



**MILWAUKEE
PUBLIC SCHOOLS**

Human Growth and Development

Fifth Grade

Wellness and Prevention Office

6/19/2015

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**Milwaukee Public Schools
Wellness and Prevention Office**

**Human Growth & Development Curriculum
Fifth Grade Lessons**

OUTLINE

Unit 1 – Relationships

- Lesson 1- Self-Esteem in friendships

Unit 2 – Society & Culture

- Lesson 2-Media Influences*

Unit 3 – Personal Skills

- Lesson 3-Values
- Lesson 4-Values
- Lesson 5-Decision Making

Unit 4 – Human Development

- Lesson 6-Self Esteem
- Lesson 7-Puberty Myths
- Lesson 8-Puberty & Menstruation*
- Lesson 9-Reproductive Anatomy *
- Lesson 10-Gender Roles
- Lesson 11-Sexual Identity & Orientation
- Lesson 12-Human Sexuality*
- Lesson 13-Abstinence, Contraception & Pregnancy 1 day
- Lesson 14- The Cost of Raising Children 1 day
- Lesson 15-Sexually Transmitted Infections (STI) 1 day
- Lesson 16-Sexual Harassment & Abuse 1 day

***Due to the lesson contents and student maturity some lessons need more focused time and attention.**

Milwaukee Public Schools

Wellness and Prevention Office

INSTRUCTIONS FOR ASSESSMENT COMPLETION

- Please use the attached Assessment Tracking Form; make copies for yourself as needed
- Each grade level of the HGD course has a pre and post assessment and two additional assessments/quizzes that could be used for formative or summative assessments.
- The Assessment Tracking Form should be submitted to your school principal.

AD= ADVANCED: Student performs this task at an advanced level and is significantly above the standard

PR= PROFICIENT: Student performs this task confidently and consistently and meets the standard

BA= BASIC: Student is improving in this skill or behavior; however they are below the standard

MI= MINIMAL: Student is beginning to develop in this skill or behavior; however they are significantly below the standard.

Fifth Grade HGD		Pre-Assessment	Post-Assessment	Assessment/Quiz 1	Assessment/Quiz 2
School Name: _____	Teacher Name: _____				
# students _____					
1.					
2.					
3.					
4.					
5.					
6.					
7.					
8.					
9.					
10.					
11.					
12.					
13.					
14.					
15.					
16.					
17.					
18.					
19.					
20.					
21.					

AD= ADVANCED: Student performs this task at an advanced level and is significantly above the standard

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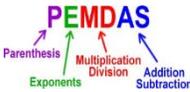
Fifth Grade HGD				
School Name: _____	Pre-Assessment	Post-Assessment	Assessment/Quiz 1	Assessment/Quiz 2
Teacher Name: _____				
# students _____				
1.				
2.				
3.				
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3rd -5th Grade Instructions for Accommodations and Modifications

It is our responsibility as educators to ensure that students have access to the curriculum or information that we present as well as a way to demonstrate their understanding.

It is important to realize that this may look different for some students.

<p>Accommodations for students with disabilities would include, but are not limited to:</p> <p>Directions: Accommodations are for clarification of directions and are separate from accommodations for test items. (Examples: Sign language for directions, explain or clarify directions, etc.)</p> <p>Content Presentation: Accommodations allow an assessment to be given to a student in a different format or mode of access that may be auditory, multi-sensory, tactile, or visual. (Examples: Large-print, audio recording, Braille, etc.)</p> <p>Response: Accommodations allow a student to respond to each test item or organize work using an assistive device. (Example: Student responds orally to a scribe who documents the student's answers, use of a graphic organizer, etc.)</p> <p>Setting: Accommodations allow a student to take an assessment in a different location or environment than the rest of his or her class. (Example: Individual testing, student stands or moves during testing, etc.)</p> <p>Timing/Scheduling: Accommodations increase the allowable length of time to complete an assessment or change the way the time is organized. (Example Extra time, testing across multiple days, etc.)</p>
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Examples of areas of concern:	Possible methods of addressing those needs:
<p><u>Reading/Writing</u>- Student is having difficulty reading instructions, content and/or completing an activity.</p>	 <ul style="list-style-type: none"> • Provide a Live Scribe Pen with pre-recorded directions and phrases on the worksheets; can also be used for note taking. • Provide letter/sound strips and number lines to support students that have difficulty w/ letter, word and number recognition. • Upload all text to be read to a text reader. • Provide a colored reading viewer to aid in focus, fluency, and overall comprehension. • Create/provide a word box based on some general or key words mentioned during discussions; useful for students that have limited vocabulary and spelling skills. • **Use one of the many tools available on Premier (see document pertaining to using Premier with the HGD Curriculum for more information and details
<p><u>Fine Motor</u> - Student is having difficulty gripping paper, scissors or writing utensils when the task requires drawing, writing or manipulating paper.</p>	 <ul style="list-style-type: none"> • Provide pencil grips. • Use laminated tag board. • Adapted Scissors. • Provide pictures of images that fall in the category to be drawn (varying in size, shape, color). Allow them to cut and paste. • Allow use of tablet to draw with finger. • Speech Recognition Software.
<p><u>Language/Communication</u>- Student is having difficulty verbalizing and/or expressing his thoughts. **Contact speech/language pathologist for more information about this area of need</p>	 <ul style="list-style-type: none"> • Provide student with visual supports to encourage communication • May require a speech output device to aid in communication.

****Note:** These are all tools to support learning that could be used with any student. If a student with a disability requires one of these tools, it becomes assistive technology. Contact the Assistive Technology team via email at atteam@milwaukee.k12.wi.us if you want more information or have questions regarding a student's possible need for assistive technology. The Assistive Technology Website is an excellent resource. Please visit <http://www5.milwaukee.k12.wi.us/dept/at/> or www.mpsmke.com/at for more ideas.

National Health Education Standards

Primary Focus

Standard 4 – Interpersonal Communication

Students will demonstrate the ability to use interpersonal communication skills to enhance health and avoid or reduce health risks.

Secondary Focus

Standard 1 – Core Concepts

Students will comprehend concepts related to health promotion and disease prevention to enhance health.

Standard 2 – Analyzing Influences

Students will analyze the influence of family, peers, culture, media, technology and other factors on health behaviors.

What You Need to Know

In order for students to develop meaningful relationships they must know who they are, feel good about themselves and feel in control of their lives. Students will describe positive characteristics about themselves. While fifth graders may present a front of self-love, many struggle with self-acceptance. Modeling self-acceptance and highlighting the good that you see in each child is helpful.

Materials:

- Handout
- Pen/pencil
- Contemporary songs with the themes of self-love and/or friendship
- CD player

Procedure:

1. Tell the students that today you will look at what it means to be a good friend to yourself. Ask the students the following questions-
 - What happens in friendships if a person doesn't start by liking him or herself?
 - If you do not like yourself, what kind of friendships might you choose?
2. Handout the "Be a Friend to Yourself" worksheet. Ask the students to complete the worksheet while they listen to music about friendships and self-love. Choose contemporary music that has these themes.
3. When the students complete the worksheets discuss:
 - What questions were the hardest to complete?
 - What is the difference between self-love and being self-centered or selfish?
 - What are ways that you can remind yourself of all that is good about you in times when you forget?
4. Assign the parent interview to be completed and brought back to class for further discussion.

Lesson Extensions:

Activities: Create a collage/poster about yourself. Include pictures of your favorite things, activities and people as well as words that describe your positive traits.

Name _____

Be a Friend to Yourself

What do you like most about how you act with others your age?

What do you like most about how you act with your family?

What do you like most about how you care for yourself?

What do you like most about how you look?

What is the best thing that has ever happened to you?

What did you do to make this happen?

What activities do you enjoy that you laugh and feel good about yourself?

What are three things that you bring to the world that make it a better place?

- 1.
- 2.
- 3.

Dear Parent or Guardian,

Your child has an assignment to interview you about what it means to be a friend to yourself and how that impacts your relationships. Please sign your name to this sheet after your child writes your answers the questions.

Thank-you!

What strengths do you bring to a friendship?

Describe a time when you (or someone you know) forgot your (his/her)) value and allowed a relationship to negatively impact you (him/her).

Which of your child's strengths do think are important for them to remember in their relationships?



National Health Education Standards

Primary Focus

Standard 2 – Analyzing Influences

Students will analyze the influence of family, peers, culture, media, technology and other factors on health behaviors.

Secondary Focus

Standard 1 – Core Concepts

Students will comprehend concepts related to health promotion and disease prevention to enhance health.

Standard 6 – Goal Setting

Students will demonstrate the ability to use goal-setting skills to enhance health.

What You Need to Know

Children believe that the entertainment media influences kids their age.

- 66% say they think their peers are influenced by what they see on TV
- 65% say shows like The Simpson’s encourage kids to disrespect their parents
- 62% say that sex on TV shows and movies influences kids to have sex when they are too young

Media has a huge effect on our student’s choices. Students will investigate and discuss media messages and influence of these messages.

Materials

- Student or teacher selected media items (song, magazine with ads, video, etc.) If student are to bring in media, be sure to set a deadline a day or two in advance so that you can review the materials before presenting them to the class.
- DVD player, VCR & TV, other items needed to view/listen to media items.
- “Be a Savvy Consumer” – handout
- Parent letter

Procedures

1. Divide the class into small groups.
2. Distribute 2-3 consumer awareness handouts to each group.
3. Select 2-3 media items for each group to review.
4. Ask students to look at, watch or listen to their media items and fill out a worksheet for each item.
5. After worksheets are complete, bring the group back together for large group discussion.
6. Ask:
 - What kinds of things do songs, ads, television shows try to tell us?
 - Why do they tell us these things?
 - Give an example of positive images of women in media.
 - Give an example of positive images of men in media.
 - Are men treated better in the media than women? Give an example.
 - On your favorite show, do the characters talk about things you talk about with your friends and family? What's different?
 - Can you imagine yourself talking like your favorite character on TV? How are you different from her or him? How are you similar?
 - Do you think the media influences how you think/feel about your body? (Do you feel like you should be skinnier, stronger, more mature looking, etc.?) Why do you think media tries to make you feel like you need to look better or older? (to sell products)

Unit Name: Society and Culture

Lesson Number: 2

Grade Level: 5

“Be a Savvy Consumer” – Media Influences

Milwaukee Public Schools
Human Growth and Development Curriculum



- With what you have learned in this lesson what changes should you make to your use or perception of media? Make a goal to change your use of media for one week.



“Be a Savvy Consumer”

What is the title of your media selection?

The selection is: (choose one)

Music Video Book or Magazine Internet
 TV Movie Other Text

1. What is the message of this selection?
2. What is the appropriate age level for this selection?
3. What feelings did the message give you?
4. Did the message inspire you to take action or want to take action?
5. Was violence part of this selection?
6. Was there a sexual message?
7. Were drugs mentioned in this selection?
8. Conclusions

Unit Name: Society and Culture
Lesson Number: 2
Grade Level: 5
“Be a Savvy Consumer” – Media Influences

Milwaukee Public Schools
Human Growth and Development Curriculum



Dear Parent or Guardian,

The fifth grade class has been discussing how TV, music, movies, the internet and other media influence our thoughts and actions. As you watch TV commercials or listen to music with your child, ask what messages they think the writers are trying to send. Ask:

1. What is the message of this selection?
2. How did the producers want you to feel about yourself?
3. What feelings did the message give you?
3. What action did the message inspire you to take (or want to take)?
4. Did the message inspire healthy thinking and living?

Enjoy your day!

Sincerely,



National Health Education Standards

Primary Focus

Standard 4 – Interpersonal Communication

Students will demonstrate the ability to use interpersonal communication skills to enhance health and avoid or reduce health risks.

Secondary Focus

Standard 1 – Core Concepts

Students will comprehend concepts related to health promotion and disease prevention to enhance health.

Standard 8 - Advocacy

Students will demonstrate the ability to advocate for personal, family and community health.

What You Need to Know

Students will identify values of their own and of others close to them. They will analyze the values of others to determine commonly held values in our society.

Materials

- “Values Chart” Worksheet

Procedures

1. Before class, write a list of values on the board and create a chart for recording student’s answers.

Caring	Fairness	Honesty	Responsibility
Health	Kindness	Sharing	Courage
Friendship	Independence	Integrity	Family
Education	Courtesy	Respect	Faith

2. Discuss the chart with the students to define terms.
3. Distribute the “Values Chart” Worksheet to students. Ask them to write their name in the first box and then two people that they live with or know well in the boxes below their name. Say, “After your name, write down five values that are important to you. Then write down values that you think are important to the other two people. You can use the value list on the board, or add your own.”
4. When the students complete the work sheet. Ask them to chart their answers on the chart you created on the board. Graph their responses. Discuss with the class what seems most important to the class based on the graph.
 - What seems most important to the people in our lives?
 - Do you think your values will change throughout your life and why?
 - Where do you think your values come from?
 - How do your values affect decisions you make?
 - Friendships you have?
 - Choices you make regarding your health?

Homework: Take blank Value Chart and interview the family members values you guessed.

Unit Name: Society and Culture
Lesson Number: 3
Grade Level: 5
“What Seems Important” – Values

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Value Chart

Name	Value 1	Value 2	Value 3	Value 4	Value 5

Unit Name: Personal Skills

Milwaukee Public Schools

Lesson Number: 4

Human Growth and Development Curriculum

Grade Level: 5

“Who Can” – Values

National Health Education Standards

Primary Focus

Standard 5 – Decision Making

Students will demonstrate the ability to use decision-making skills to enhance health.

Secondary Focus

Standard 1 – Core Concepts

Students will comprehend concepts related to health promotion and disease prevention to enhance health.

Standard 7 – Self Management

Students will demonstrate the ability to practice health-enhancing behaviors and avoid or reduce health risks.

What You Need to Know

This activity helps students decide what is appropriate activity between friends, family and others (such as doctor). Students think ahead to situations that will occur in the future and what is acceptable behavior from others.

Materials

- “Who Can” Worksheet

Procedures

5. Hand out the “Who Can?” chart.
6. Discuss the idea of social activities being appropriate in different contexts – like they talked about good touch/bad when they were younger.
7. Start reading the chart together –you can continue as a group, let students do this in smaller cooperative groups or individually. Direct students to put an “X” in the column or columns with which they feel each activity would be appropriate.
8. Encourage students to write comments on the worksheet– these prove to be very important in your discussion process at the end.
9. If students work in small groups or individually, bring them back to a large group discussion when the worksheet is complete.
10. Discuss
 - (If students worked in large or small groups) Did everyone agree on each activity? If not, where did you disagree?
 - What can you say if someone tries to do something with you that is inappropriate? (Have the students role play telling someone to stop or telling another grown up about a situation.)
 - Do you think some of your answers will change as you get older? How?

