



# Supporting Student Health Guide

Elementary (2022)



Ministry of  
Education and  
Child Care

## Contents

Contents .....	2
Introduction .....	4
General Suggestions for Teaching Health Topics .....	5
Getting started.....	5
Disclosure .....	6
Supporting Student Health: Sexual Health .....	7
Notes on language .....	7
Daily classroom practices.....	7
Follow-up.....	8
Resources to Consider.....	8
Topic: Consent .....	8
Definition .....	8
Considerations.....	8
Instructional strategies .....	10
Responding to the unexpected in your classroom .....	15
Topic: Body Science – Anatomically Correct Names for Body Parts.....	16
Considerations.....	16
Instructional strategies .....	16
Responding to the unexpected in your classroom .....	17
Topic: Safe and Unsafe Touch .....	18
Definition .....	18
Considerations.....	18
Instructional strategies .....	18
Responding to the unexpected in your classroom .....	21
Topic: Internet Safety .....	21
Considerations.....	21
Instructional strategies .....	23
Non-Consensual Disclosure of Intimate Images .....	25
Responding to the unexpected in your classroom .....	25
Topic: Puberty.....	26
Considerations.....	26

Instructional strategies .....	26
Responding to the unexpected in your classroom .....	27
Topic: Safer Sex (Including STIs) .....	28
Considerations.....	28
Instructional strategies .....	28
Responding to the unexpected in your classroom .....	29
Resources to Consider .....	30
Supporting Student Health: Mental Health .....	30
Notes on language.....	30
Daily classroom practices.....	31
Follow-up .....	32
Topic: Brain Science .....	32
Considerations.....	32
Instructional strategies .....	32
Responding to the unexpected in your classroom .....	33
Topic: Bullying .....	34
Considerations.....	34
Instructional strategies .....	36
Responding to the unexpected in your classroom .....	39
Topic: Well-Being.....	39
Considerations.....	39
Instructional strategies .....	40
Responding to the unexpected in your classroom .....	42
Resources .....	43
K-Grade 10 Suggested Topics .....	44
Sample Letter to Send Home .....	48
Alternative Delivery Policy .....	49
Glossary of Key Terms.....	50

# Introduction

The provincial curriculum has brought together physical education and health education in order to develop all aspects of well-being and emphasize the connections between physical, intellectual, mental, sexual and social health. This approach promotes a deeper and more holistic understanding of overall health and well-being in students.

While B.C. teachers have embraced a variety of different physical education approaches, they have often lacked the resources to teach health education topics with confidence, particularly in relation to sexual and mental health topics. In response to the need for additional support for these critical health topics, the Ministry of Education and Child Care is pleased to have worked with teachers to produce a guide to Supporting Student Health for elementary and secondary teachers.

This guide is not meant to be a step-by-step manual. Instead, it is meant to provide teachers with a useful starting point for teaching a variety of health education topics. It contains some general guidance on teaching health education topics, along with suggestions for teaching specific topics, including instructional approaches and how to respond to unexpected situations, which they can adapt to meet the needs of their students. This guide is also not meant to be a complete source of information about these health topics. While this guide contains helpful advice and suggestions for teachers, teachers will need to do additional research and development based on the needs of their students, community considerations, and other factors unique to their particular classroom.

As part of the comprehensive approach to student health and well-being, teachers are encouraged to treat health education as a regular, ongoing area of study rather than a once-a-year event. Many schools currently rely on presentations by specialist health educators to cover these important health topics. While this avoids the discomfort that can arise when teaching these sensitive topics, having classroom teachers explore them with their students helps build an ongoing conversation about health education. As students become more familiar with and comfortable talking about these issues, they may have questions that come up throughout the year that can't be adequately answered through a one-time presentation.

## A note on teacher well-being

*Student well-being begins with teacher well-being, and it is important for teachers to take care of themselves in order to take care of their students.*

*The health education outcomes are an important part of the curriculum, and teachers can play a vital role in promoting student well-being, such as through directing students to valuable resources. While doing this very important work with students, please be aware of both your limitations as a teacher and your needs for mental wellness as a person:*

- *Teachers are not medical professionals, and there are limits to a teacher's responsibilities.*
- *Be aware of your legal responsibilities related to referral and disclosure.*
- *Seek support for your own mental well-being.*
- *And be aware of the signs of compassion fatigue, such as indifference to the problems of others, isolating yourself, and feelings of hopelessness.*

Having classroom teachers address these topics also contributes to the overall goal of helping normalize conversations about mental and sexual health issues. One of the main goals of combining physical and health education is to remove the stigma from health education topics and promote mental and sexual health for students in the same way that we promote physical health.

# General Suggestions for Teaching Health Topics

## Getting started

- Rather than teaching all health topics in a single short, concentrated period of time, spread health topics throughout the year. (See Resources for a suggested timeline.)
- Send home a letter to parents and guardians in September outlining the topics you will be covering throughout the year. (See Resources for a template.)
  - Whenever possible, meet parents in person to discuss any concerns and questions regarding a topic. Sometimes all parents need to hear is that the primary purpose of the curriculum is to protect and empower students.
  - See the Alternative Delivery Policy to understand parent rights and obligations. All students must receive Health curriculum instruction.
- Incorporate Health into your regular scheduling and planning. Use this period to teach about mental health and sexual health throughout the year.
- Include comments about the Health curriculum in report cards to validate the importance of these topics.
- Find out if you have a colleague who is passionate about teaching Health and with whom you could co-teach, collaborate, or platoon.
- If another teacher covers Physical and Health Education with your students, talk to your colleagues about topics that they are covering, and supplement in your class.
- Introduce all aspects of health: mental, physical, social, sexual and how they are connected.
- Students will have different levels of background knowledge about these topics. Adapt as necessary and be aware of what is age-appropriate.
  - Gauge where your class is and revise as necessary (e.g., defining gender, sex, orientation, stigma, depression, and anxiety).



- Be aware of student diversity and adapt your activity/ lesson as needed. It is important to seek out and use examples that are culturally relevant to students. For example:
  - Students who are English Language Learners will benefit from simple language and visuals.
  - Students with autism spectrum disorder may need additional instruction for topics such as emotions, social cues, and body language.
- Be aware of the potential impact of racism and discrimination on student health. For example, the [“In Plain Sight” report](#) outlined how inequitable health care access and racism can contribute to poorer health outcomes for Indigenous people. The experience of racism is associated with higher rates of self-reported distress, suicidal ideation, and substance use amongst First Nations people.
- Students and educators who have experienced trauma may be triggered by some lessons in the Health curriculum. Be mindful of difficult subjects, provide advance notice of sensitive topics, and monitor you and your students’ behaviour throughout the lesson. Develop a safety plan for students who may need to leave the room.
- Preview videos and other content before showing to your students.
- If possible, plan your lessons before a break (recess or lunch) so students can speak to you in private if necessary. Remember your responsibilities around disclosure.
- If possible, try to plan your lessons before a break (recess or lunch) and not before a major school break (winter, spring, summer) so students can speak to you in private or follow-up with a school counsellor or other professional if needed. Remember your responsibilities around disclosure.

## Disclosure

- If a student asks a question or says something that you think might be a disclosure of abuse or harm:
  - Find a natural way to stop the lesson and ask students to do an alternative activity. Speak to the student in private, show empathy, honour the student, and offer support.
  - Clarify the student’s statement and get the essential facts (how, who, what, and when; avoid why) to help you decide whether to make a report.
  - Once you have gathered enough information, stop asking questions. As a teacher it is not your job to interview the student.
  - Take detailed notes as soon as possible.
  - Remind the student that they are not in trouble, and tell them that you will get them help (but avoid making promises).

The [Child, Family and Community Service Act](#) (CFCSA) requires that anyone who has reason to believe that a child or youth has been or is likely to be abused or neglected must report the suspected abuse or neglect to a child welfare worker.

Learn more in the [B.C Handbook for Action on Child Abuse and Neglect For Service Providers](#), which has been revised to clarify reporting requirements regarding children and youth living in situations where there is domestic violence.

You can also find out more at <https://www2.gov.bc.ca/gov/content/safety/public-safety/protecting-children/reporting-child-abuse>

For information on B.C. policies and legislation related to victims in the criminal justice system, please visit this [website](#), for age-specific information on [crime examples](#) in the province, and facts on [sexual assault](#).

To report child abuse and neglect in B.C., call 1-800-663-9122.

# Supporting Student Health: Sexual Health

## Notes on language

- Use gender inclusive language and terminology as well as ensure any discussion on sexual health topics is done in a non-judgmental way. Doing so will help normalize the conversation.
- Create a space where you model the language and attitude of consent (See Topic: Consent).

## Daily classroom practices

- Provide the class with an anonymous “Question Box” and ask them to write questions **or** one thing they learned that day, without writing their names. Since everyone will be writing something, students will feel safe to ask. If possible, keep the Question Box available so that students can ask any questions that arise later. Remember that you can always revisit a topic at a later date if you discover a better way to answer a question.
- Don’t impose your beliefs and values on the topics covered (e.g., people must be married to have sex).
- If you are confronted with a difficult question, ensure that you have understood the question and they have understood the answer by saying: “What I hear is that you’re curious about \_\_\_\_” [Answer the question.] “Did that answer your question?” Ensure that their curiosity about a topic has been satisfied appropriately.
  - If students still have questions, or you don’t feel comfortable answering a certain question in the moment, say that they are good questions and that you

will find good answers. Seek support and answer the question(s) during your next lesson.

### Follow-up

- Provide parents and students with specific instructions for accessing resources and support. For example, contact local health authorities to get current phone numbers and websites for resources, or show students how to get to the closest resources on foot, by bus, and so on.

### Resources to Consider

- The BC Government identifies important [inclusive language and terms](#) to ensure using language that is free from prejudice, stereotypes or discriminatory views of specific people or groups.
  - You can also find more in [Words Matter: Guidelines on Using Inclusive Language in the Workplace](#)
- Trans Care BC: The Provincial Health Services Authority has created [Gender Inclusive Language](#) to support gender-affirming care within BC services.

## Topic: Consent

### Definition

Consent is an agreement to engage in an activity and occurs when you ask, or give, permission to do something. Consent is used and should be used within daily life interactions and/or activities – such as asking for food or drink, taking a picture and/or posting it on social media, physical touch, or participating in an activity.

For further information on what is and what is not consent, please visit our website:

[What is consent? - Province of British Columbia \(gov.bc.ca\)](#)

### Considerations

- Create a space where you model the language and attitude of consent and build a culture of consent in your classroom. This goes well beyond the PHE classroom and instead should be part of a whole school culture.
  - Fundamental in demonstrating consent is ensuring a **'yes means yes'** narrative – shifting away from a 'no means no' model. While you may need to speak about and teach what "no" and "stop" means at times (i.e., resolving a situation or conflict after the fact), the practice and modelling of consent is about ensuring that an initiator needs to ask for permission first and obtain a verbal yes before proceeding in any action/ activity.
- Consent does not need to be a taboo topic, and it is about more than sex. While issues of consent definitely exist in sexual relationships, consent issues exist throughout life and



make for very interesting discussions with students. Consent issues could include a variety of examples, such as borrowing a friend's sweater without asking, sharing a photo of a friend without consent, or sharing a secret without permission. These are situations that have happened to every student and discussing them helps reinforce that the same principles apply to consent in intimate relationships.

- Normalize conversations in your class about respecting the bodily autonomy of other people. This starts with the teacher's leadership in the classroom. While it can be potentially disruptive for students to be moving around during classes, denying a student the ability to go to the washroom or meeting other bodily needs is an example of not respecting the bodily autonomy of students.
  - Have conversations with students about the importance of trust. When you trust students and give them the freedom to meet their bodily needs, you also expect that students make good choices and will not abuse this right.
- Students should be aware that their bodies belong to them and that their bodies are not for others to use or exploit, nor are they allowed to use or exploit others. Students need to apply this to their interactions (sexual and/or otherwise).
- It is also important to acknowledge that not receiving consent can sometimes make people feel bad (e.g., being rejected), particularly when there is positive intent behind a request. For example, if a student wants to give a friend a hug and are told no, it's natural for them to feel sad. Encouraging empathy and understanding is important and can be modelled with many common examples. For example, a student might normally enjoy getting a hug from their friend but may not want to hug at a given moment because they are feeling sick or just want to be alone.
  - Regardless of the reason, boundaries should be respected, and people shouldn't be made to feel guilty for not giving someone consent to do anything. Practicing asking for consent as well as giving, receiving and accepting "no" as an important element of establishing and respecting boundaries.
  - The goal is for discussions of consent to be regular and for all people to get used to asking for consent and to be comfortable both saying no and accepting no as an answer.
- Take violations of consent seriously and use smaller examples as teaching opportunities. For example, something as simple as one student taking another student's pen is an example to reinforce acceptable and unacceptable behaviour regarding consent. In the example of taking another student's pen, the perpetrator will often say things like "what's the big deal?" but it is important to ensure that students understand that even seemingly small violations of consent are not acceptable and show a lack of respect for others.
  - While dealing with seemingly minor issues can feel tedious, these small violations can reinforce the understanding that consent is optional.
  - Be aware that some students will try to excuse non-consensual behaviours, such as saying "it's ok, we were just joking around." While this is sometimes true, this is also sometimes done to try and save face or not look as if they were "tattling" on a classmate. Do not contradict a student, but instead emphasize that while you appreciate that in this case it was just a joke, in your classroom

you expect that students will ask for permission before touching another student or taking their property.

