/ Accepting your partner for who they are.
- **Communication** - Use open, honest, and assertive communication.
- **Affection** - Flirting, holding hands, making out, sex (definition is mutual).
- **Using consent** - Happens all the time in healthy relationships.
- **Listening** - To try and understand each other.
- **Time together and time apart** - Creating a balance.
- **Equality** - Each having equal say in the relationship.
- **Freedom** - To have own friends, interests, goals, and supports.
- **Boundaries** - What we do and don't want around sexual activities, time, privacy, and space.
- Healthy conflict.
- Doing activities that are fun together.
- Helping each other feel safe.
- Trust - Develops throughout the relationship.
- Sense of humour.
- Support, etc.

Debrief

- Look how many qualities can be part of a healthy relationship!
- Acknowledge that we may not be seeing these things in all of the relationships we see in the media or in our lives, but we can still plan to expect these things from a partner.
- If we haven't learned how to have a healthy relationship from our family or friends, then we can try and find people or couples who can teach us these qualities. Look for people who can teach you how to be a good partner, find positive role models.
- Let youth know that they don't have to be dating or thinking about dating to think about healthy relationships. A great time to make this list is before deciding to date.
- **To build a healthy relationship and receive the qualities on our lists, we must be willing to offer them to our partner as well. One of the best ways to have a healthy relationship is to**

know what one looks like for you and to expect one. So, some unofficial homework is to think about and write down what you want out of a relationship. It might help to look for people whose relationships are healthy and try to learn from them.

- Healthy relationships take work and practice. Mention that we are all responsible for our actions and for the way we treat others.
- At Teen Talk, we ask youth, **“Is this a wish list, or a checklist?”** Checklist. We can all expect these things of our partners and from ourselves.
- Ask youth, **“Who deserves a relationship like this?”** (Everyone.) If we decide to date, we all have the right and the responsibility to develop healthy relationships.
- **Expecting a healthy relationship is the best thing anyone can do to prevent being in an abusive relationship.**
- Remind youth that you can be just as happy and fulfilled whether you are single or in a relationship.

Additional Activities

Ideally, this activity can be followed by:

- Fun and Single Relay Race

Fun and Single Relay Race

Recommended Age: 12+

Goal

- To show that being single can be fun.

Have Ready

- Write on two flipchart papers with markers, or on a chalk/white board, 'Fun Things To Do When Single.'
- Tape, if using flipcharts.

Instructions

- Have the youth brainstorm things they can do to have fun when they are single.
- This can be done as a large group brainstorm, small group flipcharts, or for a lot of fun, break youth into two teams and create a relay race where each team has individuals running to the flipchart, writing an activity, and running back to the team to tag off until everyone has had a turn or two.

Sample Flipchart

Fun Things To Do When Single

- Watch movies
 - Go camping
 - Hang with friends
 - Play bingo (Win!)
 - Spend time with Elders
 - Flirt
 - Learn your history
 - Visit family
 - Create art
 - Join a team/club
 - Go to a party
 - Volunteer
 - Sit by the fire
 - Read
 - Sweats
 - And more...
- Spend time outside
 - Play card games
 - Masturbate
 - Be a role model
 - Fishing
 - Attend gatherings
 - Try something new
 - Swimming
 - Make dinner
 - Work out
 - Crafts
 - Dance
 - Meet new people
 - Ceremonies
 - Facebook

Debrief

- This list shows us that being single can be really fun.
- Being single is also better for your self-esteem than being in an unhealthy/abusive relationship.
- Being single does not mean that you have a boring life. In fact, there are tons of things you can do to feel good about yourself and to have fun.
- This is a great list to have, even if you are in a relationship, because a big part of healthy relationships is having space to do your own thing and be your own person.

Slam Dunk Self-Esteem Activity⁵

Recommended Age: 12+

Goals

- To explore elements of self-esteem.
- To practice positive self-talk and recognize positive self-reflection.

Have Ready

- Write the '5 Steps to Building Self-Esteem' on the board or reveal the flipchart with the steps written on it (just the bolded parts). Briefly go through each step, using the information below each bullet.

Instructions

- Choose five Slam Dunk statements and write them on the board or reveal a flipchart with them on it.
- Hand out a sheet of paper and a pen or pencil to each youth.
- Ask youth to choose at least one question and write their answer on the blank sheet of paper.
- Once everyone has finished, ask youth to take turns sharing their answers (but remind them that sharing is voluntary). After each participant has read their answer, invite them to crumple up their sheet of paper and slam dunk it into the container or basket (or bag, if nothing else).

Sample Flipchart

Five Steps to Building Self-Esteem

These are some steps that can be helpful in building self-esteem:

- **Value yourself and value others**
Identify the qualities you like about yourself and remind yourself of them often. Learn to forgive yourself for mistakes you have

made in the past. Communicate your feelings and thoughts honestly and directly. When you appreciate your own worth, it is easier to respect the worth of others. Accept other people for who they are. Try not to control someone else.

- **Get connected**

We all need extra support. Connecting is about both caring and feeling cared for. Look at the people, places, or things around you that mean something to you and find positive examples of mutual and supportive relationships. This can include friends, family, and counsellors. When you are alone, use the time to enjoy yourself rather than just existing until you can be with others.

- **Think about your thinking**

Be aware of your thoughts and your negative self-talk such as blaming, criticizing, or comparing. Notice if there are patterns to when these thoughts come up. Challenge your negative thoughts when they happen. Remind yourself of your strengths instead. This takes practice. Be kind to yourself, don't expect perfection.

- **Live in the moment**

When you are feeling stressed, ask yourself, "Am I okay at this very moment, this very second?" Even in the most difficult times, we are usually okay second by second – it's when we let ourselves get caught up in the past or the future that we tend to feel overwhelmed. Understand that "this too shall pass."

- **Be active**

Move your body in ways that feel good. Studies show that when people get out and do things, especially something physically oriented, they feel better (especially the next day). So, find something that you like that feels good for your body and do it!

Slam Dunk Statements

(Select 5 for youth to choose from)

- Something I do better than most people
- A skill or ability I would like to improve or work on
- A time that I handled a conflict in a positive way
- A time I turned a setback into a triumph (success)
- Something that I am proud of
- Three of my best qualities

- An important relationship in my life and why
- For me, the key to feeling good about myself is...
- Something I am really good at is...
- A promise I made to myself and have kept
- A talent I would like to develop this year
- What I would like to have written on my tombstone
- Something that I want to be complimented on
- An important achievement in my life
- Ways that I show respect for myself
- The most difficult thing I have accomplished
- Things I do for self-care
- An important life lesson I have learned and why
- What I would try if I knew I could not fail
- What I would regret not having done if my life were ending
- The best thing I have ever done for myself
- The best thing I have ever done for another person

Appendix: Educational Curriculum Connections

Our curriculum ties to the Manitoba Government learning outcomes. The following language used is not our own. For more information, please visit www.edu.gov.mb.ca/k12/cur/physhlth/

Grade 7

K.3.7.B.5a Describe scenarios that illustrate examples of physically, verbally, and emotionally abusive behaviours in different relationships (i.e., within families, between friends, among peers, with employers, groups, gangs, on sports teams, when babysitting).

K.3.7.B.5b Develop strategies (e.g., conflict-resolution skills...) for avoiding situations (e.g., conflict between parents' and peer values, with the law, in competition, within school...) that can potentially lead to conflict and violence.

K.3.7.B.6a Establish safety guidelines to protect self and others from sexually abusive situations (e.g., pornography, incest, stalking, prostitution, sexual assault...).

K.3.7.B.6b Demonstrate an understanding of skills (i.e., problem solving, conflict resolution, communication, assertiveness, anger management skills) in dealing with case scenarios related to sexually abusive situations and ways to seek help.

K.4.7.B.2a Identify the characteristics (e.g., compliance/ conflict, confidence level, tone of voice, eye contact, body language...) associated with each of the communication styles (e.g., passive, aggressive, assertive...) and leadership qualities (e.g., enthusiasm, presentation skills, reliability, organization...).

K.4.7.B.3a Identify anger-management skills (e.g., use self-statements, participate in physical activities, write letters to express feelings...) as alternatives to aggression and violence.

K.4.7.B.3b Describe how conflict situations (i.e., change, new situations, negative group influences, dishonesty) affect personal behaviour and development (e.g., adapting to new surroundings or routines, making new friends, coping with change, being assertive...).

K.4.7.B.3c Review strategies (e.g., mediation, conflict resolution...), possible outcomes (i.e., win/win, win/lose, lose/win, lose/lose), and behaviours (e.g., compromising, negotiating, accommodating, blaming, avoiding, collaborating, consensus building...) for conflict resolution among friends and/or peers.

K.4.8.B.2b Identify roles and responsibilities (e.g., loyalty, commitment, support, respect, leadership...) in developing positive relationships (e.g., between friends, within families, in a sports team, band/choir...).

Senior 1-4

K.3.S1.B.5a Analyze issues related to violence prevention in a variety of contexts.

K.3.S1.B.5b Demonstrate an understanding of the skills in dealing with case scenarios related to physically, verbally, and emotionally abusive situations.

K.3.S1.B.6a Differentiate among the terms associated with abusive situations.

K.3.S1.B.6b Identify skills and community resources for addressing problems associated with sexually abusive behaviours.

K.3.5.B.4 Identify available community supports that promote safety and community health.

K.3.S2.B.4 Investigate the contributions self and/or others can make to community/global health and sustainable development

K.4.S1.B.1a Describe ways to treat others for developing healthy and meaningful relationships.

K.4.S1.B.2b Identify appropriate social behaviours for developing meaningful interpersonal relationships.

S.4.S1.A.3 Apply interpersonal skills in case scenarios related to developing close, meaningful relationships.

K.5.S1.E.2a Identify the components for building and maintaining healthy, close relationships.

K.5.S2.E.2 Analyze the components in different case scenarios for building and maintaining healthy relationships.

12.HR.1 Demonstrate understanding of the characteristics of healthy and unhealthy, relationships, and discuss factors that might influence their development.

12.HR.5 Apply problem-solving and decision-making strategies to recognize unhealthy relationships, and identify community supports and services to assist in the healthy resolution of relationship issues.

12.HR.4 Apply problem-solving and decision-making strategies to identify and prevent the development of abusive relationships and/or to end unwanted relationships.

S1 & S4 4.4.2 analyze and evaluate strategies for building, maintaining, and ending relationships

S4 4.4.3 determine resources available for families with addiction or violence issues

Endnotes

¹Love Is Respect. (n.d.). *Relationship spectrum*. Love Is Respect. Retrieved August 23, 2021, from <https://www.loveisrespect.org/everyone-deserves-a-healthy-relationship/relationship-spectrum/>

²Slane, A. (2013). Sexting and the law in Canada. *The Canadian Journal of Human Sexuality*, 22(3), 117–122.

³Government of Manitoba. (n.d.). Families | Province of Manitoba. Retrieved June 24, 2021, from Province of Manitoba: Families website: <https://www.gov.mb.ca/fs/traciustrust/index.html>

⁴Legislative Services Branch. (2019). *Criminal Code*. Justice.gc.ca. <https://laws-lois.justice.gc.ca/eng/acts/c-46/section-279.html>

⁵Fredericton Sexual Assault Crisis Centre. (2009). Man to man: A tool-kit for delivering workshops to men and boys about reducing sexual assault. In *Liberty Lane* (pp. 1–647). Fredericton Sexual Assault Crisis Centre, Inc. https://www.libertylane.ca/uploads/1/6/1/7/16174606/man_to_man_toolkit.pdf

CHAPTER 7

Mental Health Activities

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Feelings & “What Got You Through” Brainstorms

Recommended Age: 12+

Goals

- To relate youth to others who may be dealing with a mental illness or going through a hard time.
- To reduce stigma and define empathy by exemplifying that we can all relate to difficult feelings and offer support.
- To explore what gets you through and show the difference between coping that heals and that which numbs (e.g., self-medicating).
- To provide youth with local resources.

Have Ready

- Flipchart papers with ‘Feelings during a hard time?’ and ‘What got you through?’ (x2) written at the top.
- Markers.

Instructions for ‘Feelings’

- **Introduce the topic of mental health.** We all have mental health, and, just like our physical health, we must work towards mental wellness. What do you think we mean by mental wellness? **Mental wellness is a balance of mental, physical, spiritual, and emotional parts of ourselves.**¹ It is also the ability to deal with stresses and challenges while living a full and creative life. **We talk about mental health because stress is common during the teenage years, and we all must learn how to cope with stress and difficult feelings to be mentally well. The sooner we can get support and resources, the better we are able to cope.** Tell youth we are going to talk about mental health, mental illness, and mental wellness. **Provide a disclaimer, mentioning these issues can be hard to talk about and that it is okay for them to draw, ‘zone out,’ etc.**
- As a large group brainstorm, explain that we are going to think of some of the feelings that might come up during a difficult or hard

time (e.g., when there's a loss, a breakup, or when preparing for a difficult task such as an exam or a big game). Ask youth, **“What are some of the feelings that could come up when someone is having that hard time?”** Flipchart their responses.

Sample Flipchart

Feelings During a Hard Time

- | | |
|------------------|-----------|
| • Sad | Resilient |
| • Alone/Isolated | Strong |
| • Depressed | Capable |
| • Anxious | |
| • Scared | |
| • Guilt | |
| • Hurt/Pain | |
| • Confused | |
| • Angry | |
| • Powerless | |

‘Feelings’ Debrief

- Ask youth, **“Who here has felt most of these feelings?”** These feelings are common feelings, meaning that most of us have experienced these feelings at one time or another in our lives, so we can relate to others who are dealing with these emotions.
- Ask youth, **“Are any of these feelings bad, or wrong?”** (No)
- For some of us, these feelings are triggered by specific events (a loved one dying or getting sick, losing a game, failing a test, breaking up with a partner, etc.). **However, sometimes the reason for the pain is not visible to those around us, which can often be the case with mental illness. This can lead to misunderstandings or even minimizing of what someone is going through.**
- **Although it may be confusing to understand the source of these feelings, it is important to acknowledge that all feelings are real and valid. So, even if we have not been through what someone else has been through, we know what it's like to need support and understanding from others.**

- **Suffering is not equal. Some people have been through or go through more than others do for reasons beyond their control.** For example, those who have had hard childhoods or those who have experienced trauma in their lives may feel hard emotions more intensely than someone who has grown up with a lot of support and no traumatic experiences. Someone who has to cope with racism or other forms of discrimination on a daily basis may have different triggers than people who have more privilege in the same way. **All feelings are valid, no matter where they come from.**
- **We all experience feelings of being anxious or depressed sometimes. Some people also live with mental illnesses of depression or anxiety.** If the feelings don't seem to pass or are impacting day-to-day needs, talk to a trusted adult. A mental illness may add challenges to our mental health, but **people can and do recover or find ways to thrive with a mental illness.** It just might take a little more support.
- While it is not a competition, it is good to recognize that some people need more support and understanding. For example, depression and anxiety are the two most common mental health issues for people your age. **Finding more supports and taking extra steps for mental wellness might be necessary for anyone who is living with anxiety and/or depression.** This could include talking to a supportive person regularly, seeing a counsellor, going to a support group, taking medications, doing exercises that work for them, and having a specialized plan in place for when they need it. There are lots of ways to support each other.
- Sometimes, even though we are going through a hard time, we may still feel strong or have hope knowing that we will get through it because we've gotten through the other hard times before. When we recover from a tough time, we call it 'resiliency' and people can be amazingly resilient. **Asking for help with a hard time helps us build inner strength and support and can make it easier to ask for help in the future.**
- Note: If youth bring up thoughts of suicide, it is important to respond appropriately. Acknowledge that sometimes when people have been feeling sad, depressed, or hopeless for a long time, they may start to think about suicide. Reinforce suicide prevention

messages: **it is important to talk to an adult you trust and not keep it a secret if someone is thinking about suicide.** For more information, please refer to the Suicide Prevention section of the corresponding chapter in the Teen Talk Service Provider Manual.

Instructions for ‘What got you through?’

- Divide youth into two groups and give each group a ‘What got you through?’ flipchart.
- Explain to the groups that we know hard times are going to happen in our lives, so it makes sense to try to figure out healthy ways to get through those hard times or to cope with them. These can take some time and work to develop, but can really help us.
- Ask the group, **“When thinking about a hard time, what helped you get through?”** Have them write their ideas on the flipcharts.

Sample Flipchart

What got you through?

- **Talk to someone you trust:** a friend, family member, Elder, teacher, counsellor, etc.
- Hang out with friends/others/family
- Cry, laugh, and get hugs
- Do something creative, draw, paint, or play music
- Talk to people/have conversations
- Write down your feelings in a letter, journal, blog, or diary
- Go see a medical doctor, Elder, spiritual leader for care, etc.
- Go for a walk/connect to nature
- Watch movies
- Play videogames
- Play sports, dance, sing
- Go for a bike ride
- Read poetry or create your own
- Build or fix something
- Masturbate
- Spend time alone/get to know yourself
- Meditate or pray
- Attend ceremonies

- Use positive self-talk
- Practice mindfulness/deep breathing
- Take part in cultural practices

‘What got you through?’ Debrief

- Have the groups read out their lists if they feel comfortable, or if not, you read the lists to the whole group. Validate that there are lots of ways people get through tough times.
- If substance use appears on the list: We have to acknowledge that substance use or self-medicating is a choice some people make to avoid challenging feelings. Discuss key harm reduction tips like drinking water, taking breaks, being somewhere safe, etc. Avoid shaming the group, but also acknowledge it can potentially lead to problems like addiction. Substances and self-medicating can numb all feelings, both ‘negative’ (e.g., shame, guilt) and ‘positive’ (e.g., joy, hope). Be sure to highlight that increasing other activities and resources on the list can help someone who is trying to use less substances or less often. Note: If youth bring up self-harm, encourage them not to judge and add in healthier ways of coping. Finding new/additional ways to get through difficult times can help people reduce risks and may be more useful in the long run. For more information on self-harm, please see the corresponding chapter of the Teen Talk Service Provider Manual.
- Some ways of coping allow us to reflect and/or release our feelings (e.g., talking, journaling, making music, art, etc.), and others help us to distract, numb, or avoid feelings (e.g., shopping, reading books, watching television, playing video games, playing sports, etc.). Ideally, we do both reflective and engaging activities, as well as distancing or distracting activities, when dealing with difficult or stressful times.
- We don’t only want to reflect on our hard time because that can be exhausting, but if we only distract from our problems then we may not work through our feelings. This is why we need both.
- Beyond reflecting and distracting activities, it is helpful to have a variety of coping skills. It can be good to think about activities that you can do by yourself, that you can do with other people, that do not cost money, that do cost money, that are quick, that take some

time, that take effort, and that are easy. That way, we have a mix of things to pull from.²

- Ask youth, “**Who needs coping skills and people to support them?**” (Everyone.)

Provide Resources

- Talking about feelings and coping can be a heavy topic and may bring up personal issues for some youth. Provide youth with local resources where they can go if they want to talk to someone. Examples are guidance counsellor, teacher, mental health worker, Elder, Traditional healer, or crisis lines (Klinik Crisis Line: 1.800.322.3019, Kids Help Phone: 1.800.668.6868 and Kids Text Line: text *connect* to 686868, Manitoba Suicide Prevention and Support Line: 1.877.435.7170, First Nations and Inuit Hope for Wellness Help Line: 1.855.242.3310, Sexual Assault Crisis Line: 1.888.292.7565, Manitoba Farm, Rural & Northern Support Line: 1.866.367.3276).
- When in Winnipeg, youth can access Klinik Drop-In Counselling: 204.784.4067, Youth Mobile Crisis Unit: 204.949.4777, Child and Adolescent Mental Health Program Centralized Intake: 204.958.9600 through referral by a teacher, counsellor, or yourself without a doctor’s note, no fee for service.
- When in Brandon, youth can access Child & Adolescent Treatment Centre (CATC): 204.578.2700 or toll-free: 1.866.403.5459.
- It can be difficult talking to friends, counsellors, or crisis lines about issues that are going on in our lives, but it can be helpful. Crisis line workers are counsellors who are trained to offer support and help. They understand that calling and sharing is a hard thing to do. They will wait with the person, and they won’t hang up if the person is silent or crying.
- These services are free, mostly youth-friendly, and try to be non-judgmental. Encourage youth to keep trying if they don’t find one of these places or people to be helpful. Sometimes, we have to try a few different resources before we find one we are comfortable with. FYI: Though Youth Mobile Crisis, a service available in certain areas of the province, offers confidential phone calls, there are certain criteria that must be met for workers to visit a youth in person.

- FYI: The Manitoba Adolescent Treatment Centre (MATC) has mental health clinicians that provide mental health services via Telehealth to children and youth who are experiencing emotional difficulties in 11 Manitoba First Nation communities. They accept referrals from service providers and community professionals, such as guidance counsellors, directly. Youth under 16 require parental consent, but there is no limit to the number of sessions provided. Call 1.855.413.7855 for referral forms and information.

Coping Bingo

Recommended Age: 12+

Goals

- To identify existing coping techniques in the room.
- To build a connection between hobbies, art, sports, etc. for coping and mental wellness.

Have Ready

- Bingo cards.

Instructions

- Hand out bingo cards.
- Explain that everyone will move around the room and find people who do the things listed in the squares.
- Get them to sign their name in the square if it applies to them.
- You can only get someone to sign your sheet once.
- Once you have a full (line, 2 lines, etc.), yell 'BINGO.'

Debrief

- **Hobbies, sports, art, and connection to friends, family, and community are all part of caring for our mental health.**
- **The activities on these cards build up our confidence, connect us to our cultures, and our communities.** Some of these things bring us laughter or a needed distraction. Other things on these cards offer a chance for connection or to reflect on what is going on. These are all things that strengthen our mental health and help protect us during life's challenging moments.
- Ideally, we do both reflective and engaging activities, as well as distancing or distracting activities, when dealing with difficult or stressful times. We don't only want to reflect on our hard time because that can be exhausting, but if we only distract from our

problems, then we may not work through our feelings. This is why we need both.

BINGO

Go fishing	Ask Grandparents about their childhood	 Be affectionate with someone	Sit by the river	Play in the snow
 Smudge	Spend time with Elders	Ask for help from someone you trust	Play sports	 Nap
Draw or doodle	Breathe deeply three times in a row	 FREE SQUARE	Play with animals	Look after siblings/little kids
Speak a language other than English	 Listen or make music	Journal your thoughts	Laugh so much you cry	Believe a compliment about yourself
Play video games	Go for a bike ride	Spend time in nature	Go to ceremonies	 cook or bake

Here's what you do:

1. Walk around the room & find people who have or would use the above ways to cope.
2. Get them to sign the square if it applies to them.
3. You can only get someone to sign your sheet once, so get moving around the room and talk to different people.
4. Once you have a full line across or down, yell "BINGO." Claim the prizes!
5. If that was too easy, see if you can fill all your squares today. Good luck!

Pathways to Health Brainstorm

Recommended Age: 12+

Goals

- To offer practical examples of people, activities, and resources that can help youth navigate through a challenging time.
- To offer an opportunity for youth to personalize information on coping and resources.

Have Ready

- Write: “Who can I talk to?” “What do I like to do?” and “What do I like about myself?” on a third of a flipchart.
- Pathways to Health handout (see below).
- Markers.

Instructions

- It can be difficult to think of things that you like about yourself, things you like to do, or even who you can talk to when going through a tough time. That is why we make a list of people, places, and things we enjoy that might help us during a hard time.
- Ask youth, **“Who can I talk to?” “What do I like to do?”** and **“What do I like about myself?”** and write their responses to each question on a flipchart. Have the group answer the questions as a large group first while you flipchart their answers. *Note: This can be done as large or small group brainstorm. This can also be done by posting the three flipcharts and having groups of youth rotate through each flipchart, adding their answers.*

Sample Flipchart

Who Can I Talk To?

- Friends
- Family members

- Teachers
- Elders
- Pets or animals
- Guidance counsellor
- Support workers
- Medicine people
- Spiritual people like Traditional Healer or Pastor
- Parole officer
- Klinik Crisis Line: 1.800.322.3019
- Manitoba Suicide Prevention & Support Line: 1.877.435.7170
- Kids Help Phone: 1.800.668.6868
- Sexual Assault Crisis Line: 1.888.292.7565
- Kids Text Line: text *connect* to 686868
- First Nations and Inuit Hope for Wellness Help Line: 1.855.242.3310
- Manitoba Farm, Rural & Northern Support Line: 1.866.367.3276 (Chat Support Line too)
- Teen clinics – scattered across Winnipeg and Manitoba. Most offer free drop-in youth counselling one evening a week. Find one at teenclinic.ca.
- If in Winnipeg, Klinik Drop-In Counselling (167 Sherbrook St., Winnipeg), Youth Mobile Crisis Unit: 204.949.4777
- If in Brandon, Child & Adolescent Treatment Centre (CATC): 204.578.2700 or toll-free: 1.866.403.5459

‘Who can I talk to?’ Debrief

- Validate that we all need to feel supported and listened to, especially when things are tough.
- Ask youth, **“What could you say if you called a helpline?”** **Validate any responses and explain that the people on the lines are trained counsellors who are there to listen and try to help.** Assure youth the counsellors will not hang up on anyone for not talking right away or not knowing what to say. They know that calling a helpline takes a lot of courage, and they will wait with you until you find the words.

- Provide each youth with a resource page of all the websites and helpline numbers. See the resources handout on the Teen Talk website.
- If it makes sense to do so, provide some information about each resource, specifically those that are youth-friendly and local or ones that operate 24/7, like the crisis lines. For example, youth can access programs at the Child Adolescent Mental Health Program (free) through referral by a teacher, counsellor, or self-referral.

Sample Flipchart

What Do I Like to Do?

- Hang out with friends
- Call people I know
- Be outside
- Play video games
- Talk to people/have conversations
- Play or listen to music
- Watch movies
- Play sports, dance, sing, ride bike, drum
- Read poetry or create your own
- Go shopping
- Build or fix something
- Masturbate or have sexy time
- Meditate and pray
- Smudging
- Spend time with Elders
- Cultural practices, such as going to ceremonies
- Spend time with family

‘What do I like to do?’ Debrief

- Validate their responses and highlight that the things we enjoy doing can also lift our spirits and help us when we are feeling down.