Unit Name: Personal Skills

Lesson Number: 4

Grade Level: 5

“Who Can” – Values

“Who Can” - Worksheet

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Put an “X” in the column or columns with which you feel each activity would be appropriate. Please add your thoughts in the comment column.

Activity	Family	Friends	Other	Comment
Go Shopping				
Watch TV				
Play Sports				
Work on Projects Together				
Play Together				
Tell Secrets				
Laugh Together				
Comfort Each Other				
Cry in Front Of				
Hug				
Kiss				
Sleep in the Same Room				
Sit on Each Other's Lap				
Give/Receive a back Rub				
Bathe or Shower Together				
Touch in private area				
Be Nude in Front Of				



National Health Education Standards

Primary Focus

Standard 5 – Decision Making

Students will demonstrate the ability to use decision-making skills to enhance health.

Secondary Focus

Standard 1 – Core Concepts

Students will comprehend concepts related to health promotion and disease prevention to enhance health.

Standard 7 – Self Management

Students will demonstrate the ability to practice health-enhancing behaviors and avoid or reduce health risks.

What You Need to Know- lesson objectives

This lesson will review three decision-making styles: inactive, reactive and proactive.

- Inactive- the person fails to make choices. May let others or the situation determine his/her fate.
- Reactive- waits too long to make a decision and may find him/herself in trouble before thinking about what to do.
- Proactive – thinks about possible outcomes and makes decisions before getting into trouble, avoids dangerous situations to begin with.

Through the activities of this lesson, students will practice making proactive decisions.

Once a decision is made, resistance or refusal skills may be necessary. Resistance skills are skills that help a person say “NO” to an action or to leave a situation and can be used to resist negative peer pressure. Rehearsal is the most effective way to insure that students actually use refusal skills as a tool to stay away from risky behaviors.

You will need to clear space in your room or move to a larger area for this 1st optional activity.

Materials

- Decision Making Model – Handout
- Two ropes
- Blindfold
- Four large signs out of construction paper: *No Values, Doesn't Obey Rules, Low Self Esteem, and Lack of Knowledge (optional activity)*
- Large target labeled “RESPONSIBLE DECISION” (or write these words on the chalkboard with a circle around the words) (optional activity)
- A-S-K Refusal Skills – Handout
- Student Evaluation Form – Copy, cut in half, and distribute to students before role plays*
- Parent letter

Procedures

1. Introduce this lesson with the following activity:
 - a. Tell students you are looking for a volunteer who is willing to be blindfolded, spun around and asked to try to reach a target. Select a student volunteer.
 - b. Explain that this student will walk a path to reach an important personal goal or decision. Along the way they will encounter obstacles that require decisions or action. Ask the volunteer to name a goal that he or she has for his or her life. It may help to offer a fill-in-the-blank sentence such as: I will never... or I will try to always...



“The Path to Our Goals” – Decision Making

- c. Explain that the first round of this exercise they are to think of the student volunteered as having no guidelines (no rules for self) for reaching that goal.
 - d. Ask for four volunteers who will hold the label cards and stand in the path of the first volunteer.
 - e. Blindfold the student. Place the other 4 students in the path between the blindfolded volunteer and the target goal. Tell them that they are to read their card loudly if the blindfolded student comes very close to them.
 - f. Spin the student around (Be cautious of safety concerns) and have him/her try to walk toward the target.
 - g. When the blindfolded volunteer runs into a student with a label, the student in the path is to explain who (s)he is- which obstacle they represent.
 - i. No Values- “You don’t have any values. You take what you want and don’t care who you hurt.”
 - ii. Doesn’t Obey Rules- “Just do what feels good- even if you will get in trouble.”
 - iii. Low self-esteem- “You don’t really like yourself anyway, so just do what it takes to please others.”
 - iv. Lack of knowledge- “You don’t have all the information you need to make good choices along the way.”
 - h. After the volunteer has bumped into a few of the students and it is obvious that they are having a hard time reaching the target, have him/her take off the blindfold. Have everyone sit down for discussion.
2. Discuss with the class the types of decision-making. What type of decision-making was involved in this activity? In order to make responsible decisions and reach your goals, it is important to know your values, think ahead about dangerous situations, and know how to get out of any situation that you are uncomfortable with. Ask students how they would handle the obstacles in the skit when they bump into them in life.
 3. Sometimes decisions are hard to make; you know your values, but you don’t want to lose a friend, or you think that you won’t get hurt or in trouble this time.
 4. Hand out the “Decision Making Model”– Say, “This is a tool that we can use to practice making responsible decisions.” Teach the Decision Making Model using the example you chose to use above. Work through the sheet as a class.
 5. After working through the decision making model, set up the activity again. This time, ask for four new volunteers to hold the rope in a straight path to the goal. Have the “label” students stand outside the ropes. Again blindfold one student, but have this student stand inside the ropes and place one hand on each of the two ropes. Say, “The student can use the ropes as ‘guidelines’ to face decisions along the way to the goal.” Discuss some of the students’ personal guidelines they have set that help them towards their goals.
 6. Discuss the difference between the two activities. Apply information learned from this activity to every day life.
 7. Send parent letter home

On the same or next day:

2. Discuss with students that once a decision is made, you may need help to resist negative peer pressure.
3. Explain Resistance skills and distribute the “A-S-K Refusal Skills” Handout.
4. Teach the process to the students.
5. Use the situations listed below (or brainstorm risky situations with the class) to role-play how students would use the “A-S-K Process” to say no.



“The Path to Our Goals” – Decision Making

6. *Use the “student evaluation” to encourage student participation. Distribute prior role plays. After the lesson is over, have students evaluate their participation in the role plays. They may choose to collect or discuss as a class.

Situations

- A friend says to you, “Come over to my house after school. My parents will not be home.” What are some responses? (Encourage “I statements” and the ASK steps.)

Possible responses:

“No, I can’t come over, my parent always calls to see if a parent will be home. If the friend keeps asking- “If you want to show me you are a friend, you’ll respect my decision to stay out of trouble.”

“I would like to have fun with our friends. Let’s find out where they will be.”

- The teacher has asked you and a friend to take something to the office. On the way you both find a five-dollar bill on the floor. Your friend wants to keep it.
- Your friend invites you to ride in a car with his/her older sibling. There are a number of older kids in the car and you would have to sit on someone’s lap.

Lesson Extensions: The following programs is offered by the Children’s Health Education Center. Teen Transitions- Grades 5-6: Through games like "Question Bowl" and "Adolescent Adventure," students explore the responsibilities and exciting changes they'll experience as they become teenagers. This program is facilitated, in part, by peer educators from CHEC’s [Teen Health Crew](#), when available.



The Decision Making Model

1. State the situation that requires a decision - What’s going on?
2. List the possible choices-What are my options? And then consider the consequences-What would happen if...?

Choices → Consequences ↓	1.	2.	3.
Is it safe?			
Is it legal?			
Is it respectful of self and others?			
Does it follow my parent’s guidelines			
Is it healthy?			
How will it affect my future?			

3. Make a decision based on everything you know and act on it. - Choose the best option and do it.
4. Evaluate your decision. - Think about how it turned out. Can something be changed now? Next time?



A-S-K – A process for saying no

A – Ask Questions

Ask questions so you know what you’re getting into. Decide if the situation could lead to trouble. “Trouble” might mean that it’s illegal, dishonest, unhealthy, or dangerous. Watch out for anything that would get you in trouble with the law, your school, your parents or yourself (you would feel badly about having done it.)

S – Say “No”

Say “no” if it’s wrong or it will get you in trouble and give a reason (if you want to.)

OR:

Walk away

Make a joke about it

Ignore it

Flatter your friend

Change the subject

Act shocked

Make an excuse as to why you can’t do it

Don’t be alone in a risky situation

Avoid the situation all together

Think about how much you are worth

Surround yourself with positive peers

K- Know Alternatives – and suggest one of them.



Student Evaluation Form

1. I encouraged others.

Often Sometimes Rarely

2. I felt encouraged by others.

Often Sometimes Rarely

3. I followed directions.

Often Sometimes Rarely

4. I shared my ideas, thoughts and feelings.

Often Sometimes Rarely

5. I responded to other’s ideas, thoughts and feelings.

Often Sometimes Rarely

Student Evaluation Form

1. I encouraged others.

Often Sometimes Rarely

2. I felt encouraged by others.

Often Sometimes Rarely

3. I followed directions.

Often Sometimes Rarely

4. I shared my ideas, thoughts and feelings.

Often Sometimes Rarely

5. I responded to other’s ideas, thoughts and feelings.

Often Sometimes Rarely



No Values

Nothing is important to you.

**Do what you want now, don't think
about what will happen or who will get
hurt.**



Doesn't Obey Rules

**Just do what feels good- even if you get
in trouble!**



Low Self- Esteem

You don't really like yourself anyway, so
just do what it takes to please others.



Lack of Knowledge

**You don't have all the information you
need to make a good choice.**



The Decision Making Model

1. State the situation that requires a decision - What’s going on?
2. List the possible choices - What are my options? And then consider the consequences - What would happen if...?

Choices → Consequences ↓	1.	2.	3.
Is it safe?			
Is it legal?			
Is it respectful of self and others?			
Does it follow my parent’s guidelines			
Is it healthy?			
How will it affect my future?			

3. Make a decision based on everything you know and act on it. - Choose the best option and do it.
4. Evaluate your decision. - Think about how it turned out. Can something be changed now? Next time?



Dear Parent or Guardian,

We have been practicing the use of the decision-making model that children have learned since kindergarten. The model is below and can be used to help you and your child discuss a decision you are facing at home.

The Decision Making Model

- 5. State the situation that requires a decision - What’s going on?
- 6. List the possible choices - What are my options? And then consider the consequences - What would happen if...?

Choices → Consequences ↓	1.	2.	3.
Is it safe?			
Is it legal?			
Is it respectful of self and others?			
Does it follow my parent’s guidelines			
Is it healthy?			
How will it affect my future?			

- 7. Make a decision based on everything you know and act on it. - Choose the best option and do it.
- 8. Evaluate your decision. - Think about how it turned out. Can something be changed now? Next time?



National Health Education Standards

Primary Focus

Standard 8 - Advocacy

Students will demonstrate the ability to advocate for personal, family and community health.

Secondary Focus

Standard 1 – Core Concepts

Students will comprehend concepts related to health promotion and disease prevention to enhance health.

Standard 3 – Accessing Information

Students will demonstrate the ability to access valid health information and products and services to enhance health.

What You Need to Know

This lesson asks the student to consider the changes in his/her life to date and to think about developmental changes to come.

Materials

- “The Future Story of Me” - worksheet

Procedure

1. Tell students that as people grow they change in the way they look. Every day they grow, change, learn new things and are able to do more things. Discuss some of the physical changes. Then discuss some of the changes in what they know and what they can do.
2. Tell students – there have been changes in your lives and there will be many more. Discuss the fact that they will grow into adults with many new rights and responsibilities.
3. Tell students – You can do many more things now than you could when you were a baby. Now you are learning how to do many things that will prepare you for being a teenager and an adult. Discuss as appropriate.
4. Tell students – Today, we are going to write more of the Story about You. You will not know all the answers, but you can predict what life might be like for you when you are older. Write the story about you, and in the boxes you can draw pictures of the future you.

Lesson Extension – ask student to explain the information on one of the following sites

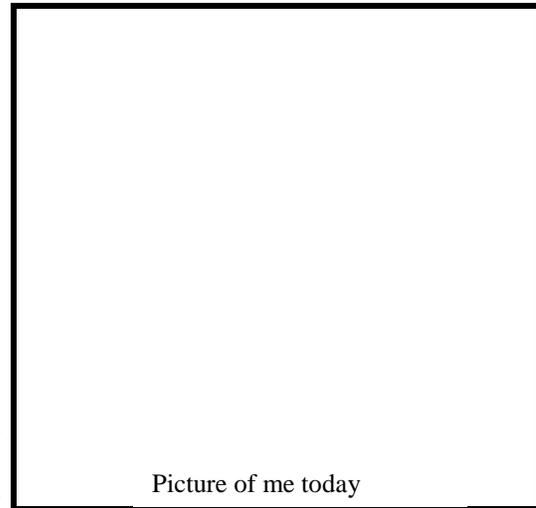
Life Planning Education Websites

- Advocatesforyouth.org
- Teenwite.com
- Pbs.org/inthemix/educators



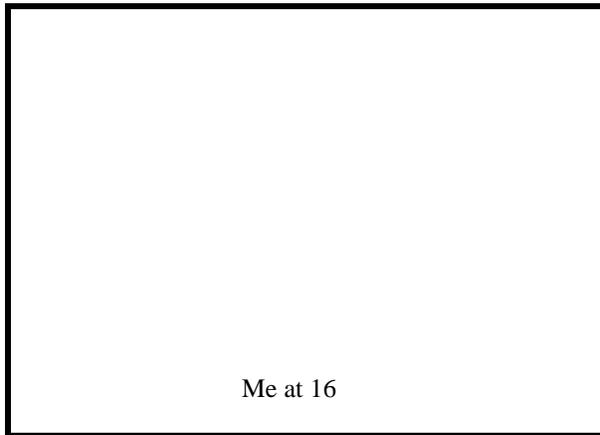
The Future Story of Me by _____

Today, I am _____ years old and
in the _____ grade. I have changed
a lot since I was a baby. In fact, I
have changed a lot since last year.
Here are some things that have
changed _____



Picture of me today

I am really good at some things,
but there are some other things I
need to learn and work on.



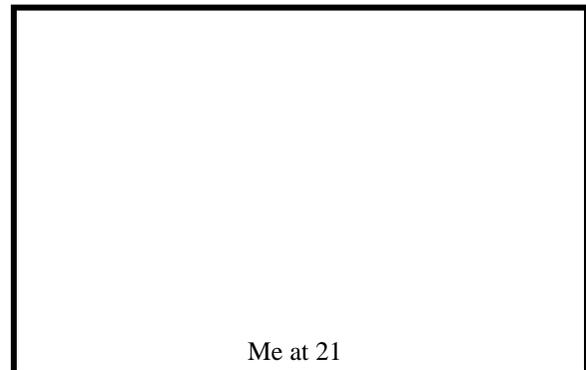
Me at 16

This is what I am good at _____

These are the things I need to
learn and work
on _____

As I get older, I will keep
changing and learning how to
do more things. This is how I
think I will look and what I will
be doing when I am 16 years
old.