- Be aware of signs that indicate risk factors, such as a student who uses misogynistic language in the class or “jokes” about violence. Students are exposed to a wide variety of messages related to relationships. Students may come from a household where they are exposed to gender-based violence or listen to media sources that objectify women or reinforce negative stereotypes.
- Trust your gut feelings. If you feel uncomfortable and worry that you are in a dangerous situation, you’re probably right and you should listen to your instincts. Many survivors report having had a “bad feeling” about the situation prior to being assaulted. If a situation feels bad or you start to get nervous about someone’s behaviour, establish boundaries with them immediately and leave as soon as possible.
- Remind them that just because someone doesn’t actually say “stop” or “no” doesn’t mean they mean “yes.” This is applicable in many contexts and can be reinforced early and often (e.g., with “playful” teasing or pushing between friends, tapping someone on the head).
- Showing respect to our elders is often a primary driving force/fear in students allowing unwanted contact to occur, especially when it comes to someone who is a close relative, family friend, teacher, coach, and so on. Make sure that students understand their right to say no to unwanted touch or interactions.
  - Talk to students about their control over their bodies. No one should be forced to have unwanted physical contact. This can be difficult for adults, in particular for older relatives who have learned different social norms. However, these new norms can be communicated in a positive way and can lead to important conversations at home.
- In Canada, the age of consent is 16, with exceptions for younger people if they are close in age to each other. For specific details, see the federal Department of Justice guidelines on consent at <https://www.justice.gc.ca/eng/rp-pr/other-autre/clp/faq.html>.
- Under the age of 18, consent can never be given if the person is in a position of authority (e.g., a teacher or coach) or if the sexual activity is exploitative (e.g., pornography or prostitution).
- It is important to be clear in your communication and to speak up and clearly say “no!” or “stop!” if you are uncomfortable with something. While consent should be enthusiastic, some people (i.e. people on the autism spectrum) may have difficulty reading body language.
- Use gender inclusive language, as anyone from any sex or gender can be both the survivor(s)/ victims(s) and perpetrator(s) of sexual assault.

## Instructional strategies

Strategies to support you in exploring this topic with your students could include the following:

- Explain to students that their body is theirs and only theirs. They get to decide who touches their body and who they hug, give kisses to, and hold hands with.

- If an adult (parent or otherwise) asks for hug/kiss or asks them to hug/kiss someone else (family friend, aunt, uncle etc.), they always have the choice to say no.
- They should not worry about hurting the other person's feelings. They can just say "No, thank you," offer a thumbs-up or high-five, or smile and wave goodbye instead.
- Tell students they need to ask their peers before touching them (e.g., hugging, holding hands, touching someone on the head).
  - Include "Do not touch someone without their permission" in your "class contract" or classroom rules at the beginning of the year.
  - Sometimes consent is verbal (you use your voice to send the message) and sometimes it's nonverbal (you use your body to send the message).
  - Sometimes people change their minds, or may not feel like being touched at that moment. Just because they wanted a hug earlier in the day or yesterday, it doesn't mean that they want one now. Students need to get consent every time.
  - When someone signals that they want the touching to stop (e.g., by letting go of a person's hand, pulling away from a hug, saying stop), they are no longer giving consent.
    - Don't get mad or upset.
    - If you aren't sure if someone is still giving you consent, it's your job to ask.
    - Continuing to touch someone when you know they don't like it is a form of bullying.
- Discuss handling rejection in a healthy and positive way.
  - Ask students what the difference is between rejection and refusal?
  - How does a refusal or rejection make you feel and how might people react in those situations? How do we react in healthy ways?
  - Rejection and refusal are very normal and common parts of life. In many situations, rejection is an important part of ensuring everyone is safe and respected.
- Remind students that not all physical touches (hugging, hand holding, etc.) are bad; in fact, they usually make us feel good!
  - When we have physical touch, our brains make something called dopamine that makes us feel happy and less stressed. This is why people usually like to receive and give physical touch. It's totally normal to want to hug someone!
  - As the person who wants to do the touching (which feels good), you need to look at the person you want to touch and see if they look like they want to receive physical touch. This can be hard, so it's a good idea to ask if you aren't sure.

- If something that usually feels good, like a hug, makes you have a “no” feeling (e.g., an uncomfortable feeling, or a funny feeling in your stomach), then it probably means you don’t like it and don’t want to give consent. You should keep trying to make the touching stop until it does. (See Topic: Safe/Unsafe Touch.)
- Run through some different scenarios with your class (adapting as necessary for age):
  - A friend wants to hold your hand at recess, but you don’t want to. Is it okay to say no? (Yes. It doesn’t mean you don’t like your friend. Discuss.)
  - You are holding a friend’s hand during recess, but then you decide you don’t feel like it anymore. Is it okay to stop? (Yes, it’s okay to change your mind. Discuss)
  - You are at a family party and your mom tells you to give Aunt Betty a hug or a kiss, but you don’t want to. Sometimes hugging/kissing Aunt Betty makes you uncomfortable. What could you say?
    - “No, thank you, but how about a high-five?”
    - “I don’t feel like hugging today.”
    - “That makes me feel uncomfortable. I don’t want to give Aunt Betty hugs and kisses.”
      - Tell students that if they don’t want to hurt Aunt Betty’s feelings, they should talk to their parents in private and ask them in a strong voice to stop asking them to give hugs and kisses to family members.
      - Emphasize that while it’s nice to be considerate of other people’s feelings, and to usually try to be polite, you should never do something that makes you feel uncomfortable or unsafe in order to protect someone else’s feelings.
      - Explain that in our society, we are expected to be respectful to one another. So if you don’t wish to give someone a hug or even a high-five, it’s still important to show respect.
        - As a class, come up with some other ways to be respectful (e.g., giving a wave, shaking the person’s hand, saying goodbye and looking them in the eye).
  - You run up to an adult in the school and want to give them a hug. Is this okay? (No, you have to ask permission to give hugs. Discuss how this applies to all people.)
  - I (the teacher) am putting books on the bookshelf, you walk up behind me and give me a hug. Is this okay? (No, you have to ask permission to give hugs. Discuss how this applies to all people, even teachers!)
    - Here you could discuss how sometimes you can get “nonverbal” consent from someone. For example, if you hold your arms open to hug your teacher and the teacher opens their arms back, that’s a signal of consent. If you aren’t sure if you are getting consent, don’t be afraid to ask!
- Explain to students that it is important to practice asking for consent, giving consent, and saying no. This helps students build resilience when asking for a hug and being told no or

being the one saying “no, thank you.” However, it is important to distinguish inappropriate touch, which is never okay.

- Have students practice asking for consent (high-fives, hugs, handshakes), giving consent if they are comfortable), and saying no.
- Ensure that all students practice saying no in a strong voice. If students feel shy or uncomfortable saying no to their friends, offer them strategies like smiling and saying “no, thank you” or doing something different with their hands, like waving or giving a thumbs-up.
- Explain to students that they will never be in trouble for saying no to an adult or friend. The student decides what happens with their body and no one else gets to decide.
  - If someone is making them feel bad because they are choosing not to give consent, then that person is not being a good friend.
- Remind students that when someone is not giving them consent, it’s not fair or right to get mad or upset. Treat others how you would like to be treated!
  - It’s acceptable and normal to not give consent. You can just respond by saying “that’s cool!” or “no worries.”
- Explain what “bribes” and “threats” mean and that they are never acceptable. Here are some examples:
  - “I won’t be your friend if you don’t hold my hand.”
  - “If you are my friend then you will let me hug you.”
  - “I will let you have [ice cream, toys, etc.] if you let me touch you.”
- Unpack common scenarios that can happen in a student’s life and how they factor into building a culture of consent.
  - Discuss other forms of pressure and manipulation, including guilt or frequent asking/begging for example:
    - “aw, come on, please ... everyone else is doing it”;
    - “but we have been going out for so long”;
    - “if you loved me you would.”
  - Emphasize that it is not necessary to agree to sexual activity in order to avoid the other person’s stated anger or disappointment.
  - What happens when students are at a party? How do they know if they or someone else has had too much to drink? What can students do to create safety for those who are intoxicated?
  - People need to be aware of predators who will “spike” drinks and to be extremely vigilant about what they consume.
  - Reinforce that consent can never be given if someone is intoxicated, unresponsive, incapacitated, asleep, or unconscious. Even if a person decided beforehand that they would engage in sexual activity, once they become in one of the above states, that person’s consent is revoked and cannot be obtained.

- Discuss the importance of advocating for people and seeking help if someone is being taken advantage of.
- Using a [trauma-informed](#) approach, roleplay a situation and practice ways they could advocate for someone who may have their personal boundaries violated.
- Unpack examples of scenarios in popular culture and/or social media which contribute to the normalization of coercion and how the scenario could have unfolded differently if consent had been obtained.
- While talking about safe and unsafe touches, either consensual or non-consensual, may seem like an elementary school topic, these issues remain relevant throughout a student's life. Beyond more typical roughhousing and horseplay, people will do more sexually charged things such as hitting someone in the genitals or smacking someone's buttocks.
  - Often, people are not fully aware of the impact that these "games" can have. Encourage empathy and emphasize that setting boundaries is important. How would they feel if someone did these things to someone close to them?
  - Discuss personal boundaries with students: what are they, why are they important, how do boundaries keep us safe, how can we communicate boundaries (verbal and nonverbal), how can we respect boundaries.
  - Remind students that these types of games are potentially assault or sexual harassment and that violating someone's boundaries can have very serious consequences.
  - Examples of sexual harassment include: being touched, grabbed or pinched in a sexual way, sexual gestures, sexual jokes, being catcalled, insults with sexualized words, being the target of sexual rumours or of lewd or prolonged staring, unwanted sharing/display of pornography, requests/demands for sexual images/videos or being shown or being sent sexual images/videos.
  - Addressing sexual harassment in the classroom and the school generally is key to promoting consent culture (and reducing sexual assault).
  - Even when students say they don't mind and it's just a game, power dynamics within peer groups mean that people who are being bullied would rather put up with abuse than be seen as having "tattled" on someone.
  - Have students brainstorm alternative outlets for these types of behaviours, such as intramural sports versus unstructured roughhousing.
- Encourage students to take action towards building a culture of consent within the school.
  - Students could discuss ways to educate themselves and their peers, such as a poster campaign, weekly announcements, inviting guest speakers, or other strategies.

## Discomfort

*We often use the word “discomfort” with regard to a growth mindset and building resilience. Being “uncomfortable” can be a good thing if it encourages us to push ourselves and try new things.*

*However, it is important to distinguish this discomfort from the discomfort we feel when someone tries to touch us in a way we don't like. Students need to figure out what is the root of discomfort: are you trying to push yourself “out of your comfort zone” or is someone else making you feel uncomfortable?*

## Responding to the unexpected in your classroom

When introduced to sensitive topics in your classroom, students may occasionally disclose sensitive information or ask unexpected questions.

- Remember your responsibilities around disclosure (see General Suggestions for Teaching Health Topics).
- Victims/ survivors of sexual assault may not directly disclose the event, but may demonstrate the following behaviours after experiencing a traumatic sexual incident:
  - compromised feelings of safety/well-being
  - heightened feelings of fear and hyper-vigilance
  - decreased/loss of confidence and low self-esteem
  - anxiety, depression, shame, guilt, and/or anger
  - difficulties concentrating
  - difficulties with memory
  - sleeping disorders or difficulty sleeping
  - suicidal ideation, self-mutilation and/or suicide attempts
  - alcoholism and/or drug abuse and/or other high-risk behaviours
  - symptoms of post-traumatic stress disorder
  - difficulties with emotional/intimate/sexual relationships

*The [Child, Family and Community Service Act](#) (CFCSA) requires that anyone who has reason to believe that a child or youth has been or is likely to be abused or neglected must report the suspected abuse or neglect to a child welfare worker.*

*Learn more in the [B.C Handbook for Action on Child Abuse and Neglect For Service Providers](#), which has been revised to clarify reporting requirements*

*regarding children and youth living in situations where there is domestic violence.*

# Topic: Body Science – Anatomically Correct Names for Body Parts

## Considerations

- Become comfortable with the language; say the words out loud to yourself before using them in the classroom. And always use the anatomically correct names for private body parts with your students:
  - Two private areas of our body:
    - breasts (for all bodies)
    - genitals (anything between your legs, including the anus)
- Read children’s books about body science yourself before reading them aloud to students to ensure that they use current and appropriate language and information, and that they are age-appropriate.
- Teach body science before a natural break (recess or lunch), so that if a disclosure occurs, you have the time and means to deal with it.
- Send a letter home to explain to parents and guardians what health topics you will be teaching throughout the year.
- If parents or guardians have concerns and questions regarding the topic of body science, try to meet with them in person instead over the phone or via email. Sometimes all parents need to hear is that the primary purpose of the curriculum is to protect and empower our students.
  - See the Alternative Delivery Policy to understand parent rights and obligations. All students must receive Health curriculum instruction.