- If we look into cultural practices, we can often find knowledge, activities, and ceremonies that promote mental wellness and help deal with stress. One Indigenous cultural and spiritual practice that is from this Land is smudging. Smudging includes burning medicines like sage, cedar, and sweetgrass to cleanse and heal. Smudging can be used to help someone de-stress, get through a hard time, or maintain mental wellness. People may also smudge to connect to their spirituality. Smudging can be part of reclaiming Indigenous identity, culture, and power.
- If youth have substance use on their lists, we must acknowledge that substance use or self-medicating is a choice some people make. Discuss key harm reduction tips like drinking water, taking breaks, being somewhere safe, etc. Avoid shaming the group, but also acknowledge it can potentially lead to problems like addiction. **It's important to know that substances and self-medicating can numb all feelings, both 'negative' (e.g., shame, guilt) and 'positive' (e.g., joy, hope).** See the Substance Use Awareness chapter for games and activities on substance use.
- FYI: If youth bring up self-harm, note that if we are self-harming, one of the most important things we can do is try and add in healthier ways of coping. Finding new ways to get through difficult times can help people reduce risks and may be more useful in the long run.
- Tell youth, **"Some ways of coping allow us to reflect and/or release our feelings** (e.g., talking, journaling, making music, art), **and others help us to distract, numb, or avoid feelings** (e.g., shopping, watching television, playing sports, etc.)." Ideally, we do reflective and engaging as well as distancing or distracting activities when dealing with difficult or stressful times.
- It is helpful to have a variety of coping skills. It can be good to think about activities that you can do by yourself, that you can do with other people, that are free, that cost money, that are quick, that take some time, that take effort, and that are easy. That way, we have a mix of things to pull from.³

Sample Flipchart

What Do I Like About Myself?

- Funny
- Kind
- Good friend
- Helpful
- Smart
- Awesome chef
- Good listener
- Good gamer
- Great fisher/hunter
- Sporty
- Excellent TV watcher

‘What do I like about myself?’ Debrief

- We have found that often youth say ‘nothing’ or say that they don’t know. It can be good to think about some things that connect to our personalities and our skills. Ask youth, **“Is it OK to like ourselves?”** (Yes!) Sometimes, we might be worried others will call us conceited or say we are full of ourselves, but each person is special and has great talents. Confidence is good to have.
- We are supposed to like ourselves. It is important to know and explore the good things inside us for us to take care of ourselves and get to a place of mental wellness. Plus, when we show that we like who we are and believe in ourselves, it gives others permission to feel good about themselves, too.
- Have youth fill out their own copy of the Pathways to Health handout to keep it handy for whenever they need it.

PATHWAYS TO HEALTH

Three people I can talk to

(you can put phone lines too)

1.

2.

3

Three things I like about myself

(e.g. my jokes, my smile, my skills)

1.

2.

3.

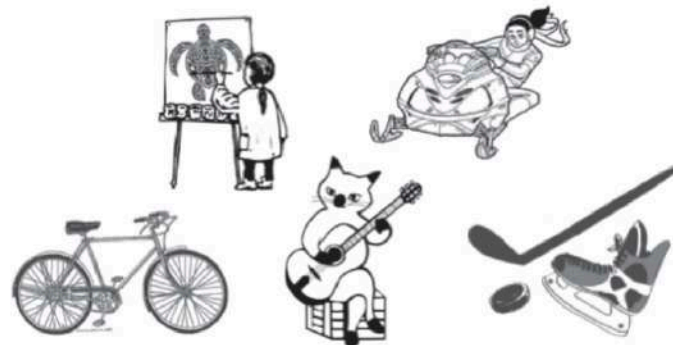
Three things I like to do

(e.g. cooking, video games, hanging with friends)

1.

2.

3



Keep this somewhere special and look at it if you are having a hard time.
It might brighten your day!

PATHWAYS TO HEALTH

Three people I can talk to

(you can put phone lines too)

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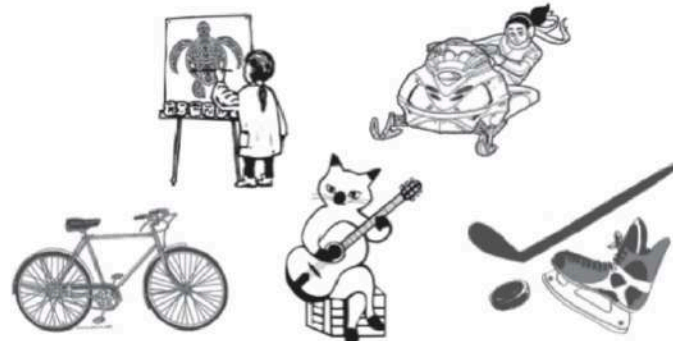
Three things I like to do

(e.g. cooking, video games, hanging with friends)

1.

2.

3



Keep this somewhere special and look at it if you are having a hard time.
It might brighten your day!

Helping a Friend Practice Cards

Recommended Age: 12-14

Goal

- To develop empathy skills and build help-seeking behaviours.
- To recognize warning signs of depression, anxiety, or trauma.

Have Ready

- Choose 4-6 cards based on time and group size.

Instructions

- Explain that you have cards with different situations a friend could go through. Ask youth to brainstorm ways to support this friend that are non-judgmental and connect to help.
- Hand out discussion cards to youth in groups of 3-5.
- Allow youth a few minutes to talk in their groups. Debrief each card as a classroom by asking each group to share their thoughts.

Cards and Key Points of Debrief:

Note: Cards bolded, followed by debrief talking points. Validate any feelings and supportive approaches the youth come up with.

“Your friend seems tired all the time and doesn’t seem interested in doing things like they used to. They often cancel plans you’ve made together. How would you support them? What sort of feelings might be happening for them?”

- Sometimes, when someone is going through a bad time or is stressed out, it can make them more tired or withdraw.
- When someone cancels all the time, it can be frustrating, but if someone is struggling with their mental health, it is important to let them know we care and to continue to let them know they are welcome.
- We all get sad and low sometimes, but if this goes on for a while, it may be a sign of depression. Depression can be treated, but they may need extra support from a counsellor or other trusted adult.

“Your friend says they feel worried all the time, almost like their thoughts are racing. It’s making it hard to concentrate. They can’t seem to shake this feeling. How would you support them? What sort of feelings might be happening for them?”

- Stress can make it hard to concentrate. This could be a sign they need someone to talk to about what is going on, some support on letting commitments go, or some fun to relieve stress.
- It sounds like they feel anxious. We all feel anxious sometimes. Since the feeling isn’t going away, it may also be a sign of anxiety, a type of mental illness. People can learn to manage their anxiety, but they may need extra support from a counsellor or other trusted adult.

“Your friend seems short-tempered all morning and distracted. As you sit down for lunch, they start to cry. How would you support them? What sort of feelings might be happening for them?”

- It sounds like something is going on with your friend. Check in and ask if they’d like to talk. Remember, listening without judgment is an important way to support someone going through a hard time.
- Share resources like the Kids Help Phone or support them in talking to a trusted adult. You could go together to their favourite teacher or the school counsellor.
- Ask if they need a hug or share some food with them.

“Your friend recently broke up with their partner. They seem upset by the situation and have started to spread rumours about their ex. How would you support them? What sort of feelings might be happening for them?”

- It can feel hard to go through a breakup. Talk with your friend about their feelings and offer support, such as hanging out, sharing food, making jokes, and listening to them. Connect them with additional supports or share resources.
- Remind them that it is okay to feel upset, but that it is never okay to spread rumours like this. As a friend, they are more likely to listen to you.
- Check in with their ex as well to see if they are okay.

“Your friend was recently in a car accident. Ever since then, they avoid driving anywhere and recently mentioned regularly having bad dreams about being in a car. How would you support them? What sort of feelings might be happening for them?”

- Sometimes, when we go through unexpected, violent, or scary experiences, there is a lasting impact on our thoughts and feelings. Sometimes, these experiences create something called trauma.
- Trauma is not a mental illness, but it can have a similar impact. People can and do heal from trauma, but it takes extra support and time to find ways to cope with or process our feelings from the experience.
- Trauma can also be intergenerational, where our ancestors experience something and it continues to impact us. In Canada, our shared history of residential schools is an example of experiences that have created intergenerational trauma.
- There is also intergenerational strength, where we carry the gifts that our ancestors used to get through their hard times.

FYI: Trauma is often the underlying cause of many pressing problems in our communities, including, but not limited to, poverty, crime, violence, domestic abuse, sexual exploitation, low academic achievement, mental health problems, and addiction. Estimates show that within the general population, 1 in 4 Canadians has experienced a traumatic event, and 1 in 10 experiences post-traumatic stress.⁴ An Indigenous way of understanding trauma is Blood/Bone Memory or Ancestral Memory. As described by Indigenous Knowledge Keepers, trauma, grief, or pain experienced by our ancestors, grandparents, and/or family members can pass down to us, as our blood and bones carry it.⁵ We must understand Blood/Bone Memory exists, because it can give meaning to our suffering. Suffering also comes from systems of oppression and experiencing discrimination, which is important to understand, too. There is a balance to our memory. We also receive the strengths, gifts, and wisdom that got our ancestors through traumatic experiences. This is a simplification of the teachings. There is a lot more to it.

Your friend seems tired all the time and doesn't seem interested in doing things like they used to. They often cancel plans you've made together. How would you support them? What sort of feelings might be happening for them?

Your friend says they feel worried all the time, almost like their thoughts are racing. It's making it hard to concentrate. They can't seem to shake this feeling. How would you support them? What sort of feelings might be happening for them?

Your friend seems short-tempered all morning and distracted. As you sit down for lunch, they start to cry. How would you support them? What sort of feelings might be happening for them?

Your friend recently broke up with their partner. They seem upset by the situation and have started to spread rumours about their ex. How would you support them? What sort of feelings might be happening for them?

Your friend was recently in a car accident. Ever since then, they avoid driving anywhere and recently mentioned regularly having bad dreams about being in a car. How would you support them? What sort of feelings might be happening for them?

Helping a Friend Brainstorms

Recommended Age: 14+

Goal

- To validate the importance of caring for one another.

Have Ready

- Space for youth to face each other for the quick-change game.
- Write 'Helping a Friend' on two flipcharts or a white board.

Instructions

- Tell youth, **"Everybody, find a partner and sit facing each other. Take a quick look at what your partner is wearing, what their hair is like, and what shoes they are wearing. Now, turn around and quickly change 3 things about yourself: you could pull out a pocket, untie your shoes, tuck your hair back, roll up a sleeve, etc. Now turn around and your partner will try to notice what you have changed."**⁶
- After the debrief for the game, break the youth into two groups and flipchart helping a friend. Ask what are some ways we can help a friend going through a hard time.

Game Debrief

- **Why do you think we would have you do this activity? We played the quick-change game to try to notice changes in our partner. It is important to pay attention to the people in our lives and notice if we see any changes in the ways that they are acting. This is just a game, but changes in people can show us signs that they are having a hard time. Also, noticing positive changes in people is a good way to show that we value them and can be encouraging. For example, "That's a sharp haircut, my friend."**

Sample Flipchart

Helping a Friend

- Listen to them
- Don't judge them or make them feel bad
- Bring them food
- Hang out with them
- Have fun together
- Ask them how they are doing
- Play sports with them
- Compliment them
- Try to cheer them up
- Be nice
- Go with them to talk to an adult they trust (if needed)
- Help them call a crisis line (if needed)
- Play video games with them
- Spend time with them
- Give/make them treats

Debrief

- **There are many things we do/can do to support each other. Listening, being there for someone, and showing them that you care can be very helpful.**
- Part of helping a friend is doing regular friend stuff. Sharing food, laughter, and fun.
- **If your friend is really struggling, they may need help and support from a trusted adult (counsellor, teacher, guidance counsellor, coach, uncle, auntie, Elder, etc.).** It is important to tell an adult you trust and to not keep the information to yourself. You can let the person know you are seeking outside help, and if possible, ask the person you are supporting which adult they would like to go to for help, and offer to do it with them. **You could say something like, "This is bigger than the both of us and I need to make sure you get all the help you need."** The more supportive people we have when helping someone who is really struggling, the better.

- **Taking care of yourself is also important when supporting a friend through a hard time.** It can be helpful to set a boundary and get support for yourself from someone you trust if it is too much for you. For example, you could say, “You need to make arrangements for other supports and here are some helplines you can call, because today I need time to myself and will be turning off my cell.” **It is very important to continue to do the things you like and care for your own needs so that you have the energy to keep being helpful to others.**

“Mind Matters” Trivia Game

Recommended Age: 12+

Goal

- To have fun while educating, linking youth to local resources, and reinforcing information learned about coping, supporting a friend, wellness, and various mental illnesses.

Have Ready

- Mind Matters questions and answers.
- Mind Matters game board (see example on the following page).
- Prize(s) for winning team (optional).

Note to Facilitators

- This activity requires the facilitator to have a basic understanding of the mental health issues that affect youth. For more information on mental health, check out the corresponding chapter of the Teen Talk Service Provider Manual.

Instructions

- This game is meant to reinforce mental health information that has already been covered.
- Divide the group into two teams and have them choose team names.
- The teams will take turns choosing a category and points value, and answering a question.
- Keep score on a chalk/white board.
- Encourage each team to huddle and work together to come up with the correct answer.
- There is no need to ask every question, the game can be as brief or extended as needed.

- The bullets under the questions are suggestions for how a question could be answered. They do not need to give each bulleted answer to get the points. Use your judgment, always award points if an answer they give to a question is valid but different than the answer listed.
- At Teen Talk, we try to play a 'Final Jeopardy' round, where each team chooses a number of points to wager; see below for Final Jeopardy questions.
- Note: Alternatively, as a time-saving measure, read out select questions to the entire group.

Sample game board

Mind Matters

Coping	Mental Illness	Wellness	Supporting a Friend	Wild Card
100	100	100	100	100
200	200	200	200	200
300	300	300	300	300

Mind Matters Game Questions

Coping

100 Name two things you could say if you called a helpline.

- I'm having a hard time; I need to talk to somebody; Today was tough; I'm not sure what to say; I need help; I need someone to listen; Hello..., etc.

200 How can talking about a hard time be helpful? Give two reasons.

- Process what's going on: share your feelings, work out what's bothering you, and explore what you can do about it
- Feel better
- Don't feel alone
- Feel cared for
- Create a connection between people

200 Demonstrate Balloon Breathing or Robot/Ragdoll and explain when you would use it.

- Anytime! Breathing deeply is a helpful way to start the day, keep us feeling good, calm us down, or help us feel better and relax throughout the day or night. The Robot/Ragdoll can relieve tension in the body.

300 It is helpful to have a mix of different ways to cope during hard times. Some things should distract us, some things should allow us to reflect on our problem. Why?

- Distractions give us a break from hard times. We need breaks to refuel our energy/spirit/mind. Some examples include hanging out with friends, video games, Netflix, etc.
- Reflective activities give us time to think about what is going on. We need time to process our thoughts and feelings as part of moving through them. Some examples include talking, journaling, making art, etc.
- If we only ever distract ourselves, it is harder to work through a problem, but if we only ever think about a problem, it can be really draining. We need a mix to bring balance.

Mental Illness

100 Name one resource that may be helpful if someone is experiencing depression.

- Mood Disorders Association of Manitoba and the Canadian Mental Health Association
- School counsellors, teen clinic, support groups, nursing station, mental health workers, Klinik Community Health (Winnipeg), phone lines, Child and Youth Community Mental Health (Brandon)

100 Name a reason for each: Why would a person want a mental health diagnosis? Why would a person not want a mental health diagnosis?

- May make it easier to access info, resources, and treatment, and connect with other people.
- Don't want the label or the treatment, **stigma**.
- We get to decide for ourselves whether we seek out a diagnosis. **Either way, we deserve to be treated with respect.**

200 What can someone do if they are struggling with anxiety?

- Talk to someone you trust about it.
- Seek out resources like joining a support group or Anxiety Disorders Association of Manitoba (ADAM).
- Try lots of ways to cope (more than once) and find out what works for you.
- Medication is an option; it's your choice, as you are the expert on your mental health (more so than the doctor). Some choose meds and some people find ways to cope without medication.

200 Name three things you should ask a pharmacist or doctor when getting prescribed medication for a mental illness.

- What are the side effects?
- Why am I taking this?
- Are there any alternatives to taking this medication?
- Is this the lowest dose I can take for it to be effective?
- What are the expected results?

- If I take drugs/alcohol or another medication while on this prescription, what will happen?
- How long should I take it?
- Will it make my birth control pill less effective?
- What should I do if I miss a dose?
- How often should I take it?
- What time of the day should I take this?

300 How are people with schizophrenia usually shown on TV, in the news, or in movies? And what is the problem with that?

- Violent, dangerous, low IQ, multiple personalities. Stigma: it reinforces these false ideas and makes it harder for anyone dealing with schizophrenia to get help.

Wellness

100 How is physical health connected with our mental health?

- All areas of our health interconnect. Striving for balance and wellness means paying attention to all aspects of our health. (This includes sexual health too!)
- When we are stressed, there is an impact on our physical body too, such as breathing, heart rate, hunger, sleep, etc.

200 Why is it important to make time for ourselves and have fun?

Self-care is important because it:

- Gives us a break so we can reenergize
- Helps us cope when times are harder
- Releases endorphins (happy hormones)
- Reduces stress
- Feels good
- Can help us have more energy to be helpful to others

200 What are 4 natural ways of healing that Indigenous knowledge teaches us?

- Talking
- Laughing
- Crying
- Shaking

- Yawning
- Sweating
- Yelling

300 Give one example of setting a healthy boundary and explain why boundaries are important.

- Letting our parents/caregivers know when we need transition time.
- Asking people to stop distracting us when we are busy.
- Letting friends know when we won't be available.
- Telling romantic partners how much affection we want or don't want.
- Helps us meet our own needs, helps develop our identity and independence, helps build healthy relationships, is respectful to others, enables us to use our energy in good ways to take care of ourselves, and enables us to be more supportive to others.

Supporting a Friend

100 It is okay to ask a friend if they are having a hard time. Name two reasons why.

- It shows that we care; that we noticed and are concerned.
- Let them know that they are not alone; may break the isolation.
- Allows the person to talk about what is going on, which can be a step to getting help.

200 When supporting a friend, it is important to be non-judgmental and listen to them. Give two reasons why.

- It builds connection.
- It creates safety.
- Makes it more likely the friend will ask for help in the future.
- It's respectful.

200 Why may a support group be helpful?

- To get information.
- To not be alone and have a sense of belonging.
- Gives people a chance to share their experiences of struggle and recovery, which may help people learn to cope better.
- Might give someone a sense of purpose or something to do.

- (They are often free. Contact local health centres, community associations, or the nursing station to find out what groups are running in your area.)

(FYI: Support groups exist for a variety of topics and are easy to join. They usually are run by groups of people dealing with a particular topic who sit together for a period and share their experiences.)

300 How can we support a friend who is having a hard time, but who has also made it clear they don't want to talk?

- Let them know that's okay, but you're there if they ever need to.
- Share food.
- Have fun together; laughter and distractions can help give someone a break from their hard time.
- Share resources like phone lines.
- Check in occasionally.

Wild Cards

100 If we hear gossip or someone negatively talking about mental health, what can we do?

Say something like...

- "What you're saying is not helpful."
- "Everyone has mental health, so making fun of it hurts us all."
- "If what you're saying is true, it sounds like they need our support, not judgment."

200 If learning a wellness practice from a culture that is not our own, how do we do that respectfully?

- Research which culture it is originally from and the history of its use.
- If possible, learn from the people and culture who created it.
- Try to use it as close to its original meaning and purpose as possible.
- Acknowledge where it comes from when using it.
- Do not claim it as your own or try to make money or profit from its use.

200 Experiencing discrimination can be stressful and impact our wellbeing. What are some ways to take care of ourselves and others who are dealing with discrimination?

- Remember, it's not their/our fault. It is the system of oppression or the person using discrimination who needs to change.
- Finding someone who has experienced the same type of discrimination can be helpful to connect with and learn from.
- Having fun and doing wellness activities is extra important.
- Expression is powerful, helps us deal with our feelings, creates connection, and can make positive changes in the world.
- Connect with and undertake community care. Caring for others builds inner strength and connection. Community can refill our energy, inspire us, and make us not feel alone.

300 Why is it important to take care of yourself while supporting other people? Give me an example of what this might look like.

- Supporting someone else is hard, so we need to ensure we are taking care of our well-being so that we have the capacity to offer support to others.
- Talking to our own support systems (friends, family, counsellors, phone lines, etc.).
- Doing things that bring us joy (hobbies, sports, art, food, etc.).
- Setting healthy boundaries with the person we are supporting. This makes sure we are there for them, but in a way that lets us also take care of ourselves.

FINAL BONUS QUESTIONS

Get each team to collectively fill out Pathways to Health in 1 minute. The fastest team to complete Pathways wins.

OR

Get each team to write down as many things to do to get through a hard time OR write down in one minute as many resources, including websites, apps, or phone lines, that someone could use. This can be in their groups, or relay-style on the white board or on flipcharts. The team with the most activities wins.

“Inner Circle/Outer Circle” Supportive Listening Activity

Recommended Age: 14+

Goals

- To have youth practice good listening skills.
- To have youth practice giving supportive statements.

Instructions

- Divide the group in two.
- Have them form an inner circle and an outer circle, with youth on the inside facing out and youth on the outside facing in. Each inner circle person should be facing an outer circle person.
- Start with the outer circle people being the talkers, sharing their situation (that you read out below), and the inner circle people being the listeners.
- Read out the scenario. Instruct the inner circle people to be unsupportive (for the first two examples only), give them about a minute for the talkers to share and the listeners to be unsupportive. Then instruct the listeners to be supportive and give them another minute to redo the same scenario. From the third scenario on, only instruct the listeners to be supportive, since the main point is to practice being supportive.
- After each scenario, have the outer circle rotate so that they are facing the next person to their right. At this point, the talker and listener can switch roles and be given a new scenario.

An example of the list of scenarios:

- Your little sister embarrassed you in front of your crush.
- You are really stressed out.
- You want to stop smoking weed.
- You just found out you or your partner is pregnant.
- You think you might be 2STLGBQ+ (Two Spirit, transgender, lesbian, gay, bisexual, queer, plus).
- You are worried your friend is in an abusive relationship.

- You had sex for the first time, and you think you have an STI.
- You/your partner have been using the pill, but you want to use something else.
- Your parent/guardian has been drinking/using drugs a lot at home.
- You are feeling pressure to drink/use drugs.
- You are thinking about having sex.

Debrief

Questions to ask youth could be:

- **“How did it feel to do the activity?”**
- **“What were some of the unsupportive reactions?”**
- **“What were the supportive reactions?”** (Optional: flipchart their responses)
- **“How did it feel to speak to someone who was unsupportive?”**
- **“How did it feel to speak to someone who was supportive?”**
- **“How can this translate into our real-life role as helpers?”**

Wellness Ball Activity

Recommended Age: 12+

Goal

- To demonstrate the importance of self-care, boundaries, and setting limits when they are supporting others.

Have Ready

- 3 or 4 similar small balls (depending on size of the group), 2 larger beachballs or volleyballs, and one special ball that looks different from all the others.

Instructions

- Ask youth to stand in a circle, in a clear area.
- The activity facilitator has 3 or 4 similar small balls (depending on size of the group), 2 larger beachballs or volleyballs, and one special ball near them.
- Tell youth, **“Raise one hand, and leave that hand up until you have been passed a ball. Remember who throws you the ball, and who you throw the ball to. Throw softly and remember this isn’t a race.”**
- Once youth have the hang of the activity, add another small ball and have youth “go through the same pattern with this ball.”
- When all 3 or 4 small balls are in rotation, add a large ball, which will start at the facilitator and move around the circle, passed side to side.
- After a couple of rotations of that large ball, add the other large ball, going side to side the other direction. You may need to ask youth to slow down or concentrate on the activity if balls are flying or dropping often.
- After a couple more rotations of all those balls, pause the game and explain, **“The last ball is the most important ball, the one that cannot be dropped, this ball will follow the same rotation as the other small balls. OK, now GO!”**

- After a couple more minutes, end the activity and ask youth to sit down where they are standing to debrief.

Debrief

- **“What did you think of the activity?”**
- **“What did it remind you of?”** (Stress, life, anxiety.)
- **“What did the little balls represent?”** (Everyday stressors.)
- **“The bigger balls?”** (Events that happen that you can’t foresee, like death in the family, breakups, etc.)
- **“The special ball you weren’t allowed to drop?”** (You, the most important and special thing there is.)
- **“What helped you catch the most balls, and not drop everything?”** (Help from others, cooperation, saying “STOP!” or using people’s names before you threw it, etc.)
- This game can represent our lives, how we can support ourselves and each other, and how sometimes we need to drop some parts of our lives to take care of ourselves. (It could be saying no to babysitting, skipping a party, turning off our phone, going to bed early, etc.) **“We need to have limits and boundaries. We might not be able to stop stressful things we are not prepared for from happening, but we can ask for help when we need it. It is important to take care of ourselves in order to be great supports, friends, or partners.”**

Holistic Model of Health Reflection

Recommended Age: 14+

Goals

- To illustrate how the heart, mind, body, and spirit are all interconnected.
- To show how both positive and negative things affect all aspects of ourselves.

Have Ready

- Paper and pencils for each youth.

Instructions

- Instruct participants to draw a picture of themselves.
- Ask youth to draw a 'pointer' to their head, their heart, and their body.
- Ask youth to draw a large circle around the picture of their selves.
- Tell them the head represents their mental health, the heart represents their emotional health, and the body represents their physical health. Inside the circle around them represents their spiritual health. (For some, this includes connection to something greater than the physical world, such as Creator, God, Buddha, etc. For others, this could mean connecting to the people and things around them, such as the community.)
- Beside each pointer and inside the circle, write all the things that affect each aspect of health. Give them about 5 minutes to fill in all of the areas.
- Example #1: In physical, I might put sleep, because the amount of sleep I get affects my physical health. You could also put that under mental, so choose whichever area you think it affects most.
- Example #2: My home life affects my emotional health.

Debrief

- **“Would anyone like to share their drawing and reflections?”**
- We can see that when one aspect of our ‘beings’ is being negatively affected, how does it affect other aspects? For example, problematic use of substances such as alcohol can affect our livers (physical), our memory (mental), how we feel about ourselves (emotional), and relationships with people and community (spiritual).
- **“When one aspect of our ‘beings’ is being positively affected, how does it affect other aspects?”** For example, a protective factor such as having a meaningful role in the school or community affects our sense of self-worth (emotional), our relationships to others (spiritual), our ability to plan and carry out ideas (mental), and our stress levels (physical).
- What we are sharing has been known for centuries in Indigenous cultures of the world. All of these aspects are equal and interconnected. The Original Peoples of these Lands share many teachings around the importance of keeping a balance through the Medicine Wheel.

Circle Map Activity

Adapted from Jessica Danforth from the Native Youth Sexual Health Network

Recommended Age: 14+

Goals

- To explore protective and risk factors in communities.
- To empower youth to see their roles in communities.

Have Ready

- A full sheet of paper and pen per person.
- Flipchart paper and marker.

Instructions

- Get the group to draw a large circle on their paper.
- Ask them to think about the things they like/love about their community and write those inside the circle (2-5 minutes).
- Then get them to think about all the things they hate/dislike about their community. Those words are written on the outside of the circle.