When I am 21, I will be an adult.
There will be many things that are
different from my life today. This
is what I think I will look like and
this is what I will know and be
able to do. _____



Me at 21



National Health Education Standards

Primary Focus

Standard 1 – Core Concepts

Students will comprehend concepts related to health promotion and disease prevention to enhance health.

Secondary Focus

Standard 8 - Advocacy

Students will demonstrate the ability to advocate for personal, family and community health.

What you need to know

This lesson should build upon the introductory lesson on Puberty, “The Future Story of Me.” As students start to learn about puberty, myths begin to surface that often confuse and/or complicate the students’ perception of adolescence. This lesson is designed to dispel several myths as well as to generate discussion and decision-making among peers. This would be a good lesson to consider separating students by gender. If you do not, be sure to put students in same sex groups for small group work.

Materials

- “For Real?” worksheet – one copy per student
- Board or flipchart for large group debriefing
- Parent Letter

Procedure

1. Hand out worksheet to students and divide class into groups of 5 or 6 with group being all girls or all boys.
2. Explain to students that the human growth and development unit is designed to explain the facts about puberty. However, it is also designed to ensure that the students gain trust in what they know to be factual about puberty and learn how to get answers for their questions.
3. Each group member has ten minutes to fill out his or her worksheet. When all students in the group are finished, students participate in a 20-minute group discussion about the questions. (All answer #1, explain their decision, then move on to #2, etc.) Students should try to come to consensus as to whether each question is true or false. Group members should be prepared to defend their answers using what they already know about puberty and create a list of questions that the discussions brought up for their group.
4. At the 30-minute mark, each group will designate a person to mark the group’s results on a master list on the board. (Put the numbers 1-12 on the board with room for each group to mark a T or F next to the number.)
5. Discuss myth vs. fact. Explain that if a student feels confused or unsure of a concept that, even though they may feel uncomfortable at first, a trusted adult could help them with such questions. The adult may know the answer or be able to help find it.
6. As a large group, discuss how it felt to agree/disagree with classmates; discuss the significance of making individual decisions, then sharing ideas with peers. How did they decide what was true? Did the right answer always come out through discussion? If not, what influenced the group to choose the wrong answer? What are sources that they would like to have used to get the answers? When students have questions about their bodies, adults whom they trust and who have knowledge about the body are the best people to ask. Friends can cause confusion. Friends can also be helpful. Sometimes it is hard to know if you can trust a friend’s answer to your question. Adults can help.
7. Optional: Have students brainstorm about what they know/have heard about the changes they will face.

Unit Name: Personal Skills

Lesson Number: 7

Grade Level: 5

“Puberty Myths”

Milwaukee Public Schools
Human Growth and Development Curriculum



8. Send Parent Letter home

Lesson extensions

LIFE PLANNING EDUCATION WEBSITES

- Advocatesforyouth.org
- Pbs.org/inthemix/educators



“For Real?”

NAME: _____

Answer the questions by circling T (TRUE) or F (FALSE) after each statement:.

- | | | |
|---|---|---|
| 1. A person can't get pregnant during their period. | T | F |
| 2. Boys usually begin puberty before girls. | T | F |
| 3. Pimples are caused from oily and fatty foods. | T | F |
| 4. It is OK for someone to bathe, swim and play sports when they have their period. | T | F |
| 5. Anyone can have breast growth during puberty. | T | F |
| 6. When you go through puberty, you need to take baths or showers more often. | T | F |
| 7. If someone does not get their period by age 14 they are not normal. | T | F |
| 8. A person can have erections at any age. | T | F |
| 9. Not keeping the genital area clean can lead to infections. | T | F |
| 10. Only boys' voices change during puberty. | T | F |
| 11. Touching your vulva or penis in private is physically harmful. | T | F |
| 12. Tampons are only OK to use if a person is over 18. | T | F |



“For Real?” Answer KEY

Answer the questions by circling T (TRUE) or F (FALSE) after each statement:

- | | | |
|---|----------------------------|----------------------------|
| 1. A person can't get pregnant during their period. | T | <input type="checkbox"/> F |
| 2. Boys usually begin puberty before girls. | T | <input type="checkbox"/> F |
| 3. Pimples are caused from oily and fatty foods. | T | <input type="checkbox"/> F |
| 4. It is OK for someone to bathe, swim and play sports when they have their period. | <input type="checkbox"/> T | F |
| 5. Anyone can have breast growth during puberty. | <input type="checkbox"/> T | F |
| 6. When you go through puberty, you need to take baths or showers more often. | <input type="checkbox"/> T | F |
| 7. If someone does not get their period by age 14 they are not normal. | T | <input type="checkbox"/> F |
| 8. A person can have erections at any age. | <input type="checkbox"/> T | F |
| 9. Not keeping the genital area clean can lead to infections. | <input type="checkbox"/> T | F |
| 10. Only boys' voices change during puberty. | T | <input type="checkbox"/> F |
| 11. Touching your vulva or penis in private is physically harmful. | T | <input type="checkbox"/> F |
| 12. Tampons are only OK to use if a person is over 18. | T | <input type="checkbox"/> F |

Unit Name: Personal Skills

Lesson Number: 7

Grade Level: 5

“Puberty Myths”

Milwaukee Public Schools
Human Growth and Development Curriculum



Dear Parent or Guardian,

Today in class the fifth graders learned facts about puberty as we challenged some myths or false ideas that some people believe. You might want to share some experiences from your own puberty. It is important for your child to know that it is normal to have some discomfort with their changing body. Be sure to share the positive sides of change too like the added responsibility that maturity brings!

In our next lessons we will review the correct medical terms for our reproductive anatomy, consequences of too early sexual activity, and how to make healthy choices in our relationships.

In the process of creating this curriculum, community members were surveyed to get their thoughts on when different aspects of Human Growth and Development should be taught. People surveyed included teachers, parents, school administrators, and religious leaders. There was consensus that the medical terms for body parts should be used in the school setting at all grade levels and by fifth grade students needed to understand reasons that abstinence is the healthiest choice during the teen years.

Our lessons are designed to support you in your role as you guide your child during these times of growth and change. Feel free to call me at any time.

Sincerely,



National Health Education Standards

Primary Focus

Standard 1 – Core Concepts

Students will comprehend concepts related to health promotion and disease prevention to enhance health.

Secondary Focus

Standard 4 – Interpersonal Communication

Students will demonstrate the ability to use interpersonal communication skills to enhance health and avoid or reduce health risks.

What you need to know

The curriculum and video mentioned below are excellent resources that can be ordered from Proctor & Gamble for free. It is highly recommended that you order these kits for your students and use the puberty education materials to teach anatomy, growth & development, menstruation and hygiene. The program is set up so that you can separate the boys and girls or teach the materials in a co-ed setting.

The anatomy pictures are used with permission from the Children’s Health Education Center.

Note that the picture is of an uncircumcised penis. This is an opportunity to explain circumcision.

Materials

- Shoe box with hole in the top to collect question cards
- Index cards – for students to write questions on
- Video – Optional but recommended (see resource below)
- Anatomy charts for the classroom

Procedure

1. We took a look at some of the myths surrounding puberty; today’s lesson will cover the main facts regarding puberty. Our conversation today may cause you to have a lot of questions. Questions that you don’t feel comfortable asking out loud. I will distribute index cards for you to write questions. You do not have to write your name on these cards. At the end of the lesson, I will pass the box around and you may place your card inside. If you don’t have a question, simply write, “No question at this time” and place it in the box.
2. The conversations we have in this room can be shared with your parents but are not for gossip on the playground.
3. Puberty is the time in your life when you start to become an adult. This means a lot of growing and changing - both inside and out. For most girls, puberty generally begins sometime between ages 9-16 and for most boys, ages 10-18.
4. During puberty, your body’s shape begins to change – most girls will develop breasts and hips; most boys, grow taller with broader bodies and more muscles. Hair begins to develop in varying degrees for everyone: pubic hair, underarm hair, leg hair, and, even, facial and body hair. By the time you’ve finished puberty, you will have reached your adult size.
5. A hormone is the name given to a chemical substance produced in our brains that signals things to happen throughout our body. Hormones travel through the blood and begin all these changes I have mentioned. Everyone has both testosterone and estrogen in their bodies, which cause a lot of these changes during puberty.
6. Testosterone will give the testes the signal to begin the production of sperm cells. Testosterone is the hormone that causes most of the changes in the body during puberty for most boys. Sperm cells must be produced for you to have biological children.



7. The ovaries produce hormones that signal changes over many years in all parts of the body too. These changes prepare bodies to be able to someday become pregnant and carry the developing baby inside them until birth. Just as hormones signal the testicles to produce sperm in the testes, they signal the ovaries to release eggs. The following is an explanation of how this occurs. It is called the **Menstrual Cycle (diagram included)**:
- One of the first things to happen in the menstrual cycle is that an egg is released from one of the ovaries. The egg travels from the ovary through the fallopian tube and into the uterus. If an egg meets a sperm on the journey to the uterus, the egg can become fertilized. This fertilized egg moves into the uterus and can then grow into a baby.
 - During most of the menstrual cycle, including when the egg is traveling to the uterus, the uterus is building up a lining of healthy tissue and blood. If the egg that reaches the uterus is fertilized, it will remain there and most likely become a baby. The lining is there to help the baby develop and grow, while staying healthy and comfortable.
 - Most of the time the egg passes through the uterus because it does not get fertilized. If the egg is not fertilized, the built-up lining of blood and tissue is not needed and so it passes out through the vagina each month during the menstrual period. A period usually lasts from 5 to 7 days. But some will have shorter periods - and some will have longer periods. The blood that comes out during a period may seem like a lot of blood, but usually it's not. Most of the time, less than a half-cup is shed during the course of an entire period.
 - After the bleeding from a menstrual period has stopped, the entire cycle begins again. About two weeks into the new cycle, another egg will be released from the ovary. A whole menstrual cycle usually takes about 28 days from one period to the next. But it usually takes a year or two after the first menstrual cycle for you to have regular periods.
 - There are a number of things that can affect the menstrual cycle including exercise and nutrition. Exercising regularly and eating a variety of healthy foods can help you maintain regular menstrual cycles.
8. Unlike the regular monthly release of eggs from the ovaries, sperm is released from the testicles at different times and in response to different stimuli: touching the penis for pleasurable sensations (masturbation), having sex with another person, and sometimes at night when sleeping you may remember having a “sexy” dream or even sometimes for no apparent reason (wet dreams). As the sperm is released from the testicles it travels towards the penis and gathers fluid along the way. This fluid mixes with the sperm and is called semen. When the semen leaves the penis it is called ejaculation.
9. All of these changes may seem like a lot. Some kids say that they would just as soon not change. Others have siblings or friends or cousins who have made the changes of puberty and they want to get on with it! You might find it interesting to ask your parents or another trusted adult how they felt about the changes of puberty before they started going through them. No matter how you feel about it today, every human goes through the changes of puberty. Taking time to talk about it and grow in your understanding of puberty is one way we hope to help you to feel good about being you...at every stage along the way to becoming an adult.

Lesson Extensions: (Highly Recommended)

“Always Changing – About You” instructor’s guide and video. 1-800-543-2108 (Includes lessons on puberty, stages of development, video, worksheets, lesson plans, hygiene)

“Straight Talk – Period”

Playtex offers a free teaching kit about girls’ puberty and menstruation for educators to use with their students. They also offer brochures that can be distributed to students for reference outside the classroom and tampon samples. Playtex, PO Box 15267, Clinton, IA 52732-9367

Unit Name: Personal Skills
Lesson Number: 8
Grade Level: 5
“Puberty & Menstruation”

Milwaukee Public Schools
Human Growth and Development Curriculum



VIDEOS INCLUDED WITH 4TH GRADE TRAININGS:

- **Just Around the Corner for girls**
- **Just Around the Corner for boys**

These videos are the ideal way to present human development information to boys in grades 3-5.

- When to expect the onset of puberty
- The physical and emotional changes of puberty
- The maturation of the male reproductive system
- Common experiences of puberty, including voice change, feelings of physical awkwardness, and nocturnal emissions
- The importance of good hygiene and healthy habits

The following are classes offered at the Children’s Health Education Center. Call (414) 765-9355 to schedule a field trip

Growing Boys: Grades 4-5: In this program just for boys, we address the physical and emotional changes both boys and girls face as they go through puberty. The reproductive system, intercourse and conception are introduced.