## Instructional strategies

Strategies to support you in exploring this topic with your students could include the following:

- Explain to students that they are going to be scientists. Scientists are open-minded and curious about things and want to learn all that they can.
- Explain to students why we use scientific names:
  - “You might have heard a different name for some of these body part names, or you might use these words at home. It is important that you know the scientific



name for the body part. If you ever hurt yourself in one of your private areas, it will be important to use the scientific name. This way, when you get help, the doctor, nurse, or family member will know exactly where you are hurt and how to help you.”

- Explain that male and female bodies have many parts that are the same (knees, eyes, arms, navel – point out that this is the scientific name for “belly button”) and only have a few parts that are *different*.

### Body parts to name

- *Male:*
  - *testicles (males usually have two)*
  - *penis*
  - *two holes: urethra (for urine) and anus (for stool)*
- *Female:*
  - *vulva (what you can see when you look down)*
  - *three holes: urethra (for urine), anus (for stool), and vagina (where a baby may come out)*

## Responding to the unexpected in your classroom

When introduced to sensitive topics in your classroom, students may occasionally disclose sensitive information or ask unexpected questions. Here are some suggestions for responding to difficult questions or situations.

- When a student asks a difficult question:
  - Clarify the question, answer it to the best of your ability, and ask if you have answered it.
  - Ensure that their curiosity has been satisfied.
  - Remind students that there is a lot of misinformation on the Internet, so they should ask as many questions as they need to.
- If a student asks where babies come from, explain that babies grow in a uterus/womb and that only people with one of these can have a baby. Babies do not grow in stomachs. If this were the case, anyone would be able to grow a baby.
- If a student continues to experiment with using the scientific words after a body science lesson (for example, calling out “penis!”), explain that it’s okay to use those words at appropriate times, such as during Health lessons, if you have questions, or when discussing a health concern. However, using those words repeatedly and out of context would be inappropriate behaviour.

# Topic: Safe and Unsafe Touch

## Definition

Remember it is important to know that consent must be obtained and given via a verbal yes before any kind of physical touch can occur. It is important for students of all ages to understand the difference between what is a safe touch compared to what is unsafe.

**Safe Touch:** Consensual touch that feels welcome and safe, such as a medical checkup, a high-five, or a hug.

**Unsafe Touch:** Touch that hurts or make us feel uncomfortable, such as being hit, touching of private parts, or any other non-consensual touching.

## Considerations

- If possible, plan for your lessons to take place before a break like recess or lunch so students can speak to you in private if necessary, and for you to act appropriately if a student discloses to you.
- This topic touches on many themes from Topic: Consent, so refer to it as necessary.

## Instructional strategies

Strategies to support you in exploring this topic with your students could include the following:

- Ask students to share examples of “safe touch” and “unsafe touch”
  - Hug (safe if it doesn’t give you the “no” feeling)
  - Giving first aid (safe if you need help)
  - Hitting, pushing, kicking (unsafe)
  - Adult in the bathroom with a child (safe only with a trusted adult; unless you need help, an adult should not be in the bathroom with you)
  - Adult(s) helping young children, people with disabilities or serious injuries, or people who are very sick (safe)
  - Adult grabbing child’s arm (unsafe unless they are keeping you safe – for example, pulling you away from traffic)
  - Doctor and child alone– Usually a parent or trusted adult should be with you when you are with a medical professional. As you get older, you may not want your parents in the room with you when you are at the doctor’s office. Children should know and be reminded that the doctor or nurse needs to ask for their permission to touch them during a medical examination. They have the right to a third party in the room such as a Medical Office Assistant. If you feel uncomfortable while you are alone with a medical professional, you have the right to say no or stop, and to ask for a trusted adult to be with you.

- Avoid using generalizations such as “a medical professional” as an example of a trusted adult for “safe touch.”
  - Remind students that if they have the uncomfortable “no” feeling, they have the right to say no to anyone, even a medical professional or family member.
- Talk about how sometimes we are “uncomfortable” when we need help or we are hurt. For example, if you scrape your knee, cleaning the wound is painful and uncomfortable, but you need help with it.
  - Distinguish between being in pain and having the “no” feeling.
- Teach what a “no” feeling and “discomfort” look like and feel like.

### Discomfort

*We often use the word “discomfort” with regard to a growth mindset and building resilience. Being “uncomfortable” can be a good thing if it encourages us to push ourselves and try new things.*

*However, it is important to distinguish this discomfort from the discomfort we feel when someone tries to touch us in a way we don’t like. Students need to figure out what is the root of discomfort: are you trying to push yourself “out of your comfort zone” or is someone else making you feel uncomfortable?*

- Tell students that if someone is touching them in a way that gives them the “no” feeling, it is not a safe touch, and they should do everything they can to make it stop.
  - Say “stop” or “no.”
  - Tell a trusted adult about it, and keep telling until someone helps to make it stop.
- Model, and have your students practice, using a strong voice to say “no” or “stop”:
  - Explicitly demonstrate what someone using a strong voice should sound like.
- Ensure that students know that anyone who is being touched in an inappropriate manner is allowed to do whatever they need to do to get away, including kicking, punching, biting, screaming, and so on.
  - Remind them that violence like this is usually not okay, but if it’s a matter of protecting yourself, it is allowed and encouraged.
    - If someone ever tries to pick you up and put you in a car, do everything in your power to get away!
  - Emphasize that they will never be in trouble for protecting themselves from unsafe touch. The person doing or trying to do the touching is always in the wrong, no matter who they are.

- Explicitly state that when someone says “yes,” “I like that,” or “no,” “stop,” we have to listen to the person the first time. This is called giving consent (“yes”) or not giving consent (“no,” “stop”). (See Topic: Consent.)
- Ask students to identify two private areas: breasts and genitals (for both males and females).
  - Remind students that no one should ever ask them to look at or touch their private areas, and that they should never ask to look at or touch someone else’s private areas.
  - By the time most students are at school, it is unlikely that they would need help from someone in a way that includes touching any of the two private areas (breasts and genitals).
  - There is also no reason why a student would need to look or touch someone else’s private areas.
  - Discuss how some families kiss their family members, and that is totally normal as long as everyone is comfortable with it!
  - You may also discuss how sometimes we show our private areas to parents or doctors for our own health and safety. For example, if a student has unusual pain in a private area, they should tell a trusted adult.
- Talk to your students about secrets. Ask for examples of some secrets that are good to keep.
  - A secret that is good to keep is one that eventually will be revealed (e.g., surprise party, the gift you will give your sister for her birthday).
  - Another kind of secret that is good to keep is when someone is trusting you with private information where no one is being hurt or will be hurt (e.g., a friend tells you who they have a crush on, their grandparent is sick, or their parents are getting divorced).
    - Sharing a secret like that might hurt a friend’s feelings because they didn’t want to talk about it with a lot of people, and it’s very personal. Never tell a secret like that to another friend. If you aren’t sure if it’s a secret you should keep, tell a trusted adult and they will help you.
    - Reinforce a culture of consent and remind students that sharing information or secrets without permission is a violation of trust. Unless you are sharing a secret to protect someone (e.g., a friend talking about hurting themselves) you should always get permission before sharing information.
- If someone tells you a secret about being touched in an unsafe way, that person is being hurt and needs help. Tell a trusted adult and keep telling until someone helps. Your friend might be a bit upset at first, but you are doing the right thing because you care about them.

## Responding to the unexpected in your classroom

When introduced to sensitive topics in your classroom, students may occasionally disclose sensitive information or ask unexpected questions.

- If a student asks a question or says something that you think might be disclosure:
  - Find a natural way to stop the lesson and ask students to do an alternative activity. Speak to the student in private, show empathy, honour the child, and offer support.
  - Clarify their statement and get the essential facts (how, who, what, and when; avoid why) to help you decide whether to make a report.
  - Once you have gathered enough information, stop asking questions. As a teacher it is not your job to interview the child.
  - Take detailed notes as soon as possible.
  - Remind the student that they are not in trouble, and tell them that you will get them help (but avoid making promises).

*The [Child, Family and Community Service Act \(CFCSA\)](#) requires that anyone who has reason to believe that a child or youth has been or is likely to be abused or neglected must report the suspected abuse or neglect to a child welfare worker.*

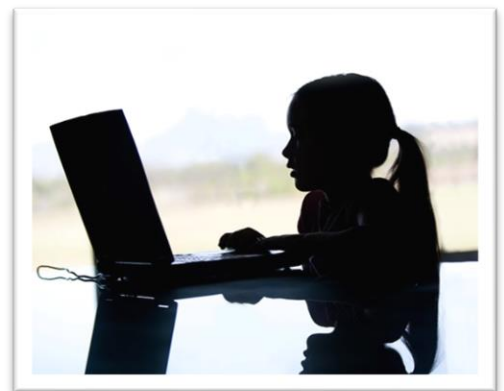
*Learn more in the [B.C Handbook for Action on Child Abuse and Neglect For Service Providers](#), which has been revised to clarify reporting requirements regarding children and youth living in situations where there is domestic violence.*

*You can also find out more at: <https://www2.gov.bc.ca/gov/content/safety/public-safety/protecting-children/reporting-child-abuse>*

## Topic: Internet Safety

### Considerations

- It is hard to fully grasp the experiences that students are having online, as technology is ever-evolving, and new social media platforms are always coming in and out of popularity.
  - When in doubt, tell students to talk to their parents/guardians about the sites and platforms they are using.



- Explain that you are suggesting this for their own safety, and that it is very important for their parents to understand exactly how they are using the Internet.
- Child predators can use online games and social media as a tool for grooming children and accessing personal information in bits and pieces over time through casual conversation.
  - To convey this to students, you can say something like “Most of the people on the Internet are not bad people. But just as there are dangerous people in the real world, there are also dangerous people online.”
  - Many students think they would be able to tell the difference between talking to a real child their own age and an adult pretending to be a child.
    - Ask them how they could tell.
    - Emphasize that the dangerous people online are smart and tricky, and they won’t say, “Hi there, I’m a kid like you! Tell me your address!”

**Note:** *There is a fine line between informing students of potential dangers and scaring them, but it is important to:*

- *encourage all students to be very cautious while using online platforms and to be very open with their parents*
  - *remind them that they will continue to have difficult and important decisions to make about how they use the Internet, because they will have more and more access to the Internet as they grow up*
  - *encourage students to be aware of online bullying and hateful content - remind students to always practice online safety by being aware of the nature of possible threats and potentially harmful online situations*
- 
- Ultimately, we cannot control what students do online; sometimes we can’t even control what they are doing on school devices. Parent education is a very important piece of the puzzle.
    - After having these conversations with your students, send some general information to parents about the kinds of apps and websites students listed as being popular, or features they have accessed.
    - For example: “Today we discussed Internet safety as a class. Students said they play online games such as A, B, C; use apps such as D, E, F; and use features such as video chatting and photo sharing. Please talk to your child about Internet safety and the kinds of apps and games they are using. This would be a good time to do some research about the applications and the privacy laws surrounding them, and possibly to set up parental controls.”
  - Allow students to ask questions about their experiences. Students may surprise you with their questions about making YouTube channels, befriending people they’ve never met, and sharing photos through platforms you’ve never even heard of.

- As teachers, you also need to be careful of your own social media profiles and what you share online. Students may search your social media profiles for potentially inappropriate activities you have talked about, or to look for pictures not intended for a student audience. Students finding information about you online is also a good opportunity to reinforce a culture of consent and to talk about the importance of respecting boundaries and privacy. Sharing images or information about a person without permission is not a positive or caring behaviour in the school community.
- Remind students about the potential dangers of sharing information online, particularly if someone asks for pictures or personal information. Abusers can use pictures or personal information to blackmail people into doing things they do not want to. Without fearmongering, reinforce that elementary-aged students should never share any intimate images with anyone.
  - Remind students that if an incident does happen, it is not their fault as the fault always lies with the person sharing their photo(s)/ personal information without their consent. Students should report these incidents to a trusted adult.
- Also, reinforce that if a student ever does have access to an intimate image of someone else, sharing it is never acceptable and can be illegal. This can be introduced in an age-appropriate way by focusing on embarrassing information rather than sexual content. For example, sharing a picture of a friend doing something embarrassing might seem funny but can be extremely hurtful. These situations can lead to severe consequences for someone’s mental well-being.

## Instructional strategies

Strategies to support you in exploring this topic with your students could include the following:

- Start by asking the class some questions about Internet use to get a sense of access and familiarity for your age group:
  - What is the Internet used for (e.g., researching school projects, coding, sharing information, finding recipes, social media, talking to your grandparents on facetime)?
  - Raise your hand if you have used the Internet to:
    - search for something for school
    - search for something you were interested in
    - play a game
    - watch TV
    - watch a video
  - Raise your hand if you have ever used a tablet or computer when your parents were not in the room watching with you. (Remember that students will often say they have less Internet access than they actually do.)
  - Raise your hand if you have ever been looking for one thing on the Internet but found something else. (Use a mild example, like searching for “Jaguar”—the animal—but getting pictures of a car.)