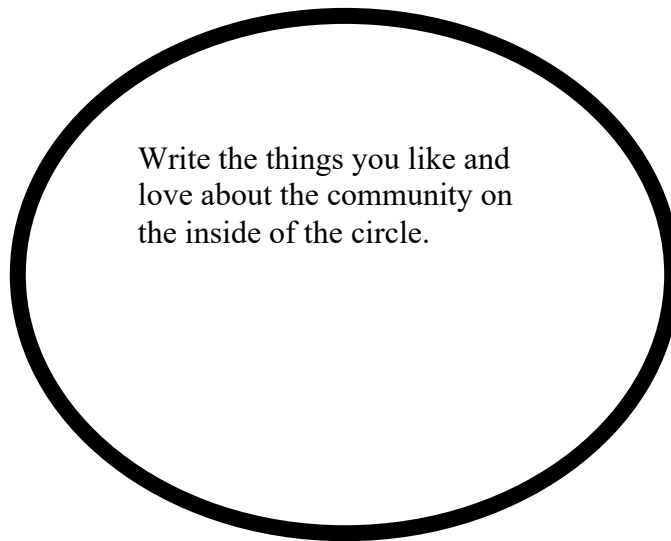
Debrief

- Ask each person to share one thing they have written on the outside of the circle, e.g., violence, suicide, drinking, drugs, garbage, poverty, gossip, lack of food, isolation, abuse. Write their responses on a flipchart circle map.
- Then ask them to share what they have written inside the circle, e.g., friendly neighbours, fishing, camping, berry picking, pow-wows, hockey, Elders, community feasts, youth/babies, and whatever they have written. Flipchart their responses.
- The outside words can be considered 'risk factors.' Often, the things on the outside of the circle are beyond our control, but there are ways we can affect these by coming together as a group/community and focusing on one aspect at a time.

- The things inside the circle can be considered pathways to health, or ‘protective factors.’ These things help create healthy youth, and in turn, healthy communities. If we focus on the inside stuff, it can help push out the things we don’t like and we don’t get stuck feeding into the negative.
- We have the most control over the things inside the circle and that can help us to see that we are making a difference.

Circle Map Sample

Write the things you dislike about the community on the outside of the circle.



Appendix: Educational Curriculum Connections

Our curriculum ties to the Manitoba Government learning outcomes. The following language used is not our own. For more information, please visit www.edu.gov.mb.ca/k12/cur/physhlth/

Grade 7

K.4.7.A.2a Identify the obstacles (e.g., changing information, abilities, priorities, values, resources, attitudes, illness, injury, responsibilities...) that may influence achievement of and making revisions to personal goals and strategies (e.g., decision-making/ problem-solving process...).

K.4.7.A.2b Describe the mental skills (i.e., goal setting, focusing, stress management, visualization, positive thinking) necessary to enhance performance, readiness, and satisfaction.

K.4.7.B.1a Identify socially acceptable behaviours (e.g., keep an open mind, show a willingness to try, recognize own feelings and emotions, step away from the situation if feeling anger...) for dealing with new situations and/or change (e.g., participating in new activities, choosing friends...).

K.4.7.B.3b Describe how conflict situations (i.e., change, new situations, negative group influences, dishonesty) affect personal behaviour and development (e.g., adapting to new surroundings or routines, making new friends, coping with change, being assertive...).

K.4.7.B.4 Describe appropriate use (e.g., saying "no" to negative peer pressure, differentiating between situations where assertiveness is/isn't warranted...) of avoidance/refusal strategies when dealing with potentially dangerous situations and/or stressful social situations.

S.4.7.A.3 Demonstrate functional use of interpersonal skills (i.e., communicate effectively, cooperate/ collaborate, be respectful, be responsible) for dealing with new activities, situations, and/or changes in class activities.

K.5.7.D.1 Differentiate between the use and abuse (i.e., prescribed/ unprescribed drugs; own medication/someone else's medication; correct/ incorrect dosage, addiction) of medicinal and non-medicinal substances (e.g., medicines, over-the-counter drugs, vitamins, alcohol, tobacco, inhalants, street drugs...).

K.5.7.D.2 Explain different consequences, related to different variables (i.e., fair play, legalities, performance, medical, safety, and financial implications), of taking harmful and beneficial drugs or other substances (e.g., antibiotics, anti-inflammatories, stimulants, narcotics, anabolic steroids, marijuana, diuretics, herbs...).

K.5.7.D.3 Identify the positive and negative social factors (i.e., influences of peers, families, role models, media, Internet, celebrities, social occasions, parties) that may influence avoidance and/or use of substances (e.g., tobacco, alcohol, caffeine, street drugs, inhalants...).

K.5.7.E.2b Identify positive ways of coping with daily moods and emotions associated with puberty (e.g., engaging in physical activity, discussing emotions with family/friends/religious leaders, listening to music, laughing, taking part in hobbies, participating in school/community activities, reading books...).

Senior 1-4

K.3.5.B.4 Identify available community supports that promote safety and community health.

11.MH.1 Identify and apply positive health strategies to deal with issues such as stress, anxiety, depression, and eating disorders.

11.MH.5 Identify community service agencies that support individuals concerned about mental-emotional health issues.

K.4.S2.A.1 Assess personal attributes and talents across a variety of domains, and assess how each contributes to self-esteem/self-confidence.

k.4.S2.C.4a Examine the stress management strategies and defense mechanisms that can be healthy or unhealthy ways of managing stress.

K.4.S2.C.1a Describe the behaviours necessary for providing others with support and promoting emotional health and well-being.

K.4.S2.C.1b Show an understanding of ways to support others who are dealing with the loss of a friend or family member.

K.4.S2.C.1b Show an understanding of ways to support others who are dealing with the loss of a friend or family member.

K.4.S2.C.2 Describe situations that cause personal stress.

K.4.S2.C.3 Examine the physiological and psychological effects of stress related to health and well-being.

K.4.S2.C.4a Examine the stress management strategies and defense mechanisms that can be healthy or unhealthy ways of managing stress.

11.MH.1 Identify and apply positive health strategies to deal with issues such as stress, anxiety, depression, and eating disorders.

S.4.S2.A.5 Apply stress-management strategies and communication skills for stress reduction for self and/ or others in case scenarios related to stressful situations.

11.MH.4 Examine the signs and symptoms of mental-emotional health issues related to stress, anxiety, depression, and eating disorders.

K.5.S2.A.2 Demonstrate knowledge of healthy lifestyle practices that contribute to disease/ illness prevention, including mental illness/ disorders.

S1 4.4.1 identify sources of positive and negative stress for adolescents

S3 4.4.4 demonstrate appropriate stress management/problem-solving techniques

S1 5.2.3 identify and evaluate adolescent mental and physical health issues, e.g., depression, health issues—STIs, alcohol and drug abuse, learning disability, physical disability, family abuse or violence, personal or family illness

S1 5.1.3 identify behaviours that promote health and wellness

Endnotes

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CHAPTER 8

Substance Use Awareness Activities

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“Why Youth Use & Don’t Use Substances” Brainstorm

Recommended Age: 14+

Goals

- To brainstorm reasons why teens may or may not be using substances.
- To link youth to local resources where they can get help.

Have Ready

- Write “Why do youth use substances?” and “Why don’t youth use substances?” at the top of flipchart paper or a whiteboard.
- Markers.

Activity Introduction

- In this activity, we ask youth what are the reasons for using or not using substances. But first we ask, **“What exactly are ‘substances’?”** Substances are things that we put into our bodies that change how we feel, think, and experience the world around us or how our body acts. **“What are some legal ones?”** Coffee, nicotine (cigarettes if 18), cannabis (if 19), over-the-counter medications such as Tylenol, prescription drugs (intended to be taken by the person they are prescribed to in the recommended dosage), and alcohol (if over 18). **“What are some illegal ones?”** Ecstasy, cocaine, meth, etc.
- Mention that this is not an activity about whether it is right or wrong to use certain substances or a time where we share stories about drug use. We are not assuming anyone is using substances or not, and we are not judging anyone for whatever choices they make. Everyone deserves respect and support, whether they choose to use substances or not.
- Hand out the flipcharts and ask youth to write down their ideas. Give the groups about 5 or 10 minutes to work on their flipcharts (see sample flipcharts below).

Instructions

- This exercise can be done in small groups and/or as a large group brainstorm where you write their responses on a flipchart or whiteboard.
- Ask youth, “**Why do youth use?**” and “**Why don’t youth use?**”

Sample Flipcharts

Why do youth use?

- Chill out/relax
- Deal with stress
- Addiction
- Media influences
- Curious
- **Mental health issues**
- Trauma
- Fun/like it
- Be social
- **Peer pressure**
- Family is using
- **Help cope/forget problems**
- Health purposes

Why don’t youth use?

- Past experience
- Values
- Substance use by friends or family
- Fear of overdosing
- Worry about addiction
- Don’t like hangovers
- **Are driving**
- **Are pregnant**
- Focus on sports/academics
- **Future goals**
- Worry about getting in trouble
- Don’t want to make impaired decisions/look foolish or stupid
- Worry about being vulnerable/assaulted

Debrief

- Go over the flipcharts with the group; add the bolded responses if not already added by youth.
- Looking at the lists, we can see that there are many reasons youth have for using or not using substances.
- For some youth, substance use is for fun or to experiment. Having said that, we can also see that some youth are using to cope or deal with problems or trauma.

- Debrief mental health issues, trauma, to cope with problems, or addiction by acknowledging that this is a reality for some youth, and talking about appropriate resources (e.g., talking about it with someone they trust and asking for help from a guidance counsellor, teacher, addictions worker, knowledge keeper, Elder, family member, or other trusted adult).
- Debrief peer pressure by talking about refusal skills (e.g., things youth can say in a party situation to refuse alcohol or drugs like I'm driving; I have to babysit later; I have a big game/test tomorrow; I'll get in trouble with my family; Somebody has to watch out for the rest of you, etc.).
- Debrief pregnancy by talking about refusal skills, ways to support someone who is pregnant, and abstinence activities.
- **Reiterate that everyone deserves respect and support, whether they choose to use substances or not.**

Additional Activities

Ideally, this activity can be followed by:

- Risk Line-Up Game with Harm Reduction
- Refusal Skills Brainstorm
- Abstinence Activities Scenario Cards & Brainstorm

Risk Line-Up Game with Harm Reduction

Recommended Age: 14+

Goals

- To show how a variety of factors affect how risky a substance is and how risk can be different for everyone at different times.
- To share harm reduction strategies if youth are deciding to use.

Note to Facilitators

This activity requires that the facilitator has a basic understanding of the effects and risks of the substances listed. For more information on substances, see the Substance Use Awareness Chapter of the Teen Talk Service Provider Manual or the many publications that AFM has developed on alcohol and drugs.¹

Have Ready

- Risk Line-Up cards, Higher Risk and Lower Risk cards.
- Tape.

Instructions

- Post the Lower Risk and Higher Risk cards far apart from one another on a wall.
- Ask youth, **“What do we mean by ‘higher risk’ and ‘lower risk’?”** ‘Higher risk’ means there is a big chance that something bad could happen, and ‘lower risk’ means there’s a smaller chance of something bad happening.
- Hand out the Risk cards. Explain to youth that their job is to tape the cards on the wall in order from lowest to highest risk on a continuum.
- Ask youth to put the cards in a line, talking with each other to determine the order of risk.

Risk Line-Up Game Debrief

- ‘Sniffing gas’ and ‘injecting crystal meth’ typically end up closest to Higher Risk, but where youth position the cards doesn’t really matter, since the activity is a way to discuss how level of risk can be different for everyone.
- Ask youth, “**Do the cards look like they are in the right order?**” Let youth know that risk can be different for everyone, and everyone may have a different line-up. If someone was allergic to beer, then chugging it could be risky (or drinking it at all). If someone had a lung condition, then smoking every day would be riskier for them.
- There are many factors that can influence risk, such as: genetics, family history, supports, whether someone is in school, their family situation, the coping skills someone has developed, whether someone has a good doctor or healthcare, their friend group, and how they see themselves. Some of these things may change throughout our lifetime (like getting a good healthcare provider or developing coping skills), and others we can’t change (like our genetics).
- It is important to know ourselves and what the risks may be to each one of us.

Risks and Harm Reduction Debrief

- Let youth know that we are here to share information that can help people be safer. The best way to avoid harm from using substances is not to use them at all, but that is not a choice everyone can or wants to make. If people are using, it is important to have accurate information to be safer and reduce the amount of harm that could happen. This is also good information for those who are currently not using, because you may find yourself in a position where you can help someone else. The more accurate information people have, the safer and healthier people can be.
- Choose specific cards to highlight harm reduction strategies. At Teen Talk, we ask youth, “**What could be some harms of using (insert substance here)? What could someone do to reduce the risks?**”

Risks with using alcohol:

- The greatest risks often come from people's behaviours when they are drinking (e.g., driving, fighting, sex without protection, etc.).
- Feeling or acting differently than usual, being uncoordinated, and having slower reaction times.
- Tell youth, **"When a person drinks more than their body can handle, they get what's called alcohol poisoning."** Signs of alcohol poisoning are vomiting, clammy skin, shallow breathing, and passing out. An overdose can lead to a coma or death. Taking in amounts quickly, like chugging, puts us at a higher risk of alcohol poisoning. Taking too much of any downer, like alcohol, can result in overdose because the body slows down too much, and a person's heartbeat or breathing can stop.

Harm reduction with alcohol:

- Arrange a safe way home.
- Keep your drink with you at all times.
- Don't put things in people's drinks.
- Know your limits.
- Drink water in between alcoholic drinks.
- Drink non-alcoholic drinks from an alcohol bottle.
- Use the buddy system.
- Know the recovery position.
- Don't ask another person to have sex or make out while drinking, because they are in a more vulnerable state. It's not okay to take advantage of people when they are drunk or high, and consent legally doesn't count when people are drunk or high.
- Avoid drinking or reduce use as much as possible if you think you might be pregnant. FYI: Alcohol use can harm a fetus and can cause Fetal Alcohol Spectrum Disorder (FASD). Because of addiction, coping/trauma, or lack of information, people might use substances during a pregnancy. Rather than judge or shame someone, offer support and resources. Ask youth, **"How can we support someone who is pregnant?"** Not drink around them, do fun things with them, go to appointments with them, bring them

food, listen and not judge them.

Risks with mixing and prescription drugs:

- Mixing is the number one cause of overdose. Mixing downers can slow the heart down and cause coma or death; mixing uppers can cause convulsions and heart failure; mixing downers and uppers can mask each one's effects, so people may use more, increasing the chance of overdose. FYI: The body's default response to too much alcohol is to pass out. Because stimulants prevent this from happening, you can drink even more alcohol without passing out. If further depressant drugs are added, you risk the chance of going into a coma or even dying of an overdose.²
- **Prescription Drugs:** These are harmful when they are not being used for their intended purpose or are not yours in the first place. It can be more complicated to stay safe with prescription drugs than with other substances. This is because it can be hard to know what class of drugs you are taking (whether the substance is an upper, downer, or both), what dosage the pill is (pill size does not tell us the pill's strength), and how much it takes to give a desired effect versus a harmful effect. FYI: Research suggests youth view prescription drugs as 'safer' than illegal drugs.³

Harm reduction with mixing and prescription drugs:

- Try not to mix.
- If you are taking medication, talk to your healthcare provider about the effects of using other substances while on the medication.
- Have someone with you when you're using.
- Stick to substances that have a predictable effect.
- Take a smaller dose.
- Know the recovery position and when to call for help.

Additional Activities

Ideally, this activity can be followed by:

- Refusal Skills Brainstorm
- Problematic Use Brainstorm
- Abstinence Activities Scenario Cards & Brainstorm
- Decisional Balancing Reflection

**LOWER
RISK**

**HIGHER
RISK**

**SMOKING
WEED AS
SOON AS YOU
WAKE UP**

**GETTING
WASTED
EVERY
WEEKEND**

**RIDING YOUR
BIKE NO
HANDS,
HIGH ON
MUSHROOMS**

CHUGGING BEER

MIXING PRESCRIPTION DRUGS AND ALCOHOL

INJECTING CRYSTAL METH

SNIFFING GAS TO GET HIGH

**STAYING UP
ALL NIGHT
DRINKING
ENERGY
DRINKS**

Substance Effects Match-Up

Recommended Age: 14+

Goal

- To discuss the desired effects and potential risks of different substances.

Instructions

- Tell the youth that most substances can be classified in one of five categories because of how they work in the body. We're going to go through five of them to explore what the potential desired effects (what people might want from taking the substance) and potential harms (risks or side effects) may be.

Option A: Substance Effects Matching Game Group Activity

- Use this option for a large group by using one set of cards (can be copied from following pages; make sure to cut along dotted lines) and calling on volunteers to place them. For a more collaborative activity, print several sets of cards (below) for small groups to work on together and compare results at the end as a large group. To increase the challenge or for groups with a lot of existing substance information, separate the Desired Effects and Potential Harms by cutting into two cards instead of one sheet.
- Place signs for 'Downers,' 'Uppers,' 'Cannabis,' 'Hallucinogens,' and 'Inhalants' on whiteboard or wall, or distribute to groups if doing small group version of this activity.
- Hand out Desired Effects and Potential Harms cards and have youth place them in the sections where they feel the cards belong.

Option B: Substance Effects Matching Game Handout

- Use this option for a more reflective activity. Print enough copies of the Substance Effects Matching Game (follows card activity) for your group. Have youth complete the matching game individually or in small groups. Compare the final answers as a large group and use information below for debrief.

- **Answer key for matching game:** Inhalants (D&G), Downers (E&J), Uppers (B&F), Cannabis (A&H), Hallucinogens (C&I)

Debrief

- Use the following info about substances, listed by category, to talk about the substances with youth in as much or as little detail as suits your group.

DOWNERS: alcohol, painkillers, heroin, fentanyl, etc.

Desired effects: Slow the body down, create a feeling of calm, help a person relax or sleep (sedative), reduce physical and/or emotional pain. Alcohol in small doses can make people feel energetic and happy.

Potential harms: Downers are called depressants because they slow down the central nervous system and this sometimes blocks messages getting to our brains. Alcohol lowers inhibitions and impairs judgment, changing the things we do and what we think of as safe or unsafe. The greatest risks often come from the things people do when they are drunk. The more alcohol is consumed, the more people can find themselves becoming increasingly sad, angry, uncoordinated, and/or slowed down. **Alcohol poisoning is when a person drinks more alcohol than their body can handle. “What are the signs of alcohol poisoning?”** Signs of alcohol poisoning are vomiting, clammy skin, shallow breathing, and passing out. An overdose can lead to a coma or death. Taking in amounts quickly puts us at a higher risk of alcohol poisoning. Taking too much of any downer can result in overdose because the body slows down too much and a person’s heartbeat or breathing can stop.

UPPERS: cocaine, caffeine, crystal meth, speed, etc.

Uppers or stimulants work by increasing dopamine levels in the brain.

Desired effects: May feel alert, happy, ‘high,’ excited, and an increased tolerance to pain.

Potential harms: With all uppers, there’s a crash at some point. At this time, people can feel depressed, upset, mad, or really tired. **“What might someone be tempted to do at this point to deal with how they are**

feeling?” Take more. That’s what can make uppers so addictive. If a person uses too much of an upper (especially cocaine or speed/amphetamines), they can overdose by having a heart attack. There is also a risk of nausea, headaches, racing heart, anxiety, mood swings, paranoia, severe depression, and violent behaviour.

CANNABIS: pot/weed, dried buds, hash, oil, edibles, shatter/dab, etc.

Desired effects: It can cause someone to feel relaxed, have a sense of well-being and a slowed sense of time, or provide pain relief.

Potential harms: THC (tetrahydrocannabinol) is one of the more prominent drugs in cannabis. It is hard to guess how strong it will be because THC levels vary from plant to plant. This means that it can be hard to predict what effect a particular batch will have. Some people can experience panic, paranoia, and memory problems, and it can lead to lung problems when smoked. **“How could cannabis affect someone’s driving?”** Since cannabis distorts thinking, people may think they are driving fine when they are high, even though they are not. Effects like slower reaction time, distorted perceptions of time and distance, decreased alertness, and increased drowsiness all make driving dangerous under the influence of weed.⁴ ‘Greening out’ is a term used to describe a situation where a person may feel sick after using cannabis. Although not fatal, a person may go pale and sweaty, feel dizzy with ‘the spins,’ feel nauseous, and may even start vomiting. In Canada, the use of cannabis is now legal based on age. In Manitoba, legal age is 19+, while in other provinces it may be 18+.

HALLUCINOGENS: magic mushrooms, LSD (acid), ecstasy/MDMA, peyote, etc.

Hallucinogens change the way people think, see, and hear things. With hallucinogens, in general, the high depends on where you are, who you’re with, and how you’re feeling. **Ecstasy** (or MDMA) can be considered both a hallucinogen and an upper.

Desired effects: Include feelings of openness, euphoria, increased energy, and hallucinations. Some Indigenous cultures have teachings about specific medicines that are considered to be hallucinogens for ceremonial purposes to obtain information, knowledge, or purpose.⁵ These ceremonies are guided by a Traditional Healer, Medicine People, and Knowledge Keepers.

Potential harms: With mushrooms, **'bad trips' can happen.** This is where someone could feel fear, panic, and even terror. Other harms can be upset stomach and confusion (which has led to accidental injury and death). Hallucinogens may cause lasting perception changes (streaking or flashbacks) or persistent psychosis. These effects may last for years. For people with a pre-existing mental illness, there is a possibility that both **hallucinogens** and **cannabis** could aggravate the illness.⁶ **Ecstasy** side effects can include grinding of teeth and jaw clenching, increased heart rate and body temperature, anxiety, and paranoia. There is also a risk of liver/heart failure due to dehydration and hyperthermia (severely high fever).

INHALANTS: solvents and gasses (not intended for human consumption)

Desired effects: Can make a person feel euphoric, lightheaded or dizzy, and lose inhibitions.

Potential harms: Memory loss, loss of hearing and sense of smell, changes in personality, irreversible brain damage, death from either passing out or from **sudden sniffing death**, where the heart stops. **Stigma:** Harm can also include being judged negatively. Often in our society, people make negative assumptions about people who use inhalants, whereas if someone is using a different substance (like alcohol, for example), they may not be judged in the same way. **Negative assumptions are called stigma and that stigma may make it more difficult for someone to get help if they feel that their substance use is becoming problematic.**

Additional Activities

Ideally, this activity can be followed by:

- “Partying Safer” Brainstorm

DOWNERS

ALCOHOL, PAIN-KILLERS, HEROIN, SLEEPING PILLS...

UPPERS

COCAINE, CAFFEINE, CRYSTAL METH, SPEED, ECSTASY...

CANNABIS

POT/WEED, DRIED BUDS, HASH, OIL, EDIBLES, SHATTER/DAB...

HALLUCINOGENS

MAGIC MUSHROOMS, ACID, ECSTASY/MDMA, AYAHUASCA, PEYOTE...

INHALANTS

SOLVENTS AND GASSES (NOT INTENDED FOR HUMAN CONSUMPTION)

Desired effects:

- Slows the body down
- Makes you sleepy
- Pain relief (physical and emotional)

Potential harms:

- Lowered inhibitions - taking more risks
- Overdose
- Addiction/problematic use

Desired effects:

- Alert and awake
- Happy or 'high'
- Increased tolerance to pain

Potential harms:

- Crash (feeling depressed, upset, mad, or really tired)
- Overdose
- Addiction/problematic use

Desired effects:

- Quick and fast high
- Giddy and lightheaded or dizzy
- Immediate escape from reality

Potential harms:

- Memory loss, loss of hearing and sense of smell
- Brain damage
- Changes in personality

Desired effects:

- Seeing/hearing things that others don't
- Openness and sense of well-being
- More energy

Potential harms:

- Bad trip
- Nausea (upset stomach)
- Confusion and accidental injury

Desired effects:

- Feeling chilled out and giggly
- Calms upset stomach
- Slowed sense of time

Potential harms:

- Panic or paranoia
- Slowed reaction time/
less alert
- Greening out

Substance Use Info Matching Game!

Draw a line from each desired effect (what people want from using) & potential harm (side effects or risks) on the left to the correct substance category on the right.

POTENTIAL HARMS	DESIRED EFFECTS
	A) Feeling chilled out and giggly, calms upset stomach, slowed sense of time
	B) Alert and awake, happy or "high," increased tolerance to pain
	C) Seeing/hearing things that others don't, openness and sense of well-being, more energy
	D) Quick and fast high, giddy and lightheaded or dizzy, immediate escape from reality
	E) Slows the body down, makes you sleepy, pain relief (physical and emotional)
	F) Crash (feeling depressed, upset, mad or really tired), overdose, addiction/problematic use
	G) Memory loss, loss of hearing and sense of smell, brain damage, changes in personality
	H) Panic or paranoia, slowed reaction time/less alert, greening out
	I) Bad trip, nausea (upset stomach), confusion and accidental injury
	J) Lowered inhibitions: taking more risks, overdose, addiction/problematic use

Substance Categories:

Inhalants

Solvents and gasses not intended for human consumption (e.g., gasses, cleaning products)

Downers

Alcohol, pain-killers, heroin, sleeping pills...

Uppers

Cocaine, caffeine, crystal meth, speed, ecstasy...

Cannabis

Pot/weed, dried buds, hash, oil, edibles, shatter/dab...

Hallucinogens

Magic mushrooms, acid, ecstasy/MDMA, ayahuasca, peyote...

Problematic Use Brainstorm

Recommended Age: 14+

Goals

- To highlight the warning signs that substance use may be problematic for someone.
- To explore stigma related to addiction.
- To link youth to appropriate resources where they can go for help.

Have Ready

- Write on a flipchart/whiteboard: “How do you know someone has a problem?”
- Post-it notes (if doing as an individual activity, have youth write answers on a post-it and then add to flipchart)

Instructions

- Tell youth, “**Not everyone who uses substances has a drug problem.**” There are varying levels of use. Some people don’t use at all, some may use substances once in a while, and some may use more often, in which case it takes up more of their time and energy. Someone’s use could be a problem if it is having a negative impact on their life or they are using to the point that it’s causing problems in their life. For some people, this may include addiction. “**What are some warning signs that someone’s use has become a problem?**”

Sample Flipchart

How do you know someone has a problem?

- Conflicts in relationships
- Missing school
- Getting kicked out of school/home

- Other people are concerned about their use (could mention 'denial' here)
- Only hanging out with people who use the same substances
- Stealing money to buy substances
- Using when they'd rather not be
- Hiding their use from other people
- Feeling embarrassed about using
- Spending more and more time, money, and energy doing things related to using (even just thinking about it)
- Trying to cut down unsuccessfully several times
- Giving up activities they used to value

Debrief

- Problematic use could be defined as continuing to use a substance even though it is having a negative impact on their life. When we use a substance regularly, our bodies develop a tolerance, which means it takes more of the drug to get the same effect. This increases the negative side effects to get the same or lower high. A dependency is when the body needs the substance just to feel 'normal.'
- It can be difficult to have a friend or family member who is using substances, but ultimately they need to decide for themselves if they have a problem or need help. If people feel judged or threatened for using substances, they may be less likely to get help. When supporting a friend, try not to judge, and instead let them know you are worried about them and want to help. People are more likely to want help if they feel supported.
- **“Who could you talk to if you were concerned about your or someone else’s substance use?”** AFM (24-hour phone line and youth programs), guidance counsellor, addiction worker, teacher, family member, Elder, Traditional Healer, essentially anyone you think will be supportive.