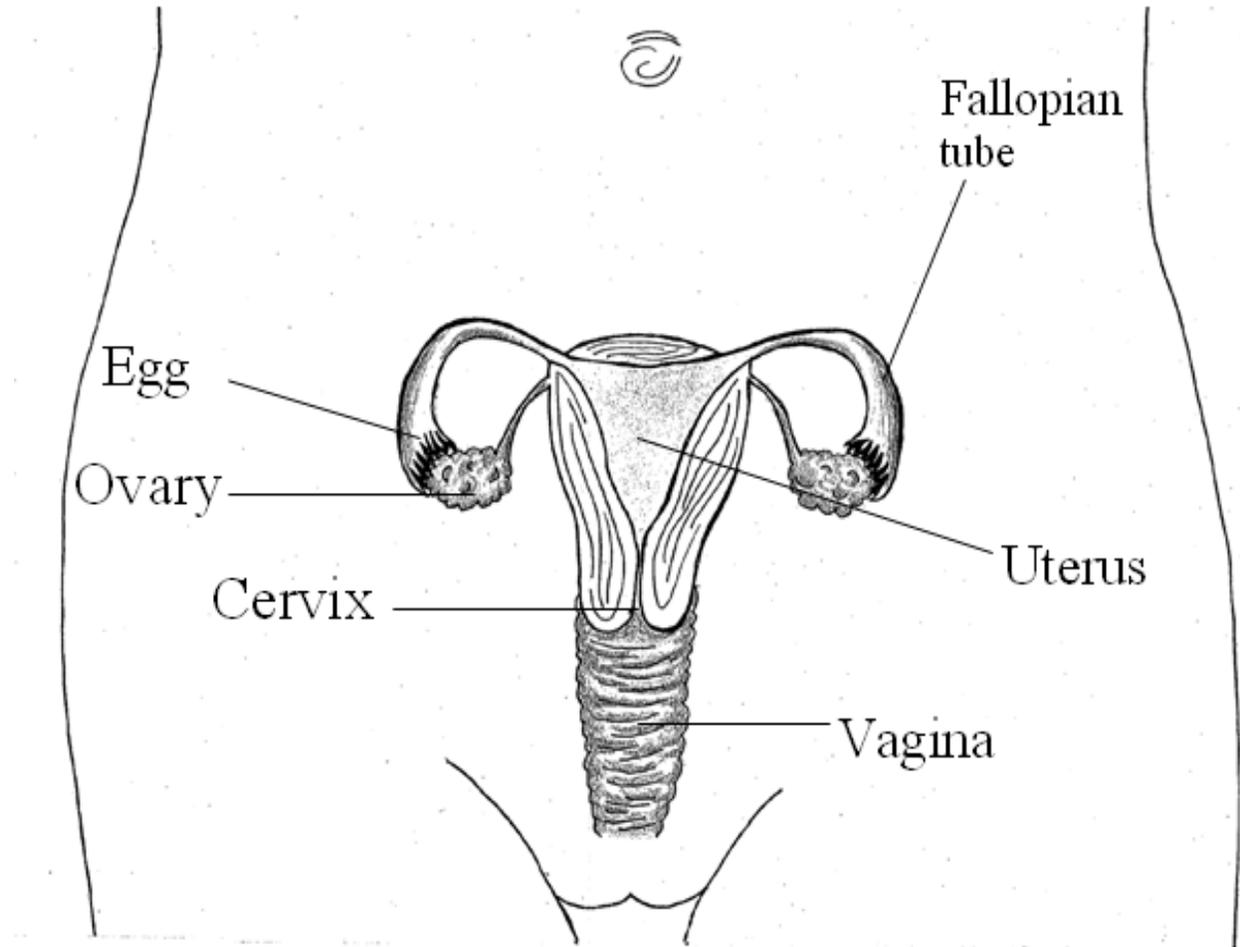
Growing Girls: Grades 4-5: In this program just for girls, we address the physical and emotional changes both girls and boys face as they go through puberty. The reproductive system and intercourse and conception are introduced. Special emphasis is placed on the menstrual cycle and proper hygiene.

Teen Transitions: Grades 5-6: Through games like "Question Bowl" and "Adolescent Adventure," students explore the responsibilities and exciting changes they'll experience as they become teenagers. This program is facilitated, in part, by peer educators from CHEC’s Teen Health Crew, when available.

Link to Kid’s Health Website (kid friendly website)
<http://kidshealth.org/kid/>



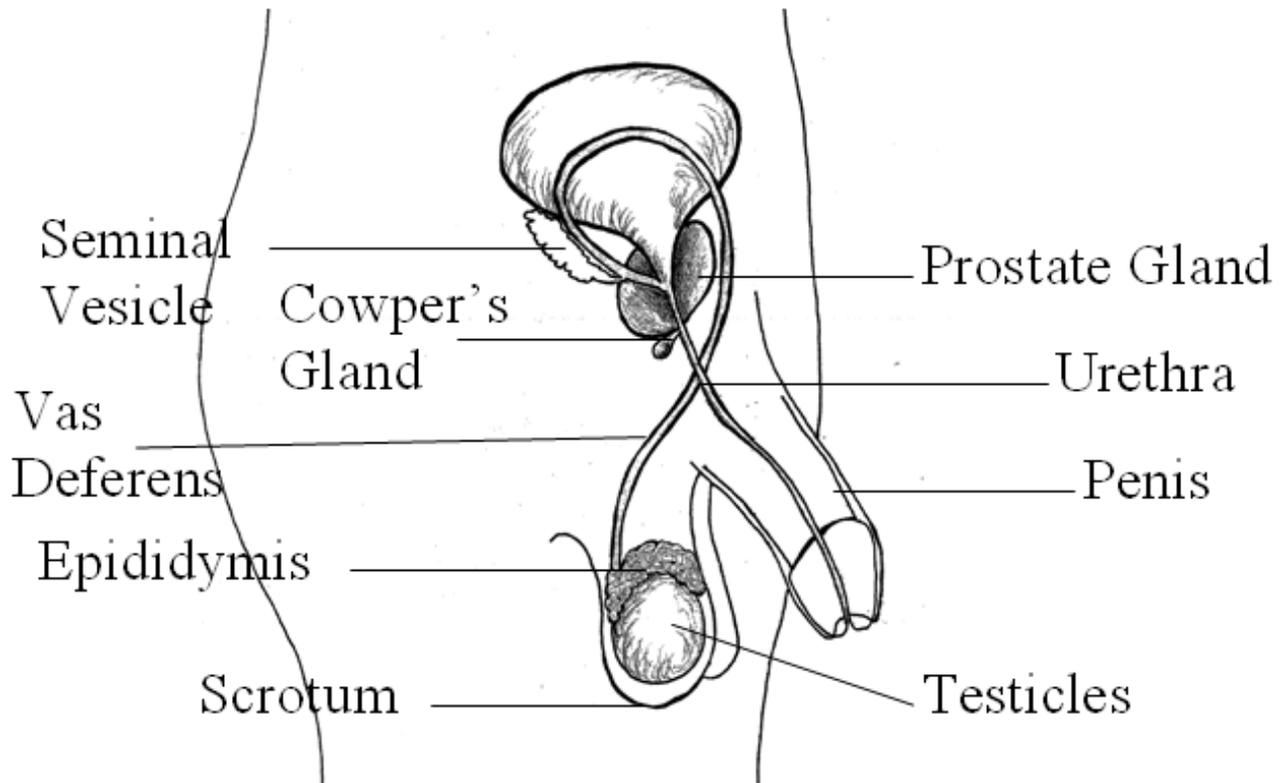
FEMALE



Illustrations created by Margaret Lancelot, 2009



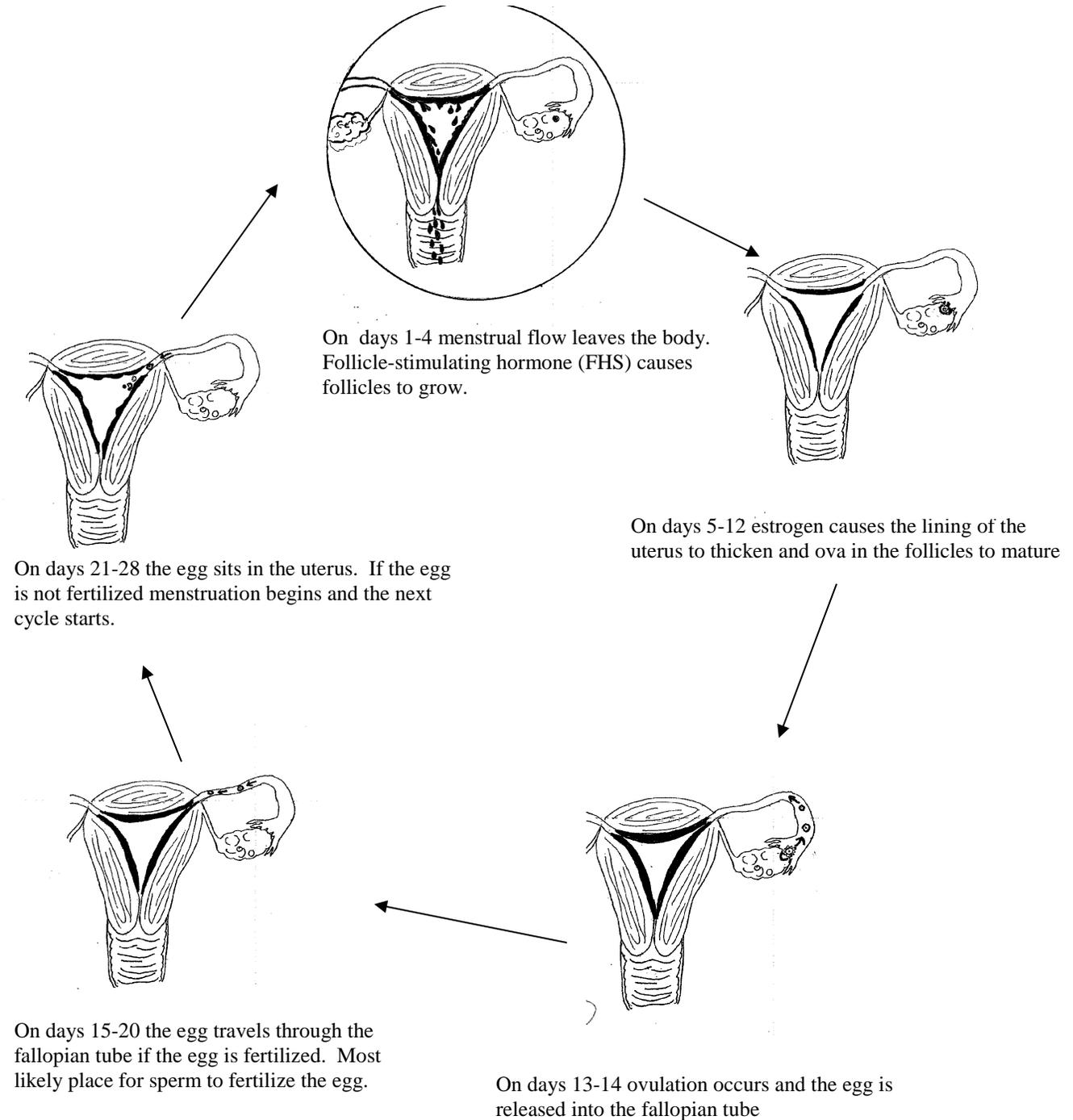
MALE



Illustrations created by Margaret Lancelot, 2009



The Menstrual Cycle



Illustrations created by Margaret Lancelot, 2009



Female Reproductive System Terms

Cervix - The base of the uterus with a small opening between the uterus and vagina.

Clitoris - small sensitive organ at the top of the vulva.

Egg - Also called an ovum; a reproductive cell produced by the ovaries.

Fallopian Tubes – the tubes that extend from near the ovaries to the uterus.

Labia – the folds of skin surrounding the opening of the vagina.

Ovaries – the two almond-shaped glands that produce the egg (ova) and send out hormones.

Urethra - Tube that carries urine from the bladder out of the body.

Uterus – the organ that prepares each month to receive and support a fertilized ovum during pregnancy and to contract during childbirth to help with delivery

Vagina – a muscular passageway that lies between the bladder and the rectum, and it serves as intercourse sex organ, the birth canal, and the passageway for the menstrual flow and the arriving sperm.

Male Reproductive System Terms

Penis – Sex organ; also used to urinate

Prostrate Gland – Gland next to the bottom of the bladder; it forms a fluid that combines with sperm and a fluid from the seminal vesicles to make semen

Scrotum – Sac of skin that holds the testicles, just underneath the penis.

Semen – Also called seminal fluid, it’s a white, milky liquid that carries sperm out of the penis during ejaculation.

Seminal Vesicles - Two glands on either side of the bladder that secrete seminal fluid.

Sperm - Reproductive cells produced by the testes.

Testicles – Also called the testes; two oval-shaped organs that are contained in the scrotum. They produce testosterone (a hormone) and sperm.

Urethra - Tube that carries urine and semen out of the body, but not at the same time.

Vas Deferens – Tubes in which sperm is combined with other fluids from the prostate gland and seminal vesicles to make semen.



National Health Education Standards

Primary Focus

Standard 1 – Core Concepts

Students will comprehend concepts related to health promotion and disease prevention to enhance health.

Secondary Focus

Standard 4 – Interpersonal Communication

Students will demonstrate the ability to use interpersonal communication skills to enhance health and avoid or reduce health risks.

What you need to know

Students are ready to learn about the basics of the human reproductive system. At this level, the classroom teacher should be able to introduce and explain the interior and exterior reproductive systems of males and females. Teachers may refer to the “Always Changing” Program for explanation of the systems. This lesson reinforces learning of the anatomy.

Materials

- Male and female reproductive system pictures from lesson #7 (one copy per student)
- Male and female reproductive system terms from lesson #7 (optional)
- “Match Game” Worksheet

Procedure

DEPENDING ON COMFORT LEVEL, YOU MAY SEPARATE BOYS AND GIRLS FOR THIS LESSON. MANY TEACHERS PREFER THIS, AS STUDENTS WILL BE MORE APT TO ADDRESS QUESTIONS WITH A SAME SEX GROUP.

1. Establish list of classroom ground rules. Remind students of the QUESTION BOX in each session. Address questions as suitable – explain to students that you may not be able to answer all questions, depending on the subject matter.
2. NO SHOCK VALUE QUESTIONS
3. Using worksheets as a guide, explain the path of the egg cell for the females, and the sperm cell for the males. As you do this, the parts of each system will naturally fall in to place. Terms to teach:
 - a. (GIRLS) Ovary, egg cell, fallopian tube, uterus, vagina, urethra, clitoris, labia, anus.
 - b. (BOYS) Scrotum, testicles, vas deferens, prostate gland, urethra, penis, anus
4. GIRLS: explain process of menstruation, sanitary devices, hygiene
5. Following the lesson, hand out “Match Game” worksheet. Each student should be able to match the anatomical term to the appropriate sex.
6. Lesson extensions
 - **It's So Amazing! A Book About Eggs, Sperm, Birth, Babies, and Families**
Robie Harris (parent resource)
 - **Just Around the Corner-For Boys and Girls- Two DVD's that were given to all schools that attended the 4th grade human growth and development training in Winter 2009**
 - Children's Health Education Center has a Human Growth & Development program that covers these topic areas and will be presented by trained professional. For more information call 414-765-9355.
 - Specific Programs at CHEC



- Growing Boys- Grades 4-5 In this program just for boys, we address the physical and emotional changes both boys and girls face as they go through puberty. The reproductive system, intercourse and conception are introduced.
 - Growing Girls- Grades 4-5: In this program just for girls, we address the physical and emotional changes both girls and boys face as they go through puberty. The reproductive system and intercourse and conception are introduced. Special emphasis is placed on the menstrual cycle and proper hygiene
-
- “Always Changing – About you” instructor’s guide. 1-800-543-2108 (Includes lessons on puberty, stages of development, video, worksheets, lesson plans, hygiene)



Name: _____

Date: _____

Class: _____

MATCH GAME

Match the body part name to the correct part of the body by drawing a line to the correct system.