- Raise your hand if you have ever seen something online that you think was probably not meant for kids.
- Tell students that the Internet is an amazing tool that all kinds of people use all the time. It allows us to access information quickly and easily, and it can be great. However, the computer or tablet doesn't have the same judgment that a real person has. So sometimes information or images that are designed for adults end up being seen or accessed by children. This can happen by mistake, such as searching for a term with multiple meanings, or if you click on something by accident.
  - Some things that we see by mistake can make us feel uncomfortable or curious. Tell students that if they see something like that, it's best to tell a teacher (if at school) or a trusted adult (if at home).
  - If appropriate for the age of your students, this may be a good time to talk about sexualized images and pornography. Some students access pornography online as early as Grade 5, and it is important to share the message that this is not a realistic representation of a sexual relationship.
- Tell students that the Internet is also a tool that people use to connect with one another. A lot of people talk to their friends and family, connect with people who have similar interests, or chat and play online games with people they have never met.
  - Depending on the age of your students, they will have varying understandings and exposure to "talking on the Internet." However, almost all students will eventually be exposed to this kind of communication, so it is never too early to start these conversations.
- Talk to students about protecting their privacy:
  - Never give any personal information over the Internet.
  - Never share information with someone you have never met.
    - Sometimes you might think there is a good reason to share personal information. For example, let's say you are chatting with a classmate in an online game and they ask you where your soccer game will be next weekend:
      - Do not share this information unless your parent or guardian is in the room with you and you have their permission. Some chat forums are not well-protected, and it is important to remember that even people you know can use your personal information in a way that puts you at potential risk.
      - Depending on the age of your students, you might even suggest that they should not talk to anyone online unless they are 100 percent sure it is a friend or family member they know in real life.
      - Some students play online games with strangers, but with chatting features limited.



### Some reminders for students

- *No one is responsible for monitoring YouTube videos, and anyone can post any opinion they want to share. Be critical of what you hear and see online: some people share views that are racist, sexist, homophobic, transphobic, and generally inappropriate.*
- *Anything you post online is there forever – even after it's been deleted.*
- *Keep things private. Don't post personal information like your birthday, phone number, or address. Don't share passwords with friends.*
- *Online bullying - spreading rumours, sharing mean or inappropriate pictures, threatening others and so on - is very hurtful and could be a serious offence that gets you into trouble with the law.*
- *For Grade 5+: If you are under the age of 18, taking, sending, and sharing nude pictures of yourself or others can get you into trouble with the law and can also have very serious lifelong personal, social, and mental health consequences.*

### Non-Consensual Disclosure of Intimate Images

- Remind students when sharing a digital photo with someone, it can easily be shared with large numbers of people.
- If you send intimate images to someone, it is possible they will share these images after the relationship ends.
- Some people may also use the threat of disclosure to control someone. For example, an abusive partner may threaten to share intimate images with their partner's family, peers, or employer to control their behaviour.
- Under Canadian law, publishing intimate images of someone without their consent is considered a criminal offence.
- If convicted of the non-consensual disclosure of intimate images, someone may serve prison time and have their right to access the Internet restricted.
- Adults should never ask you for intimate images and you should tell a trusted adult if anyone ever asks you for pictures of yourself or if they have taken pictures of you.

### Responding to the unexpected in your classroom

When introduced to sensitive topics in your classroom, students may occasionally disclose sensitive information or ask unexpected questions.

- During these lessons, some students may want to share about things they've seen on the Internet, and you may not want to go down that road.
  - If they share about something that made them uncomfortable, tell them you're sorry that it happened, but that they can talk to you about it more in private if they would like to.

# Topic: Puberty

## Considerations

- Teach co-ed lessons (with boys and girls in the same room).
  - This promotes compassion and inclusion for all bodies: students need to know what their peers of other genders are going through.
  - Review body anatomy with students prior to this lesson. Use anatomically correct names.
- Normalize puberty by explaining that it is something that all bodies go through. It's not always easy and it takes years, but everyone goes on the journey to becoming an adult.
- All students enter and finish puberty at their own pace. While there are rough age ranges, these are not set in stone and students will begin and end puberty when their body says so.
  - "Your body is born with an internal alarm clock that tells your brain when to begin making and releasing hormones (from your pituitary gland)."

## Instructional strategies

Strategies to support you in exploring this topic with your students could include the following:

- Mention the following points:
  - Puberty begins because of hormones (estrogen and testosterone). All bodies have both, but in different amounts. After that, they continue to be released in a hormone cycle.
  - People grow at their own pace: some grow slow and steady, some grow fast (this is sometimes called a "growth spurt").
  - Facial oil/acne: Tell students that pimples are normal and it is best to leave them alone and not pick at them.
  - Body hair: Hair will grow all over the body, including the genitals.
    - Body hair is different from the hair on your head and will likely be a different colour and texture.
    - Everyone makes a personal decision about what to do with their body hair – including doing nothing at all!
    - If you choose to remove body hair, make sure you do it safely (using shaving cream with a razor, etc.).
  - Sweat: The body makes new sweat glands when entering puberty. Sweat now contains urea and may smell. Students may need to start using deodorant.
  - "Mads, Glads, Sads" (emotions and mood Swings): High highs and low lows. Mood swings are normal!

- Crushes: A crush is practice for an adult relationship. It’s your decision whether to tell others or to keep it to yourself.
  - Remind students that talking about someone else’s crush is a form of gossip.
  - This can be a good opportunity to give an example of a secret that is okay to keep (i.e., if a friend tells you about their crush).
- Voice change: This happens in all bodies, but will be more obvious break in males.
- Males:
  - Genitals will grow during puberty, and 50 percent of males will develop breast tissue (it will even out when the shoulders broaden).
  - Nocturnal emissions (wet dreams) – when extra sperm is released from the penis – are normal and mean that everything is working.
- Females:
  - Menstruation: Show products that can be used during menstruation (e.g., sanitary pad, tampon, Diva Cup, Lunapad) and explain where in the school they can be found.
- Sleep: Sleep is very important, because bodies are going through a lot of changes.
- Hygiene: Students need to clean their genitals daily with soap. Soap needs to actually touch their body in order to clean it!

## Responding to the unexpected in your classroom

When introduced to sensitive topics in your classroom, students may occasionally disclose sensitive information or ask unexpected questions. Here are some suggestions for responding to difficult questions or situations.

- For students with “the giggles”:
  - See Topic: Body Science for ways to encourage students to think like scientists.
  - Allow students to put their heads down on the desk, take a break to get water, or take a short walk around the school to calm down so they can come back and continue to listen.
- If you have a Q&A session during the lesson, students may try and “throw you off” with a comment/question.
  - Provide the class with an anonymous “Question Box” and ask them to write questions or one thing they learned that day, without writing their names. Since everyone will be writing something, students will feel safe to ask. If possible, keep the Question Box available so that students can ask any questions that arise later.
  - Remember that you can always revisit a topic at a later date if you discover a better way to answer a question.
- If a student asks a question that you aren’t sure how to answer, or do not know the answer to, get back to them. For example, say “That’s a great question and I can understand why

you would be curious about that. I'm not sure of the answer, but I will get back to you within a day with the answer."

## Topic: Safer Sex (Including STIs)

### Considerations

- Remind students that sex, in all its varieties, should always be consensual for both people.
  - Remind students what consent looks/sounds/feels like (See Topic: Consent.) as well as what is safe and unsafe touching (See Topic: Safe and Unsafe Touch).
- Don't impose your beliefs and values on the topics covered (e.g., people must be married to have sex).
- Use the term "STI" (sexually transmitted infection) not "STD" (sexually transmitted disease). Most STIs are curable infections, not diseases. The word "disease" has a negative connotation, suggesting that it is stuck with the person. STIs are either viral or bacterial.
- Graphic images are often used as a scare tactic for STI prevention. This is both unnecessary and potentially traumatic for some people.
- Have clinic information readily available so students can access information and health services.

### Instructional strategies

Strategies to support you in exploring this topic with your students could include the following:

- Discuss different options to use to prevent pregnancy (except for condoms, these do not prevent STIs):
  - IUD (hormonal and copper)
  - Contraceptive pill
  - Vaginal ring
  - Injection
  - Hormonal patch
  - Condoms (male and female)
- Discuss emergency contraception after unprotected sex:
  - Two options: IUD or emergency contraceptive pills (including the varieties available)
  - There is no need to go to the doctor for pill option, as it is available at most pharmacies/clinics.

- Discuss why condoms are good protection against both an STI and an unwanted pregnancy.
  - Condoms are one-use only and come in different varieties.
  - While condoms provide good protection against an unplanned pregnancy, combining condom use with other contraception provides even better protection in case of accidents (e.g., a condom used improperly or breaking).
- Explain that while the use of contraceptives can significantly reduce the chances of unplanned pregnancies, the only guaranteed way to prevent pregnancy and the spread of STIs is not having sex.
- Tell students that as soon as they are sexually active, they should get regular testing for STIs, including testing for HIV (this is a blood test).
  - Some STIs don't cause symptoms. Or they cause symptoms that then go away. This is why it is important to get checked regularly.
  - STI testing is free in B.C.
  - Testing using involves a medical professional taking a sample of body fluid from the throat, inside the tip of the penis, or inside the rectum or vagina. Urinating into a medical cup and a blood test can also be parts of an STI test.
  - Testing and results are completely anonymous and confidential. Parents/guardians will not be given the information.
- For the most part, treating an STI is as simple as treating an infection like strep throat. You would go to a doctor to get treatment for strep throat, and STIs are the same.
  - This is a good opportunity to talk about the dangers of stigma preventing people from getting the treatment they need.
- Reinforce the importance of setting boundaries and obtaining consent during any intimate activities. State that when someone says "yes," "I like that," or "no," "stop," we have to listen to the person the first time. This is called giving consent ("yes") or not giving consent ("no," "stop"). (See Topic: Consent)

## Responding to the unexpected in your classroom

When introduced to sensitive topics in your classroom, students may occasionally disclose sensitive information or ask unexpected questions. Here are some suggestions for responding to difficult questions or situations:

- If you have a Q&A session during the lesson, students may try and "throw you off" with a comment/question.
  - Provide the class with an anonymous "Question Box" and ask them to write questions or one thing they learned that day, without writing their names. Since everyone will be writing something, students will feel safe to ask. If possible, keep the Question Box available so that students can ask any questions that arise later.

- Remember that you can always revisit a topic at a later date if you discover a better way to answer a question.
- Provide students with specific instructions for accessing resources and support. For example, contact local health authorities to get current phone numbers and websites for resources, or show students how to get to the closest resources on foot, by bus, and so on.

## Resources to Consider

The following resource links provided below are to assist educators in accessing clinical information that is the most current, accurate, and credible. All information comes from HealthLink BC – a government funded telehealth service.

- [Safer Sex | HealthLink BC](#)
- [Sexually Transmitted Infections | HealthLink BC](#)
- [Preventing Sexually Transmitted Infections \(STIs\) | HealthLink BC](#)

# Supporting Student Health: Mental Health

## Notes on language

- Introduce all aspects of health: mental, physical, social, sexual.
- Make the connection between *physical* health and *mental* health. Suggest to students that taking care of their mental health is just as important as taking care of their physical health because the two things work together.
  - Use this opportunity to discuss stigma as it relates to mental illness. For example, people aren't embarrassed to seek help from a doctor when their leg is broken; but if someone thinks they will be judged for struggling with anxiety or depression, it's like walking on a broken leg because they are embarrassed to seek the help they need to recover.
- Remember to model the use of appropriate language in your classroom and encourage students to do the same. For example, using words and expressions like "crazy," "just get over it," or "don't be so sensitive" can be hurtful and perpetuate stereotypes.
- Clarify the differences between chronic mental health issues and day-to-day stressors.
  - Discourage students from casually using expressions like "I'm so depressed – I didn't get to see the movie I wanted" or "I was so bored – I wanted to die."



Remind students that this can be very hurtful for people who truly struggle with those feelings.

- Students can express themselves in many different ways. Be aware of your responsibilities around disclosure in relation to potential issues like student self-harm. If you have concerns about a student, speak to your school counsellor.

## Daily classroom practices

- Create a safe and welcoming learning space.
- Use a Social Emotional Learning framework in your class. Try to create a sense of belonging and mutual respect among your students.
- Incorporate coping strategies in your class, model their use, and name them specifically. For example:
  - “Wow, I think the class is feeling sleepy this afternoon! Let’s go outside and get some exercise so when we come back we will feel more focused.”
  - “I am feeling frustrated because my projector isn’t working. I’m going to take some deep breaths to calm down before I try this again.”
  - “I can tell that the class is getting into the silly zone. What are some strategies we can try so we are better able to learn? Let’s try a mindful moment.”
- If possible, create a “Calm Corner” where students can choose to take a break. You can also incorporate a “calm down kit” with a variety of sensory and visual tools like stress balls, fidgets, and so on. There are lots of do-it-yourself ideas online.
  - Remind students that these are tools, not toys.
  - Draw a correlation with someone wearing glasses so they can see and learn: some people need a tool to calm down so they can learn.
- Don’t underestimate the power of physical activity. Incorporate strategies such various breathing techniques into your daily classroom practice. Take brain breaks. Move desks aside and do some movement, if possible. Allow students to self-regulate and get fresh air or exercise as needed.