Additional Activities

Ideally, this activity can be followed by:

- Refusal Skills Brainstorm
- Abstinence Activities Scenario Cards & Brainstorm
- Decisional Balancing Reflection
- Identifying Strengths Reflection Activity

Abstinence Activities Scenario Cards & Brainstorm

Recommended Age: 12+

Goal

- To create a list of protective factors (activities/friends/projects) that can decrease the chances of harmfully using substances.

Have Ready

- Flipchart paper or whiteboard and markers.
- Scenario cards (optional).

Instructions

- Break youth into smaller groups and give each group a scenario card (see below), flipchart, and markers.
- Have youth brainstorm all the things the person in the scenario could do instead of using. Encourage youth to give realistic suggestions that could work in their lives by asking them to imagine the person lives in their community.

Abstinence Scenarios

Scenario 1:

Jared has started new medication to treat depression. He wants to get back to doing the things he loves and his health has become a major priority. His doctor has told him that he needs to stay away from alcohol because it could stop his medication from working well. List some fun and safe activities he can do.

Scenario 2:

Sky has just been released from the Manitoba Youth Centre after being there for four months. One of the conditions for her probation is no drugs or alcohol. If she is caught using them, she may have to go back to the youth centre. She does not want to go back and wants to avoid drugs and alcohol. Make a list of fun and safe activities for her to do.

Scenario 3:

Erik has been playing hockey since he was seven. He wants to play for a Manitoba junior hockey team. He realizes that smoking and drinking on the weekend affects his game, so he wants to cut back. List some fun and safe activities he can do.

Scenario 4:

Joe spent the night at the nursing station after drinking a lot of alcohol and smoking pot. He had severe alcohol poisoning because the pot stopped him from puking. He wants to take a six-month break from drinking and smoking pot. Make a list of fun and safe activities for him to do.

Scenario 5:

Sam and her friends have been experimenting with various drugs over the past year. She found out she is pregnant several weeks ago and decided she's going to parent. She wants to stop using. List some fun and safe activities she can do.

Sample Flipchart**Things to Do**

- sports/activities/hobbies
- go for walks
- spend time with animals/pets
- take a class in something you're interested in
- learn a new skill
- spend time with people who build you up (and will not use with you)
- spend time on the Land
- movies/video games
- hang out with friends and family who are not using
- go to the community centre/hockey rink
- parties/dances
- community events
- cook/bake
- write, draw, paint

- get a part-time job
- get more involved with your community (volunteer, join or start a community garden, hang out with neighbours)
- consider if your friends are pressuring you to use
- drive around
- practice saying no
- use only on special occasions
- go to or help with ceremonies
- find someone you can talk to openly and honestly who will be non-judgmental (mentor, counsellor, a good friend, etc.)

Debrief

- Let youth know that having other activities that are meaningful and fun for them in their lives decreases the likelihood of becoming dependent on a substance and increases the likelihood of being able to cut down.
- When choosing other activities instead of using substances, it can be helpful to find an activity that has the same desired effects. So, for example, if someone is using to get a rush of adrenaline, spending time playing a fast-paced video game or listening to loud music would be a better substitute than reading or meditating.
- It is also worth remembering that if we have been using for a while, it can take a considerable amount of time to adjust to being sober.
- Ask youth, **“Can someone who’s not using any substances make a list like this?”** Of course, someone doesn’t necessarily have to have a ‘problem’ to want to reduce their usage. Anyone can decide to focus on meaningful activities, whether or not they are using. People may even want to help a friend reduce usage (if they want to).
- Partying could be on the list. If someone wanted to cut down on drinking, ask youth, **“Would going to a party where other people are drinking necessarily be easy?”** (No) A lot of times, there is pressure for everyone to join in.
- Ask youth, **“What could people say if they don’t want to use in this situation?”** I’m driving, I have to babysit later, I have a big

game/test tomorrow, or no thanks are all possible ways to say no.

Additional Activities

Ideally, this activity can be followed by:

- Partying Safer Brainstorm
- Decisional Balancing Reflection
- Identifying Strengths Reflection Activity

Refusal Skills Brainstorm

Recommended Age: 12+

Goal

- To discuss ways to refuse substances and resist pressure from others.

Have Ready

- Flipchart paper or whiteboard and markers.

Instructions

- Have youth think about a situation where someone is using more often than they want to, so they've decided to cut down. **"If someone wanted to cut down on drinking (for example), would going to a party where other people are drinking be easy?"** A lot of times there can be pressure for people to join in. Let's list a few ways people can respond if others are trying to pressure them to use a substance.

Sample Flipchart

Ways to say no

- **No thanks, I'm driving**
- **I've got a big test/game tomorrow**
- **I just don't want to**
- **No, I'm good**
- **Nah, I'm cutting down, thanks though**
- Someone needs to stay sober to watch out for you
- I'm hungover from yesterday
- I'm working/babysitting tomorrow
- I'll get in trouble/grounded

Debrief

- Validate the responses youth provide, and add that sometimes it can be easier to actually appear to be drinking when you're not. Some suggestions for this would be to walk around with a beer bottle filled with water, or drink pop but tell people that it's mixed with alcohol.
- Ask youth, **"Who could you talk to if you were concerned about your usage?"** AFM (24-hour phone line and youth programs, see resource pages at the end of this chapter), guidance counsellor, addiction worker, teacher, family member, Elder or Knowledge Keeper; essentially, someone you trust who can be supportive. Talking with people who have accurate information about drugs and alcohol can be helpful, whether it's concerns we may have about the impact of using, looking into why we use, or learning more about particular effects. Just knowing who we can talk to if we have concerns can be helpful.

Additional Activities

Ideally, this activity can be followed by:

- Abstinence Activities Scenario Cards & Brainstorm
- Partying Safer Brainstorm
- Decisional Balancing Reflection
- Identifying Strengths Reflection Activity

“Partying Safer” Brainstorm

Recommended Age: 14+

Goals

- To identify harm reduction tools and strategies.
- To link youth to resources where they can go for help.

Have Ready

- Flipchart paper titled, “Staying Safer When Using Drugs or Alcohol.”
- Markers and tape.
- Art supplies (optional Alternative or Extended activity).

Instructions

- Let youth know, **“Often, the best way to be safer with substances is not to use them at all. However, this is not always a choice that people can or want to make, which is why it’s important to know how to reduce the harms when using.”** Even when people aren’t using substances, it’s a good idea to have information on how to stay safer in order to help others.
- Tell youth, **“Let’s brainstorm a list of things that could keep us safer at a party where people might be drinking or using drugs.”**
- Have youth flipchart ways to be safer in 2-3 small groups.

Alternative or Extended Activity:

- Have youth brainstorm ways of partying safer. In small groups or individually, have youth create drawings or posters with the messages. These can be put up in a classroom, school, or community centre, or shared on social media.

Note to Facilitators

For northern and remote communities, include factors for safety considering local realities, such as use of boats, skidoos, winter roads, landscape, weather, wildlife, bodies of water, etc. Include examples such as dress for the weather, especially in winter, have a sober driver on the water or ice in boats, trucks, and skidoos, etc.

Sample Flipcharts

Staying Safer When Using Drugs or Alcohol:

- **Buddy system, have someone you trust around**
- **Safe way home or place to crash** (know the bus route, including last bus home, have cab or bus fare stash, designated driver, or arrange to sleepover at a friend's house. Buddy system is important here, because it's not always safe to travel alone).
- **Drink water and eat food**
- **Know your limits** (if six beers make you fall down drunk, consider bringing only two or three)
- **Start low, go slow** to see how your body responds
- **Take breaks**
- **Don't mix substances**, as it increases the chances of an overdose
- **Watch your drink and do not put things in other people's drinks**
- **Don't share equipment, such as straws, bills, needles, cooking gear, etc.**
- **Carry condoms**
- **Know your dealer**
- Know the laws for your community
- Eat edibles or vaporize cannabis instead of smoking it. If you choose to smoke, the longer you hold it in and the deeper the inhalation, the more potential harm to your lungs.
- Know what strain you're using and its effects (THC vs. CBD levels)
- If possible, delay the use of cannabis until early adulthood, as it will lower the chances of negatively affecting brain development
- Know family mental health history
- Try to use with people or in an environment that is comfortable for you

- If having a bad trip, try to go to a place that is quiet and ideally with a person who can ‘talk you down.’
- Injecting drugs:
 - rotate injection sites
 - use new needles every time
 - get new needles from Street Connections
 - safely dispose of used needles
- Inhalants:
 - try not to spray directly into your mouth
 - try not to light a match or use a lighter, because inhalants are highly flammable
 - try to use it in an open space rather than in a confined space

Additional Considerations for Dry Communities:

- **Drinking real alcohol that has been made to go in a human body,** although it’s more expensive/harder to get, it is safer than homebrew.
- **If drinking homebrew or alcohol not made to go in the body, drink only small amounts and give it time to take effect.** Each batch is different and because it can be so strong, the risk is that it can shut kidneys down quickly and it still ferments in the body, so poisoning can happen faster.
- **It is especially important to take breaks for your body to recover.**
- Tell someone when you’re leaving and tell them which way you are going to get there so they know when to expect or look for you.
- Know who you’re buying from.
- Take a friend when you’re buying.
- Know the risk (punishments) of getting caught by band constables and the RCMP (can be very different).
- Know that if ‘the rez is dry’ (no hoots or booze left), you don’t have to keep looking. It might be a good time to take a break for a little while.

Substance Use & Sexual Decision-Making Debrief

- When people are drunk or high, they can make decisions that they might not normally make, and they are in a vulnerable state. This means that getting someone’s consent when they are under the

influence isn't true (or legal) consent. Under the influence means that there is an outside factor (the substance) impacting a person's decision-making ability.

- Let youth know, **“Consent is enthusiastic and clear permission, which means that only yes means yes.** It's also a voluntary agreement, which means it's something that people freely decide to do together. Sex or making out should be enjoyable for everyone involved, because that's the point!”
- It's never okay to pressure, guilt or manipulate someone into having sex or making out. That is not consent; it is sexual coercion and assault.
- **Getting another person drunk or high in order to have sex with them is sexual assault. Asking someone who is really drunk or high to have sex or make out is not okay. It's never okay to take advantage of someone when they are drunk or high.**
- **What are some ways people can respect or take care of someone when they are drunk or high?** Bring them water, help them get home safely (if they need your help), ask them how they are doing, watch out for them, etc. **It is obvious that there is a very clear difference between showing someone respect and care when they are drunk or high versus taking advantage of them.**
- **If you have ever dealt with or are dealing with sexual assault, it is never your fault, and you have a right to get support.** You can access support for sexual assault or being taken advantage of, even if you were in a relationship with the other person, or if alcohol or drugs were involved. It can help to talk to someone you trust. **The Sexual Assault Crisis Line is a great resource that people can call if they need to talk. It is open 24/7 and free to call from anywhere in Manitoba. Their phone number is 1.888.292.7565 or 204.786.8631.** If someone wanted in-person counselling, they could call 204.784-4049 for Sexual Assault Intake.
- If someone tells you that they have experienced sexual assault, it's important to be supportive. Some things that are important to say are: “It's not your fault,” “I believe you,” “I'm sorry that happened,” “How can I support you,” and “You deserve support.” You can also give them resources mentioned already, such as the Sexual Assault Crisis Line. You can offer to be there with them when they call that line, if that would be helpful for them. You can also call that line to get more information about how to support that person.

- Drugs and alcohol can also affect how safe sex is. Drugs and alcohol can increase the likelihood of sex and decrease how safe the sex is.⁷ That’s why it is important to think ahead about ways to reduce the risk of unplanned pregnancy or STIs/HIV when using. Ask youth, **“If sex might be a possibility in a situation where people are drunk or high, what are ways they could be safer?”** Carry condoms, talk about boundaries when you are sober, have a buddy system, check in with each other, decide to do other activities that are lower-risk, or decide to have sex or make out when sober instead. Note: The relationship between alcohol and sexual violence is complex. The association of sex and alcohol consumption is normalized in our dominant culture. Yet harmful use of alcohol is a risk factor for both experiencing and perpetrating sexual violence. It has been estimated that as many as 50-70% of sexual assaults are linked to alcohol use. Most alcohol-related sexual violence occurs between individuals who are known to each other, most often at parties and in bars, or in dating relationships. Alcohol (the drink itself) is the number one date rape drug.⁸

Substance Use & Pregnancy Debrief

- **During a pregnancy, it is best to not drink or reduce use as much as possible. Alcohol use can seriously harm a fetus and can cause Fetal Alcohol Spectrum Disorder (FASD).** Because of addiction, coping/trauma, or lack of information, people might use during a pregnancy. It’s helpful to support someone during a pregnancy and not shame or judge them for using.
- Ask youth, **“How can we support someone who is pregnant?” Not drink around them, listen and not judge them,** do fun things with them, offer to go to appointments with them, bring them food, etc.

Additional Activities

Ideally, this activity can be followed by:

- Refusal Skills Brainstorm
- Abstinence Activities Scenario Cards & Brainstorm
- Decisional Balancing Reflection

Recovery Position

Recommended Age: 12+

Goal

- To demonstrate how and when to put someone in the recovery position and when to call for help.

Instructions

- Ask youth, **“What should you do if someone is passed out from drugs or alcohol?”** When someone is passed out and they can’t wake up, you can roll them into the recovery position.
- **“How can you tell if someone is passed out or just sleeping?”** Try to wake them up by calling their name, talking in their ear, or nudging them, but be aware they may wake up startled. If they don’t wake up, but are breathing and respond, they are likely unconscious and can be put in the recovery position.
- We are going to demonstrate the recovery position.
- Ask if there is a volunteer who is willing to lie down on the floor and let the facilitator roll them into the recovery position. If there are no volunteers, or if the facilitator prefers not to use a youth volunteer, use a teacher or co-facilitator.
- Make sure the demo is happening in a visible location.
- Get consent from youth before putting them into the recovery position.

Recovery Position Steps

- Tilt head backwards to open airways.
- Bend one arm out at their side.
- Place other arm across chest with hand against cheek.
- Bend the knee to a 90° angle. This will help you roll them over, no matter your strength or their size.
- Roll them over so they are supported by their arm.
- The bent leg and arm give stability, while the hand under the head

keeps their airways open so they don't choke on their vomit. (See the following diagram.)

Debrief

- Ask youth, **“Why do you put someone in the recovery position?”** (So they don't choke on their vomit if they are throwing up.)
- Ask youth, **“What should you do after the person is in the recovery position?”** If the person is passed out, it means they may have alcohol poisoning or may be overdosing. Encourage youth to call for help or get the person to a hospital or nursing station if they think the other person may be in danger, suspect alcohol has been mixed with other drugs, or there are severe risk signs, such as non-responsive, irregular breathing, clammy/pale skin, or blood in their vomit. Encourage youth to check for these signs and to ask if anyone knows how much or what they have taken/drunk.
- If someone at a party is passed out and does not have any of the severe risk signs, still keep them in the recovery position in a safe place and check on them often or stay with them. This is important, because their blood alcohol level could still be rising.
- When in doubt, it is much safer to call for help. For the most part, paramedics or other emergency responders just want to make sure people are safe. FYI: When 911 is called, an ambulance is sent out and a paramedic stays on the phone with the person who called to assist them in helping the youth who is hurt. If they are under 18, a parent/guardian is contacted from the hospital. An ambulance fee is charged to the person who is transported or their guardian. They are also covered by insurance plans, as well as Child and Family Services and Social Assistance.
- Now that you have demonstrated the recovery position, encourage youth to try practicing it.


Additional Activities


Ideally, this activity can be followed by:


- Refusal Skills Brainstorm
- Abstinence Activities Scenario Cards & Brainstorm
- Decisional Balancing Reflection


Recovery Position Demonstration⁹


STEP-BY-STEP GUIDE TO PUTTING SOMEONE IN THE RECOVERY POSITION


- 

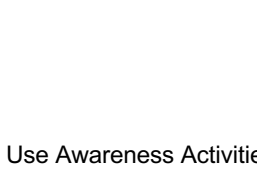
1 KNEEL BESIDE THE PERSON
- 

2 STRAIGHTEN THEIR ARMS AND LEGS
- 

3 FOLD THE ARM CLOSEST TO YOU OVER THEIR CHEST
- 

4 PLACE THE OTHER ARM AT A RIGHT ANGLE TO THEIR BODY
- 

5 GET THE LEG CLOSEST TO YOU AND BEND THE KNEE
- 

6 WHILE SUPPORTING THE PERSON'S HEAD AND NECK, GENTLY TAKE THE BENT KNEE CLOSEST TO YOU AND VERY GENTLY ROLL THE PERSON AWAY FROM YOU. ADJUST THE UPPER LEG, SO BOTH THE HIP AND KNEE ARE BENT AT RIGHT ANGLES. ENSURE THE PERSON IS STEADY AND CANNOT ROLL.
- 

7 TILT THE HEAD BACK AND MAKE SURE AIRWAYS ARE CLEAR AND OPEN

“Pros & Cons” Decisional Balancing Reflection

Recommended Age: 14+

Goals

- To provide an assessment tool for youth to reflect on the benefits and harms of using substances, as well as the benefits and harms of quitting or reducing use.
- To introduce the concept of stages of readiness, as well as emphasizing goal-oriented strategies to reduce harm.

Have Ready

- Reflection Activity handout (see below).
- Flipchart paper and markers, or chalk/whiteboard.

Activity Introduction

- There is a need for youth who are actively engaging in substance use to reflect on their own level of use, their reasons for using, as well as explore their motivations for quitting or cutting down on substance use.
- When we think about making changes, most of us don't really consider all 'sides' in a complete way. Instead, we often do what we think we're 'supposed' to do, avoid doing things we don't feel like doing, or maybe just feel overwhelmed and give up thinking about it at all. Thinking through the pros and cons of both changing and not making a change is one way to help us figure out if we're ready to make a change. This can also help us to 'hang on' to our plan in times of stress or crisis.

Instructions

- Ask youth, **“Think about your substance use and what the positives and negatives are.”** They can write all the reasons they can think of in each of the boxes on the handout.

- Let youth know they will not be asked to share their page with anyone.
- It's helpful to be honest about what the positive benefits of using substances are, as well as the negative consequences of using. For example, a person can put that a positive of smoking pot is that it is fun and a negative is that it costs too much money.
- It's also important to be honest about what someone would gain as well as lose by quitting. A positive about quitting pot could be helping with physical issues, such as an ongoing cough or memory problems. A negative is that it may have been helping with sleep.
- Pass out the worksheet and give youth time to fill it out.

Sample Sheet for Cannabis

<p>Best about Using</p> <ul style="list-style-type: none"> • Fun • More friends • Helps get through your day • Coping/helps deal with trauma • Helps with sleep 	<p>Worst about Using</p> <ul style="list-style-type: none"> • \$\$\$ • It has to 'work' • Triggers suicidal feelings • Kicked out of school • Unsafe situations • Physical health issues
<p>Best about Quitting/Cutting Down</p> <ul style="list-style-type: none"> • Get off street • Decreased suicidal feelings • Return to school • Sleeping/eating improve • Safety • More money 	<p>Worst about Quitting/Cutting Down</p> <ul style="list-style-type: none"> • Boredom • Loss of friends • Flashbacks • Sleep • Miss being high • Loss of social status

Debrief

- Ask youth, **“When looking at your completed sheet, what do you notice?”** Youth may say some sections are harder or easier to fill in. Acknowledge that deciding to continue using or choosing not to use can be really complicated.

- **When trying to decide if you are ready for change, it is not the number of points made in each section, but how much weight or importance that you put on those points.**
- However, even if you may not be ready to cut down or quit, you can still make small changes and set goals to get ready for bigger changes. For example, if you are worried about not sleeping well without pot, you can try to look for other strategies that can help with sleeping, even while still using.

Additional Activities

Ideally, this activity can be followed by:

- Identifying Strengths Reflection
- Drug Trivia Game

Decisional Balancing Sheet

<p>Best things about using</p>	<p>Worst things about using</p>
<p>Best things about quitting/cutting down</p>	<p>Worst things about quitting/cutting down</p>

Identifying Strengths Reflection

Recommended Age: 12+

Goals

- To provide a tool for youth to describe people, activities, and things in their lives that give them strength.
- To introduce the importance of having and/or building a positive support system.

Have Ready

- Hand out sheets of paper (poster size optional) and pens/markers.

Activity Introduction

- Youth who are actively engaged in substance use are often surrounded by others who are also using or at risk for using. This may include friends, peers, or family members. A key tool is to have youth expand their social support network, as well as reflect on their own sources of strength in working toward quitting or cutting down.

Instructions

- Ask youth, “**Think of a list of people and activities in your lives that give you strength or support.**” These people or activities are ones that help us make healthy decisions in hard times. We want to focus on positive supports and people or things that help us with healing. The lists should include people or things that help us feel good about ourselves and help us handle stress.
- Next, ask youth, “**Write about or draw one of the things on your list.**” Encourage youth to draw a picture, write a song or poem, or simply journal about why this person or activity is so important to

them. Let youth know that they won't have to share what they created with anyone.

- Facilitators can walk around and help youth or encourage them. Facilitators can also remind youth that they can draw a picture of a person, activity, or ceremony that brings them strength.
- If anyone seems to be struggling, point out that some common areas to explore are family supports, positive friends, a mentor in their life, volunteering or helping others, spending time with younger people, taking part in spiritual ceremonies or practices, counselling, going to group meetings (e.g., AA or NA), visiting a Lodge, or an Elder.

Debrief

- Let youth know, **“Surrounding ourselves with positive people can help us through hard times, as well as help us make healthier decisions when it comes to substance use.”** Think about how it feels to hear encouraging words. Even if that person can't 'fix' the difficult time we are going through, it is important to find people who care for us without judging us. Even if you only have one person in your life, it can make a huge difference in helping us feel good about ourselves. If this area was limited or it was hard to name a person, then we know that this is an area to work on in our lives. Sometimes, this means separating from our friends in order to connect with people who are encouraging and positive.
- **Tell youth that the activities they identified are important because they can see that even in times when friends or family aren't available, they can draw from their own sources of strength.** Those activities are not just hobbies; rather, they are protective factors that help us not only get through rough times, but possibly give us a break from using substances. If this area was limited or it was hard to come up with activities that are positive, then that is an area to work on in our lives. Debrief that something as simple as volunteering some of your time at an afterschool program or hanging out with younger people can provide us with a feeling of connection, as well as give us an important job or role to play in others' lives.

Teen Talk's Drug Trivia Game

Recommended Age: 14+

Goal

- To have fun while educating, linking youth to local resources, and reinforcing information learned about various substances and harm reduction practices.

Note to Facilitators

- This activity requires that the facilitator has a basic understanding of the effects and risks of common substances. For more info on substances, check out the corresponding chapter of the Teen Talk Service Provider Manual or the many publications that AFM has developed on alcohol and drugs, available at www.afm.mb.ca.

Have Ready

- Drug Trivia questions and answers (see below).
- Create Drug Trivia gameboard pieces.
- Prize(s) for winning team (optional).

Instructions

- Divide the group into two teams.
- Decide on team names and which team will go first.
- The teams will take turns choosing a category and points value, and answering a question.
- Keep score somewhere that's visible to youth.
- Encourage each team to huddle and work together to come up with the correct answer.
- The game can be as brief or extended as needed.
- At Teen Talk, we try to play a final 'Bonus Round', where each team chooses a number of points to wager. See "Playing It Safer" questions for an example bonus question.

DRUG TRIVIA			
FAST FACTS	DRUG EFFECTS	WILD CARD	PLAYING IT SAFER
100	100	100	100
200	200	200	200
300	300	300	300

Drug Trivia Questions

Fast Facts

100 Why is it dangerous to drive under the influence of cannabis?

- Effects like slower reaction time, distorted perceptions of time and distance, decreased alertness, and increased drowsiness all make driving dangerous under the influence of weed.¹⁰ Since cannabis distorts thinking, if someone is high, they may think they are driving fine even though they are not.

100 What may happen if you have too much caffeine?

- May cause headaches, rapid heartbeat, nausea, feelings of anxiety, nervousness, restlessness, or agitation.

200 How can connecting to culture and ceremony help someone avoid, reduce, or stop using substances?

- Provides healing and time for reflection
- Gives us strength and connects us to ourselves and our ancestors
- Can keep us focused and busy
- Sense of belonging
- Connects us to our communities, Elders, and Medicine People

200 Smoking cannabis can damage the lungs. What is a way to reduce the risk or make it safer?

- Eating or vaporizing weed instead of smoking it. If you choose to smoke, the longer you hold it in and the deeper the inhalation, the more potential harm to your lungs. Sometimes, folks will use a water bong, believing it will filter the smoke; however, users tend to take deeper inhalations, leading to increased levels of smoke entering the lungs.¹¹

300 When can taking prescription medication be risky?

- When it is not your prescription. The dosage might be too high, you might have unknown allergies, the medication might have different effects on different people, etc.

- When taken at a higher dose than prescribed.
- When mixed with another substance.

300 What are four ways to plan a safe way home?

- Travel with people you trust, dress for the weather (and keep the warm clothing on), know the bus schedule, have bus fare, have taxi money, have a DD, have someone you can call for a ride, have a phone with you, have a back-up plan

Drug Effects

100 Name three signs of alcohol overdose.

- Vomiting, blacking out, passing out, cold/clammy skin, slurring, lack of muscle coordination, death

200 What are three things that will affect how many drinks it takes a person to get drunk?

- Amount of sleep, whether you have eaten, tolerance, atmosphere, body weight, and sex

200 Why is it important to take a break from using uppers like meth and cocaine?

- As uppers tend to be addictive, taking a break can help to reduce the likelihood of becoming dependent.
- Because uppers like cocaine and crystal meth (methamphetamine) give a big dose of the feel-good chemical dopamine, the body stops producing it. After the drug is out of the system, it takes a while for the body to start making and releasing it again.

300 What influences whether someone will have a good trip or a bad trip when taking a hallucinogen?

- Set and setting, or in other words, how they are feeling before they take the substance and if they trust their surroundings and the people they are with.

300 Name three reasons why it is dangerous to mix substances.

- Taking similar types of drugs can increase their negative effects and be dangerous. For example, taking two depressants like heroin and alcohol.
- A drug may affect you in a particular way that makes other drugs you take more dangerous than usual.
- One drug may mean you have to take higher levels of another type of drug to feel the effects, and this can lead to overdose.
- The drugs might interact in completely unexpected ways.
- In the case of overdose, help may not know what they took.