1. testicles

2. uterus

3. vagina

4. scrotum

5. fallopian tube

6. vas deferens

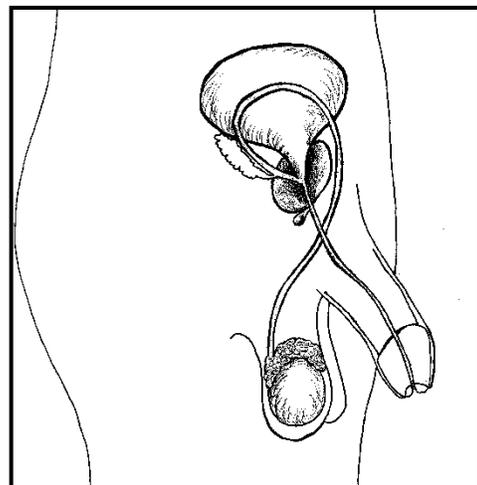
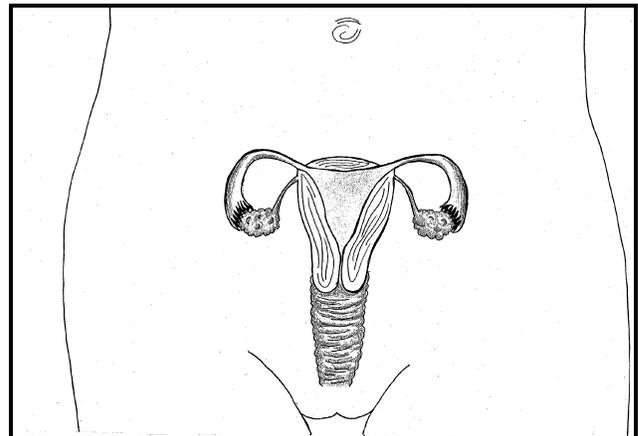
7. penis

8. ovary

9. urethra

10. egg cell

11. sperm cell





National Health Education Standards

Primary Focus

Standard 2 – Analyzing Influences

Students will analyze the influence of family, peers, culture, media, technology and other factors on health behaviors.

Secondary Focus

Standard 1 – Core Concepts

Students will comprehend concepts related to health promotion and disease prevention to enhance health.

Standard 4 – Interpersonal Communication

Students will demonstrate the ability to use interpersonal communication skills to enhance health and avoid or reduce health risks.

What You Need to Know

Children in upper elementary school are becoming curious about how other people live and behave. This session introduces the concept that gender roles do not need to be rigid and that people should have many choices about how they behave and live their lives. Student understands about what it means to be gay or straight and shows empathy for individuals who may be struggling with their sexual orientation will increase.

Materials

- Gender Role Worksheet

Definitions

Sex – biological categories of male and female.

Gender identity – inner sense of identification as male or female

Gender roles – the roles and behaviors that each culture or society assigns to males and females.

Procedures

1. Begin this lesson by defining sex. Ask students:
 - a. How did you tell the difference between men and women when you were little? What clues did you use?
 - b. How do you tell the difference between men and women today?
2. Tell students that a person's sex is his/her biological makeup, which includes the internal and external parts of their sexual/reproductive system. . For the most part, changing any of these things about our bodies is hard to do. On the other hand, gender identity is that persons' inner sense of who they are as a girl, as a boy, or even as another gender. A gender role is the way a person behaves, or the way society says a person should behave, based on their gender and sex. Try to avoid dividing everything into two categories, even sex. You may have intersex and/or transgender students in your class and not know it. Using the language above is an inclusive way to describe sex and gender.
3. What are some things we learn from our culture about difference between sexes and gender roles? (Girls cry, boys aren't allow to cry, boys are good at sports, girls play with dolls...)
4. A person's gender role, the way they decides to live life, is largely up to the individual.
5. Ask students if they have ever seen a movie like "Big" with Tom Hanks – where the person wakes up one morning and has changed. Say, "I would like you to imagine that you are Movie Director who is making a movie about a child who wakes up one morning the opposite sex. One of the jobs of a director is to help the actors "feel" their role



6. Distribute the “Gender Role Worksheet” and have students complete individually.
NOTE You may have a student in your class who is transgender and/or gender nonconforming and has not told anyone this. Allow students the freedom to fill-out the workshop as they need to.
7. When students have completed the worksheet say, “Do you agree or disagree with this statement: “In our society, you are looked down on if you are a girl.” Discuss. As the discussion continues, be sure to address issues like, men make more money than women, boys have more support for sports, boys tend to get away with more trouble making than girls... Do students think that any of this is changing? If so, cite examples.

Videos available for use:

Always #like a girl

<http://www.youtube.com/watch?v=XjQBJWYDTs>



If you were a different gender,

- 1) **If you are a girl, pretend you are a boy, when you answer these questions.**
- 2) **If you are a boy, pretend you are a girl, when you answer these questions.**

Will you dress differently? _____

Will you have the same friends? _____

Will you do the same schoolwork? _____

Will you do homework any differently? _____

Will parents, teachers, siblings or friends treat you differently? _____

Will your gender make a difference in the careers you might want to pursue when you get older?



Gender Role Worksheet

Will you think the same way? _____

Will you be basically the same person? _____

How will it feel to be another sex? _____

What will be fun about being another sex? _____

What things in our life will not change if you are another sex? _____

Do these differences have to happen? _____

What happens when a boy behaves in the way that people expect a girl to behave? _____

What happens when a girl behaves in the way that people expect a boy to behave? _____



National Health Education Standards

Primary Focus

Standard 2 – Analyzing Influences

Students will analyze the influence of family, peers, culture, media, technology and other factors on health behaviors.

Secondary Focus

Standard 1 – Core Concepts

Students will comprehend concepts related to health promotion and disease prevention to enhance health.

Standard 4 – Interpersonal Communication

Students will demonstrate the ability to use interpersonal communication skills to enhance health and avoid or reduce health risks.

What You Need to Know

Children in upper elementary school are becoming curious about how other people live and behave. This session introduces the concept that gender roles do not need to be rigid and that people should have many choices about how they behave and live their lives. Student understands about what it means to be gay or straight and empathy for individuals who may be struggling with their sexual orientation will increase.

Materials

- Newsprint and Markers

Definitions

Sex – biological categories of male and female.

Gender identity – inner sense of identification as male or female

Gender roles – the roles and behaviors that each culture or society assigns to males and females.

Procedures

1. Before class, put up four pieces of newsprint. On the top of the first sheet write the word, “Gay.” On the top of the second sheet, write the word “Lesbian.” On the third sheet write “Bisexual.” And on the fourth sheet write “Straight.”
2. Say, “Yesterday we talked about sex and gender roles. Today I would like to talk about ‘sexual orientation.’ As people go through puberty, they begin to feel new emotions including sexual attraction and desire. ‘Sexual orientation’ is used to describe the direction of a person’s feelings of sexual attraction and desire. An individual may be attracted to people of the same gender, people of another sex, or people of more than one sex. Sexual orientation is not related to your gender identity and has nothing to do with gender roles.”
3. “I have written four words on newsprint. Have you ever heard of the word “Gay”? What does it mean? (Someone who is attracted to people of the same gender. It can refer to men or women. Another word for this is Homosexual. *NOTE:* Many LGBTQ people feel that the term “homosexual” is offensive or wrong. Address that gay, lesbian and bisexual are better terms that many people prefer.)” Ask these questions of the other two words. (Lesbian = A woman who is attracted to other women. Bisexual= A person who is attracted to men and women.; Straight=A person who is attracted to people of another gender. Another word for this is heterosexual.)
4. Explain that we don’t really know exactly how a person’s sexual orientation develops. Explain that most experts believe that your sexual orientation is determined before you are born, although you may not know it until you are older. It doesn’t really matter how we get to be what we are.



What is important to know is that a person’s sexual orientation is just one part of who that person is.

5. Explain that people often have questions about their sexual orientation as they go through puberty and their teenage years. It is not uncommon for boys to be attracted to other boys and for girls to be attracted to other girls and expressing these sexual feelings during puberty and teenage years does not determine a person’s sexual orientation. Invite questions from participants or distribute index cards for students to write questions on anonymously.
6. Introduce “Miranda’s Story.” Explain that Miranda, like the rest of us, lives in a society in which there is a lot of “homophobia”. Homophobia is fear of someone who is homosexual. That fear is usually based on ignorance, misunderstanding, or believing stereotypes. Some people who are knowledgeable about the facts still disagree with a homosexual lifestyle due to moral and religious beliefs. They are not homophobic or fearful they simply believe that the lifestyle is wrong. Whether someone disagrees with a lifestyle or not, it is not acceptable or legal to harm another person because of their sexual orientation.
7. Tell students that as they listen to Miranda’s story, you would like them to think about how each of the people in the story feels about what is happening, and about what Miranda should do in the situations she faces.
8. Read the story pausing for comment when appropriate. (*Teacher can read or have students read.*)
9. Discuss:
 - How do you think Miranda felt when she heard those comments about her brother?
 - How do you think Miranda felt when she talked to her brother about it? How do you think Johnny felt hearing all the comments about him? How do you think you would feel if your brother or sister, or best friend, was in a similar situation? What do you think you would do?
 - What is one stereotype that people have about your gender that is not true of you?

Lesson extension: “That’s a Family” DVD from Groundspark, and part of the Respect for All Project. www.groundspark.org/films/thatfamily/index.html

In this award winning DVD children from diverse families talk about what is special about their family, what’s challenging about their type of family, and what they want other children to understand about their family. It is recommended for K-5th grade and comes with a thorough discussion guide.



Miranda’s Story

Miranda was an 11-year-old girl who lived with her mother, her father, her 14 year old sister Karen, and her 16-year-old brother Johnny. Her parents were always after her to clean up her room, and Johnny and Karen teased her sometimes, which annoyed her, but she loved her family very much.

Miranda liked hanging around her sister and brother and all of their friends because they were much older and really cool. Miranda liked listening in on their conversations about dating and other teen stuff.

One day, when Miranda was eavesdropping on a conversation between Karen and her friends, she heard Jasmine, Karen’s best friend, say to Karen, “I heard a really nasty rumor about your brother Johnny today. I heard that he’s a faggot.” Karen answered, “He is not. Johnny is the captain of the JV baseball team. He is a real guy. No brother of mine is like that.”

“Well,” Jasmine said, “You can just forget about us being best friends, I think it’s just disgusting. If you live in the house with him, you could be one too!” Miranda was very confused. She had heard the word “faggot” before, and knew it was not a nice thing to call someone, but she wasn’t sure what it meant. Then Miranda heard Jasmine and the other girls leave and her sister start to cry.

What can Miranda do?

The next day Karen came into Miranda’s room and told Miranda that she had something very important to discuss with her. She asked Miranda if she knew what a homosexual is? Miranda said she had just learned in school that a homosexual is someone who is attracted to people of the same sex. So instead of a boy who likes to date girls, a homosexual boy likes to date other boys. Miranda added that girls could be homosexual too and date other girls. Karen told Miranda that people were saying that Johnny was a homosexual. Karen said she was really embarrassed and didn’t want to walk to school with Johnny anymore, because people might think that she was homosexual too. Karen told Miranda that if anyone asked her, she should tell them it wasn’t true and should beat them up to show how tough their family is.

What can Miranda say to Karen?

A few weeks later, Miranda went to watch Johnny pitch in a baseball game. He pitched a shutout, and everyone in the stands cheered. After the game, as they walked home, some boys and girls Johnny’s age began to tease him, calling him gay and sissy and saying he is a girl. Johnny just ignored them but Miranda began to get very upset.

What can Miranda say or do?

When they got home, Miranda said to Johnny, “I’m very upset that kids are teasing you and making fun of you. Why are they doing that?” Johnny said, “They think that I am gay. Do you know what that is?” “Kind of,” said Miranda, “Are you gay?”

“Well, yeah, I am gay. I have certain feelings that I get, feelings of wanting to be very close and romantic with someone, feelings that you will understand better when you get to be a little bit older,” Johnny answered. “These feelings are for other boys, not for girls. So, I guess that makes me gay. Lots of people are gay. In fact, did you know that Aunt Laura is gay? Marie, who lives with her, is Aunt Laura’s girlfriend. Actually, they have been together for so many years it’s really like they are married. But as far as those kids are concerned, it really makes me mad that people call me names. Why do they think it’s

“Miranda’s Story?!” – Sexual Identity and Orientation



okay to make fun of someone just for who they are? I guess I know now who my real friends are. I know I can really use the support of my family right now to help me to get through this.”

What can Miranda suggest to Johnny?

What kind of support can she give to him?

The next day in school one of the kids in Miranda’s class said to her, “I’ve heard that homosexuals are weird and that gay boys really want to be girls and the lesbians really want to be boys.”

What can Miranda say?

That afternoon, Miranda’s teacher asked the class to write a paragraph about their families and to say something special about each member of the family.

What can Miranda say about her brother Johnny?

Lesson Extension:

- Our Whole Lives, Elizabeth M. Casparian & Eva S Goldfarb, Unitarian Universalist Association 2000. ISBN 1-55896-391-X



National Health Education Standards

Primary Focus

Standard 4 – Interpersonal Communication

Students will demonstrate the ability to use interpersonal communication skills to enhance health and avoid or reduce health risks.

Secondary Focus

Standard 1 – Core Concepts

Students will comprehend concepts related to health promotion and disease prevention to enhance health.

Standard 2 – Analyzing Influences

Students will analyze the influence of family, peers, culture, media, technology and other factors on health behaviors.

What You Need to Know

This session will follow the explanation of reproductive anatomy. It moves beyond just talking about the individual to shared sexual behavior and sexual intercourse. Students explore the difference between the physical act of intercourse and the idea of “making love”. They identify reasons one may choose to or not to engage in intercourse. The decision making model from previous lessons is used and reinforced. This lesson covers information that your school community of staff, principal and parents should first deem appropriate for upper elementary students.