- *Counsellors play an important role in supporting students’ mental well-being in a one-to-one setting. But collaborating with counsellors and having them do lessons with the whole class can also be hugely beneficial for students. Talk to the school counsellor about co-teaching – specifically about strategies for coping with difficulty.*
- *All students may need to use these strategies to cope in times of difficulty.*
- *When all students learn these strategies, they may be more likely to know the signs of distress, ask for support when they need it, and support one another.*

## Follow-up

- If you are unsure about whether to refer a student to a school counsellor, talk to the counsellor.
- Provide parents and students with specific instructions for accessing resources and support. For example, contact local health authorities to get current phone numbers and websites for resources, or show students how to get to the closest resources on foot, by bus, and so on.

# Topic: Brain Science

## Considerations

- Remember to model the use of appropriate language in your classroom and encourage students to do the same.
  - For example, using words and expressions like “crazy,” “just get over it,” or “don’t be so sensitive” can be hurtful and perpetuate stereotypes.
- Clarify the differences between chronic mental health issues and day-to-day stressors.
  - Discourage students from casually using expressions like “I’m so depressed – I didn’t get to see the movie I wanted” or “I was so bored – I wanted to die.” Remind students that this can be very hurtful for people who truly struggle with those feelings.
- Students can express themselves in many different ways. Be aware of your responsibilities around disclosure related to student self-harm. If you have concerns about a student, speak to your school counsellor.

## Instructional strategies

Strategies to support you in exploring this topic with your students could include the following:

- Teach the basic functions of the brain.
- Consider the age of your students when deciding which model of the brain to use.
  - One option is the “Flip Your Lid” hand model (Dr. Daniel Siegel):
    - Make a fist, with your thumb tucked inside your fingers. The thumb is the Emotional Brain or “Little Brain.” The fingers are the Thinking Brain or “Big Brain.”
    - Explain that we sometimes “flip our lid” (open your hand, exposing the Little Brain) and our Little Brain takes over (fight or flight, big emotions, no rational thinking or problem solving). We need our Thinking Brain to problem solve and calm down.
    - Brainstorm “Big Brain strategies” – ways to calm down and put the Thinking Brain back in control. These strategies (e.g., take five deep breaths, get a drink of water, ask for a hug from your parents, squeeze a stuffed animal



- or stress ball) can be represented by each finger returning to cover the thumb/Little Brain.
  - Have students choose their favourite four strategies and draw a hand, where each finger is a Big Brain strategy. Students should make sure that at least one strategy is something they can do while at school.
- Explain to students that the brain is an organ in the body, like many others, releasing chemicals that have specific functions, and sometimes needing medical support to function properly.
  - Discuss the following example with students (from Jennifer Katz, *Ensouling Our Schools: A Universally Designed Framework for Mental Health, Well-Being, and Reconciliation*, p. 125): “The pancreas produces insulin to regulate sugar in our blood. When the pancreas does not produce enough insulin, high levels of sugar build up in the blood. We call this condition ‘diabetes.’ Because high levels of sugar in our blood can cause damage, doctors give patients with diabetes insulin to replace the insulin the body cannot produce.”
  - When the body produces too much or not enough of a neurotransmitter or chemical, it may influence our mental health. Different people respond differently to experiences and sometimes when our brain has too little or too much of a neurotransmitter or we are struggling, we call it a mental illness, even though it is actually an illness just as diabetes is.
- Use this opportunity to discuss the negative effects of stigma as it relates to mental health challenges:
  - Students with visual impairments wear glasses to make it easier to learn. Students with attention difficulties sometimes take medication or use different coping methods to make it easier to learn.
  - If you felt like you would be judged for taking medication for the flu, you might not ask for the help you needed, and stay sick for long time.
  - Some people feel that way about asking for help for their mental wellness. It is perfectly normal to use prescription medication to support mental well-being (e.g., antidepressants, medication for ADHD).
  - If appropriate for the age of your students, you might discuss healthy and unhealthy ways to manage mental wellness.

## Responding to the unexpected in your classroom

When introduced to sensitive topics in your classroom, students may occasionally disclose sensitive information or ask unexpected questions. Here are some suggestions for responding to difficult questions or situations:

- If, during a lesson on mental health, a student shares that a family member is depressed:
  - Show empathy: “I’m sorry to hear that, because it can be difficult. I hope they’re getting the help and support that they need.”

- Remind students that this is one of the reasons why we talk about mental health, so that we can ask for help when we need it, and support our friends and family when they need it: “It sounds like your [family member] is being very brave for talking about their challenges and experiences.”
- Remind students that mental health challenges are very common, but not something that a lot of people talk about: “Many people struggle in silence because they are afraid of being judged. Just because someone isn’t ready to share about their mental health doesn’t mean they aren’t going through a difficult time. Remember that anyone can be struggling through a time of difficulty, but we can’t always tell, because they aren’t wearing a cast or blowing their nose, like they would with a physical injury or illness.”
- Remind students that we should also respect people’s privacy: “Some things we share with close family, but not with strangers. As long as they are getting the support that they need, we have to let everyone make their own decisions about who else they will talk to about it.”
- Use this opportunity to talk about secrets: “If your friend told you they were feeling so sad that they wanted to hurt themselves, would it be okay to tell someone?” (Yes! It’s not telling a secret if you are worried that someone might hurt themselves or others.)

## Topic: Bullying

### Considerations

- Create a safe and welcoming learning space.
- Use a Social Emotional Learning framework in your class. Try to create a sense of belonging and mutual respect among your students.
- Make the connection between bullying and consent:
  - Tell students they need to ask their peers before touching them (e.g., touching someone on the head, pushing).
  - Include “Do not touch someone without their permission” in your “class contract” or classroom rules at the beginning of the year.
  - Explain:
    - Sometimes consent is verbal (you use your voice to send the message) and sometimes it’s nonverbal (you use your body to send the message).
    - If you aren’t sure if someone is still giving you consent, it’s your job to ask.
    - Continuing to touch someone when you know they don’t like it is a form of bullying.

- Students often misinterpret any unwanted behaviour as bullying. It's important to know the difference between bullying and single acts of aggression or conflict. Not all mean or rude behavior or conflict is bullying.
  - Introduce a definition of bullying:
    - Bullying is deliberately hurtful behaviour that is repeated over a period of time.
    - It's hard for the person being bullied to make it stop.
  - Define the different kinds of bullying:
    - Physical bullying: doing anything that causes physical harm to a person or their property
    - Verbal bullying: name-calling, making threats, intimidation, telling offensive jokes (including jokes about race, gender, socio-economic status, physical limitations, etc.)
    - Indirect bullying: talking about someone behind their back, starting or spreading rumours, telling stories or secrets about someone to be funny or hurtful
    - Social or relational bullying: doing things to harm someone else's reputation or make them feel embarrassed or humiliated
    - Intimidation: scaring the victim into doing something that the bully does or does not want them to do
    - Cyberbullying: bullying in any of these ways but via technology: sending unwanted pictures to a survivor/victim to scare them, sending pictures of a survivor/victim to other people to make fun of them, spreading rumours via texts and emails and social media
    - Sextortion: sexual extortion occurs when someone threatens to distribute the victim's private, often sexually explicit, material online if the victim does not comply with their demands. This could include things such as demanding money or more intimate images.
  - Define "rumours" and "gossip":
    - Rumours: a currently circulating story or report of uncertain or doubtful truth or a story or fact about someone that someone misinterpreted or made up, making it a lie; it's usually a negative story
      - Give silly and serious examples: for example, "I heard a rumour that person A eats worms for breakfast!" and "I heard that person B's parents are getting divorced." Whether it is silly or serious, it can be very hurtful.
      - Discuss the divorce example: even if it were true, would it be kind to be talking behind person B's back about their family?
    - Gossip: casual or unconstrained conversations or reports about other people, typically involving details that are not confirmed as being true or conversations about other people, usually negative and usually about things that aren't the speakers' business, about things that are true or

untrue, or that people have heard “through the grapevine” (not directly from the person being talked about).

- Emphasize that gossiping is dangerous because it’s how rumours spread.
  - **Activity:** Play the “Broken Telephone” game to show how meaning can be lost “through the grapevine.”
- Reinforce the idea that gossiping is not a kind behaviour and can have a negative effect on relationships with others. Nobody wants to be gossiped about and have rumours spread about them. Spreading rumours and being seen as a “gossip” can also make people unwilling to trust you with secrets or private information.

#### Warning signs that someone may be getting bullied:

- *Changes in behaviour, loss of appetite*
- *Lost or damaged property*
- *Self-harm, talk of suicide*
- *Complaints about stomach aches, headaches, etc.*
- *No longer wanting to participate in activities; wanting to stay home from school; avoiding certain groups of people*
- *Injuries, bruising, damaged clothing, or broken items*

#### Warning signs that someone may be bullying others:

- *Becoming violent or aggressive*
- *Blaming others*
- *Having extra money or new belongings that can’t otherwise be explained*
- *Having new friends who bully others*

## Instructional strategies

Strategies to support you in exploring this topic with your students could include the following:

- Discuss why some people engage in bullying behaviour:
  - They may be struggling with their own challenges.
  - They may be getting bullied themselves by a friend, older sibling, or family member.
  - There may be an imbalance of power or strength, or a desire for power (social, physical, psychological).
  - They may want to seem popular, tough, in charge, or cool.

- They may want to get attention, or make people afraid of them in order to get what they want.
- They may be jealous of the person they are bullying.
- Emphasize that while bullying is bad, every person has feelings and needs. Suggest to students that everyone makes mistakes, and people deserve a second chance.
- Discuss strategies for stopping bullying behaviour:
  - Talk to a trusted adult if you witness bullying or if you are a survivor/victim of bullying.
    - Keep seeking help until the bullying stops.
  - Be an “upstander” who stands up for others instead of a “bystander” who just watches when someone is being bullied
  - Do not take part in hurting a bullying survivor/victim.
    - Say kind words and be a friend to the survivor/victim.
  - Don’t be involved in spreading rumours and gossip.
    - Don’t spread rumours that you hear.
    - Even better, if you hear a rumour, say to the person who is telling you, “Really? Where did you hear that? Do you think that person would be okay with you telling people about that?” This is the only way that rumours will stop: If nobody sends a message to the “gossiper” that spreading rumours and gossip isn’t cool or funny, then they will keep spreading those rumours.
- Use the analogy of a fire:
  - If a small fire (a rumour) starts and nobody does anything to stop it, it will continue to burn, and could possibly spread (the gossiper will keep telling other people, because no one tells them to stop or sends the social message that it isn’t acceptable). Eventually the fire may go out, but the survivor/victim will still be hurt.
  - If people listening to the rumour participate in the gossiping by adding rumours they have heard or continuing to talk negatively, it’s like adding fuel to the fire. The fire will grow. More rumours will spread. The survivor/victim will get hurt even more. The fire will grow bigger and be harder to put out.
  - If people listening to the rumour send the social message to the gossiper(s) that it isn’t okay, and that they don’t want to talk about other people like that, it’s like putting water on the fire. The rumours stop. The fire is out. The survivor/victim won’t be hurt anymore.
- Remind students that they do not need to tell the survivor/victim that someone was gossiping about them. That will just hurt the survivor/victim more. Instead, stop the gossip and tell a teacher or adult.

- Tell students that they can play an important role in preventing bullying. Remind them that even though teachers and adults can talk to students about doing the right thing, and provide consequences, in some ways peers have more power, because people care about what their friends and peers will think about them, which can provide a more meaningful consequence for lots of people.
  - If the person using bullying behaviour isn't getting any reinforcement from their peers (i.e., telling the person they are being funny or cool), they will usually stop the mean behaviour.
  - Have students practice saying the following:
    - "That isn't cool. I don't want to talk about other people when they aren't even here."
    - "That was a mean thing to say" or "That wasn't very nice."
    - "Let's talk about something else. We don't even know if that's true, and I don't think it's nice to talk about that kind of thing."
  - Remind students that while they shouldn't "bully a bully," it's okay to tell someone they are being mean if they are. Some people need to hear it from a peer to realize that they aren't being kind.
  - Tell students that after they have been an "Upstander," it's still important to tell an adult.
- Remind students that those engaging in bullying behaviour are people too!
  - Sometimes bullying behaviour or gossiping is because the person has low self-confidence, they need a friend, or they need a positive way to cope with their bad feelings.
  - If one of your friends says something that's not nice about someone else, it doesn't mean you should stop being their friend and never talk to them again.
    - Tell your friend that you don't think it's nice, and they will probably stop. Everyone deserves a second chance. If they continue to be mean, you may decide you don't want to be friends with a person who acts like that.
    - Tell your friend why you don't want to hang out with them anymore, so they get the message that being a bully doesn't help you make and keep friends.
    - Don't forget that if your friend is starting to act differently, or mean, they may be going through a difficult time. Try asking if they are okay. They may need a friend now more than ever.
- Have students ask themselves, "Do I bully others?"
  - What's a more positive way to get respect from your peers?
  - Talk to someone about your feelings, especially about how to cope with feelings of anger.
  - Apologize to the people you've hurt. They might not trust you right away, though, because they will want to see that you've changed.