Wild Card

100 Name a risk of sharing drug works (a.k.a. supplies) like straws or needles.

- Infection with syphilis, hep C, or HIV. Like with needles, blood can pass. This can include the needle, but also any gear used for prepping the substance.

100 Name three reasons why some people use substances and three reasons why some don't.

- Accept any answer. Stress, experimenting, curious, peer pressure, for fun, heard some side effects and risks, no access, other things they want to do, religion, etc.

200 When and why would you use the recovery position?

- When someone passes out after drinking alcohol or using other substances.
- Use the recovery position so that they don't choke or drown in their vomit. If the person is unresponsive, then you need to call 911.

200 What are three signs someone's substance use is becoming a problem?

- Trying to quit but can't, conflicts in relationships (friends, family, partner, etc.), affecting their commitments (school, work, sports, etc.), affecting finances, etc.

300 Why do negative comments or judgments about some drugs make it harder for someone to get help?

- If someone feels judged, they are less likely to feel comfortable asking for help.
- They may feel shame and hide what they are doing, which can lead to risks around accessing new supplies (needles, etc.) or overdosing without someone around to call 911.
- They may feel more hurt or isolation.

300 What two substances account for most deaths in the western world?

- Alcohol and tobacco.
- FYI: People sometimes assume that illegal drugs are the most dangerous substances, yet because of their wide use and harmful effects, these two legal substances are unsafe.

Playing It Safer

100 Name three places to go for information and help with substance use.

- AFM, guidance counsellor, teen clinic, support group (like AA), older or more informed friend/brother/sister/parent, support worker, NNDAP, nursing station, etc.

100 Name five ways to stay safer if drinking.

- Know your tolerance, drink water, eat first, always watch your drink, have a buddy, alternate alcoholic drinks with non-alcoholic ones, bring condoms, have a safe way home (riding or walking may not be safe, sometimes it's better to stay where you are until you feel better)

200 Name two ways to make cannabis edibles safer (pot brownies, gummies, lollipops, etc.).

- Start with a small amount (know how many mg of THC or CBD is in the item).
- Give it time to kick in. Wait up to an hour before taking more. Keep in mind that how much someone has eaten, slept, their metabolism, etc. can affect how fast and how strong the high will be.
- Store them away from pets and children.

200 Why is eating usually the safest way to take a substance?

- Because it takes longer for the body to absorb it and it can also be puked or pumped out if necessary.

200 What can you do to help someone who is having a 'bad trip' on a hallucinogen?

- Take the person to quiet surroundings where they feel comfortable.
- Find a friend who can reassure them (talk them down).
- Stay with them/find someone else who can.
- Validate their panic, stress to them that their panic will wear off.
- Call an ambulance if their condition worsens.

300 If someone uses drugs, what are 3 ways to reduce their risk?

- Start with a smaller dose, know your dealer, don't use alone/use the 'buddy system,' and don't mix substances

300 If someone uses injection drugs, what are 3 things that can reduce their risk?

- Always use new needles, don't share, don't use the same spot on the body (rotate injection sites), start with smaller amounts, don't mix an upper with a downer, don't use alone, use fresh bottled water, don't share cooking gear, use diluted bleach as a last resort, safely dispose of the needle

Final Trivia Question

- Have the youth brainstorm other activities they can do instead of using.
- Tape up two pieces of flipchart paper that say, "Other Fun & Safe Things to Do."
- Create a relay race where each team has individuals running to the flipchart, writing an activity, and running back to the team to tag off until the time runs out.
- The team with the most answers wins.
- After reading the second team's flipchart, debrief the activity.

Debrief

- Tell youth, "**The more interesting and fun things you have in your life, the easier it will be to cut down on or avoid substance use.**¹² **When we are choosing activities for ourselves to do, obviously they need to be things that we enjoy or find stimulating that will give us some sort of natural high.**" For some people, this could be exercise (like riding your bike or going for a run), as it stimulates and releases adrenaline in our bodies that can give us that natural high. For others, instead of smoking weed to relax, one could pick another calm activity like listening to music, taking a bath, or watching TV. Just remember to do something that will replace using, not make you want to use.

Appendix: Educational Curriculum Connections

Our curriculum ties to the Manitoba Government learning outcomes. The following language used is not our own. For more information, please visit www.edu.gov.mb.ca/k12/cur/physhlth/

Grade 7

K.3.5.B.4 Identify available community supports that promote safety and community health.

K.5.7.D.1 Differentiate between the use and abuse (i.e., prescribed/unprescribed drugs; own medication/someone else's medication; correct/ incorrect dosage, addiction) of medicinal and non-medicinal substances (e.g., medicines, over-the-counter drugs, vitamins, alcohol, tobacco, inhalants, street drugs...).

K.5.7.D.2 Explain different consequences, related to different variables (i.e., fair play, legalities, performance, medical, safety, and financial implications), of taking harmful and beneficial drugs or other substances (e.g., antibiotics, anti-inflammatories, stimulants, narcotics, anabolic steroids, marijuana, diuretics, herbs...).

K.5.7.D.3 Identify the positive and negative social factors (i.e., influences of peers, families, role models, media, Internet, celebrities, social occasions, parties) that may influence avoidance and/or use of substances (e.g., tobacco, alcohol, caffeine, street drugs, inhalants...).

K.5.7.E.2b Identify positive ways of coping with daily moods and emotions associated with puberty (e.g., engaging in physical activity, discussing emotions with family/friends/religious leaders, listening to music, laughing, taking part in hobbies, participating in school/community activities, reading books...).

Senior 1-4

K.3.5.B.4 Identify available community supports that promote safety and community health.

K.4.S1.B.4 Identify examples of potentially dangerous situations and effective strategies for avoidance/refusal.

K.5.S1.D.1 Explain the meaning of addiction and substance dependence and the possible effects on self and/ or others.

11.SU.2 Explain the stages of involvement in substance use or abuse. Includes: non-involvement, irregular involvement, regular involvement, harmful involvement, and dependent involvement

K.5.S1.D.2 Examine the use and abuse of substances and potential consequences on personal health and well-being.

11.SU.1 Explain ways in which drugs and other substances are classified.

K.5.S1.D.3 Identify community agencies and resources available to support the prevention of substance use and abuse.

11.SU.4 Use reliable information in making healthy decisions for helping self and/or others regarding substance use and abuse.

K.5.S2.A.2 Demonstrate knowledge of healthy lifestyle practices that contribute to disease/ illness prevention, including mental illness/ disorders.

K.5.S2.D.1 Analyze issues concerning the use and abuse of legal and illegal substances.

K.5.S2.D.2 Evaluate the legal aspects and consequences of substance use and abuse and addiction

K.5.S2.D.3 Examine current statistics on substance use as it affects healthy living, locally and nationally.

S.5.S1.A.4 Apply problem solving strategies to respond appropriately to issues related to substance use and/or abuse

S.5.S2.A.4 Analyze effective responses to problems regarding substance use and abuse by self or others.

11.SU.3 Examine factors that influence decisions regarding substance use and abuse.

Endnotes

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CHAPTER 9

Body Image Activities

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Body Image Expectations & the Media

Recommended Age: 12+

Goals

- To explore body image issues.
- To explore how youth are affected by body image issues.
- To discuss the media's role in creating and perpetuating negative body image.

Have Ready

- Hand out scrap pieces of paper to each participant.
- Recycling bin.
- Write "What Beautiful Means to Me" on two flipcharts.

Instructions

- Ask youth, "**What is body image?**" How you see yourself, not what you actually look like.
- Give youth a few minutes to reflect on all the things that go into images of celebrities that we see in the media. Tell them to take a moment to think of a celebrity picture they've recently seen. Now, on the paper, write down all the things that went into making this photo. Think about what was done to the person in the photo, and what was done behind the camera to make the picture look that way.
- Ask youth, "**What does the person in the photo do to look this way?**" (flipchart responses) Photoshop, personal trainer, personal stylist, makeup, plastic surgery, etc.
- Ask youth, "**What has been done to the photo to make it look this way?**" (flipchart responses) Expensive camera, lighting, photo editing, professional photographer, etc.
- Ask youth, "**Is it easy to remember all the things that were done when we look at the photo?**" Not really. Looking at these photos may lead to feeling pressured to look a certain way and create an idea that there's such a thing as a 'perfect' body. But

these images are not realistic. What’s going on in these photos takes a lot of money, special equipment, and a team of people to end up looking the way it does. **Try to be critical of these photos and remind yourself, and others, that these photos are not what we are meant to look like. Many photos are trying to sell an image or products to make a profit by encouraging us to change our natural beauty.**

- Remind youth that media is supposed to be entertainment, not real life, and social media is supposed to be a tool for connecting with friends and having fun. If you’re following something that doesn’t promote your overall health, wellbeing, or creativity, then unfollow it.¹ Replace them with people and stories that make you feel good about yourself and others. *Note: Place bin in middle of the room.*
- Now, we want you to do one last thing with your list. Crumple up that piece of paper and throw it away!
- Asking youth in two groups to brainstorm “What beauty means to me” on a flipchart can close this activity nicely.

Additional Activities

Ideally, this activity should be followed by:

- Body Image Action Planning Activity
- Body Image Discussion Cards
- Body Image Boosters

“Ideal Not Real” Body Image Activity

Recommended Age: 12+

Goal

- To explore body image issues.
- To explore how youth are affected by body image issues.
- To demonstrate how ‘ideal’ bodies (stereotypes) in the media set unrealistic standards.

Have Ready

- Two large pieces of flipchart paper and markers.
- Write “What Beautiful Means to Me” on two flipcharts.

Instructions

- Ask youth, “**What is body image?**” How you see yourself, not what you actually look like.
- Divide the class into two groups. Have one group draw the ‘ideal’ male body (the stereotypes) while the other group draws what the ‘ideal’ female body (the stereotypes) is supposed to look like. Be sure to mention that there are more genders (trans, agender, non-binary, etc.) and expressions than just men and women; media typically only portrays people in the gender binary (man/woman, masculine/feminine).
- Ask youth, “**What does the media tell us the ‘ideal’ female/male body should look like?**” Tell them to have as much fun as possible with their drawing, but that it is not supposed to be what they find most attractive or valuable about people.
- Have them also write or draw other characteristics of this person, such as what they are supposed to like to do, wear, eat, and act like.
- Have them choose one or two people to present their drawing.
- The drawings will most likely have some of the following: Girls: lots of makeup, thin, big breasts and butt, white teeth, jewelry, blond long hair, white skin, be passive, have \$\$, etc. Guys:

muscular, no body hair, tanned (if white skin), defined abs, big penis, have \$\$, aggressive, white teeth, be tough, etc.

Debrief

- Ask youth, **“Where do we learn about these expectations from?”** This discussion usually includes sources such as **media**, social media, and celebrities, but could also include community specific examples, ideals, and identities. **A lot of pressure to look a certain way comes from the media. “Do most people in our community or the world look like this? What’s missing?”** Different ethnicities, different abilities (e.g., people using wheelchairs), different body sizes, personalities, etc.
- **“Are these images we get in media realistic?”** No. **“So then what’s going on with the images that we see that’s unrealistic?”** Photoshop, photo-editing apps, personal trainers and chefs, airbrushing, hair and makeup artists, etc. A very small portion of our society looks like the types of bodies that we often see in the media. **If we compare ourselves to unrealistic standards, it can be easy to be critical of our own bodies and not appreciate them for all their gifts.** When we become so focused on the appearance of our body, we can forget that our body is instrumental in everything we do. Our bodies allow us to get from place to place, to do the things we like to do, and to live.
- **Remind youth that these stereotypes are trying to sell an image or products to make a profit by encouraging us to change our natural beauty.**
- Remind youth that media is supposed to be entertainment, not real life, and that social media is supposed to be a tool for connecting with friends and having fun. If they’re following something that doesn’t promote their overall health, wellbeing, or creativity, then encourage them to unfollow it.² Replace it with people and stories that make them feel good about themselves and others.
- Asking youth in two groups to brainstorm “What beauty means to me” on a flipchart can close this activity nicely.

Additional Activities

Ideally, this activity should be followed by:

- Body Image Action Planning Activity
- Body Image Discussion Cards
- Body Image Boosters

Body Image Discussion Cards

Recommended Age: 12+

Goal

- To discuss body image issues.
- To identify the connections between discrimination and negative body image.

Have Ready

- Discussion cards. For younger groups, you may want to do 3-4 cards, and for older groups, 5-6 cards. This depends on group size too.

Instructions

- Hand out cards and ask youth to talk about their card in small groups.
- After a few minutes, bring the classroom back together. Ask each group to read their card and share their thoughts. Ask the rest of the classroom if they agree or have anything to add.
- Share key talking points (below).

Cards and Debrief

Why can't people control getting pimples?

- **What causes pimples?** A hormone called androgen plays a role in acne.³ Among other things, androgen stimulates the oil glands in the skin. When the oil glands are over-stimulated by the androgen hormone, people can get breakouts. **Hormones are a common part of puberty, and so are pimples.**
- What do people mean by 'taking proper care of their skin'? Washing, not eating the 'wrong' foods. Over-washing your face can irritate the skin and oil glands and can cause more breakouts. It's better to wash gently with a mild fragrance-free soap twice a day.⁴ You may have heard that

certain foods cause acne or make it worse, but there's no scientific evidence to back up these claims.⁵

- Many people with ovaries notice that they get more pimples around the time of their menstrual periods. This is due to the increase in hormone production in the body. Estimates show that 63% of people experience an increase in pimples (up to 25% more) during pre-menstruation.⁶

How are fat bodies discriminated against in our society? How can we all be more inclusive?

- **This is a type of discrimination called fatphobia (also referred to as fat-shaming) that is often reinforced by the media. The fact that our society considers the word 'fat' an insult shows us that fatphobia exists.**
- **People often treat thin or muscular people better than they do fat people.**
- We know that fatphobic/shaming comments are actually discrimination. This means that, like other types of discrimination, it is not okay. Because we don't often hear fatphobia talked about like this in our society, people may not realize this.
- If there is a fat person in the media, which is rare, often they are in comedy roles as opposed to serious ones. We rarely see serious sex scenes. We know that in real life, people who are fat can have happy/healthy sex lives; however, this is rarely portrayed in the media. This, in part, creates and contributes to fatphobia.
- Some examples of how we can all be more inclusive are to not laugh at or make fat jokes, speak up when we hear the word fat being labelled as bad, use the word fat neutrally or positively, don't comment on people's weight (gains, losses, or present place), and seek out and share media that celebrates all bodies.
- Note: If youth bring up skinny-shaming, discuss how it is never okay to shame someone based on their body size, but fatphobia also happens at a systemic level. You can use the Defining Oppression activity from the Diversity and Anti-Oppression chapter to explain the difference.
- FYI: The fear of being fat is so overwhelming that some young girls have indicated in surveys that they are more afraid of becoming fat than they are of cancer, nuclear war, or losing their parents.⁷

- FYI: These fat-phobic attitudes can lead to discrimination. For example, research has repeatedly shown that weight affects teacher evaluations, admissions into higher education, personnel decisions, landlord decisions about tenants, and assessments by medical and mental health personnel and employers.⁸

Why can restricting or limiting the amount or types of food you eat be unhealthy?

- Food not only fuels our body, but also our minds. Dieting can impact our mental health, including our mood and our stress levels.
- Puberty is a time of many changes, including weight changes. It is normal to gain weight, as our bodies are still growing. At this time, bodies require a lot of energy, including nutritious foods to fuel both the body and brain. Restricting food is especially problematic when a body is rapidly growing and demanding food to help with hormone levels, concentration, brain development, etc. Fad diets aimed at building muscle or losing weight often do not provide us with a balance of nutrients that our bodies need.
- Diets overwhelmingly fail to help people stay thin. Of those who lose 25 or more pounds, over 95% will gain that weight back and more.⁹ When you lose weight really fast and then gain it back, and then lose it fast again (yo-yo dieting), it puts a lot of stress on your heart and other vital organs.
- FYI: Yo-yo dieting is extremely hard on the body. Yo-yo dieters are twice as likely to develop type II diabetes and cardiovascular disease compared to people who remain fat. Dieting (where the sole motivation is weight loss) starves your mind and body. It has been proven to lead to binge eating, the body's natural response to deprivation, it slows down our metabolism so that the body cannot process nutrients efficiently, and it can lead to many health issues.

How can advertising from the fitness and diet industry negatively impact our wellbeing?

- **The diet industry focuses on making money, not helping people. One of the big ways they do this is to make people question their body and their worth.** They often hire social media influencers and celebrities to talk about their product, without acknowledging the

sponsorship. In reality, most of these people don't use their products off-camera.

- **If the diet industry actually cared about people's health, it would be sending us different messages.** Those messages might be things like beauty is diverse and comes in many body shapes, sizes, and colours. We are all beautiful in our own ways. Health is not only about our outside appearance, but includes many things like the food we eat, the activities we enjoy, the supportive people in our lives, and the way we feel about ourselves.
- **In Canada alone, the diet industry is worth about \$7 billion a year.**¹⁰ On a global scale, it's worth hundreds of billions of dollars. These businesses send us tons of messages through TV, magazines, social media, ads, etc. that tell us that we are not good enough. Their goal is to encourage us to buy their products that will 'fix our problem(s).' What if other industries had a failure rate of 95%?¹¹ Imagine if airplanes only worked 5% of the time? It's unlikely that we would use airplanes as often and the industry would have to change to have a higher success rate.
- The diet industry makes false claims and attacks our self-worth to make us buy their products. They label products as 'healthy' and use social media, commercials, and celebrities to convince us we need their products to feel happy.

How can social media affect the way we see ourselves?

- Social media can negatively impact our self-esteem, particularly if how many likes or views we get motivates us. This can make us question why we didn't get as many likes – "I guess I don't actually look that good, etc."
- People may compare themselves to others (lives and bodies).
- Photoshop and other apps often manipulate images we see in social media.
- On the other hand, sometimes it can make you feel great to post a picture of yourself or your life.
- **Social media also allows us to find other body-accepting communities and people (e.g., body-acceptance, fat-positive communities) that we don't see in regular media.** This can give us control over what kind of media we see.

How can weight loss or muscle gain products be risky for our health?

- **Supplements and weight loss pills have recommended doses that are not usually made for growing/changing teen bodies.** In particular, the impacts of supplements like creatine on developing bodies are unknown. It may have lasting negative effects on bone development. Doctors recommend waiting until you're older before using it.
- **Some products change our moods and our energy levels, and that can get in the way of things we need to do, like sleep, go to school, work, maintain our relationships, etc.**
- If people use anything with the hope of enhancing their performance or changing their body size, are they likely to take only the recommended amount? No. They are likely to use more than the recommended amount. Going above dosage amounts can be dangerous.
- Talked about as natural, but when used without the support of a healthcare provider, steroids such as testosterone may have health risks including blood pressure changes, aggression, heart problems, and infection when injecting
- FYI: Long-term use of creatine has been shown to damage the liver and kidney functions. Using it while the body is still developing (like in the teen years) may affect how the organs might work over time. The medical community does not recommend it.

Weight charts online and in doctors' offices often label people as 'healthy' or 'unhealthy.' What is the problem with this? What are better ways to measure health?

- **Weight charts, like BMI, do not take into account genetics, muscle mass, activity levels, stress, etc. They also don't adjust for taller people or shorter people.**
- **The Body Mass Index was never intended to be a measure of an individual's health, but as a tool for a mathematician to estimate population averages. It was never designed for health.** Doctors only started using it at the insistence of private health insurance companies as a tool for denying people care.¹²

- **Health is about how you feel and how your body works, not about a number on a scale.**
- **Everyone has a natural healthy weight range and body size. Those weights and sizes are different for everyone.** Studies have shown that people can live long and healthy lives at any body size, as long as they are eating nutritious food, caring for themselves, and moving their bodies in ways that feel good for them.¹³
- **Everyone can make healthy choices that include body movement, but that is not about weight loss.** For example, light exercise can sometimes reduce feelings of stress and anxiety without changes in body weight.
- FYI: Having a high BMI has been exaggerated as a risk factor and wrongly considered as a cause of ill health and early death. In 91% of the cases of whether someone is in poor health or not, it has nothing to do with their BMI rating. This means that whether someone is in poor health or not, there is a 9% chance that it might relate to their BMI rating.¹⁴ Someone's BMI rating has very little to do with how healthy they are or will be in the future.

How does racism in the media affect body image?

- **The media affects how we live our lives, how we see other people, and how we think about ourselves.** If we don't see ourselves represented, then we may start to question if we matter. If we only see stereotypes of groups, then we may start to believe and act on them.
- Western media focuses on people with lighter or white skin and features. This informs the beauty standards in our society and teaches us that white skin is what's considered to be 'normal' and other skin colours are 'exotic'. **None of the 'ideals' we see celebrate the diversity of beauty around the world and often exclude people of colour.**
- If there are brown/black people being portrayed in the media, they often have features similar to white people (e.g., lighter skin).
- **These beauty standards are a result of the history of racism on this land (and many others).** People who hold the most power within our society determine the physical characteristics considered to be the most desirable.

- Other cultures have been changing their beauty ideals to follow American/European beauty trends. We see skin-bleaching products being sold, and people of colour trying to prevent their skin from looking its natural colour.
- FYI: Skin-whitening products may make someone's skin look lighter in appearance. These products have shown to be harmful in that they often contain skin-irritating chemicals, including corticosteroids, hydroquinone, and mercury. The British Skin Foundation advises that hydroquinone can cause intense irritation and uneven bleaching of the skin, and mercury can cause increased pigmentation and severe itchy rashes.¹⁵ In 2017, the global skin-lightening industry was worth \$4.8 billion, with a projected growth of \$8.9 billion by 2027.¹⁶

How are fat bodies discriminated against in our society? How can we all be more inclusive?

Why can't people control getting pimples?

Why can restricting or limiting the amounts or types of food you eat be unhealthy?

How can advertising from the fitness and diet industry negatively impact our wellbeing?

How can social media affect the way we see ourselves?

How can weight loss or muscle gain products be risky for our health?

Weight charts online and in doctors' offices often label people as 'healthy' or 'unhealthy.' What is the problem with this? What are better ways to measure health?

How does racism in the media affect body image?

Body Image Action Planning Activity

Recommended Age: 12+

Goal

- To brainstorm ways to feel good about our bodies and combat negative body image.

Have Ready

- Write “How can I feel better about my body?” “How can I help others feel better about their bodies?” on two flipcharts.
- Markers.
- Tape (for posting flipcharts).

Instructions

- Split youth into two groups. Give each group a list. Allow groups about 5-10 minutes to complete the lists.
- Have each group read their list, debriefing as a large group after each list.

Sample Flipcharts

How Can I Feel Better About My Body?

- Give yourself compliments: think about the things you like or enjoy about your body and try not talking to yourself negatively.
- Don't compare your body to others, as we're all unique.
- Eat food you like and that fuels you!
- Hang out with people who love you the way you are.
- Listen to your body! Pay attention to what makes you feel good (eating well, sleeping enough, movement).
- Exercise to feel good, not to lose weight or bulk up.
- Wear clothes you feel good in.
- Be critical of media.
- Refuse to apologize for your body.

- Recognize that our bodies are changing at this age and that's a good thing!
- Don't date anyone who doesn't think you're beautiful.
- Think of your body as the most important tool you will ever use!
- Behave like a person who is confident and comfortable with their body.

Debrief

- Often, youth may write things on the flipchart like: exercise more or eat healthy. Reframe their answers into body-acceptance statements like: move your body in ways that feel good or eat a variety of foods and don't feel guilty for eating a piece of cake.
- This is not a list of things we can do to change what we look like. This is a list to affirm who we are today.
- Encourage youth to try to find things they like about themselves. This is a lifelong process, but is worth the effort, as when we feel good about ourselves and have high self-esteem, it's easier to treat ourselves well and resist harmful messages about our bodies.

How Can I Help Others Feel Better About Their Bodies?

- Compliment people for what they do, as well as how they look.
- Educate yourself and others. Take part in education around body phobia, such as International No Diet Day or doing an info table on fatphobia, eating disorders, or racism in advertising/media.
- Don't judge anyone's looks or compare people's bodies.
- Be a good example. Don't put yourself down.
- Challenge media that tell us only certain body characteristics are beautiful (thin, white, blond, able-bodied, etc.).
- Support companies that are body-positive.
- Challenge body-phobic comments and myths.
- Challenge professionals to avoid assumptions about body size and health.
- When people talk about feeling 'fat', ask them why fat means bad/unattractive.
- Challenge myths about fatness and eating/exercise.
- Shop at stores that carry all sizes.

- Stop supporting the diet industry.
- Support alternative media.
- Create our own media.

Debrief

- Most mainstream media contributes to people feeling negatively about their bodies. Helping ourselves and others feel better about our bodies can start with the activities listed. Ask youth, **“Why is it important to help other people feel good about themselves?”** We are all impacted by body-shaming and fatphobia, and we all have the power to change the current culture by how we act and what we say. When we model body acceptance and challenge fatphobic attitudes, we make it easier for others to feel better about themselves. When people feel better about their bodies, they are better able to take care of themselves.

Additional Activities

Ideally, this activity should be followed by:

- Body Image Boosters

Body Image Boosters

Recommended Age: 12+

Goal

- To brainstorm qualities that help youth feel good about themselves.

Option 1: Body Image Booster

Have Ready

- Body Image Booster handout.
- Pens.

Instructions

- Ask youth to fill out the Body Image Booster (see the following page for copies).
- Give youth the following instructions:
- **1. Think about three things that you like about your body. It can be difficult to think of those things. Are we supposed to like ourselves? Of course! Liking ourselves is incredibly healthy.**
- **2. Write down three of your best personality traits. We all have strengths. Is anyone here a good friend? Think about the things about your personality that you really like, or that make you a good friend, and write them down.**
- **3. Write down a compliment someone gave you that made you feel good. It can be about how you look, or write down something about what's great about you on the inside. You can also write down something you are good at/proud of.**
- **4. Lastly, write down a piece of clothing or accessory that makes you feel good.**

Option 2: I Am: Body Image Booster

Have Ready

- I Am: Body Image Booster handout.
- Pens.

Instructions

- Ask youth to fill out the Body Image Booster (see following page for copies).
- We are exploring the positive qualities that make up who we are as a person. Take a moment to turn this figure into a drawing of yourself by adding basic things like hair, features, clothing, etc.
- Now, list all the qualities, abilities, and roles you have that make up who you are. Fill in the figure with all these positive labels.
Note: If youth need examples, suggest things like I am a good friend or I am creative, etc.