Materials

- Newsprint, markers, and making tape
- 2 baskets or paper bags
- Anatomy diagrams from lesson 8
- Teacher resource- Wisconsin laws on sexual contact and intercourse

Procedures

1. Begin by saying: “From the beginning of our life until our death, we are sexual beings.” There are many things that make up our “sexual self” including:
 - Our values
 - How we feel about our bodies
 - Messages we hear and see from the people and media around us
 - Our sexual orientation
2. “At this point in your life, as you are nearing or are already in puberty, many changes start to occur. We have talked about the physical and emotional changes of puberty, but so far we have only talked about you. Today I would like to talk about how we feel and behave toward others.” {Remind students of the rules of confidentiality, the right to pass (not answer a question) and if they have any questions, you will provide them with index cards that can be placed in a box and you will answer questions at a later point. Either at the end of this lesson or at the beginning of the next.}
3. “We have talked about the fact that in puberty, you start to get feelings of attraction and desire (meaning that you want to be close and touch other people.) The term “making out” refers to two people kissing, hugging and touching each other. They do this because of their feelings of attraction and desire. It is an intimate way of showing that you care, love and are attracted to someone else. Most of the time people make out and they stop there. Other times, people make out as part of lovemaking activities that leads to sexual intercourse. As sexual beings, people sometimes touch their own genitals for a feeling of pleasure. This is called masturbation.”

“Sexuality Throughout Life” –Human Sexuality



4. “Vaginal intercourse and lovemaking are not the same. Vaginal intercourse means a penis going into a vagina. The term doesn’t say anything about feelings and emotions. Lovemaking is sharing intimate behavior between two people. The term lovemaking implies that there is love, or very strong caring between two people, and that they are sharing their love physically. Sometimes the best choice in a relationship, the most loving choice is NOT to have sexual intercourse. There are various laws against sexual intercourse during childhood up until age 18. And no adult has the legal right to touch a child of any age in a sexual manner.”
5. Explain to students that they have been learning about the physical aspects of puberty and intercourse. Tell them that there is a big difference between one’s body being physically able to have sex and being ready to deal with the consequences of having sex. Brainstorm the consequences of having sex. List the student ideas on the board. (Be sure the list includes emotional, financial, religious, and other consequences.) After they have a long list of the consequences of sex, take two of the consequences of sex (pregnancy and disease) and make two new lists of the consequences of those. The board should end up covered in lots of consequences to demonstrate the huge impact of the decision to have sex.
6. Divide the group into small groups of three to five people of the same sex. Have each small group work on the decision making model for the following situation: Imagine that two teens are 17 years old and are considering whether to have sexual intercourse. They are seniors in high school and have known each other for two months. One is going to college for a degree in nursing and the other plans to begin an apprenticeship program to become an electrician after high school.
7. After approximately 5 minutes, have the groups come together as a large group to share their decision matrix. As each group to shares their responses, keep track of the themes by circling or checking off the consequences they chose from the existing list on the board. Use a different color of marker or chalk for the boys and girls.
8. Compare the boys’ responses with the girls. (What are some of the similarities/differences?)
9. Ask: Under what circumstances do you think an adult might decide that it would be okay for them to have sexual intercourse with someone else?
10. Then ask them if they can agree on the top two conditions that they think most people would believe are necessary for them to consider having sexual intercourse with someone else. Discuss the two items that the group deems to be the most important and talk about why these conditions are so important to so many people.



The Decision Making Model

1. State the situation that requires a decision - What’s going on?

Two teens are 17 years old and are considering whether to have sexual intercourse. They are seniors in high school and have known each other for two months. One is going to college for a degree in nursing and the other plans to begin an apprenticeship program to become an electrician after high school.

2. List the possible choices - What are my options? And then consider the consequences - What would happen if...?

Choices → Consequences ↓	1.	2.	3.
Is it safe?			
Is it legal?			
Is it respectful of self and others?			
Does it follow my parent’s guidelines?			
Is it healthy?			
How will it affect my future?			

3. What decision is best based on everything you know?

4. Evaluate your decision. - Think about how it turned out. Can something be changed now? Next time? *This step comes after the decision is acted on. This couple will have the opportunity to evaluate how the decision is working for them and make changes based on the impact of their choice.*



GUIDELINES ON “TEENS” AND THE LAW

This information does not constitute legal advice.

QUESTIONS	RESPONSES
<p>“SEXUAL INTERCOURSE:” In Wisconsin, can an individual engage in “sexual intercourse” with a minor, a child who has not yet attained the age of 18? What if the two individuals are both 16 or 17 years of age?</p>	<p><i>According to Wisconsin law, it is illegal for any person, regardless of their age, to engage in sexual intercourse with a child who has not yet attained the age of 18. This means that two teens, both aged 16, who say that the sexual intercourse is voluntary still risk prosecution.</i></p> <ul style="list-style-type: none"> • It is considered 1st degree sexual assault if the child has not yet attained the age of 13. • It is considered 2nd degree sexual assault if the child has not yet attained the age of 16. • It is considered a Class A misdemeanor if the child is 16 or older. <i>(WI statutes 948.02, 948.09.)</i>
<p>“SEXUAL CONTACT” AGE 0-16: In Wisconsin, can a person engage in “sexual contact” with a child aged 0-16 years of age?</p>	<p>It is illegal for any person, regardless of their age, to have “sexual contact” with a person under 16 years of age. <i>(WI s. 948.02.)</i></p>
<p>“SEXUAL CONTACT” AGE 16-18: In Wisconsin, can an individual engage in “sexual contact” with a child aged 16-18 years of age?</p>	<p>Wisconsin statutes are silent as to whether a child aged 16 or older may consent to “sexual contact.” This has been interpreted to mean that “sexual contact” with a child 16 or older is not automatically against the law.</p>
<p>CHILD ABUSE RESTRAINING ORDER: Can a parent or guardian obtain a Child Abuse Restraining Order (WI s. Section 813.12) against the person with whom their 16 or 17 year old child is engaging in sexual intercourse? <i>(For example a parent wants to get the Child Abuse Restraining order against 16-year-old daughter’s 26-year-old “boyfriend.”)</i></p>	<p>No, because the definition of “child abuse” used to provide reasons for the Restraining Order does not include the sexual assault law referring only to 16 and 17 year olds. <i>(WI s. 948.09)</i> (Whoever has sexual intercourse with a child who is not the defendant’s spouse and who has attained the age of 16 is guilty of a Class A misdemeanor.)</p>

MANDATED REPORTING:

Do mandated reporters report “voluntary” sexual intercourse between 16 and 17 year olds?

- Mandated reporters are required to report “child abuse” or “neglect.” The definition of “child abuse” does **not** include the sexual assault law referring only to 16 and 17 year olds, s. 948.09 (Whoever has sexual intercourse with a child who is not the defendant’s spouse and who has attained the age of 16 is guilty of a Class A misdemeanor.) This exclusion has been interpreted to mean that **“voluntary” sexual activity of a 16 or 17 year old, though still illegal, need not be reported as child abuse;** UNLESS the reporter suspects such things as: that coercion has been used, the sexual intercourse occurred or is likely to **occur with someone who is in a position of power or authority over the teen, or** he or she has **reasonable doubt** as to the **voluntariness** of the child’s participation in the sexual contact or intercourse. *These ideas about when a mandated reporter may want to report are not Wisconsin law, they are only ideas to consider when talking with a 16-17 year old about their sexual activity.*
- However, if a reporter suspects any elements under Wisconsin’s sexual assault laws s. 940.225, such as use of force or non-consent, the reporter shall report the sexual abuse.
- **Social workers for child protective services (CPS) can be good resources!** You may call CPS workers with questions about when to make a report. Asking a question is not reporting. However remember that if you give identifying information about a possible victim or offender, CPS must move forward on your statements.

This information sheet was created in 1999 by the Wisconsin Coalition Against Sexual Assault (WCASA). WCASA is a membership organization of sexual assault centers and other organizations and individuals throughout Wisconsin working to end sexual violence. For information sheets on additional topics or for membership information, contact WCASA, 600 Williamson St. Suite N2, Madison, WI, 53703. Phone/TTY: 608-257-1516 Fax: 608-257-2150. Information sheets can be downloaded from our website www.wcasa.org. This may be reproduced with reference to WCASA.



National Health Education Standards

Primary Focus

Standard 1 – Core Concepts

Students will comprehend concepts related to health promotion and disease prevention to enhance health.

Secondary Focus

Standard 7 – Self Management

Students will demonstrate the ability to practice health-enhancing behaviors and avoid or reduce health risks.

What You Need to Know

In this lesson the students map the pathway of the egg and sperm during intercourse/conception. The last lesson introduced abstinence and consequences of sexual intercourse. This lesson offers the opportunity to introduce contraception while reviewing the concepts from the anatomy lesson. This lesson covers information that your school community of staff, principal and parents should first deem appropriate for upper elementary students.

Materials

- Newsprint, markers, and making tape
- 2 baskets or paper bags
- Anatomy diagrams from lesson 8
- Pathway of Fertilization Cards- male and female

Procedures

1. Yesterday we talked about lovemaking and vaginal intercourse. One reason that couples have sexual intercourse when making love is to have a child. If a man and a woman do not take specific steps to prevent pregnancy, such as using a form of birth control (also called **contraception**), then pregnancy can result from vaginal intercourse.
2. The only 100 % effective way to not get pregnant is to not have intercourse. This is called **abstinence**. (You may choose to write the highlighted words on the board with the definition.)
3. Define –
 - **Pregnancy** – when a woman has a developing fetus inside her uterus (also called the womb.)
 - **Fetus** – starts out as a small group of cells called an embryo and as the cells divide and grow they become a fetus.
 - **Childbirth** – The process of giving birth. Explain that after approximately nine months, the baby usually comes out of the mother through the mother’s vagina. In some cases, a doctor takes the baby directly from the mother’s uterus through what is known as a cesarean section, or C-section.

The process by which sexual intercourse leads to pregnancy involves both the male and the female. It requires that a sperm from the male unite with an egg from the female. This union is called **fertilization** and, if all goes well, approximately nine months later, a baby is born.

4. Tell the participants that they are about to try an activity that looks at the process by which conception, or fertilization, comes about. Along the way they will also learn about contraception options. Ask if they would like to begin with the journey of the sperm or the journey of the ovum. Once they have decided, start with the appropriate set of cards or strips of paper. Explain that the goal of the activity is to arrange the cards in the correct sequence.
5. Mix up the cards or strips of paper in the basket.

“Sexuality Throughout Life” –Abstinence, Pregnancy, Contraception



6. Select participants, one at a time, to pick one card from the pile. As they get a card, have them stand in a line at the front of class. Once everyone has a card, have participants read their card. After all cards have been read, go back to the first person in the line and, as a class, try to put the students in the correct order. Repeat this process with a new group of volunteers for the second set of cards.
7. Go back and describe contraception options by where they work in the process:
 - Male: condom is put on as soon as the penis is hard (erect) before the sperm begins to travel to the penis. This keeps the sperm from meeting the ova.
 - Female:
 1. Birth control hormones such as pills and patches keep the ova from maturing and being released
 2. Barrier methods keep the sperm and ova from meeting- diaphragm protects the cervix area from the sperm entering the uterus and so does the female condom.
 - These are not all of the methods people use to avoid becoming pregnant. In later years you will learn more about these and other methods. It is important to know that the only 100% effective way to avoid pregnancy is not to have sexual intercourse- abstinence.
8. Using the anatomy diagrams from lesson 8, have each student draw the pathways without viewing the cards.
9. Then ask students: What makes someone ready to become a parent?
10. End the lesson by being clear that the information the students have been learning about their bodies and how babies are born is meant to help them to make responsible decisions about their bodies. Tell students that you believe that they are each of great value and that any decision they make in their life should be based on their value as a person and the potential that their future holds. Tell them that you and other adults in the school want to help them to have the strength to make healthy choices that lead to the futures of their dreams.

Lesson Extension

- Our Whole Lives. Elizabeth M. Casparian & Eva S Goldfarb, Unitarian Universalist Association 2000. ISBN 1-55896-391-X

Steps to Conception Cards - Sperm

Testicles produce testosterone and sperm.

Sperm travel from the testicles through the vas deferens to the penis.

Sperm mix with semen and come out through the penis during ejaculation.

Sperm travel through the vagina.

Sperm travel through the cervix and uterus.

Sperm travel up the fallopian tubes.

Sperm meet the ovum (egg).

Only one sperm fertilizes ovum.

Steps to Conception Cards – Ovum (Egg)

Ovaries produce estrogen which helps to develop the ova. (Eggs)

Ova (eggs) grow bigger inside ovaries throughout the month.

One ovum (egg) in only one of the ovaries becomes fully mature each month.

A mature ovum (egg) leaves the ovary. This step is called ovulation.

The ovum (egg) is swept into a Fallopian tube.

The ovum (egg) moves down the Fallopian tube toward the uterus.

The ovum (egg) meets hundreds of sperm that try to fertilize it.

The ovum (egg) allows only one sperm to enter and fertilize it.



National Health Education Standards

Primary Focus

Standard 5 – Decision Making

Students will demonstrate the ability to use decision-making skills to enhance health.

Secondary Focus

Standard 1 – Core Concepts

Students will comprehend concepts related to health promotion and disease prevention to enhance health.

Standard 6 – Goal Setting

Students will demonstrate the ability to use goal-setting skills to enhance health.

What You Need to Know

Students estimate basic financial costs of raising a child for one month/year and think through other costs—emotional, social, etc. Understanding the realities of parenthood is a strategy for pregnancy prevention as well as a good way to help students appreciate the tasks their parents face.

Materials

- “Costs of Raising You” Handout
- Calculators, paper and pencils

Procedure

1. Ask students to work in pairs or groups of three to estimate the cost of raising them for the past month. Using the budget guide to categorize expenses. Give them 10 minutes to try and make their best guess at the cost.
2. Handout the article and any reference material you have gathered to the groups. The students will need calculators to divide the numbers by 18 to get to the yearly cost and then by 12 to get to the monthly cost. Let them make any adjustments they would like to their estimates based on the information. Then share their costs with the rest of the group. Discuss what would make a difference from family to family in the cost of raising their children.
3. Brainstorm other “costs” to their parents of raising them besides the money. List these ideas on the board or newsprint.
4. Conclude by having the students work alone or in their same groups to answer the following question in writing. What will you need to do in the next 10 years of your life to prepare yourself to handle all the “costs” of parenting (if you choose to become a parent someday)?
5. Have the students take the budget home to get input from their parent or other adult on the real costs of parenting. Tell them to write down the ideas and ask the parent to sign the paper.

Lesson Extensions

Web sites: www.usda.gov/cnpp for this year’s results on the costs of raising a child.