- Remind students that no one has the right to make them feel like they aren't safe at school.
- Some degree of socially imperfect behaviour is normal. Not everything needs an adult response or punishment and can instead be an opportunity to communicate better ways to express anger or anxiety in more acceptable ways.

## Responding to the unexpected in your classroom

When introduced to sensitive topics in your classroom, students may occasionally disclose sensitive information or ask unexpected questions.

- Remember your responsibilities around disclosure (see General Suggestions for Teaching Health Topics).

*The [Child, Family and Community Service Act \(CFCSA\)](#) requires that anyone who has reason to believe that a child or youth has been or is likely to be abused or neglected must report the suspected abuse or neglect to a child welfare worker.*

*Learn more in the [B.C Handbook for Action on Child Abuse and Neglect For Service Providers](#), which has been revised to clarify reporting requirements regarding children and youth living in situations where there is domestic violence.*

# Topic: Well-Being

## Considerations

- Introduce multiple strategies to support student well-being so that students can take away strategies they can use for themselves in daily life.
  - Name the strategies specifically.
  - Incorporate them in your class.
  - Model their use. For example:
    - “Wow, I think the class is feeling sleepy this afternoon! Let’s go outside and get some exercise so when we come back we will feel more focused.”
    - “I am feeling frustrated because my projector isn’t working. I’m going to take some deep breaths to calm down before I try this again.”
    - “I can tell that the class is getting into the silly zone. What are some strategies we can try so we are better able to learn? Let’s try a mindful moment.”
  - Practice them often.

- Make conversation about emotions part of your class routine – for example, via Mood Meters, journals, class meetings, nonverbal check-ins with hand gestures, morning greetings.
  - This is also a good way to build class community and make all students feel safe and welcome.
  - Try using these sentence frames suggested by Allan Kehler:
    - To move from the everyday pleasantries of “How’s it going” to show you are really asking because you care: “How are you feeling today, [name]?”
    - If you have serious concerns about a student, and you want to show concern, open up a channel for conversation, or help them seek support and resources: “I don’t want to pry, but I want you to know that I am concerned about you, and I am here to listen if you ever want to talk.”
  - If possible, create a “Calm Corner” where students can choose to take a break. You can also incorporate a “calm-down kit” with a variety of sensory and visual tools like stress balls, fidgets, and so on. There are lots of do-it-yourself ideas online.
    - Remind students that these are tools, not toys.
    - Make a connection with wearing glasses so you can see and learn: some people need a tool to calm down so they can learn.
- Talk to your administration about options for accessing school and/or district funds to support the Health curriculum.
- Use a Social Emotional Learning framework in your class. Try to create a sense of belonging and mutual respect among your students.
- Create a safe and welcoming learning space.
- Counsellors play an important role in supporting students’ mental well-being in a one-to-one setting. But collaborating and having counsellors do lessons with the whole class can also be hugely beneficial for students. Talk to the school counsellor about co-teaching – specifically about strategies for coping with difficulty.
  - All students may need to use these strategies to cope in times of difficulty.
  - When all students learn these strategies, they may be more likely to know the signs of distress, ask for support when they need it, and support one another.
- Remember to model the use of appropriate language in your classroom and encourage students to do the same. For example, using words and expressions like “crazy,” “just get over it,” or “don’t be so sensitive” can be hurtful and perpetuate stereotypes.
- Reinforce a positive classroom environment through building a culture of consent.
- Students can express themselves in many different ways. Be aware of your responsibilities around disclosure about student self-harm. If you have concerns about a student, speak to your school counsellor.

## Instructional strategies

Strategies to support you in exploring this topic with your students could include the following:



- Discuss stress and anxiety and clarify the differences between chronic mental health issues and day-to-day stressors.
  - See Topic: Brain Science for more information on making the connection between brain chemistry, mental wellness, and treatment for chronic mental illness.
  - Remind students that being sad for a short while is an important part of life, but being sad for an extended period of time can mean something else.
  - Discourage students from casually using expressions like “I’m so depressed – I didn’t get to see the movie I wanted” or “I was so bored – I wanted to die.” Remind students that this can be very hurtful for people who truly struggle with those feelings.
  - Introduce a “Size of the Problem Scale” to help students identify and manage their feelings and reactions to daily stressors and disappointments.
    - After introducing this framework, a simple prompt like “Is it a big problem or a little problem?” can help students gain perspective during a time of difficulty.
  - When students feel like they are coping with a big problem, ask “Will you be able to sleep tonight?”
    - If they say no, they may need more intensive support to break down their feelings and concerns, and help them use coping strategies.
      - Remember to follow up to show students that you care and to give them a chance to self-reflect.
      - If the worries persist, they may require support from a professional counsellor.
- Talk to students about the things they can control and things they cannot control. Remind students that the only thing we have full control over is our own behaviour.
  - Sometimes worrying a little bit can be a good thing. We need drivers to be a little bit worried about driving safely! When baseball and softball players go up to bat, they worry a bit about watching the pitch so they can hit the ball. If no one ever worried about paying attention in class, we would never learn anything!
  - It’s not healthy to worry about things that we have no control over. After a certain point, we need to let go of the things we cannot control. You can support students with this by having them imagine a balloon with their worry inside, letting go of the balloon, and watching it float away.
- Introduce and use stress- and anxiety-reducing activities, such as the following:
  - Gratitude lessons, journals, and circle sharing – Encouraging students to be thankful for things in categories to focus their thinking. For example:
    - “What is something you are grateful for that you cannot buy in a store?”
    - “Name something in nature that you are grateful for.”

- “Think of a person in your family you are grateful for and one thing in particular that you appreciate about that person.”
  - Mindfulness activities – The main goal of mindfulness activities is to practice awareness and nonjudgment.
    - Search “mindfulness exercises” online, or search for guided mindful breathing/eating/scripts, and you’ll find countless activity ideas.
    - There are some good explorations of mindfulness using the senses, such as counting three things you can see, two things you can hear, one thing you can smell or feel.
  - Breathing exercises – Again, there are countless options, such as box breathing, figure-8 breathing, and visualizing. For example:
    - To slow down breathing: Inhale “smell the flowers”/ Exhale “blow out the candles”,
    - To decrease anxieties, have students put a picture to their breath: Inhale “Happy Feelings/ Images/ Colours” Exhale “Worries” etc.
    - Play a recorded guided meditation for kids that practices visualizing calm spaces.
  - Positive self-talk – Introduce the idea of using a mantra in times of difficulty, or to reassure oneself during times of excessive worrying. For example:
    - “I can do this”/ “I can handle it”
    - “I am happy”/ “I am good”
    - “Let it go” (for worries, add a visual image of a balloon floating away)
  - Physical activity, such as yoga and brain breaks – If possible, allow students to self-regulate and get fresh air or exercise as needed.
- Incorporate outdoor education whenever possible. Being outdoors can have powerful restorative benefits.
  - Encourage students to turn to family, friends, and pets for support.
  - Tell students that hobbies, like crafting, colouring, drawing, cooking, sports, journalling, and creative writing, can be very helpful.
  - Remind students about the importance of sleep, and reducing screen time, especially before bed.
  - If appropriate for the age of your students, you could also discuss examples of unhealthy coping strategies, such as using substances and alcohol, burying yourself in work, avoiding friends, and bingeing (e.g., over-eating, over-exercising).

## Responding to the unexpected in your classroom

When introduced to sensitive topics in your classroom, students may occasionally disclose sensitive information or ask unexpected questions. Here are some suggestions for responding to difficult questions or situations.

- If you are unsure about whether to refer a student to a school counsellor, talk to the counsellor.
- Provide students with specific instructions for accessing resources and support. For example, contact local health authorities to get current phone numbers and websites for resources, or show students how to get to the closest resources on foot, by bus, and so on.

## Resources

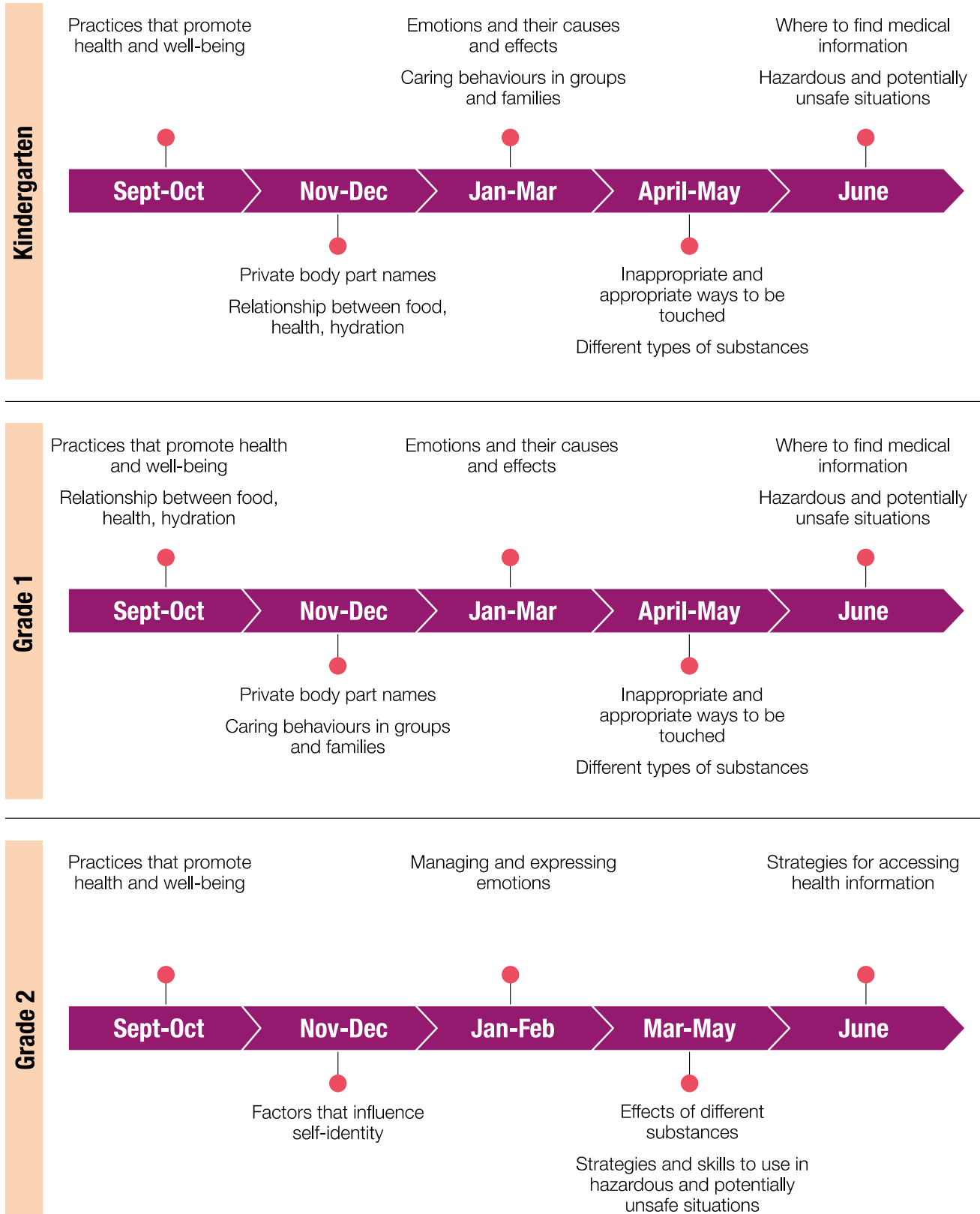
- Crisis Text Help Line: Text HOME to 686868 in Canada to text with a trained crisis responder
- Kids Help Phone: Kids Help Phone counsellors are available 24/7 at 1-800-668-6868
- HealthLink BC: [HealthLink BC - 24/7 Health Advice You Can Trust](#)
  - [About 8-1-1 | HealthLink BC](#)
- Options for Sexual Health: <https://www.optionsforsexualhealth.org/>

*Information about reporting child abuse can be found at:*

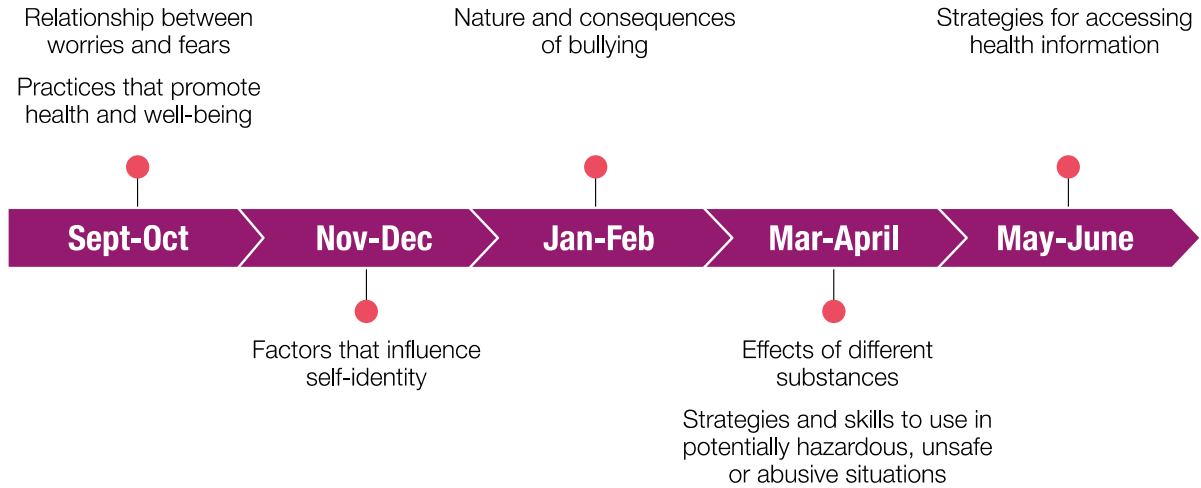
<https://www2.gov.bc.ca/gov/content/safety/public-safety/protecting-children/reporting-child-abuse>