Debrief

- We are all made up of more than how we look on the outside. We all have skills, abilities, and roles that help us in feeling healthy in our bodies, minds, and hearts. **If you are ever feeling down on yourself, it can be helpful to take a moment and reflect on your gifts. If we are struggling to remember the gifts we have, ask someone close, like a friend or family member, as they often know our gifts even when we forget.**

BODY IMAGE BOOSTER

3 things about your body that you enjoy:

3 of your best personality traits:

A compliment you received that made you feel good:

A piece of clothing or an accessory that makes you feel good:

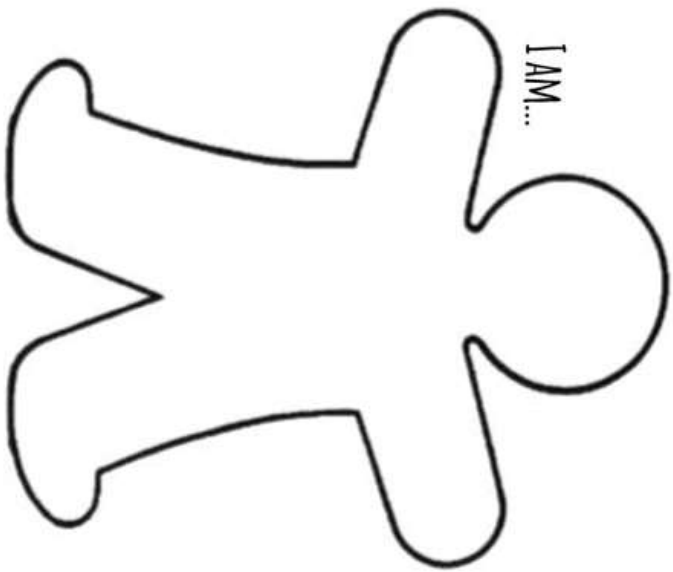
BODY IMAGE BOOSTER

3 things about your body that you enjoy:

3 of your best personality traits:

A compliment you received that made you feel good:

A piece of clothing or an accessory that makes you feel good:



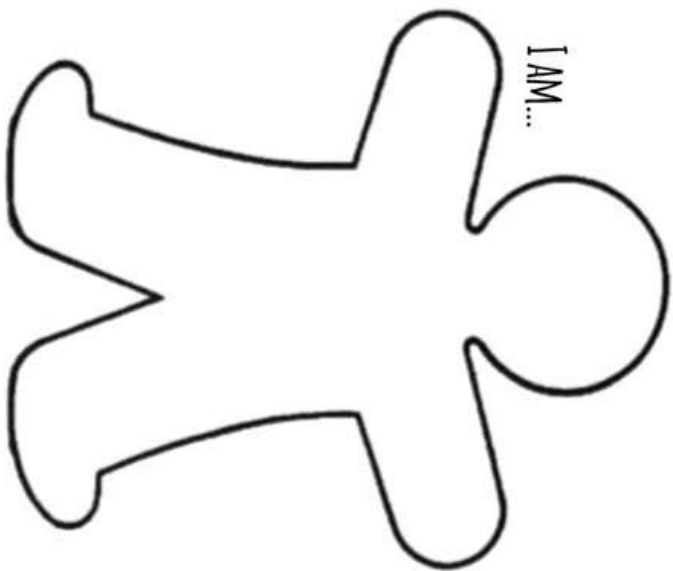
Take a minute to turn this figure into you by drawing in hair, clothes etc.

Now, write all the positive qualities, abilities and roles you have, etc. on and around the drawing.

Some examples could include

A good friend Funny Caregiver Sporty
Creative Reliable Smart Compassionate

You can see how we are much more than just how we look on the outside



Take a minute to turn this figure into you by drawing in hair, clothes etc.

Now, write all the positive qualities, abilities and roles you have, etc. on and around the drawing.

Some examples could include

A good friend Funny Caregiver Sporty
Creative Reliable Smart Compassionate

You can see how we are much more than just how we look on the outside

Appendix: Educational Curriculum Connections

Our curriculum ties to the Manitoba Government learning outcomes. The following language used is not our own. For more information, please visit www.edu.gov.mb.ca/k12/cur/physhlth/

Grade 7

K.4.7.A.3 Explain the benefits of using the decision-making/problem-solving process for making responsible and health-enhancing personal decisions (e.g., prevents impulsive and/or negative decisions, contributes to long-term health...).

K.5.7.E.2b Identify positive ways of coping with daily moods and emotions associated with puberty (e.g., engaging in physical activity, discussing emotions with family/friends/religious leaders, listening to music, laughing, taking part in hobbies, participating in school/community activities, reading books...).

Senior 1-4

K.3.5.B.4 Identify available community supports that promote safety and community health.

11.MH.4 Examine the signs and symptoms of mental-emotional health issues related to stress, anxiety, depression, and eating disorders.
(eating Disorders only)

K.3.S2.B.4 Investigate the contributions self and/or others can make to community/global health and sustainable development

K.4.S1.A.1 Examine personal strengths, values, and strategies for achieving individual success and a positive self-image.

11.MH.2 Examine media influence(s) on self-image and behaviour.

K.4.S2.A.3 Analyze factors that influence personal and or group decisions for action, healthy lifestyles

K.4.S2.A.1 Assess personal attributes and talents across a variety of domains, and assess how each contributes to self-esteem/self-confidence.

S1 5.1.1 discuss factors that influence self concept

S1 5.1.7 define and discuss perception and its influence on oneself and others

S1 5.2.1 analyze information from several sources to determine society's changing perception of beauty

S1 5.2.2 describe unhealthy eating patterns and body-altering substance abuse, e.g., fad dieting, compulsive eating, anorexia and bulimia, steroids

S1 5.1.3 identify behaviours that promote health and wellness

Endnotes

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CHAPTER 10

Diversity and Anti-Oppression Activities

IN THIS CHAPTER

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Defining Oppression¹

Recommended Age: 14+

Goals

- To explain the difference between individual experiences of harm and oppression.

Have Ready

- Flipchart paper and tape or whiteboard.

Instructions

- Draw 3 overlapping circles on the board (see example).
- Write the word Oppression in the middle.
- As you explain each level, add the corresponding word to one of the circles.
- It can help to use an example as you explain, such as fatphobia as a system vs. skinny-shaming of an individual, or racism and why reverse racism isn't a thing.

Debrief

- **When someone is made to feel bad about their differences, this is called discrimination.**
- **When systems create differences in power and access to resources based around differences, this is called oppression.**
- To consider something oppression, it must exist on three levels.
- **First, there is the individual level.** This is a personal interaction and experience. This includes comments, bullying, etc. It hurts and is never okay, but without the next two levels, it is not oppression. E.g., being made fun of because of our body size (fat, skinny, short, etc.).
- **The second level is the ideological level. This is where an idea is deeply embedded into the thoughts and assumptions of a group of people.** Sometimes, so much so that they may not even

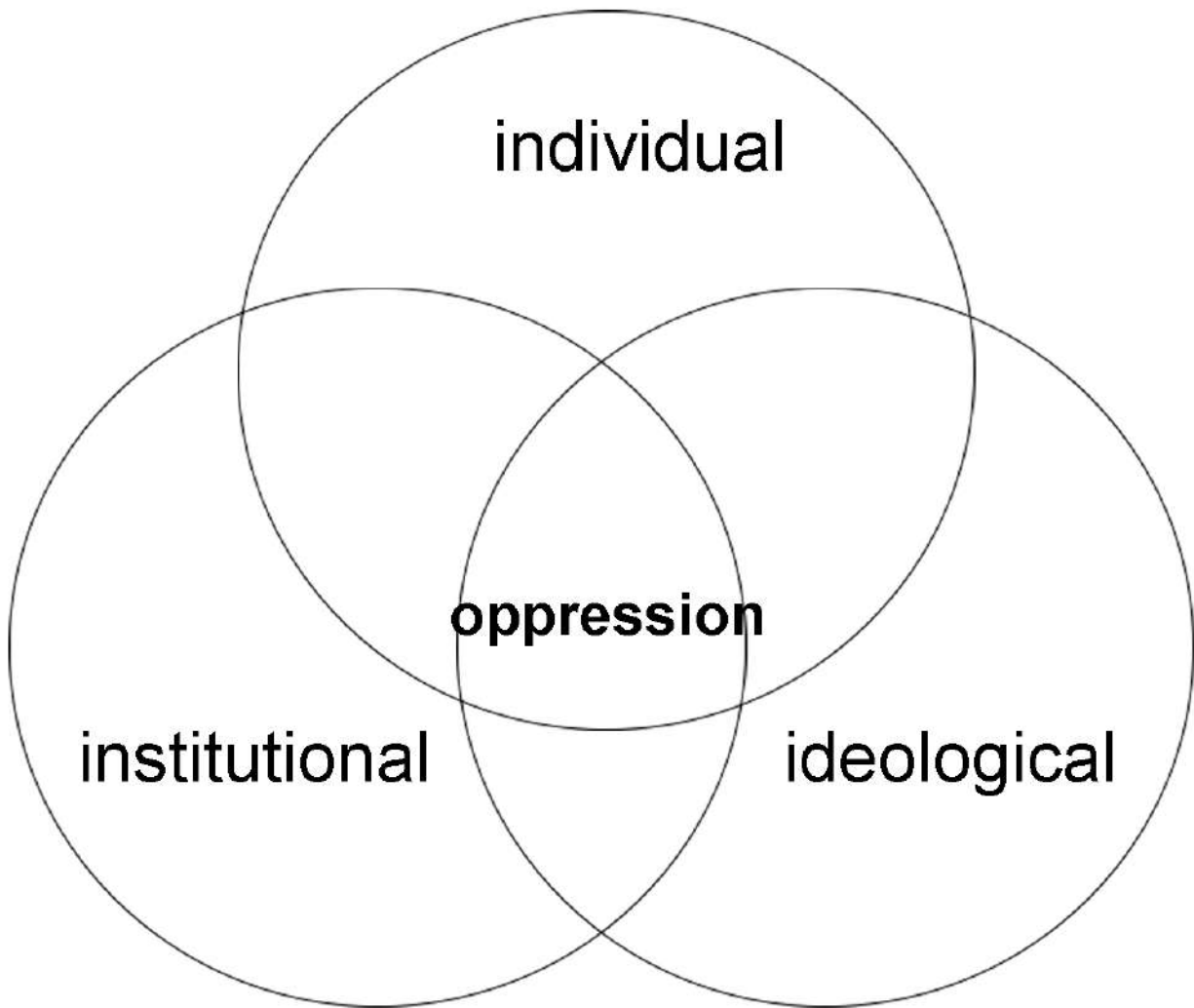
realize it exists or question if it is right. E.g., assuming fat people must be unhealthy.

- **The third level is the institutional level.** This is the level that gets talked about the least, because it can sometimes seem invisible to those with privilege. **This is when the discrimination is built into systems like government, school, the justice system, healthcare, etc.** E.g., when doctors tell fat people they need to lose weight instead of running tests when people come in with a health issue.
- We can all be hurt, in a very real way, on the individual level. **But it's not oppression without all of these levels.**

Additional Activities

Ideally, this activity should be followed by:

- Dispelling Stereotypes Discussion Cards
- Dealing with Discrimination Action Planning



Power Shuffle

Recommended Age: 14+

Goal

- To demonstrate the diversity that exists among all of us, even among peers.
- To reveal how neither our differences nor our similarities are always obvious or visible.
- To explore the feelings, both positive and negative, that can surface when we identify with a particular category or group of people.
- To show that in our society, some differences are accepted and approved of, while other differences are not.

Have Ready

- Statements.

Instructions

- Ideally, this activity should have a minimum of 10 youth. While the co-facilitator must participate with the youth, teachers, instructors, and/or support staff are not to participate.
- Explain to youth that in response to hearing a statement that they identify with, they should silently walk across to the other side of the room. If space is limited or to adapt to physical needs, ask seated participants to stand up or raise a hand to signal identification with a particular statement.
- Let youth know that you recognize not all differences are treated equally. If at any point they do not feel comfortable sharing their connection with a particular group, they do not have to walk.
- Let youth know that we will not be stating every possible difference that they may identify with. Explain this is due to a lack of time, not because we believe one difference to be more important or valuable than another.

- Tell participants that this is a silent activity; talking and laughing can unintentionally make others feel too self-conscious to walk across the room or uncomfortable.

Power Shuffle Statements

- You are of First Nations, Métis, or Inuit heritage (make sure you choose the language they understand). Note: For mostly Indigenous groups: “You are Ininiw/Cree,” “You are Anishinaabe/Ojibway,” “You speak Dene,” “You grew up on reserve,” etc.
- Note: If you are in an Indigenous community, you may choose to skip other global locations and instead focus on statements around language use, ceremonies at home, etc.
- You or your ancestors are from Europe (e.g., England, France, or Germany).
- You or your ancestors are from Asia (e.g., China, India, Korea, the Philippines).
- You or your ancestors are from Africa (e.g., Ethiopia, Nigeria, South Sudan).
- You or your ancestors are from a Central or South American country (e.g., Argentina, El Salvador, Cuba).
- You or your ancestors are from Western Asia/Northern Africa (e.g., Iraq, Egypt, Jordan). Note: Euro-Western worldview calls Western Asia/Northern Africa the Middle East, but this is an inaccurate colonial name.
- You or your parents are newcomers (immigrants or refugees) to this country.
- You were raised by a single parent.
- You or someone close to you identifies as Two-Spirit.
(Define Two-Spirit if necessary: It can mean a person from an Indigenous culture who walks between genders, one who carries the gifts of males and females, or one who is gender unique (not specific to any gender) and/or to identify as 2STLGBQ+.)
- You or someone close to you is lesbian, gay, or bisexual.
- You or someone close to you identify as trans.
(Define trans if necessary: Someone who identifies with a gender other than the one assigned at birth may use the word ‘trans’ to describe their gender.)

- You or someone in your family lives with a physical (dis)ability (e.g., someone uses a wheelchair, or someone lives with a chronic illness).
- You or someone you know lives with a drug or alcohol addiction.
- You were raised poor, or without a lot of money.
- You speak a language other than English at home.
- You identify as or were raised with Indigenous Sacred Ceremonies/Teachings. Note: Only if youth need prompting or have questions mention that this could include the 7 Sacred Teachings, or ceremonies such as Sundance, Sweat Lodge ceremonies.
- You were raised or identify as _____ (Note: Read one at a time, three in total, including Christian.) Christian, Jewish, Muslim, Buddhist, Hindu, Sikh, or were raised without religion.
- You were raised by many people (e.g., grandparents, adopted parents, foster parents, biological parents).
- You have lived outside of _____ (Note: If you're in a city like Winnipeg or Brandon, say that. If you are in a rural community, use the in town/in the country statements below instead.)
- You or someone you know lives with a mental illness (e.g., depression or anxiety).
- **(Last)** You have ever been made fun of because of the way you look (your body size, height, weight, etc. Grade 3 counts!).

Other statements

- You call yourself a black or brown person.
- Your parents are of different ethnic groups (e.g., one is British, one is Korean).
- You live in town (vs. in the country...ideal in rural areas).
- You live in the country (vs. living in town...ideal in rural areas).
- Neither of your parents nor the people who raised you attended university or college.
- Neither of your parents nor the people who raised you completed high school.

Debrief

- **Why do you think we do this activity?** To show that things are valued differently in society, and also to show that, although they might not always be obvious, we also have things in common, even if we are different in other ways.
- **How does it feel to cross the floor?** Was it easier when alone or with others? Why? If someone answers alone: yes, we sometimes feel proud of our differences because it can mean we are unique or special. Easier to walk with others: it can be helpful and powerful to have a community of people with similar experiences and feels less isolating. Our society doesn't always value or celebrate differences. It can really depend on what the difference is whether we'll be treated like it is something to be proud of or something to be ashamed of or even hide.
- **Were any of the statements easier to walk for?** Why? (Validate and normalize their responses.)
- **Which statements were hard to walk for?** Note: Below are three statements that could be addressed. Choose one of the three to debrief, unless there was more than one issue that arose during the activity.
- Why could it be hard to walk for the 'raised poor' question? We live in a culture that often measures success by how much money someone has. Does anyone know the name of the discrimination based on how much money someone has or what their family does for a living? Classism.
- Why might it be difficult to walk for the 'trans' statement or 'Two-Spirit' statement? How are trans people treated in our society? Trans, Two-Spirit, and non-binary people face a particular type of discrimination called transphobia. We know that, especially in school, folks who are trans can often face harassment or even violence.
- Why might it be difficult to walk for the religious statements? Not all religions are valued equally in our society. Some people experience racism based on other people discriminating against their religion or spirituality. People may experience discrimination because of their religious beliefs. For example, Christian holidays are the only ones that everyone has off from school and work.
- FYI: Rates of hate crimes against Muslims have increased by 60% in Canada since 2015. Some of this is attributed to rhetoric around

banning the burqa during the last federal election.² Over the past few years, Bill 60 and 62 were put forward in Quebec, which would prohibit government workers, educators, and healthcare providers from wearing religious symbols. This bill was introduced to target Muslims who wear the burqa, hijab, and niqab, as well as Sikhs who wear turbans.³ This did not include symbols like the cross, as it was deemed to be subtle. In October 2017, Bill 62 passed, banning anyone giving or receiving public services from covering their face.⁴ This statement can also refer to the colonial history of Canada and the imposition of Christianity, particularly upon Indigenous people.

- **Are all differences valued equally in our society?** No, if they were, no one would have a hard time walking for any of the questions.
- **For the statements where no one crossed the floor, does that mean those types of differences don't exist?** No. It shows us those differences are simply not identified in the room with us.

Additional Activities

Ideally, this activity should be followed by:

- Dispelling Stereotypes Discussion Cards
- Dealing with Discrimination Action Planning

Dispelling Stereotypes Discussion Cards

Recommended Age: 14+

Goal

- To allow youth to think about and express their ideas and values.
- To give real-life examples that illustrate discrimination issues.

Have Ready

- Discussion cards. Depending on group size and time, pick 5-6 cards that cover a variety of forms of discrimination.

Instructions

- Hand out cards and ask youth to talk about their card in small groups.
- After a few minutes, bring the classroom back together. Ask each group to read their card and share their thoughts. Ask the rest of the classroom if they agree or have anything to add.
- Each card has a correct answer, key talking point, an example of an experience of privilege, and a suggestion on how to create equity. Build your debrief around what youth share and name the form of discrimination.

Cards and Debrief

Ageism (Note: beginning with this category can assist with 'buy-in.')

- **All young people shoplift. (False: Ageism)**
This is an example of an ageist stereotype directed at young people. Shoplifting is not restricted to youth. Some stores (e.g., clothing stores, grocery stores, convenience stores) that are kept in business largely by youth make youth leave their bags at the front (which older customers don't have to do), only let a limited number of youths in the store at one time, and routinely watch young customers. In our culture, young people (and senior

citizens) are routinely ignored when it comes to decision-making in the community or government. This is not the case in many traditional cultures, where Elders are valued for their experience and youth are welcomed into conversations due to their stake in the future. **Ageism against teenagers is one of the few types of discrimination that people can grow out of, unlike other discrimination that is based on things that don't change, like someone's skin colour, for example.**

Privilege examples: Being able to shop freely. Not having a quota of how many people your age may enter a shop. Not often being followed by security or watched with the assumption that you are going to shoplift based on your age.

Creating equity: Raising awareness of businesses that treat youth unfairly, signing petitions, boycotting (choosing not to purchase things from a company that has practices or values that you find oppressive).

- **Teens can be responsible parents. (True: Ageism)**

People sometimes assume that teen parents are irresponsible for getting pregnant in the first place. However, no birth control is 100% effective, and not all teens are willing to consider adoption or abortion. Some teens become parents because they want a child and think they can do a good job. **What does a baby need to have a happy/good life? Can a teen provide those things?**

Absolutely; however, it could be helpful to have extra support from the people in their lives. Being a parent is a tremendous amount of responsibility. The job of raising a child can be very challenging for anyone, and teens often get less financial or emotional support than some adults due to stigma.

Privilege examples: When adults become pregnant, it is not assumed to be an unplanned pregnancy. Not experiencing as much judgment for becoming pregnant or choosing to parent. Adults are less likely to be assumed to be incapable or bad parents.

Creating safer spaces: Volunteering to babysit for teen parents you know, offering your bus seat to a pregnant teenager or a teen parent with a baby/kids, not judging parents or their kids, a smile shows you are supportive.

Transphobia & Homophobia

- **School can feel unsafe for 2STLGBQ+ people. (True: Homophobia/Transphobia)**
Do you think all 2STLGBQ+ folks feel safe coming out while in school? Is it safe for all 2STLGBQ+ people to be with their partners in school? 2STLGBQ+ people can face physical and verbal abuse. 64% of youth hear homophobic words, including things like ‘that’s gay’ used as an insult daily in school. Do you hear things like this go around at your school? How could this make someone who is 2STLGBQ+ feel? How could this make people who are straight feel? 59% of youth who identify as heterosexual say that this language is upsetting or makes them also feel unsafe.⁵ Most schools have washrooms and changerooms that are divided by gender, which can be difficult for someone who doesn’t identify as male or female. **Everyone has the right to feel safe in school, regardless of their sexual orientation or gender identity. Youth who go to schools with a gender-sexuality alliance (GSA) are much more likely to agree that their school/community is supportive of 2STLGBQ+ people, are much more likely to feel supported in coming out, and are much less likely to see their school as homophobic. Privilege examples:** Being able to access spaces like bathrooms, changerooms, etc. without having to worry about if you are welcome to use that space based on your gender identity. Not experiencing discrimination or harassment based on your gender identity or sexual orientation/attraction. Having the assumption that your gender identity and sexual orientation is ‘the default.’ **Creating equity:** Joining/creating a GSA to learn about and teach others about homophobia/transphobia and how to stop it. Being aware of your own language (e.g., don’t assume the gender of the person someone is dating). Finding a way to support folks who are 2STLGBQ+ if they are being bullied (check in with them, talk to an adult you trust, let the person who is being homophobic know that their behaviour is not cool (if safe to do so)).
- **There have always been more than two genders. (True: Colonization/Transphobia)**
In our society, there are often only two genders recognized:

female and male. However, there have always been more than two genders, and many societies and places in the world have acknowledged and celebrated this before, and since, colonization.⁶ There are many ways throughout the world to understand gender diversity. Some examples include Two-Spirit people on this land and Hijra in South Asia. Plus, even beyond just gender, sex itself is not as binary as we talk about. Some folks are intersex, which means a mix of biological sex characteristics. Humans are really complex and diverse; it's one of our strengths.

Privilege examples: Seeing your gender identity reflected in popular culture and media. Not having your gender identity and cultural knowledge around sexuality and gender invalidated. Being able to access spaces like bathrooms, changerooms, etc. without having to worry about if you are welcome to use that space based on your gender identity. Being able to easily access culturally specific knowledge around gender identity. Having the assumption that your gender identity and sexual orientation is 'the default.'

Creating equity: Talking to your school and other places you visit about having 'gender-neutral' bathrooms. Asking people who identify as transgender how they'd like to be addressed instead of just guessing. Learning about the history of colonization and its effects on gender identity.

- **2STLGBQ+ people can be good parents. (True: Homophobia/Heterosexism)**

Children require love and support, which can be provided no matter what someone's sexual orientation is. There is no proof that having a 2STLGBQ+ family causes any child to be confused or to have any less of a healthy childhood. Those beliefs are rooted in homophobia. **How might kids of 2STLGBQ+ parents be treated at school?**

(Note: If they say that the kids will be teased, mention that if kids are picked on because they come from a 2STLGBQ+ home, this isn't the parents' or the kids' fault. It's the people who are doing the bullying who make the choice to hurt someone because of who that person's parents are, and that is not okay.)

Privilege examples: Having parenting and pregnancy information and resources applicable to your gender identity and

sexual orientation/attraction. Not having your parenting skills questioned or attacked based on your gender identity or sexual orientation.

Creating equality: Being supportive of people who come from 2STLGBQ+ homes. Joining/creating a gender-sexuality alliance (GSA) to learn about/teach others about homophobia and how to stop it. Being aware of your own language (e.g., don't assume the gender of who someone is dating). Finding a way to support 2STLGBQ+ folks if they are being bullied (check in with them, talk to an adult you trust, let the person who is being homophobic know that their behaviour is not cool (if safe to do so)).

Racism / Xenophobia

- **Canada always welcomes newcomers (immigrants and refugees) from all over the world with open arms. (False: Xenophobia/Racism)**

While our society seems to be excited about newcomers, we are not always making them feel welcome.⁷ Canada often presents itself as a welcoming multicultural nation. While this is an important ideal to strive for, in practice it doesn't really happen. Over the last hundred years, Canada actively blocked non-white immigration through laws that made it difficult, or outright illegal, for folks from places like China and India to immigrate to this land.⁸ While these laws have since been reformed, we still don't recognize people's education unless it's from a Euro-Western institution. Newcomers may deal with racist comments about things like their accent or right to be here. Often, people who do not speak English or have a non-Canadian English accent are treated as lacking in intelligence and/or inferior. This discrimination is called xenophobia.

Privilege examples: Being able to speak your language everywhere. Not constantly being othered through questions like "So, where are you from?" "What kind of food is that?" and comments like "Your food looks strange/smells." or "We speak English here." Not being directly impacted by laws and rhetoric regarding refugees and immigrants. Seeing yourself and your experiences reflected in popular media. The assumption that your accent is a sign of intelligence, as opposed to inferiority.

Creating equity: Looking beyond the cultural norms of the place you are being raised in. Thinking critically about how mainstream media portrays people's countries of origin. Connecting and involving newcomer youth in school activities. Being welcoming and open to learning about other people's cultures and traditions.

- **Police treat people of all skin colours the same. (False: Racism)**

If two groups of teenagers were hanging out in a playground at 10 p.m., one being white and one being Indigenous, which one would be more likely to be checked out by police? We live in a culture where white people have more privilege than Indigenous people or other people of colour because of the racism that has been built into everyday life (systemic racism). In a country like Canada, many of our federal and provincial systems (like government, laws, police forces, etc.) were created by and run mostly by white people. They end up being harder on and providing far less effective service to people who aren't white. We see this with the extremely high rates of missing or murdered Indigenous women in Canada.

(Note: Additional information on the systemic oppression of Indigenous people within Manitoba/Canada can be found in Appendix C.)

There are more Indigenous people in jail than any other group. This doesn't mean that Indigenous people commit more crimes, it means that if police, judges, and lawmakers all assume that a certain part of the population is trouble because of racist ideas that exist in our society, they are going to follow that group more. Police have a better chance at catching a group they are following committing a crime than they would catching the group they aren't watching. This often means people who aren't white get charged more often and are more likely to get longer sentences. The legal system hasn't been effective in promoting the health or safety of Indigenous people.

Privilege examples: Seeing your ancestry/culture reflected in the laws and justice system. Feeling comfortable around/protected by the police. Not being targeted by police based on your culture or ethnic background. Not worrying about police violence.

Creating equity: Educating your friends about racism, educating

yourself on these issues, not laughing or taking part in racist jokes, watching police (Winnipeg cop watch).