Unit Name: Sexual Health/Behavior

Lesson Number: 14

Grade Level: 5

“The Cost of Raising You”

Milwaukee Public Schools
Human Growth and Development Curriculum



USDA ESTIMATES CHILD BORN IN 2006 WILL COST \$197,700 TO RAISE

Estimated total annual expenditures for the first child born in 2013 and living in a two-parent family in the United States:

(Before-tax income in the range of less than \$61,000/year)

Housing	\$3,713
Food	\$1,425
Transportation	\$1,400
Clothing	\$825
Health Care	\$800
Childcare and Education	\$2,925
Miscellaneous	\$613
Total	\$11,700

You can get the most recent report, "Expenditures on Children by Families," on the web at www.usda.gov/cnpp



“Cost of Raising You”

Budget

Work with your group to make your best guess at what providing these items for you cost your family each month. To make it simpler, every group will complete this as though there are four people living in the household. If you think your family spends \$1,000 a month on housing, you would divide that by the number of people in the family. For example: $\$1,000 \div 4 = \250 . Have fun making your best guess! When you are finished, compare your answers with the average monthly costs of raising a child found in the article your teacher will share with you.

Item	Monthly Costs
Housing (rent or mortgage, electric, gas)	
Child Care	
Medical and Dental Care	
Food	
Furniture	
Clothing	
Phone	
School Supplies	
Toys	
Transportation (bus or car expenses)	
Entertainment (activities, cable, etc.)	
Other	
Other	
Total	



National Health Education Standards

Primary Focus

Standard 5 – Decision Making

Students will demonstrate the ability to use decision-making skills to enhance health.

Secondary Focus

Standard 1 – Core Concepts

Students will comprehend concepts related to health promotion and disease prevention to enhance health.

Standard 3 – Accessing Information

Students will demonstrate the ability to access valid health information and products and services to enhance health.

Standard 4 – Interpersonal Communication

Students will demonstrate the ability to use interpersonal communication skills to enhance health and avoid or reduce health risks.

What You Need to Know

This lesson will introduce the concept of the communicable diseases known as STI's (Sexually Transmitted Infections – previously termed Sexually Transmitted Diseases or STD's) This lesson also introduces the term abstinence. Students will answer questions on the reading and synthesize the thinking of classmates into the best answers to demonstrate understanding of the concepts.

Materials

- A copy of the “STIs” worksheet for each student
- “Facts About HIV and AIDS” handout
- “What do you Know about HIV/AIDS” worksheet for each student
- Teachers’ Resource Guide
- Optional video: AIDS: Facts for Kids (given at November 2009 training)

Procedure

1. Connect this lesson to the previous one about the consequences of sex. Read the worksheet STIs with students and discuss as appropriate.
2. Have students reread the paper whether individually or with a partner and underline the important things to remember.
3. Have student complete the 2 questions at the bottom
4. Correct the papers with the class and discuss what the students share for an answer.
5. With the class, formulate an answer to the question that seems to be the clearest and most informative. Write this answer on the board and let everybody copy the final class answer.
6. Hand out the “Facts About HIV and AIDS” information sheet and “What do you Know about HIV/AIDS” Worksheet
7. Have students read the information sheet as a class or individually. Choose two questions to write on the board to guide the reading.
8. Have students, individually or in pairs, answer the questions on the worksheet.
9. The last question asks what they want to tell others about HIV and AIDS. Have students write a paragraph (or more) to their parents describing what they think is important to know about STIs and specifically, HIV and AIDS.
10. Correct the papers with the class and ask the students to share their notes to their parents. Do this as a whole class or in small groups.
11. Assign students to take their paragraphs home and have a parent or other adult in the home read it and sign their name, It should be returned to school the next day.

Unit Name: Sexual Health/Behavior

Lesson Number: 15

Grade Level: 5

“Sexually Transmitted Infections (STIs)”

Milwaukee Public Schools
Human Growth and Development Curriculum



NOTE: Some teachers have stated that this lesson is too long for their classes. If you think your students might have trouble being focused on this reading for 45 minutes to an hour, try breaking up the reading into two different lessons.

Videos available for use:

Discovery Education:

Search for HIV & AIDS: Staying Safe 10 segments total of 15 minutes



Sexually Transmitted Infection Worksheet

Name: _____

Date: _____

You have learned that there are lots of diseases that can be spread from one person to another. Communicable disease germs can be spread many ways. Some communicable diseases are called STIs (Sexually Transmitted Infections). These diseases are passed from persons to person through sexual touching. Like the germs that cause the flu and cold, the STI germs are so tiny that we can see them only by looking through a microscope.

There are many STIs. Some STIs are not very serious and can be cured with medicine from the doctor. Some other STIs can be very serious. Some cannot be cured and can even cause death. Gonorrhea, Syphilis, Genital Herpes, Chlamydia and HIV-AIDS are some of the disease that can be caused by sexual contact with an infected person. STIs are communicable, but they are also preventable. Not having sexual contact is the best way of preventing infection. This is called abstinence and it means not engaging in sexual behavior that can put your health at risk.

A large part of growing up is learning how to take care of yourself by making good choices that keep you healthy. Some of these choices involve eating healthy foods, exercising, keeping clean, avoiding alcohol and drugs and seeing the doctor for checkups. There are even more things you need to do to stay healthy. Washing your hands can help you avoid getting sick from some diseases. Taking responsibility for your actions will help to keep you from being exposed to diseases that can be spread from one person to another. Staying healthy involves having respect for yourself and making good choices for your body.

What is an STI?

How can you avoid catching one?



“HIV & AIDS” - What Do You Know About HIV/AIDS?

Name _____

Can you catch HIV/AIDS the way you catch a cold? _____

Is HIV/AIDS easy to catch? _____

What causes HIV/AIDS? _____

Check all the ways you can get HIV/AIDS:

- Going to school with a person with HIV/AIDS
- Playing with a person with HIV/AIDS
- Using the same toilet
- Using the same phone
- Hugging a person with HIV/AIDS
- Being kind to a person with HIV/AIDS
- Sharing needles with a person with HIV/AIDS
- Having sex with a person with HIV/AIDS
- Sharing same ear piercing needle.

Can you tell by looking at someone if they have HIV/AIDS?

Check who can get HIV/AIDS:

- | | |
|--|---|
| <input type="checkbox"/> Adults | <input type="checkbox"/> Children/Babies |
| <input type="checkbox"/> Men | <input type="checkbox"/> Women |
| <input type="checkbox"/> People who use drugs | <input type="checkbox"/> Caucasian people |
| <input type="checkbox"/> African American people | <input type="checkbox"/> Asian people |
| <input type="checkbox"/> Hispanic people | <input type="checkbox"/> Native American People |
| <input type="checkbox"/> Poor people | <input type="checkbox"/> Rich people |
| <input type="checkbox"/> Gay people | <input type="checkbox"/> Straight people |

Now that you know about HIV/AIDS what do you wish you could tell other people about it?

“Sexually Transmitted Infections (STIs)”



“HIV & AIDS” - What Do You Know About HIV/AIDS? (answer key)

Can you catch HIV/AIDS the way you catch a cold? No

Is HIV/AIDS easy to catch? No

What causes HIV/AIDS? Contact with bodily fluid of an infected person, blood, semen, vaginal secretions, breast milk, or saliva.

Check all the ways you can get HIV/AIDS:

- Going to school with a person with HIV/AIDS
- Playing with a person with HIV/AIDS
- Using the same toilet
- Using the same phone
- Hugging a person with HIV/AIDS
- Being kind to a person with HIV/AIDS
- Sharing needles with a person with HIV/AIDS
- Having sex with a person with HIV/AIDS
- Sharing same ear piercing needle.

Can you tell by looking at someone if they have HIV/AIDS? No

Check who can get HIV/AIDS:

- | | |
|---|--|
| <input checked="" type="checkbox"/> Adults | <input checked="" type="checkbox"/> Children/Babies |
| <input checked="" type="checkbox"/> Males | <input checked="" type="checkbox"/> Females |
| <input checked="" type="checkbox"/> Drug users | <input checked="" type="checkbox"/> Caucasian people |
| <input checked="" type="checkbox"/> African American people | <input checked="" type="checkbox"/> Asian people |
| <input checked="" type="checkbox"/> Hispanic people | <input checked="" type="checkbox"/> Native American People |
| <input checked="" type="checkbox"/> Poor people | <input checked="" type="checkbox"/> Rich people |
| <input checked="" type="checkbox"/> Gay people | <input checked="" type="checkbox"/> Straight people |

Now that you know about HIV/AIDS what do you wish you could tell other people about it?



The Facts About HIV and AIDS

Many people (not just kids, but adults, too) don't really understand how HIV and AIDS are related, even though they hear these two words used together all the time. HIV stands for **human immunodeficiency virus** (ih-myoo-nuh-dih-**fi**-shun-see) **virus**. AIDS stands for **acquired immunodeficiency syndrome**. HIV is actually the virus that causes the disease AIDS.

HIV Hurts the Immune System

People who are HIV positive have been tested and found to have signs of the human immunodeficiency virus in their blood. HIV destroys part of the immune (ih-**myoon**) system. Specifically, it affects a type of white blood cell called the T lymphocyte (**lim**-fuh-site), or T cell. T cells are one type of "fighter" cell in the blood that help the body fight off all kinds of germs and diseases.

After HIV enters the body, it piggybacks onto a T cell and works its way inside of that cell. Once inside, the virus completely takes over the T cell and uses it as a virus-making factory to make a lot of copies of itself. The newly made viruses then leave the T cell and go on to infect and destroy other healthy T cells as they continue to multiply inside the body. After the virus invades the T cells, they can no longer properly fight infections.

Someone who is infected with the virus is called HIV positive. But it may take years for the virus to damage enough T cells for that person to get sick and develop AIDS. And thanks to new medications, someone infected with HIV can stay relatively healthy and symptom-free for many years. But these medications are very expensive and not available to everyone in the world.

Although the HIV-positive person may feel fine, the virus is silently reproducing itself and destroying T cells. And during this time, the person is still contagious (kon-**tay**-jus), which means he or she is able to give the disease to others.

When the person's immune system has weakened and more of the blood's T cells have been destroyed by the virus, the person can no longer fight off infections. This is when he or she gets very sick. A doctor diagnoses a person with AIDS when the person has a very low number of T cells and shows signs of a serious infection.

How Many People Have HIV and AIDS?

Since the discovery of the virus more than 20 years ago, millions of people throughout the world have been infected with HIV. Most are adults, but there are kids and teens who have HIV, too. In the world today, AIDS remains an epidemic (eh-puh-**deh**-mik), which means that it affects a large number of people and continues to spread rapidly.

Right now, about 40 million people in the world are living with HIV infection or AIDS. This estimate includes 37 million adults and 2.5 million children. In the United States alone, more than 1 million people are living with HIV.

How Is HIV Spread?

HIV infection isn't like a cold or the flu. A person cannot get HIV by hugging or holding the hand of, sharing a school bus or classroom with, or visiting the home of someone who has HIV. HIV is passed only through direct contact with another person's body fluids, such as blood. The majority of people in North America get infected with HIV by:



- having sexual contact with a person who has HIV
- sharing needles or syringes (used to inject illegal drugs) with a person who has HIV

Other ways of getting HIV can occur when:

- an infected pregnant woman passes it to her unborn child. (This can be prevented by treating the mother and child around the time the baby is delivered.) Because of the risk to an untreated baby, every pregnant woman should be tested for HIV.
- a person has a blood transfusion (trans-**fyoo**-zhun) from a fairly large volume of blood. But in North America today, all donated blood is tested for HIV, so the risk of getting HIV is less than one in a million.

What Are the Symptoms of HIV and AIDS?

Most people don't feel any different after they are infected with HIV. In fact, infected people often do not experience symptoms for years. Some people develop flu-like symptoms a few days to a few weeks after being infected, but these symptoms usually go away after several days.

An HIV-positive person will eventually begin to feel sick. The person might begin to have swollen lymph nodes, weight loss, fevers that come and go, infections in the mouth, diarrhea, or he or she might feel tired for no reason all of the time. Eventually, the virus can infect all of the body's organs, including the brain, making it hard for the person to think and remember things.

When a person's T cell count gets very low, the immune system is so weak that many different diseases and infections by other germs can develop. These can be life threatening. For example, people with AIDS often develop pneumonia (nu-**mo**-nyah), which causes bad coughing and breathing problems. Other infections can affect the eyes, the organs of the digestive system, the kidneys, the lungs, and the brain. Some people develop rare kinds of cancers of the skin or immune system.

Most of the children who have HIV got it because their mothers were infected and passed the virus to them before they were born. Babies born with HIV infection may not show any symptoms at first, but the progression of AIDS is often faster in babies than in adults. Doctors need to watch them closely. Kids who have HIV or AIDS learn more slowly than healthy kids and tend to start walking and talking later.

How Are HIV and AIDS Diagnosed?

A person can be infected with HIV without even knowing it. So doctors recommend that anyone who thinks he or she may have been exposed to the virus get tested - even if the chance of having been infected seems small. Doctors test a person's blood to find out if he or she is infected with HIV.

People who are HIV positive need to have more blood tests every so often. The doctor will want to check on how many T cells the person has. The lower the T cell count, the weaker the immune system and the greater the risk that someone will get very sick.

How Are HIV and AIDS Treated?

Right now there is no cure for HIV or AIDS, but new medicines can help people live longer lives. Scientists are also researching vaccines that may one day help to prevent HIV infection, but it's a very tough assignment, and no one knows when these vaccines might become available. It's up to everyone to prevent AIDS by avoiding the behaviors that lead to HIV infection.

Can HIV and AIDS Be Prevented?

People can help stop the spread of HIV by avoiding sexual contact with infected people and by not sharing needles or syringes.



Health care workers (such as doctors, nurses, and dentists) help prevent the spread of HIV by wearing plastic gloves when working on a patient. Hospitals have strict procedures for handling samples of blood and other body fluids to prevent others from coming in contact with HIV.

Living With HIV and AIDS

New drugs make it possible for people who are HIV positive to live for years without getting AIDS. They can work or go to school, make friends, hang out, and do most of the things other people can do. They will have to take certain medicines every day and see their doctors pretty often, and they may get sick more than other people do because their immune systems are more fragile.

Even though they may look OK, people who are HIV positive may sometimes feel scared, angry, unhappy, or depressed. They may feel afraid that the people at work or school could find out and start treating them differently. It is important for all of us to remember that usual social contact, like eating lunch or playing games, with people who are HIV positive does not bring any risk of infection.