*To report child abuse and neglect in B.C., call 1-800-663-9122.*

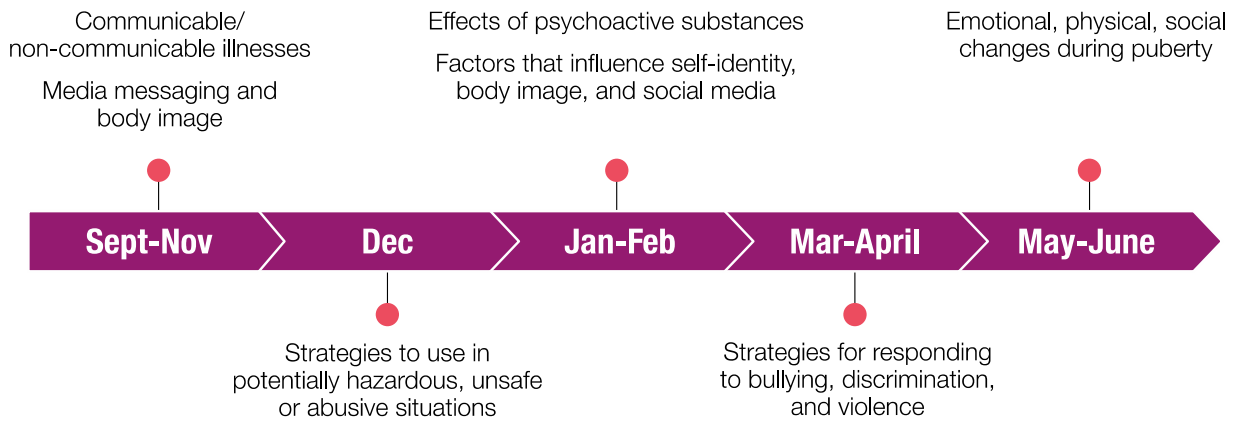
# K-Grade 10 Suggested Topics



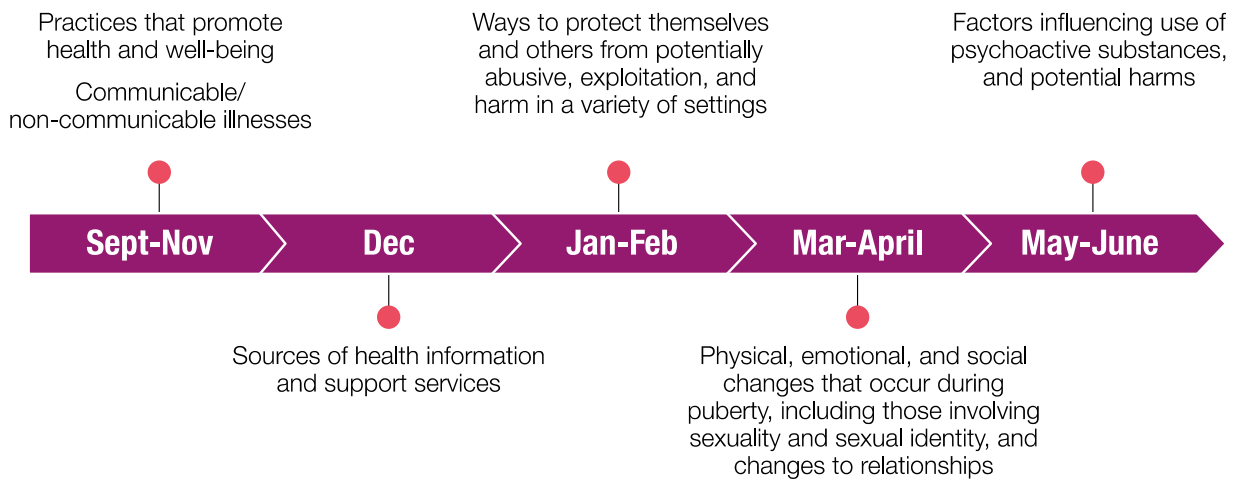
**Grade 3**



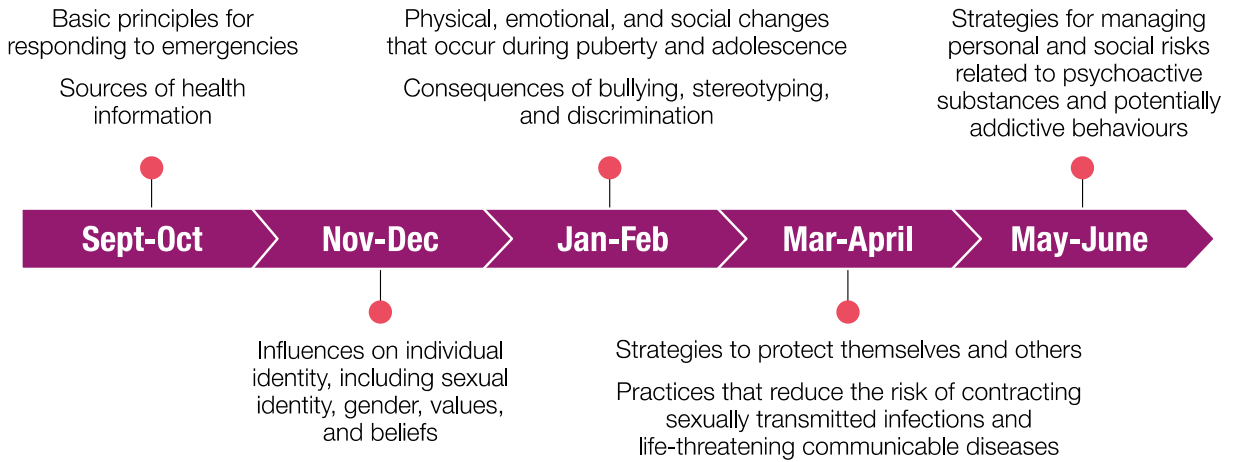
**Grade 4**



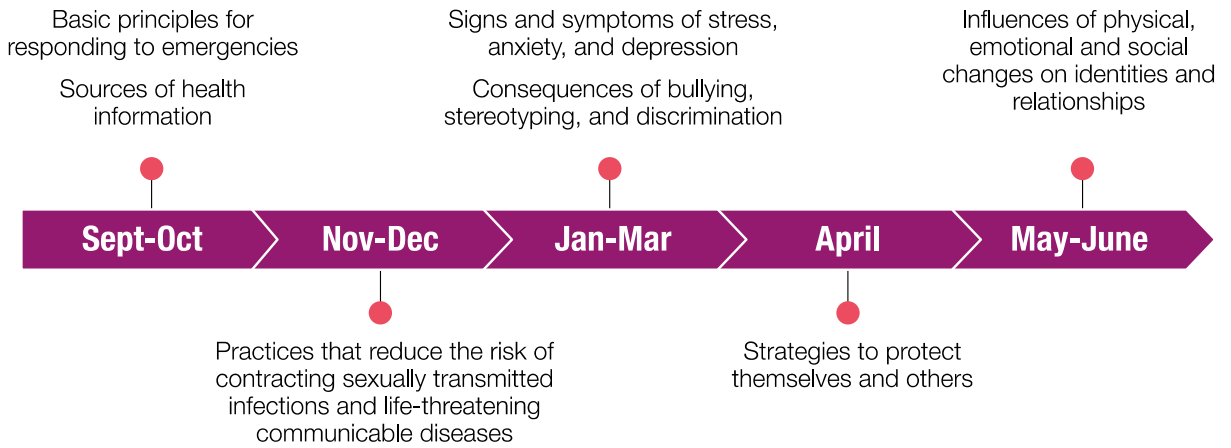
**Grade 5**



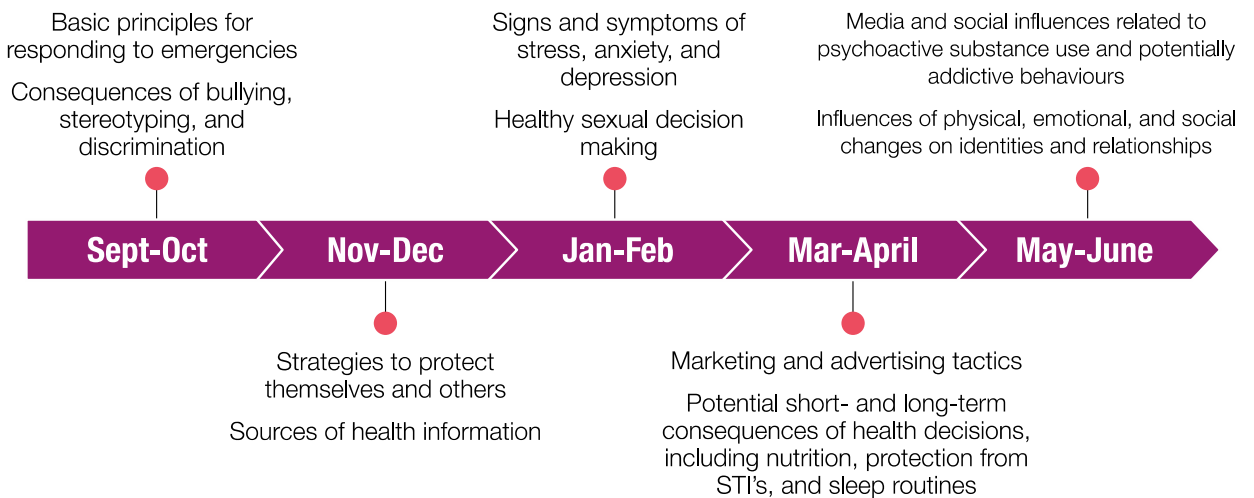
**Grade 6**



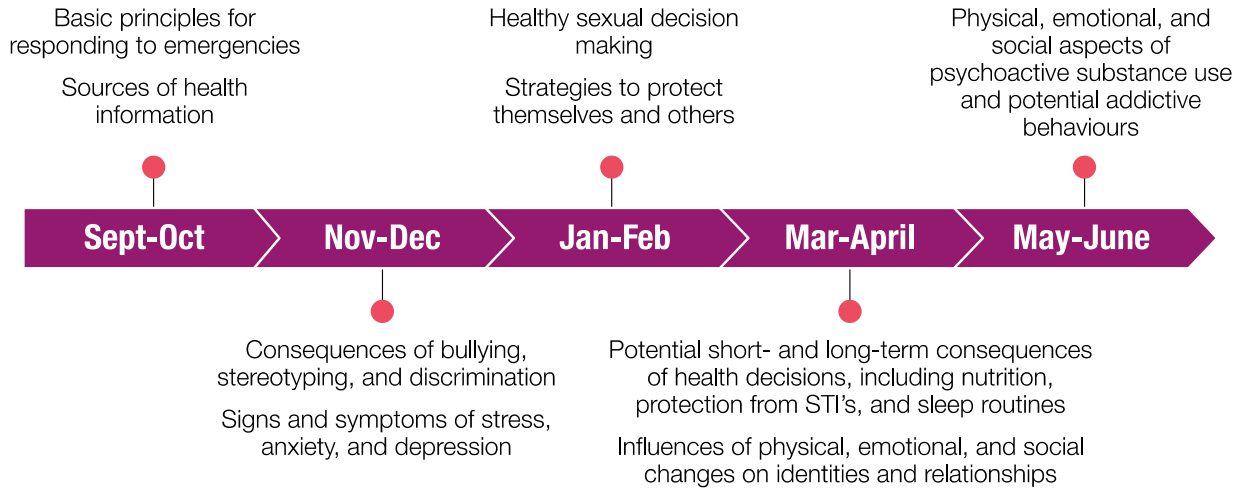
**Grade 7**



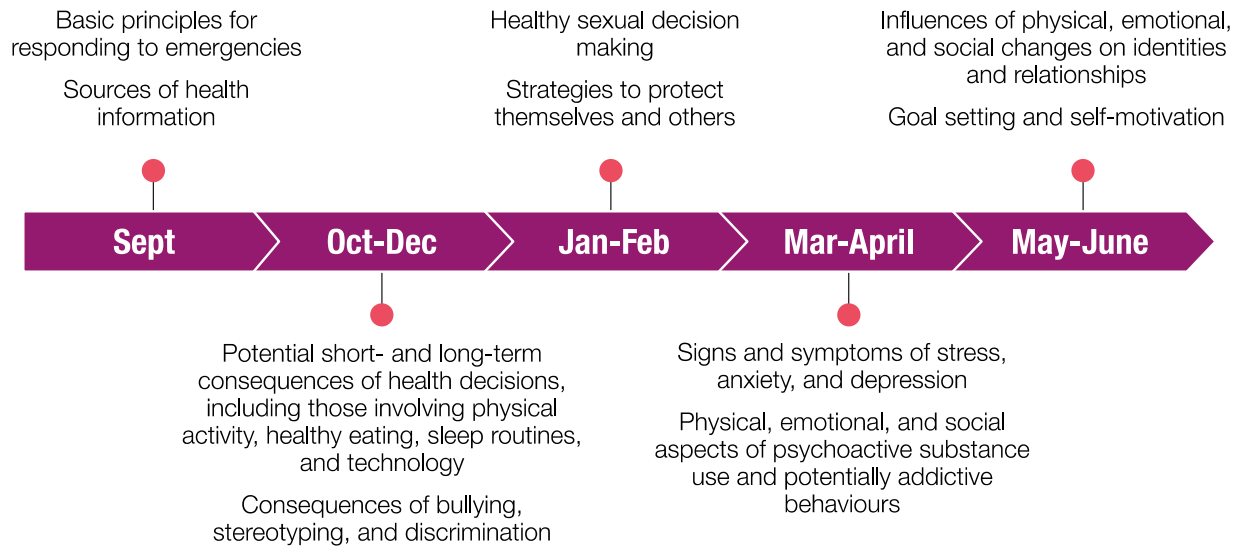
**Grade 8**



**Grade 9**



**Grade 10**



# Sample Letter to Send Home

To parents/guardians,

Sexual and mental health is part of the PHE (Physical and Health Education) curriculum. When people know information about their body, they are empowered to make healthy decisions. As our province has moved to a more holistic approach to health, knowing how our bodies and minds develop is vital to children keeping themselves healthy and safe.