Decolonization

- **It is disrespectful to name buildings and roads after people who aided in colonial violence, such as founding Residential Schools. (True: Decolonization/Racism)**
Canada is a nation built on colonization. Many of these people were active supporters and founders of systems of genocide, like Residential Schools, both in Canada and throughout the world. For example, the namesake of Bishop Grandin, the well-known roadway in St. Vital, actively championed the creation of Residential Schools. Cecil Rhodes, whose name is on a school in Winnipeg, helped create apartheid in Africa. Canada's first Prime Minister, John A. MacDonald, has many buildings named after him or statues in parks, but he was vocally against Indigenous people's rights. **How do you think it feels for people to walk into a building, maybe even go to a school every day, that is celebrating someone who used violence to try and eliminate their ancestors?**
Privilege examples: We aren't taught the full stories of some of Canada's founders. We act like they founded a nation on land that wasn't already occupied. We treat people like John A. MacDonalld or Bishop Grandin as heroes, rather than take a deeper look at their actions.
Creating equity: Learn about the real history of the land we now call Canada. Rename buildings, roads, and parks. Move statues to museums so that they become a means of education, rather than celebration.
- **It is disrespectful for sports teams to use stereotypes of Indigenous culture for names, logos, and mascots. (True: Decolonization/Racism)**
The term Eskimo is a racial slur for many Indigenous people. Would the use of racial slurs be acceptable for other groups? **Who owns these teams and who profits from them?** Those with a lot of privilege in our society (rich, white males) generally own sports

teams. In the example of these teams, these owners continue to make money off of logos/mascots that many people find to be racist. Even if images/names used by sports teams are considered by them to be heroic or brave, it's still insulting and not theirs to use. **The fact that these team names still exist today is a clear indication of the existence of racism in our society.**

Privilege examples: Seeing your ethnic or cultural background portrayed in the media and in sports as determined by people who belong to that group. Being able to watch and attend sporting events without seeing racist stereotypes of your culture. Having your voice heard when you are saying that something is harmful.

Creating equity: Not purchasing or wearing major sports teams merchandise that uses Indigenous imagery, visiting changethemascot.org to find out more information and help pressure the owners of these teams to change their team name, acknowledging your privilege and where it comes from, educating your friends about racism, researching the true history of Canada, learning about the land that you work, play, and live on, educating yourself on Indigenous culture, not laughing or taking part in racist jokes.

Ableism

- **It can be challenging for physically (dis)abled people to navigate sidewalks, buildings, and other services. (True: Ableism)**

Our landscapes and services are not always designed to accommodate people living with (dis)abilities. Sidewalks are often uneven or randomly end. Our snow clearing isn't very good and can leave people with mobility (dis)abilities stuck indoors for most of the winter. Transit Plus is expensive, is sometimes only available for doctor's appointments, and is known for sometimes making people wait hours to get picked up or dropped off. Smaller communities don't even offer these services. Buildings, bathrooms, grocery stores, etc. are not always accessible.

Privilege examples: Most spaces being accessible to someone based on them not living with a (dis)ability, including bathrooms, public transit, pathways, music venues, airplanes, and grocery stores.

Creating equity: Holding governments accountable to accessibility laws. Investing in transportation systems. Retrofitting old buildings as much as possible. Designing new buildings with accessibility in mind.

- **People with (dis)abilities have equal access to sexual health support, including condoms, birth control, and education. (False: Ableism)**

Often, people with (dis)abilities, especially those with developmental (dis)abilities are treated as non-sexual beings and assumed to not be sexually active. This is of course not true. We all have sexuality, and this includes (dis)abled people. People with (dis)abilities are not always given information about and supplies they may need for sex because some doctors or caregivers assume that they do not need to know. In other cases, they may be forced to use birth control without consent.

Privilege examples: Accessing information related to relationships and sex through healthcare providers, educators, and caregivers without the assumption that this information is not applicable.

Creating equity: Listening to people with (dis)abilities to find out how you can support them. Not making assumptions about people's sexuality.

Fatphobia

- **People who are fat are discriminated against in today's society. (True: Fatphobia)**

What types of bodies do we often see portrayed in the media? If a fat person is a star, what kind of movie/TV show is it? Comedy.

Are there often fat people in sex scenes? (No.) This is especially true of fat women, an example of both sexism and fatphobia. Fat people are not portrayed with the same diversity of roles and experiences as thin people are. **When we only see groups of people shown in specific roles (e.g., only in comedies), it takes away their humanity and experiences. Does our culture make fun of fat people? Are we as a society scared of being fat? Knowing that the word 'fat' is an insult in our society instead**

of a descriptive term shows that fatphobia exists. These attitudes and remarks then lead to more overt discrimination. Research has repeatedly shown that weight affects teacher evaluations, admissions into higher education, landlord decisions about tenants, and assessments by medical and mental health personnel and employers.⁹ What about the size of clothes in the stores, size of airport seats/movie theatre seats, etc.? Our society sometimes considers discrimination against fat people okay; however, it is never okay to be abusive to someone. It is never okay to monitor other people's bodies or eating habits.

Privilege examples: Being able to find clothing in your size at most stores, seeing your body size reflected in the media, seeing your body size being affirmed as healthy in the media and through healthcare.

Creating equity: Following people on social media who encourage care for all bodies. Not laughing at or making fatphobic jokes. Shopping at and supporting stores that carry clothes in many sizes.

Sexism

- **Girls who have sex are treated the same as guys who have sex. (False: Sexism)**

Girls who have sex are often punished for their sexuality, because in our society, guys are the only group permitted to pursue sexual pleasure. This is a double-standard because both groups are treated differently for the same behaviour and is an example of sexism. It makes it harder for girls to express their sexuality because they don't want to be thought of as less than or looked down on. It is also bad for guys, because they feel pressure to be interested in sex all the time and be a sexual expert.

Privilege examples: Guys receive props for having sex.

Creating equity: We all can treat other people with respect.

Not using the slur 'slut' or other similar words, not judging people for their (assumed) sexual activity, (directed to guys) being respectful of girls/women.

- **Women should be able to wear whatever clothes they want, without experiencing harassment or sexual violence. (True: Sexism)**

No matter what someone is wearing, whether it's short shorts or the hijab, they deserve respect. Sexual assault and harassment are not about sex or what someone is wearing, they are about someone choosing to use violence against someone. **No one ever deserves to be assaulted or harassed.** We live in a society where blaming the victim is common, making it difficult to deal with sexual assault and harassment. The sooner we all believe that everyone is entitled to respect, the sooner we can all work towards ending sexism.

Privilege example: Being able to wear whatever clothing you want without being harassed or objectified, or giving it a second thought. Not hearing comments about your body or clothing.

Creating equity: Not using or joining in when slurs like 'slut' are used, not catcalling women, joining or starting a feminist social media group, rock group, or an anti-violence association at school, raising awareness supporting Denim Day.¹⁰

Additional Activities

Ideally, this activity should be followed by:

- Dealing with Discrimination Action Planning

All young people shoplift.

Teens can be responsible parents.

2STLGBQ+ people can be good parents.

**School can feel unsafe for 2STLGBQ+ people.
(Two-Spirit, Trans, Lesbian, Gay, Bisexual, Queer, +)**

There have always been more than two genders.

Canada always welcomes newcomers (immigrants and refugees) from all over the world with open arms.

Police treat people of all skin colours the same.

It is disrespectful to name buildings and roads after people who aided in colonial violence, such as founding Residential Schools.

It is disrespectful for sports teams to use stereotypes of Indigenous culture for names, logos, and mascots.

It can be challenging for physically (dis)abled people to navigate sidewalks, buildings, and other services.

People with (dis)abilities have equal access to sexual health support, including condoms, birth control, and education.

People who are fat are discriminated against in today's society.

**Girls who have sex are treated the same as guys
who have sex.**

**Women should be able to wear whatever clothes
they want, without experiencing harassment or
sexual violence.**

Dealing with Discrimination Action Planning

Recommended Age: 14+

Goal

- To brainstorm ways to feel good about our bodies and combat negative body image.

Have Ready

- Write: “How can I feel better about my body?” “How can I help others feel better about their bodies?” on two flipcharts.
- Markers.
- Tape (for posting flipcharts).

Instructions

- Split youth into two groups. Give each group a list. Allow groups about 5-10 minutes to complete the lists.
- Have each group read their list, debriefing as a large group after each list.

Sample Flipcharts

How can I deal if I’m experiencing discrimination?

- **Realize it is NOT your fault!**
- **Own your difference. Own your uniqueness. Discover the strength, gifts, and power in it.**
- **Talk to someone you trust about the discrimination you are experiencing.** (Friends, family, caregiver, school counsellor, teacher, crisis lines)
- **Practice self-care** and be kind to yourself. Say encouraging things to yourself like how you would support a friend.
- **Laughing together** with people who have similar experiences can help get you through and can be healing.

- **Know that you are not alone.** There are many supportive groups/organizations out there that help people talk, share, come together, and raise awareness.
- **Learn about people you admire who have experienced the same type of discrimination.**
- **Know who to report abuse/harassment to.** Teachers, guidance counsellors, caregivers, parents, police, supervisors, coaches, etc. Become familiar with your school's anti-bullying/harassment policy.
- **Visit www.needhelpnow.ca for support on how to remove hurtful or bullying images from the internet** (take screenshots if you are planning on reporting them).
- **Use social media to get your voice heard. Start or sign petitions, support or create activist hashtags (e.g., #blacklivesmatter), rally folks together and organize info sessions, protests, gatherings, and celebrations.**
- **Explore your history and culture. Honour your ancestors for what they have overcome.**
- Organize in your school, group, or community. The student council, human rights group, youth night, or start a group where folks can get support, share stories/experiences, access resources, and do fun activities.
- Ask school administrators to make education about respecting differences among people a priority.
- Be politically aware. Vote, write letters, lobby government, speak directly to politicians, organize and/or participate in demonstrations.

Debrief

- **Remember, if you are experiencing discrimination or oppression, it's not your fault.** It comes from people who are ignorant to or fearful of how powerful you truly are. Own your power and connect to others like you.

How can I be an ally?

- **Think about the language you use and stop saying sexist, racist, and homophobic terms, phrases, and behaviours. If you make an insensitive remark, genuinely apologize for it.**
- **Use the privilege you have to help others.** Examples are white people speaking out against racism and not doing racist things; cis-men treating all other genders with respect; cis-gendered people using language that is inclusive of trans, Two-Spirit, and non-binary people; people holding space for people living with disabilities on the bus, in a washroom, in class, in a theatre, etc.; wealthy people choosing to help create opportunities for those with less money.
- **Educate yourself more on these topics (racism, ableism, sexism, decolonization, etc.).**
- **Respect people's pronouns and identities. Ask people what word/name they want to be called by.**
- **Don't laugh at offensive jokes. Challenge them, if you feel safe doing so.**
- **Learn about the history of the Land you live on or are visiting.**
- **Organize or attend awareness-building events.**
- **Don't judge people for their (assumed) sexual activity.**
- **Be politically aware** (e.g., vote, get involved in a party, lobby government, speak directly to politicians, organize and/or participate in demonstrations).
- **Start or join a gender-sexuality alliance.**
- **Don't like or share memes, jokes, and images that are discriminatory. Instead, you can report them.**
- **Get involved in already existing groups and work together to raise awareness about discrimination** (student council, human rights groups).
- **Join or start an anti-oppressive social media account, book club, rock group, or an anti-violence association at school.**
- **Learn about new ideas and trying something new.**
- **Learn a language other than English.**
- **Listen to people living with (dis)abilities to find out how you can support them.**

- Challenge people's fatphobic comments: don't apologize for your body/don't use 'fat' as a four-letter word.

Debrief

- **You don't have to organize big things. Making a difference can be as small as not laughing at a discriminatory joke or making an effort to understand/befriend someone different from you.** Each 'action' you come up with is important.
- These actions exist on a continuum and can vary between not laughing at an inappropriate joke (personal action on one end) to going to a demonstration (political action on the other end).

Appendix: Educational Curriculum Connections

Our curriculum ties to the Manitoba Government learning outcomes. The following language used is not our own. For more information, please visit www.edu.gov.mb.ca/k12/cur/physhlth/

Senior 1-4

K.3.5.B.4 Identify available community supports that promote safety and community health.

K.3.S2.B.4 Investigate the contributions self and/or others can make to community/global health and sustainable development

K.4.S1.B.2b Identify appropriate social behaviours (e.g., use inclusive language, treat others with respect...) for developing meaningful interpersonal relationships.

S1 4.1.3 identify and discuss harmful communication patterns (e.g., bullying, verbal abuse, harassment) and recommend methods of improving communication

S1 6.2.1 identify issues facing families/self in a multicultural and global society, e.g., sexual tolerance, religious tolerance, racial tolerance

9 & 10-S-105 Recognize and take a stand against discriminatory practices and behaviours.

9-S-301 Analyze the context of events, accounts, ideas, and interpretations.

10 S-303 Reconsider personal assumptions based on new information and ideas.

9-S-308 Evaluate information from a variety of sources to determine reliability, validity, authenticity, and perspective.

9 & 10-S-400 Listen to others to understand their perspectives.

9& 10-S-401 Use language that is respectful of human diversity.

9 & 10-S-402 Express informed and reasoned opinions.

9 & 10-S-404 Elicit, clarify, and respond to questions, ideas, and diverse points of view in discussions

9 & 10-S-405 Articulate their perspectives on issues.

9 & 10-S-406 Debate differing points of view regarding an issue.

9-VI-004 Be willing to consider diverse social and cultural perspectives.

9-S-102 Make decisions that reflect fairness and equality in their interactions with others.

9-S-400 Listen to others to understand their perspectives.

9-S-402 Express informed and reasoned opinions.

10-S-106 Propose options that are inclusive of diverse perspectives.

10-S-107 Make decisions that reflect social responsibility.

10-S-303 Reconsider personal assumptions based on new information and ideas.

9-VP-016 Be sensitive to the impact of majority rule on minorities and marginalized groups

KI-018 Evaluate effects of assimilative policies on cultural and linguistic groups in Canada. Include: Aboriginal residential schools, language laws.

KI-020A Evaluate the influence of mass media and pop culture on Aboriginal identities and cultures.

KI-023 Identify possible ways of addressing social injustices in Canada.

VI-005A Be willing to support the vitality of their First Nations, Inuit, or Métis languages and cultures.

KL-027 Give examples of opportunities and challenges related to First Nations treaties and Aboriginal rights.

VL-006 Respect traditional relationships that Aboriginal peoples of Canada have with the land.

VH-010 Appreciate that knowledge of the past helps to understand the present and prepare for the future.

9.1.4 KI-017 Give examples of ways in which First Nations, Inuit, and Métis peoples are rediscovering their cultures.

KI-018 Evaluate effects of assimilative policies on cultural and linguistic groups in Canada. Include: Aboriginal residential schools, language laws.

KI-018A Evaluate effects of residential schools on their own and other Aboriginal communities.

KI-019 Describe effects of stereotyping and discrimination on individuals, communities, and regions.

KH-030 Describe social and cultural injustices in Canada's past.

KI-023 Identify possible ways of resolving social injustices in Canada.

KL-027 Give examples of opportunities and challenges related to First Nations treaties and Aboriginal rights.

VL-006 Respect traditional relationships that Aboriginal peoples of Canada have with the land.

9-S-102 Make decisions that reflect fairness and equality in their interactions with others.

9-S-105 Recognize and take a stand against discriminatory practices and behaviours.

9-S-301 Analyze the context of events, accounts, ideas, and interpretations.

9-S-307 Propose and defend innovative options or solutions to address issues and problems.

9-S-400 Listen to others to understand their perspectives.

9-S-401 Use language that is respectful of human diversity.

9-S-402 Express informed and reasoned opinions.

9-S-404 Elicit, clarify, and respond to questions, ideas, and diverse points of view in discussions.

9-S-405 Articulate their perspectives on issues.

9-S-406 Debate differing points of view regarding an issue.

9- 1.2.1 Reflect on new understanding in relation to prior knowledge and identify gaps in personal knowledge.

10- 1.2.1 Clarify and shape understanding by assessing connections between new and prior knowledge, ideas, and experiences.

11- 1.2.1 Examine and adjust initial understanding according to new knowledge, ideas, experiences, and responses from others

12- 1.2.1 Explain how new knowledge, ideas, experiences, and perspectives reshape knowledge, ideas, and beliefs.

9- 1.2.2 Review and refine personal viewpoints through reflection, feedback, and self-assessment.

10- 1.2.2 Explain opinions, providing support or reasons; anticipate other viewpoints.

10- S-306 Analyze prejudice, racism, stereotyping, and other forms of bias in the media and other information sources.

9- 1.2.4 Consider diverse opinions, explore ambiguities, and assess whether new information clarifies understanding.

9- 5.2.1 Recognize that differing perspectives and unique reactions enrich understanding.

10-5.2.1 Consider various ideas, evidence, and viewpoints to expand understanding of texts, others, and self

12- 5.2.1 Demonstrate the value of diverse ideas and viewpoints to deepen understanding of texts, others, and self.

10-5.2.1 Recognize that differing perspectives and unique reactions enrich understanding.

10- 5.1.3 Use inclusive language and actions that support people across races, cultures, genders, ages, and abilities.

11- 4.4.3 Demonstrate critical listening and viewing behaviours to understand and respond to presentations in a variety of ways.

12- 1.1.2 Invite diverse and challenging ideas and opinions through a Variety of means to facilitate the re-examination of own ideas and positions.

Endnotes

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- ⁷ The Winnipeg Foundation. *Winnipeg's Vital Signs*. 2017.
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- ⁹ Maine, M. (2000). *Body wars: Making peace with women's bodies. An activist's guide*. Carlsbad, Ca: Gürze Books.
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CHAPTER 11

Communication Skills Activities

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Communication Practice Cards

Recommended Age: 14+

Goals

- To practice assertive communication.
- To reiterate that communication is a practiced skill.

Have Ready

- Discussion cards.

Instructions

- Define three types of communication. **Passive:** Doesn't state their needs or feelings. Gives into others' wants. **Aggressive:** Talks over others. Does not listen or respect the needs of others. Can be intimidating or threatening. **Assertive:** Expresses their own needs, but also listens to the needs of others. Seeks compromises.
- Hand out cards and ask youth to come up with an assertive response to the situation. Explain their thoughts/feelings using 'I' statements and respect responses. Invite youth to act out their card if they'd like, but make this optional.
- After a few minutes, bring the classroom back together. Ask each group to read their card and share their thoughts. Ask the rest of the classroom if they agree or have anything to add.
- Key talking points are below. Build your debrief around what youth share.

Debrief

A friend has texted to say that they are interested in you. You don't share the same feelings. Text them back an answer and explain how you feel.

- There are barriers to having conversations through text. What do they include?

- Is it possible to share how you feel without treating another person badly using the assertive style of communication discussed today?
- Assertive communication means owning your feelings and knowing that you do not have to apologize for them. Respect is being honest about how you feel towards another person.

You and your partner have been dating for a while now. You are thinking about having sex, but want to talk about condoms. Talk with your partner about how you feel.

- Where can someone get information about sexual health, condoms/sex dams, birth control, etc.?
- How could you feel more comfortable with the topic?

Your friend wants you to come to a house party. Normally you'd go, but you've been missing school a lot lately from being out too late and are starting to fall behind. You are realizing you need to cut back on partying. Have a conversation with your friend about this.

- Setting boundaries with people in our life lets them know what your current needs are.
- It can be fun to hang out with friends, but we also need to find a balance between friends and other commitments.
- If partying includes drugs or alcohol, it's also important to give our body breaks, and learn about other ways to stay safer, including knowing your limit, drinking water, and having safe ways home.

You made out with someone you met at a party this past weekend. You want to ask them to go on a date. Message them to see if they'd like to hang out.

- It isn't always easy to talk about being attracted to someone. Talking to a friend or writing out what we want to say first can help.

- When planning a date with someone we don't know very well, it's a good idea to meet somewhere public or with other friends until we feel safe with them.

Lately, your partner has been hinting about sex. Yesterday, they told you that they want to have sex with you. You don't feel ready to have sex. Talk to them about how you are feeling.

- Having a conversation about boundaries (what is/isn't okay) is really important within a relationship.
- It can be difficult to talk about abstinence when there is a lot of pressure to have sex.
- It is important to decide what is right for you and know that your choice deserves to be respected.
- It is our responsibility to deal with our feelings should we feel rejected. We don't have the right to get angry at or try to coerce or make someone feel bad if they are not into us.

You are in a new relationship and your partner has texted asking you to send some sexy pictures. You are comfortable with this, but want to set some boundaries first. Have a conversation about this.

- Negotiating sexual boundaries in a non-face-to-face situation.
- Asking a partner for acceptance, respect, and boundaries can make us feel vulnerable and takes practice.
- If someone wants to send a sexy picture, they need to have consent from the other person. It's not okay to send a sexy picture to someone unless they have given their consent and want to receive it.
- Do not forward or show sexy pictures you have received to other people. This is not consent. It is disrespectful and forwarding them is against the law. Take steps to protect the pictures, and if you don't feel able to do so, delete them.
- If a pic is shared without consent, it is the responsibility and fault of the person who shared it, never the person who sent it. Victim blaming is not okay.
- We are not here to tell you what to do, and we think it is important to talk about the risks. If someone has sent out a sexy

picture and people are gossiping about it or the person is being harassed, this can be really hard. Where could this person get help? (A parent, teacher, guidance counsellor, teen clinic, Sexual Assault Crisis Line (204-786-8631), needhelpnow.ca, phone lines, or even the cops if people keep harassing or pressuring you.)

- Also, with Snapchat the photo is not necessarily gone, as someone can screenshot it.
- Reflect on the risk, but the choice is ours if we decide to send sexy pics or not.
- FYI: The Supreme Court of Canada has laid out exceptions to underage intimate image creation. The law will, generally, not get involved in situations where:
 - Age of consent law is followed
 - Each person consents to the sexual activity being depicted and is aware that the image is being created
 - The image stays private between each person.¹

You and your partner have been dating for a while now and they want to know the code to unlock your phone. You don't feel comfortable with this. Have a conversation with your partner about why you aren't comfortable with this.

The importance of privacy and boundaries:

- Not sharing your code/password isn't so much about trust as it is about safety and respect.
- Dating doesn't mean 'sharing everything', it means understanding and creating boundaries to build a strong relationship.
- In healthy relationships, if people are sharing codes or electronics, respect is in place and nobody's privacy is being invaded.
- If someone is trying to force or pressure you to share your password, that could be a sign of abuse. If you've experienced this, it was not your fault. We'd suggest talking with a trusted adult about this experience, such as a family member, teacher you trust, school counsellor, or a phone line like the Kids Help Phone.

You're interested in someone you met online. They've asked to meet in person. You're thinking about saying yes, but are worried about the risks. What do you tell them?

- Important to not share personal information online such as full name, phone number, address.
- We never truly know who is on the other end, so it can be good to video chat with the person first before meeting them.
- If meeting in person, it is safer to meet in a public place, have someone there, or let someone know where you are going and when you will be back.
- You can also plan a check-in time with someone, where you phone/text them to let them know things are okay.
- Know what tracking and location services you have on your phone, the privacy settings, and how they work to protect yourself.
- It is abusive behaviour if someone does not respect your boundaries.

Your partner asks you to make out and hints they'd like to do more. You're into making out, but don't feel ready to take things any further. Have a conversation with them about this.

- We have a right and responsibility to discuss our expectations before and during any kind of sexual activity.
- It is the partner's responsibility to respect our boundaries. If they try to pressure you after you've said no, this is not okay. Pressuring someone to change their no into a yes is called sexual coercion and is a form of sexual violence. If you've ever experienced this, it was not your fault. Talking with someone you trust can be helpful.
- The Klinik Sexual Assault Crisis Line is another resource that people can call if they need to talk. You can also call the line if you're feeling upset or unsure about an experience. It is open 24/7 and free to call from anywhere in Manitoba. Their phone number is 1.888.292.7565 or 204.786.8631.

A friend has texted to say that they are interested in you. You don't share the same feelings.

Text them back an answer and explain how you feel.



You and your partner have been dating for a while now. You are thinking about having sex, but want to talk about condoms.

Talk with your partner about how you feel.



Your friend wants you to come to a house party. Normally you'd go, but you've been missing school a lot lately from being out too late and are starting to fall behind. You are realizing you need to cut back on partying.

Have a conversation with your friend about this.



You made out with someone you met at a party this past weekend. You want to ask them to go on a date.

Message them to see if they'd like to hang out.



Lately, your partner has been hinting about sex. Yesterday, they told you that they want to have sex with you. You don't feel ready to have sex.

Talk to them about how you are feeling.



You are in a new relationship and your partner has texted asking you to send some sexy pictures. You are comfortable with this, but want to set some boundaries first.

Have a conversation about this.



You and your partner have been dating for a while now and they want to know the code to unlock your phone. You don't feel comfortable with this.

Have a conversation with your partner about why you aren't comfortable with this.



You're interested in someone you met online. They've asked to meet in person. You're thinking about saying yes, but are worried about the risks.

What do you tell them?



Your partner asks you to make out and hints they'd like to do more. You're into making out, but don't feel ready to take things any further.

Have a conversation with them about this.



Communication Practice Cards for Younger Youth

Recommended Age: 12-13

Goals

- To practice assertive communication.
- To reiterate that communication is a practiced skill.

Have Ready

- Discussion cards.

Instructions

- Define three types of communication. **Passive:** Doesn't state their needs or feelings. Gives into others' wants. **Aggressive:** Talks over others. Does not listen or respect the needs of others. Can be intimidating or threatening. **Assertive:** Expresses their own needs, but also listens to the needs of others. Seeks compromises.
- Hand out cards and ask youth to come up with an assertive response to the situation. Explain their thoughts/feelings using 'I' statements and respect responses. Invite youth to act out their card if they'd like, but make this optional.
- After a few minutes, bring the classroom back together. Ask each group to read their card and share their thoughts. Ask the rest of the classroom if they agree or have anything to add.
- Key talking points are below. Build your debrief around what youth share.

Debrief

Your friends keep messaging you about a girl at your school who made out with someone at a party. You know this is just gossip and could hurt the person's feelings. Tell them you don't like what they're saying.

- Whose business is it if someone chooses to make out/have sex? Their own.

- How can we stop rumours? Don't re-post them or share them; delete posts, tweets, comments, etc. that spread rumours; message the person who is spreading them and tell them it isn't cool; block the person spreading them from commenting; report them to the site itself; tell an adult you trust if the problem continues.

A friend has texted to say that they are interested in you. You don't share the same feelings. Text them back an answer and explain how you feel.

- There are barriers to having conversations through text. What do they include?
- Is it possible to share how you feel without treating another person badly using the assertive style of communication discussed today?

You want to stay out later than usual, but you are normally not allowed. Talk to your parents/caregivers about this. Remember to think about what worries your caregiver may have.