When HIV infection gets worse or turns into the disease called AIDS, life really changes. The person may need to spend a lot of time in bed or in the hospital because of serious illnesses. He or she may feel very tired or weak most of the time. The person also might lose weight.

Hope for an HIV-Free Future

Maybe one day, with time and research, a cure for HIV infection will be found and AIDS will no longer exist. Until then, the smartest thing to do is to know the facts and not put yourself at risk.

If you have more questions about HIV or AIDS, talk to an adult you trust - a parent, doctor, school nurse, or guidance counselor. Don't depend only on your friends for information about HIV and AIDS because they may not know all the right answers.



National Health Education Standards

Primary Focus

Standard 7 – Self Management

Students will demonstrate the ability to practice health-enhancing behaviors and avoid or reduce health risks.

Secondary Focus

Standard 1 – Core Concepts

Students will comprehend concepts related to health promotion and disease prevention to enhance health.

Standard 2 – Analyzing Influences

Students will analyze the influence of family, peers, culture, media, technology and other factors on health behaviors.

What you need to know

Students identify sexual harassment as violence and demonstrate ways to respond. Students will recognize adult sexual activity with children as abusive. Students will apply ways they can avoid or respond to sexual harassment and abuse in order to keep themselves safe in various situations. They will identify helpful adults to assist children in such situations. The subject matter is so important that this would be an excellent topic to bring in outside community experts.

Materials

- 3x5 note cards
- “Five Steps When Encountering Sexual Harassment and Recognizing Sexual Harassment”
- (Resource for classroom teacher)

Procedure

1. Tell students that you are going to read a situation to them. They are to listen, be aware of how they feel, and be prepared to talk about what happened.
2. Read the following situation to the students:

Shanendra recently started babysitting for the Mitchells. She likes the children and really likes making extra money for herself. The Mitchells always get home in time and thank her for all she does with the children.

The other night when Mr. Mitchell drove her home after babysitting, he told her they were really pleased with her work. “But if you want to continue working for us,” he added, “you’ll have to be friendlier.”

Shanendra asked, “What do you mean?”

Mr. Mitchell said, “Well, you could start by sitting closer to me on this ride home.”

3. Lead a discussion using the following questions/statements:
 - When I read about Shanendra’s babysitting job, before I got to the ride home, how were you feeling?
 - How did your feelings change when you heard what Mr. Mitchell said to Shanendra?

“Keeping Safe from Sexual Violence” – Sexual Harassment/Abuse



- Sexual harassment is making unwanted sexual advances, asking for sexual contact, and using words or gestures in a sexual way that offends someone else. It is usually done by a person who has some kind of power over another person- like a boss or older person you know- but it can also happen between fellow students and co-workers on a job.
 - Does Mr. Mitchell have any kind of power over Shanedra? What kind? (money, age, strength, etc.) How was Mr. Mitchell’s request of Shanedra a violent act? (Violence or causing harm is often done with words.)
 - Bribery is when someone tries to force someone else to do something by promising a positive result. Did Mr. Mitchell bribe Shanedra? What did he promise her?
 - What might Shanedra be thinking? What might she be feeling?
 - Sometimes when people are harassed or abused sexually, they report feeling shame, guilty, and embarrassed. Do you think Shanedra should feel guilty for what Mr. Mitchell said? Do you think she should feel embarrassed or ashamed? What do you think Mr. Mitchell should feel?
 - What do you hope Shanedra does in this situation to keep herself safe?
4. Introduce ways to keep yourself safe from sexual harassment and abuse by saying: “Being able to think and use methods to keep ourselves safe is not easy when we are frightened. These are steps for keeping ourselves safe from sexual harassment and abuse. We will practice using these methods as we look at some more situations. The more we practice them, the more likely we are to be able to keep ourselves safe. Your parents might have great ideas for how you can keep yourself safe also.” Go over the following points. Ask the students to come up with short phrases, hand signs or symbols to stand for these concepts that will make them easy to remember. Put the phrases, signs or symbols on the board.
 - Trust the “voice” inside of you when it is telling you that something is not right. If you are confused- ask a trusted adult.
 - Walk away whenever possible from any uncomfortable situations. It is the most powerful way to stop the person. You might need to make an excuse to get away.
 - If the person follows you, tell them directly and clearly that you want them to stop because it makes you uncomfortable. Tell them if they do not stop you will get help from an adult.
 - If you feel like the person could harm you in any way, do not talk to them. Instead, run to the nearest safe place/person.
 - Sometimes children are in situations where they have to say no to an adult. It is illegal for an adult to sexually harass or abuse a child. Tell another trusted adult.
 5. Ask students to make up situations where a student might feel uncomfortable about the sexual words, gestures or actions of another towards them. Each student will write their situations on a 3x5 card and put it in a box. No names should be used.
 6. Role-play using methods to keep them safe. (Teacher will want to screen the suggestions to use ones that seem appropriate and not too upsetting.)
 7. As each group role-plays their situation, the rest of the class observes the ways that they used to keep themselves safe. After one group finishes the next group tells what they saw and then goes on to do their role-play.
 8. Conclude the class by praising the students for their ability to think through tough situations and decide how best to handle them to keep themselves safe and comfortable. Highlight the adults that were chosen as safe people to go to in the role-plays. Be sure to mention the appropriate staff in the school.
 9. Tell students that you would like to add to our list of ways to keep ourselves safe. Ask them to talk about what we discussed in class today with their parents or another adult and bring any new ideas to class tomorrow. Offer an incentive to the students for doing this assignment.



Teacher Resource

Five Steps When Encountering Sexual Harassment

Recognizing Sexual Harassment

While teachers can often correct inappropriate behavior in their classrooms, sometimes the behavior is more serious than an isolated class incident might suggest. When a teacher senses that a more systemic problem may lie behind a particular incident, he or she should follow these five steps:

1. Remedy the immediate situation. Stop the behavior so that class may continue.
2. Speak to the offending student after class. Make him or her aware that the behavior is unacceptable. Avoid using the term “sexual harassment” when talking with the student.
3. Speak to the student who was offended. Find out his or her feelings about the incident. Try to find out if the behavior has occurred before.
4. If you think the behavior could be sexual harassment, report it to an administration official or the school’s Title IX coordinator.
5. If you deem it necessary or the student requests it, separate the students from one another.

Although there is no universally agreed upon definition of sexual harassment that fits all contexts and circumstances, there is agreement that it can be verbal, non-verbal, or physical (the latter sometimes as criminal sexual assault), and that it can occur once or several times. The following are examples of behaviors generally viewed as sexual harassment when they are unwanted:

1. Direct or indirect threats or bribes for unwanted sexual activity
2. Sexual innuendos and comments
3. Asking or commenting about a person’s sexual activities
4. Humor or jokes about sex or females/males in general
5. Sexually suggestive sounds or gestures, including sucking noises, winking, and throwing kisses
6. Pestering a person for dates or sexual behavior
7. Touching, patting pinching, stroking squeezing, tickling, or brushing against a person
8. Giving a neck or shoulder massage
9. Rating a person’s sexuality or attractiveness, as on a scale of 1 through 10
10. Ogling or leering such as staring at a woman’s breasts
11. Spreading rumors about a person’s sexuality
12. Graffiti about a person’s sexuality
13. Name calling, such as “bitch” “whore” and “slut”
14. Insulting and belittling a person – sexual ridicule

“Keeping Safe from Sexual Violence” – Sexual Harassment/Abuse



15. Letters, notes, telephone calls or materials of sexual nature
16. Pejorative (sexist or stereotyped) comments about females, such as “The damned broads are at it again.”
17. Displaying pictures, calendars, cartoons, or other materials with sexual content
18. Stalking a person either inside or outside an institution
19. Attempted or actual sexual assault
20. Mooning, whereby students expose their buttocks aggressively
21. Exposing one’s genitals
22. “Streaking” – running naked in front of others
23. “Sharking” – biting a female’s breasts or backside
24. Shouting obscenities
25. Leaving obscene messages on school computers
26. Creating a sexually demeaning atmosphere, such as displaying posters and pictures that are sexist or otherwise demeaning to females or males
27. Snapping a female’s bra or elasticized waist of pants, shorts, or skirt
28. “Spiking” – pulling down someone’s pants, shorts or skirt
29. Flipping up skirts
30. Teasing females or males about heir sexuality, breasts or genitals
31. Touching and grabbing (students from kindergarten through college have reported that their breasts, buttocks, or crotches have been grabbed by other students, and such acts could be considered sexual assault)
32. Persistent unwanted sexual attention, such as continually asking a person for a date long after the person has indicated no interest
33. Telling someone what sexual behaviors the speaker would like to engage in with that person
34. Taunting students of color with offensive statements such as “black meat”
35. Whistling or yelling obscenities at women or men who walk by, or loudly discussing their sexual attributes and rating them
36. Threatening rape

Assessment Directions

Assessments should be used to help teachers gauge how well students are learning the content. The following pages are for the assessments to be used with the HGD curriculum. The first assessments are the Pre/Post assessment. This is to be given to every student. The Pre/Post assessment could be used as part of a teacher's SLO. You are also asked to complete two more assessments during the course of the HGD curriculum. These additional assessments may be used as Formative or Summative assessments.

The teachers who prepared these assessments created two additional assessments that you can use.

The following assessments are listed below:

- Grade 5 HGD Pre and Post Assessment

Unit Assessments

- Human Growth and Development Check 1
- Human Growth and Development Check 2

5th Grade: Pre and Post Test

NAME: _____ DATE: _____

Answer the questions by circling T (TRUE) or F (FALSE) after each statement:.

- | | | |
|--|---|---|
| 1. Your friendships can affect your own self esteem. | T | F |
| 2. It is important to be aware of messages in the media. | T | F |
| 3. Our values do not affect our health decisions. | T | F |
| 4. A person can't get pregnant during their period. | T | F |
| 5. Boys usually begin puberty before girls. | T | F |
| 6. It is OK for a girl to swim, play, and be active when she has her period. | T | F |
| 7. Anyone can have breast growth during puberty. | T | F |
| 8. When you go through puberty, you need to take baths or showers more often. | T | F |
| 9. If a girl does not get their period by age 14 they are not normal. | T | F |
| 10. A person can have erections at any age. | T | F |
| 11. Touching your vulva or penis in private is physically harmful. | T | F |
| 12. Tampons are only OK to use if a person is over 18. | T | F |
| 13. Your gender affects what you can and cannot do. | T | F |
| 14. Your gender determines your sexual orientation. | T | F |
| 15. Engaging in sexual activities can have emotional, financial, religious, and health consequences. | T | F |
| 16. HIV and AIDS are only transmitted through intercourse. | T | F |
| 17. There is one definition for sexual harassment / bullying. | T | F |

Name _____ Date _____

Human Growth and Development Check 1

Read the following scenario:

On the bus ride home, Terry notices his classmate Aiden, open his book-bag. In Aiden’s bag are items that look like cigars and a lighter. He tells Terry, when they get off the bus, they can go smoke the cigar over by his house. No one will know because his older brother doesn’t get home from high-school for another hour. Terry thinks about this.

Terry’s Poor Choices:

#1 Terry could say sure let’s go smoke. Terry does not care that his parents have warned him that smoking is bad for his lungs. Besides, he has seen some of his brother’s friends smoking cigars on his brother’s Facebook page all the time.

#2 Terry could agree to go and smoke with Aiden, even though he knows it is his mom and dad’s rule to come straight home after getting off the bus.

#3 Terry knows that everybody thinks Aiden is fun to be around. Aiden always has a group of people with him on the playground. Terry does not want Aiden to tell everyone he was too scared to go and smoke the cigar.

Choose one of the above “poor choices” and evaluate it using the “Decision Making Model”.

Explain why it is a poor choice using evidence from the model.

Choices Consequences	
Is It safe?	
Is it legal?	
Is it respectful of self and others?	
Does it follow my parents’ guidelines?	
Is It healthy?	
How will it affect my future	

Now make a better decision for Terry.

1. Write what he should do on the “Decision Making Model” chart.
2. Evaluate the choice on the chart. Explain your answers providing evidence.

Choices Consequences	Terry should
Is It safe?	
Is it legal?	
Is it respectful of self and others?	
Does it follow my parents’ guidelines?	
Is It healthy?	
How will it affect my future?	

Name _____

Date _____

Human Growth and Development Check #3

1. Engaging in any sexual contact with others has many negative consequences. In each part of the table, list a consequence that may result from having sexual contact with others.

Health	Emotional	Financial	Legal	Other

2. The only 100% effective way to avoid pregnancy and STI's (Sexually Transmitted Infections) is:

- a. using condoms
- b. abstinence, or not engaging in sexual intercourse
- c. birth control pills
- d. there is no way to avoid either

3. Sexually Transmitted Infections or STI's, including HIV, are passed from person to person by

- a. having sexual intercourse with another person
- b. engaging in sexual touching with another person
- c. being in contact with someone's genitals with any part of your body
- d. all of the above

4. Circle all the ways in which you can expose yourself to HIV/AIDS:

- using the same toilet
- sharing cell phones
- having sex
- sharing needles
- playing with someone
- sitting in class with someone with HIV
- getting tattoos
- sneezing
- having sexual contact
- mother passing to baby
- visiting someone's house
- contact with bodily fluids(including saliva, blood, semen, breast milk, and vaginal secretions)

5. HIV and AIDS

- a. are both curable; there are medicines available
- b. can cause death
- c. is like having a cold or flu
- d. infects adults only, not children and teens

Sexual Violence: Sexual Harassment and Abuse

Read the following scenarios. Explain how each person could keep themselves safe from sexual harassment and abuse. Remember that any type of sexual abuse, harassment and violence is wrong and illegal.

6. Ericka is on the playground racing with her friends. One of her classmates comes up to her and slaps her on her butt. Everyone starts to laugh, including Ericka, but really inside she is embarrassed. Her classmate says, “Stop being a baby. It was an accident anyway.” What should Ericka do?

7. Dewayne’s class has been using their email accounts to communicate with one another in and out of class. Lately, one of his classmates is sending him emails calling him “gay”. What should Dewayne do?

8. Christine has been visiting her best friend’s, Jana’s house afterschool. Every once in a while, Jana’s older brother has been giving Christine massages. The first time he did it, she felt weird, but since it’s her best friend’s brother, she thought it was okay. He has even babysat the two girls a few times when Jana’s mom was running errands. What should Christine do?