Students will be learning about their bodies as they develop both physically and emotionally. This learning will take place in a safe space. Throughout the year, students will be learning a variety of topics. Please see below for a rough guideline for the years learning. All information shared will be from the Grade (X) curriculum, which you can view online at: <https://curriculum.gov.bc.ca/curriculum/physical-health-education>

September – October: (list topics to be covered)

(continue for the rest of the year)...

If you have questions about any of the topics covered in Health, I would be happy to discuss this further.

I look forward to all the learning we will be doing together this year.



# Alternative Delivery Policy

In British Columbia, the Alternative Delivery Policy gives parents the ability to teach health topics from the Physical and Health Education curriculum at home. However, it is important to note that this does not exempt students from learning about these topics. Parents must work with their school so that their children meet these learning standards at home and a student must be able to demonstrate their understanding of these topics.

While there are no provincial guidelines regarding how parents are notified about upcoming topics, it is recommended that parents receive enough notice about topics to give them an opportunity to contact you regarding specific topics of concern. This gives you opportunities to work through potential areas of concern rather than simply remove their children from these lessons.

**More detailed information about the Alternative Delivery Policy is available online at:** <https://www2.gov.bc.ca/gov/content/education-training/k-12/administration/legislation-policy/public-schools/alternative-delivery-in-the-physical-and-health-curriculum>

# Glossary of Key Terms:

<b>Abuse</b>	Covers a number of types of abuse, including physical abuse, emotional abuse, emotional harm, sexual abuse and sexual exploitation. ( <a href="#">BC Government Website</a> )
<b>Anxiety</b>	Emotional issues relating to temporary or ongoing highs (being manic) or lows (feelings of despair). These highs or lows may cause withdrawal from regular social or work activities. ( <a href="#">BC Government Website</a> )
<b>Bodily Autonomy</b>	A person's right to make decisions regarding their own body, including deciding at any point who may or may not touch their body. ( <a href="#">Adapted from Creating Consent Culture</a> )
<b>Body Image</b>	Body image refers to the range of thoughts and feelings about your body. They can include thoughts of acceptance and thoughts or actions that may be problematic to personal health and well-being. ( <a href="#">Adapted from Ministry of Health</a> )
<b>Bullying</b>	Intentional, hurtful and aggressive behaviour that makes others feel uncomfortable, scared or upset. ( <a href="#">BC Government Website</a> )
<b>Consent</b>	An agreement to engage in an activity and occurs when you ask, or give, permission to do something. It is used and should be used within daily life interactions and/or activities – such as asking for food or drink, taking a picture and/or posting it on social media, physical touch, or participating in an activity. ( <a href="#">BC Government Website</a> )
<b>Culture of Consent</b>	A community in which common ground and respecting boundaries is the norm, for both sexual contact and everyday activities. ( <a href="#">Adapted from Creating Consent Culture</a> )
<b>Cyberbullying</b>	Teasing or humiliating a person online using social media, cruel websites, video games, chat rooms, instant message or texting. Cyberbullying is constantly evolving and changing with new technology and social media sites and can happen at any time of day or night, reaching a person even in the privacy or their own home. ( <a href="#">BC Government Website</a> )
<b>Depression</b>	A type of mood disorder. It can change the way you feel and act and can also affect your ability to function in your daily life. It has both mental and physical symptoms different from typical feelings of sadness or grief. ( <a href="#">BC Government Website - Wellbeing</a> )
<b>Digital Footprint</b>	Personal activities on the internet that leave a permanent trail. ( <a href="#">Adapted from BC's Digital Literacy Framework</a> )
<b>Grooming</b>	When someone acts like your friend, girlfriend, or boyfriend, to try to make you do things like talk about sex or send videos or images of yourself without your clothes on. This sometimes takes place over a long period of time, over multiple conversations, and can put you into a harmful situation. ( <a href="#">Federal Government Website</a> )

	Online Grooming – when someone becomes friends with a minor online in order to control and take advantage of them for a sexual purpose, whether online or in-person. ( <a href="#">Federal Government Website</a> )
<b>Gender</b>	A social identity, such as man, woman, non-binary or two-spirit person. ( <a href="#">Federal Government Website</a> )
<b>Gender-Based Violence (GBV)</b>	Violence that is committed against someone based on their gender identity, gender expression, or perceived gender. It can be physical, emotional, psychological, or sexual in nature. GBV disproportionately impacts women and girls, Indigenous peoples, and other diverse populations. ( <a href="#">BC Government Website</a> )
<b>Gender Equity</b>	About removing barriers that stop people from reaching their full potential. Too often, women and gender diverse people experience unfairness. This is especially true when they also struggle with injustices like poverty, racism, ableism and/or homophobia. ( <a href="#">BC Government Website</a> )
<b>Harassment</b>	Comes in many forms and it can be criminal. Criminal harassment includes repeatedly communicating with someone or engaging in threatening behaviour that makes that person fear for their safety or the safety of a family member. You might experience harassment by people in the community of by the accused or offender. ( <a href="#">BC Government Website</a> )
<b>Gender Inclusive Language</b>	Language that’s free from prejudice, stereotypes or discriminatory views of specific people or group. ( <a href="#">BC Government Website</a> )
<b>Medical Professional/ Practitioner</b>	A member of the College of Physicians and Surgeons of British Columbia who is entitled to practice under the Health Professions Act. ( <a href="#">BC Government Website – Definitions</a> )
<b>Neglect</b>	Failure to provide for a child’s or youth’s basic needs. It involved an act of omission by the parent or guardian, resulting in harm to the child or youth. Neglect may include: failure to provide food, shelter, basic health care, supervision or protection from risks. ( <a href="#">BC Handbook for Action on Child Abuse and Neglect</a> )
<b>‘No’ Feeling</b>	An instinctual feeling to decline/ say ‘no’ to and/or remove yourself from a dangerous or uncomfortable situation.
<b>Non-Consensual Disclosure of Intimate Images</b>	The non-consensual distribution of intimate images (including videos) that can occur in various situations involving adults and youth, including relationship breakdown and cyberbullying. Intimate photos taken and shared during the relationship between partners are then distributed or shared to the partners family, friends, employers etc. or posted online when the relationship breaks down. ( <a href="#">Adapted from Canadian Department of Justice</a> )
<b>Peer Pressure</b>	Being influenced and choosing to do something you would not otherwise do, in hopes of feeling accepted and valued by others. It is not just about doing something against your will. ( <a href="#">BC Gov Website - HealthLinkBC</a> )
<b>Perpetrator/ Offender</b>	A person who commits an offence or crime/ a person who has been determined by a court to be guilty of an offence, whether on

	acceptance of a guilty plea or on a finding of guilt. In an informal context, it can also refer to a person who is suspected of committing a crime. ( <a href="#">Courts of BC – Justice Education Society</a> )
<b>Physical Abuse</b>	The deliberate physical assault or action by a person that results in, or is likely to result in, physical harm to a child or youth – including the use of unreasonable force to discipline a child or youth, or to prevent a child or youth from harming themselves. ( <a href="#">BC Handbook for Action on Child Abuse and Neglect</a> )
<b>Power Dynamic</b>	The way different people or different groups of people interact with each other, such as how one person leverages their power over another. ( <a href="#">Adapted from Creating Consent Culture</a> )
<b>Sex</b>	Biological characteristics, such as male, female or intersex. ( <a href="#">Federal Government Website</a> )
<b>Sexting/ Nudes</b>	Creating, sending or sharing intimate or sexual messages, images, or videos with friends, people you know or even strangers online or through a connected device. It could be sending naked pictures of yourself or others, sharing a video of someone naked or having sex, or sending a text describing sexual acts. ( <a href="#">Federal Government Website</a> )
<b>Sextortion</b>	Simply put, sextortion is blackmail. It's when someone threatens to send a sexual image or video of you to friends, family or other people if you don't provide more sexual images or videos or do what they ask. ( <a href="#">Federal Government Website</a> )
<b>Sexual Abuse</b>	When a child or youth is used (or likely to be used) for the sexual gratification of another person. ( <a href="#">BC Handbook for Action on Child Abuse and Neglect</a> )
<b>Sexual Assault</b>	Any sexual contact that happens without consent of both people. It can range from unwanted sexual touching to forced sexual intercourse. It can occur anywhere – in your home, at a community facility like a recreational centre or in public places. It can occur even when people who know each other or are married or dating. Sexual assault occurs when someone did not consent to the sexual activity. ( <a href="#">BC Government Website</a> )
<b>Sexual Exploitation</b>	A form of sexual abuse that occurs when a child or youth engages in a sexual activity, usually through manipulation or coercion, in exchange for money, drugs, food, shelter or other considerations. ( <a href="#">BC Handbook for Action on Child Abuse and Neglect</a> )
<b>Sexual Harassment</b>	Sexual harassment is a form of sex discrimination. It is sexual harassment if someone repeatedly says or does things to you that are insulting and offensive. It can be words or actions that are sex or gender-related. ( <a href="#">Human Rights in BC – Sex Discrimination and Sexual Harassment</a> )
<b>Sexual Orientation</b>	Your pattern of emotional, romantic or sexual attraction – May include attraction to the same gender (homosexuality), a gender different than your own (heterosexuality), both men and women (bisexuality), all genders (pansexual), or neither (asexuality). ( <a href="#">BC Government Website – HealthLinkBC</a> )

<b>Sexually Transmitted Infection (STIs)</b>	Affect the general health, well-being and reproductive capacity of those infected. Participation in sexual risk behaviours can increase your chances of acquiring an STI. The most common types of STIs include chlamydia, genital herpes, gonorrhoea, HIV/AIDS, human papillomavirus (HPV), lymphogranuloma venereum (LGV), and syphilis. ( <a href="#">Federal Government Website</a> )
<b>Stigma</b>	Disapproval of a person or group by society, community or larger group, based on perceived characteristics, which significantly discredits the person or group in the eyes of others, particularly when the person or group differs from the larger cultural norms. ( <a href="#">BC Government Overdose Prevention and Response Glossary</a> )
<b>Stress</b>	How your body reacts to any change or challenge that you experience in work or school, or as a result of a life change or traumatic event. Stress can impact emotions, mind and body in a way that negatively affect your overall health. ( <a href="#">Ministry of Mental Health and Addictions – Wellbeing</a> )
<b>Survivor/ Victim</b>	An individual who has suffered physical or emotional harm, property damage, or economic loss as the result of the commission or alleged commission of an offence. ( <a href="#">Canadian Victims Bill of Rights</a> )
<b>Trauma-Informed approach</b>	A strengths-based framework grounded in an understanding of and responsiveness to the impact of trauma which emphasizes physical psychological, and emotional safety for everyone, and creates opportunities for survivors to rebuild a sense of control and empowerment. ( <a href="#">BC Gov Website</a> )
<b>Unsafe Touch</b>	Unwanted physical contact such as touching or getting too close in a sexual manner. ( <a href="#">Adapted from Statistics Canada: Gender-based violence and unwanted sexual behaviour in Canada, 2018: Initial findings from the Survey of Safety in Public and Private Spaces</a> )
<b>Upstander</b>	Someone who intervenes on behalf of a person being attacked or bullied. ( <a href="#">Adapted from Creating Consent Culture</a> )