- How could you negotiate possible problems they may have with your idea? Have a plan and information to present to your parent/guardian.
- Make sure the time feels good for both of you. Perhaps in private, when there is more time and when you are not hungry or tired. Practice telling your parent with a friend, mirror, etc.

You really like your crush, but they want to make out more than you do. Explain to them how you feel.

- Having a conversation about boundaries (what is okay and isn't okay) is really important within a relationship.
- It can be difficult to talk about abstinence when there is a lot of pressure to be sexually active.
- It is important to decide what is right for you and know that your choice deserves to be respected.

Your best friend and you are in a fight because you both like the same person. You do not want this to end your friendship. Talk about it.

- Ultimately, it's up to the person you both like if they like either of you back.
- You and your friend both must decide if it's something you are going to let cause problems in your friendship and how to deal with your feelings respectfully.

You have been wanting to hang out with your crush after school. Today is the day you are going to ask them.

- We don't always see this respectfully modeled in media, etc., so it can be tough to figure out how to say this.
- If we tell someone our feelings and listen to their answer, we might not get the answer we want, but we know that we tried, and the other person can feel respected.

You have a big assignment due Monday, but you also have a big hockey tournament to play. If you go to the tournament, you won't be able to finish your assignment. Your coach and team are counting on you to be there, but you must focus on school. Talk to your coach.

- It might be a difficult thing to bring up, since you don't want to miss your tournament or let your team down, but you also don't want to miss your assignment.
- Bringing up your conflict with your coach might mean you can troubleshoot with your coach to figure out a way to do both (e.g., they could talk to your teacher for an extension on your assignment).

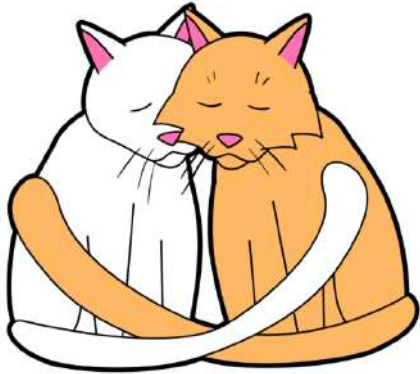


Your friends keep messaging you about a girl at your school who made out with someone at a party. You know this is just gossip and could hurt the person's feelings. Tell them you don't like what they're saying.

A friend has texted to say that they are interested in you. You don't share the same feelings. Text them back an answer and explain how you feel.



You want to stay out later than usual, but you are normally not allowed. Talk to your parents/caregivers about this. Remember to think about what worries your caregiver may have.



You really like your crush, but they want to make out more than you do. Explain to them how you feel.



Your best friend and you are in a fight because you both like the same person. You do not want this to end your friendship. Talk about it.

You have been wanting to hang out with your crush after school. Today is the day you are going to ask them.



You have a big assignment due Monday, but you also have a big hockey tournament to play. If you go to the tournament, you won't be able to finish your assignment. Your coach and team are counting on you to be there, but you must focus on school. Talk to your coach.

“I Have a Secret” Activity

Recommended Age: 12+

Goal

- To help youth build confidence in their ability to be a good listener and support to other youth.

Have Ready

- A half sheet of paper and pen for each participant.

Instructions

- Give everyone a piece of scrap paper and a pen.
- Ask them to think of a secret, something that they would not tell many people or anyone at all about. It can be a secret thought, or be something they may have done. Assure them that they will **not** be asked to write the secret down or tell the secret to anyone. If people find it difficult, tell them to think of something that most people in the room do not know about them.
- Ask the group to think about what it would take to be able to tell someone about their secret. **“What qualities does the other person need to have? What would be a helpful environment/space?”** Now ask them to **write one word, a group of words, or a phrase that explains what they would need in order to feel comfortable talking to someone about it.** Remind them that other people will read this, so they should not write down a personal secret.
- After they are finished writing, have youth stand in a circle, clear of chairs and food.
- Tell everyone to ball up their paper and on the count of 3, everyone throw that paper at each other, and just keep throwing until you tell them to stop (like a snowball fight).
- When you say stop, everyone finds a ‘snowball’ and returns to their spot.

- Go around the group and ask them to read their papers. Write their answers up on a flipchart or board. Record everything, even those answers that imply there is no way the secret could be shared.
- To save time, when a common word like ‘trust’ or ‘non-judgmental’ gets read, you can ask, “How many other people have that one on their sheet?” and put that many checkmarks beside it.
- The list can include: **trust, confidentiality, good listener, understanding, caring, respectful, non-judgmental, private space, quiet space**, acceptance, shared experience, warmth, kindness, friendship, etc. Note: Bolded qualities should be added if not mentioned by youth.

Debrief

- Ask youth, “**What are the most common responses?**”
- “**What could this list also represent?**” Characteristics of a good friend or support person.
- If ‘same experience’ comes up, ask if you have to have had the same experiences in order to be helpful/give resources/etc.
- Notice that words such as expert, certified counsellor, and college graduate are not usually on this list. Stress to youth that they do not have to be these things in order to be helpful. However, referring to a counsellor or other resources is a really important part of supporting someone. Chances are if the things on the list are what we need, then they are also what other youth need.
- Sometimes, people will feel really comfortable telling their secrets, while others are more cautious and private. Both are okay, but extremes on either end can be problematic. Not talking and ‘bottling things up’ can lead to an explosion of emotion, whereas telling everybody everything and having a lack of boundaries can leave us feeling vulnerable.
- Relate the idea of boundaries to being a support person to their friends and peers, such as letting people know when you are able/not able to talk, setting times and places for support (e.g., ‘call me to talk, but not after 10 pm’), and how/when to refer someone elsewhere.

Rumours and Gossip

Recommended Age: 12+

Goals

- To address the multitude of reasons why people would start and spread gossip.
- To unpack the word 'slut' and the result of using the word.

Instructions

- Ask for six volunteers (if it's a smaller group, they can all play) and get them to line up in a straight line.
- Explain the group will play a game called 'Telephone.' I will whisper something into the first person's ear, and they will pass it on to the next person and on and on until (co-facilitator's name, at the end of the line) gets the message. They will say what they hear out loud to everybody. **There is one rule: no repeating the message. You can only whisper it to the other person once, and then they must pass on whatever they heard.**
- You will start the message. Have a co-facilitator, teacher, or other staff stand at the other end of the line and act as the person who says the final message out loud, in case the message has been construed into something offensive.
- Some examples of messages to use are, "Masturbation can be part of a normal and healthy sexuality," "Good communication is part of what makes a healthy relationship work," and "Consent means that both partners are into what's happening."

Debrief

- **What is the telephone game an example of?** Rumours and gossip. **What would have been the best way for me to communicate with (name of co-facilitator)?** Tell them directly.
- **What kind of gossip goes around school?** Who's sleeping with whom, who's pregnant, who got drunk/stoned, who's dealing drugs, name-calling, etc. **Are rumours always accurate?** No.

- **What is the result of spreading rumours?** Puts people at risk by targeting them, can damage self-esteem, and damages relationships (friendships, partnerships).
- **Some rumours tend to go around more about girls and women than they do about boys and men. These are rumours around sex and may include words/labels like slut. This slur is an example of sexism and is violence against women.** It puts all women and girls at risk because it sends the message that it is okay to harm or put girls or women down.
- **When someone is sexually active, whose business is it?** Theirs and their partner's. Often, words like slut are harsh labels put on people, regardless of if they are having sex or not. Either way though, this is no one's business but their own.
- **How men and women get treated differently when they are rumored to be having sex also shows inequality and a double standard.** It also harms boys and men because it puts pressure on them to act hypersexual when, as individuals, they might not be that interested in sex at all. "Is it okay if a guy is not interested in sex?" Yes, of course.
- **One thing we can do to help end violence against women is not call someone hurtful names and educate others who are still using these harmful and untrue terms.**

Listening Exercise

Recommended Age: 12+

Goals

- To illustrate good listening skills.
- To discuss feelings around being listened to and not.

Instructions

- Have youth choose a partner. Have pairs choose a talker and a listener. Ask listening partner to go outside the room with one facilitator.
- Instructions to remaining group: Your partner will come in and sit with you. Talk for 3 minutes about anything: what your future plans are, your favourite TV show, your pets, etc., but nothing too personal.
- Instructions to outside group: When you go in, sit with your partner. They will talk to you for 3 minutes. All they know is that it is their job to talk and yours to listen.
 - First minute: Listen with all of your **best listening** skills.
 - Second minute: Start to **'drift off'** gradually (break eye contact, etc.).
 - Third minute: Keep listening, **but do your best to make it seem like you are paying no attention** (look out the window, flip through your cell, etc.).
- Inform group when each minute has passed. After the three minutes is up, tell the whole group what the instructions were and give them a few seconds for the listener to apologize to the talker.

Debrief

- **“How did it feel to be the talker?” “How did it feel to be the listener?”**
- **“How did the listener listen?” “How did you know they weren’t listening?”** Lack of eye contact, texting, acting distracted, etc. What aspects of a listener make it harder to talk about a

situation? Feeling like you'll be judged, that they aren't interested, that they'll spread what you said, feeling uncomfortable with them, etc.

- **“How did you show you were listening in the beginning?”** Body language, nodding, etc. **“Do most of us communicate in minute 1, minute 2, or minute 3?”** Minute 2. It's okay if we aren't able to give great minute 1 style listening to everyone all the time, but it is important to let others know where you are at. Even being honest and saying you are distracted or that you can't listen as well as they deserve and suggesting meeting another time or referring them to another person, a crisis line, a teen clinic, or a guidance counsellor is a good idea.
- A simple way to improve and build healthy relationships is to give people our first minute attention as much as possible and communicate about it when we aren't able to.

Consent Practice Cards

Recommended Age: 12+

Goals

- To explore the meaning of different consent responses.
- To practice consent.

Have Ready

- Consent cards.

Instructions

- Have the class think of a consent question to practice (e.g., Can I kiss you?).
- Explain that you have a bunch of cards with possible responses to this question. Hand out the cards and go around the room, getting youth to show their card and discuss where the card's example is consent being given or not, and why.

Debrief

- **I'm not ready.**
That's a no. They aren't ready to do this activity.
- **No.**
That's a very clear answer. We must always respect it.
- **I need to go home.**
Sounds like they aren't into it and maybe feel uncomfortable. We have to respect their answer.
- **I guess so?**
The words mean yes, but the question mark seems like they might be hesitant. I'd do a check-in to talk about their feelings.

Remember, consent must always be enthusiastic. If they aren't sure, that means it's a no.

- **I changed my mind.**
Depends on what they first said. People have the right to change their mind. If they said no, and change to a yes without any pressure, then that is a yes. If they said yes, but change their mind and want to stop, that's totally okay too. We have to stop.
- **Sure!**
That's a clear, enthusiastic yes.
- **Yes, please!**
That's a clear, enthusiastic yes.
- **Stop.**
People have the right to change their mind. If someone says stop, always stop.
- **Maybe later.**
That's a no. Could it mean maybe later? Yes. But it could also mean they don't feel comfortable saying no. Either way, we'd have to ask again later to clarify and respect whatever answer they say.
- **Umm.**
Sounds like they aren't sure, so that's a no.
- **(Laughing)**
Sometimes people laugh or giggle when they are nervous. Because they aren't saying yes, it's a no.
- **Uh-huh.**
That's a no.

I'm not ready

No

I need to go home

I guess so?

I changed my mind

Sure!

Yes, please!

Stop

Maybe later

Umm

(Laughing)

Uh-huh

Appendix: Educational Curriculum Connections

Our curriculum ties to the Manitoba Government learning outcomes. The following language used is not our own. For more information, please visit www.edu.gov.mb.ca/k12/cur/physhlth/

Grade 7

K.3.7.B.5b Develop strategies (e.g., conflict-resolution skills...) for avoiding situations (e.g., conflict between parents' and peer values, with the law, in competition, within school...) that can potentially lead to conflict and violence.

K.3.7.B.6a Establish safety guidelines to protect self and others from sexually abusive situations (e.g., pornography, incest, stalking, prostitution, sexual assault...).

K.3.7.B.6b Demonstrate an understanding of skills (i.e., problem solving, conflict resolution, communication, assertiveness, anger management skills) in dealing with case scenarios related to sexually abusive situations and ways to seek help.

K.4.7.B.2a Identify the characteristics (e.g., compliance/ conflict, confidence level, tone of voice, eye contact, body language...) associated with each of the communication styles (e.g., passive, aggressive, assertive...) and leadership qualities (e.g., enthusiasm, presentation skills, reliability, organization...).

K.4.7.B.3a Identify anger-management skills (e.g., use self-statements, participate in physical activities, write letters to express feelings...) as alternatives to aggression and violence.

K.4.7.B.3b Describe how conflict situations (i.e., change, new situations, negative group influences, dishonesty) affect personal behaviour and development (e.g., adapting to new surroundings or routines, making new friends, coping with change, being assertive...).

K.4.7.B.3c Review strategies (e.g., mediation, conflict resolution...), possible outcomes (i.e., win/win, win/lose, lose/win, lose/lose), and behaviours (e.g., compromising, negotiating, accommodating, blaming, avoiding, collaborating, consensus building...) for conflict resolution among friends and/or peers.

K.4.8.B.2b Identify roles and responsibilities (e.g., loyalty, commitment, support, respect, leadership...) in developing positive relationships (e.g., between friends, within families, in a sports team, band/choir...).

Senior 1-4

K.3.5.B.4 Identify available community supports that promote safety and community health.

K.4.S1.B.2b Identify appropriate social behaviours for developing meaningful interpersonal relationships.

K.4.S1.B.3b Examine effects of conflicts and the importance of seeing diverse sides of issues in developing meaningful personal and/ or team relationships.

K.4.S1.B.2a Identify communication skills and strategies that promote team/group dynamics

S.4.S1.A.3 Apply interpersonal skills in case scenarios related to developing close, meaningful relationships

S.4.S2.A.3 Apply communication skills and strategies in case scenarios for getting along with others in a variety of contexts.

S.4.S2.A.5 Apply stress-management strategies and communication skills for stress reduction for self and/ or others in case scenarios related to stressful situations.

K.4.S1.B.2a Identify communication skills and strategies that promote team/group dynamics

K.4.S2.B.2a Evaluate the benefits of effective communication skills for getting along with family, friends, and peers in school, community, and/or the workplace.

S.4.S2.A.3 Apply communication skills and strategies in case scenarios for getting along with others in a variety of contexts

K.4.S2.C.1a Describe the behaviours necessary for providing others with support and promoting emotional health and well-being.

K.4.S1.B.2b Identify appropriate social behaviours for developing meaningful interpersonal relationships.

12.HR.2 Demonstrate understanding of effective communication within a relationship and the potential impact of technology on communication within a relationship.

S1, S4 4.1.1 identify, analyze, and demonstrate effective communication skills to create healthy relationships, e.g., sending a clear message, effective listening, barriers to communication, negotiation, decision making

S1 4.1.3 identify and discuss harmful communication patterns (e.g., bullying, verbal abuse, harassment) and recommend methods of improving communication

S4 4.1.2 analyze how communication skills and techniques contribute positively in the workplace and at home

9- 5.1.1 Recognize the importance of effective communication in working with others.

10-5.1.1 Make and encourage contributions to assist in developing group ideas; take responsibility for developing and expressing viewpoints.

5.1.1 Use language to build and maintain collaborative relationships; take responsibility for respectfully questioning others' viewpoints and requesting further explanation.

12- 5.1.1 Use language to demonstrate flexibility in working with others; encourage differing viewpoints to extend breadth and depth of individual and group thought.

Endnotes

¹ Slane, A. (2013). Sexting and the law in Canada. *The Canadian Journal of Human Sexuality*, 22(3), 117–122.

CHAPTER 12

Additional Activities

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Energizers and Icebreakers

Recommended Age: 10+

Goals

- To build rapport and get to know youth.
- To refocus group by pausing for a body movement activity or game.

Seven Natural Ways of Healing

Instructions

- Ideally, get youth to stand in a circle.
- Use words from the language for the natural ways of healing, if known to you, or ask youth if they know these words in their language.
- Lead by doing or saying the following:
 - **Indigenous knowledge explains there are seven ways of healing that bodies naturally do. Talking, laughing, crying, yawning, shaking, yelling, and sweating.**
 - **Let's try them together!**
 - **Everyone start talking. (Talking can turn into singing easily.)**
 - **Let's try laughing together. Try a nervous laugh, how does that sound? Now, try a deep belly laugh. Great!**
 - **Now, what can crying look like or sound like? Try it, even if it's not for real. Good job!**
 - **Now, let's yawn. We're so tired and need to take air in. Yawn big. See if it's contagious.**
 - **Let's shake ourselves up. Shaking can turn into dancing so easy. Do your best shake or dance.**
 - **Let's all yell Boozhooo! (Greeting in Anishanaabemowin)**
 - **Anybody feel sweaty after all that? That's good. Sweating is another way of changing energy, releasing, and healing.**

Debrief

- **It is important to listen to our bodies because they naturally know what to do to take care of us. When we feel the need to talk to someone, have a good laugh, or cry, we should do it.** We can give ourselves permission to do these things, even if others don't understand. It is part of our healing.
- Sometimes, we find ourselves shaking our leg, yawning, or sweating. These are things we can't really control. Ever try to fight a yawn? It's hard to do. **Our body takes really good care of itself and is connected to all other parts of our health – the mental, emotional, and spiritual.**
- Indigenous knowledge understands the natural ways of healing and they are built into Indigenous ways of life. There is Pow Wow dancing, the Hoop Dance, and the Sundance ceremony. There are healing lodges actually called Sweat Lodges and the Shake Tent ceremony. Talking Circles and Drum groups are common. **There are lots of diverse healing practices Indigenous Nations use throughout Manitoba that incorporate the Seven Natural Ways of Healing.** People are often singing, drumming, dancing, laughing, sweating, yelling, and even yawning and crying as they participate. It is about letting go of what we don't need and calling in the new energy we need to carry on in a healthy way. For information about these Indigenous practices, ask the Medicine People in your community or look for local Indigenous organizations to learn from. See Elder Margaret Lavelle, *Seven Natural Ways of Healing*, on CBC Radio: Unreserved for more information.

Winds of Change Energizer I

Instructions

- Youth stay seated.
- The facilitator says, “The winds of change blow for anyone who... (insert statement here)” and then does an action.
- Everyone who shares that statement stands up, then performs whatever action is called for.
- Then, the facilitator says another statement.

Examples of statements are:

- Has more than 2 siblings - hop on one leg
- Ate cereal today - rub their belly
- Heard a song today - play air guitar
- Has a piercing/new hair cut - make a thumbs up
- Learned something new today - give the person next to you a high five
- Has gone for a bike/boat/skidoo ride - clap your hands
- Is wearing black/white/striped socks - show us
- Has gone hunting/fishing - turn around in a circle
- Makes music - pump your fist
- Plays sports - dribble a basketball
- Runs fast - run on the spot
- Journals - write your name with your finger
- Create your own - create your own

Winds of Change Energizer II

Each person needs a chair for this activity.

- Youth stay seated in the circle.
- One chair is removed and a facilitator stands in the middle of the circle.
- The one standing says a statement that is true for them. “The winds of change blow for anyone who... (insert statement here).”

- Everyone else who that statement is true for then gets up and runs to another chair (ideally, not the chair on either side of them). The last one standing becomes the facilitator and says, “The winds of change blow for anyone who (insert another statement here).”

Examples of statements are:

- Has more than 2 siblings - hop on one leg
- Ate cereal today - rub their belly
- Heard a song today - play air guitar
- Has a piercing/new hair cut - make a thumbs up
- Learned something new today - give the person next to you a high five
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- Journals - write your name with your finger
- Create your own - create your own

Write Your Name Energizer

In this energizer, ask youth to pretend to write their name using various body parts. For example...

- Finger
- Elbow
- Stomach
- Head
- Foot
- Nose
- Bum

Being a Kid Energizer

Contributed by Colby Tootoosis, Activist & Speaker, Poundmaker Cree Nation

Goal

- To allow youth to be a kid and to reaffirm life.

Instructions

The younger youth set the pace and the number of body parts you do.

- Ask youth to stand up.
- Then, read the following and give youth time to make the movements:
 - First, please stretch high like a tree. Sway side to side.
 - Now, make an eagle and fly.
 - Now, roar like a bear and stomp.
 - Now, touch the ground and bless yourself.
 - Now, touch your heart. Tap it and be grateful for all the truth and love in your heart.
 - Now, touch your mind and be grateful for all the thoughts you have. And recognize that you are not your thoughts, you are a spirit.
 - Now, touch your body and be grateful for all the things your body does. You are not your body, you are a spirit.
 - Now, touch your belly and be grateful for all the food the land provides.
 - Now, touch your butt and be grateful because it helps you sit and rest.

Step into the Circle

Contributed by Jessica Danforth and the Native Youth Sexual Health Network

Goal

- To show how much we do and do not have in common.

Instructions

- Explain that you will ask a statement like, “Step into the circle if...” and if what is said applies to them, they step into the circle. Tell them that they do not have to step into the circle if they do not want to let people know their answer to your statement.
- Note: Tailor questions around issues you want to discuss like, “Step into the circle if you have a strategy to deal with stress.” Then step out. Try a new statement like, “Step into the circle if you enjoy spending time in the bush.” Then step out. Also, this activity can even be used as an evaluative tool by asking, “Step into the circle if you learned something new today, or step into the circle if you will share something that you learned today with others.”

Check-Ins & Check-Outs

Recommended Age: 10+

Note to Facilitators

- Anytime you are doing a session with a group of youth, try to include a check-in and check-out. It allows youth to be able to connect with how they are feeling, encourages them to share how they are doing, and allows them to practice listening to the feelings of others. For people working with youth, check-ins/outs give you input about how things are going in the session or with the youth.

Sample check-ins and check-outs:

- Have youth say what kind of animal they would be and how they are feeling.
- Have youth say how they are feeling and one thing (activity/person/animal...etc.) that gives them strength.
- Draw how you are feeling: pass out a scrap or half sheet of paper and have youth draw out how they are feeling. It can be a facial expression or anything else. Have youth explain their drawing in a go-around to explain how they are feeling.
- Put a number of objects in the centre of the circle. Have youth pick out an object. Do a go-around where everyone explains how the object represents them today.
- In pairs, youth share with a partner how they are feeling for one minute. During the go-around, the partner introduces the other person and shares how they are doing.
- Ask youth to share how they are feeling and their idea of a dream date. This should not be an actual date they have had. (Well suited when talking about relationships.)

Compliment Check-In/Out

- Have youth write a compliment they have been given, heard someone else get, or would like to hear someone say to them, without writing their name or anyone else's. Remind them that it can be a compliment about their inside (personality) or outside.
- When they have all finished writing, pass around a small box or a bag as the check-in object. Have them crumple up their paper. When it is their turn, have them put their paper in the box or bag and say how they are doing today. (Facilitators keep the paper balls for the check-out.)
- At check-out, pass the box of compliments around as the check-out object. When it is their turn, have youth choose a paper ball from the box or bag, and read the compliment out loud to the group and share how they are feeling. *Note: If you are not sure the messages are appropriate, go through them before the check-out.*

Yarn Web Friendship Connections Check-Out

For this activity, you will need a ball of yarn or ribbon.

- Youth sit together in a large circle.
- Ask participants to “think of something you would like to remember about your experiences with this group. This can be a favourite memory or what you found most valuable about this session.”
- Begin the activity with the facilitator holding the yarn. While holding one end of the yarn, roll or throw the yarn ball to someone else for them to share their favourite memory/most valuable thing about the session.
- Tell them to hold onto the yarn and roll the yarn ball to someone else, who will be next to share.
- Continue doing this until everyone has had a turn and the ‘friendship web’ is complete.
- Ask youth to “hold the yarn with some space between both hands, and hold that position.”
- The facilitator walks around the circle and cuts the yarn between their hands. Ask youth to “hold up your right hand and let go of

your left. Now, everyone can take their piece of yarn away with **them.**" Note: Sometimes, there are still two people holding one piece of yarn; just ask one of them to drop an end, as there is another piece on the floor in the middle of the circle.

Anonymous Question Box

Recommended Age: 10+

Goal

- To educate youth and answer their questions.

Have Ready

- Question box (a decorated shoe/tissue box).
- Pieces of paper.
- Pens.
- Note: Can be run with a group or in a school setting where the box can be left in a common space, like near the office, and answered over the PA system with the announcements, or answers can be posted in a common area.

Instructions

- Hand each youth a pen and paper.
- Ask youth to think of questions they have on any of the topics we covered.
- Tell them to please write their question(s) down and put it in the box. Let them know they do not put their name on it.
- If they do not have a question, they can just say hi, but everyone needs to write something.
- Let them know when you will answer the questions in the front of the group. Note: It can be helpful to leave a bit of time between asking the questions and answering the questions in front of the group, in case you need to research, consult, or figure out some answers.
- Note: Inappropriate questions can arise. Teen Talk tries to turn every question, even if it might seem like a joke, into a learning opportunity and to never shame or judge the question. There may be instances where questions need to be edited, so use your judgment.

Sample Answers

1. *How long should you know someone before having sex with them?*

Everyone gets to decide for themselves when they are ready. No one can decide that for you, and it's different for everyone. Some people choose to wait a certain amount of time or until they are in a relationship or in love. On the other hand, some people choose to have sex with people they just met or they have known for a short while. Again, you get to decide. Being ready for sex usually means that you can have and talk about safer sex with a partner, talk about what you are and are not comfortable with, get tested for STIs/HIV, and ensure that both people feel ready and enthusiastic about having sex (not pressured).

2. *What colour should your genitals be?*

Genitals can come in different colours, like skin colour, and someone might find their genitals are a slightly different shade than other areas of their body. That's perfectly normal! Someone with a vagina might find that it has different shades throughout their monthly cycle. But if a person notices that their genitals are becoming red and itchy, it's a good idea to get it checked out. You can always talk to a doctor or drop by a health centre.

3. *My girlfriend is pregnant and wants to keep it. What can I do to support her?*

Probably the best thing that you can do is be there for her. Ask her what she needs to feel supported or what you can do to help. Maybe make her food or go to appointments with her, if she wants that. Pregnancies can be stressful. Having a good support system when you are pregnant can make a big difference. In terms of drug and alcohol use, it's helpful to not drink when she is around and make sure you aren't encouraging her to drink. You can go to a health centre to get more info about healthy pregnancies and being supportive.

4. *What does a healthy relationship look like?*

Great question! Some qualities of a healthy relationship can be found right here. You can make your own list of what you would want in a healthy

relationship (communication, trust, attraction, fun, no abuse, honesty, etc.).
You have a right to expect, and work on giving, a healthy relationship!

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Grade 7

These activities may contribute to Education Curriculum Student Specific Learning Outcomes if combined with or focused on topics within curricula.

Senior 1-4

These activities may contribute to Senior 1-4 Education Curriculum Student Specific Learning Outcomes if combined with or focused on topics within curricula.

