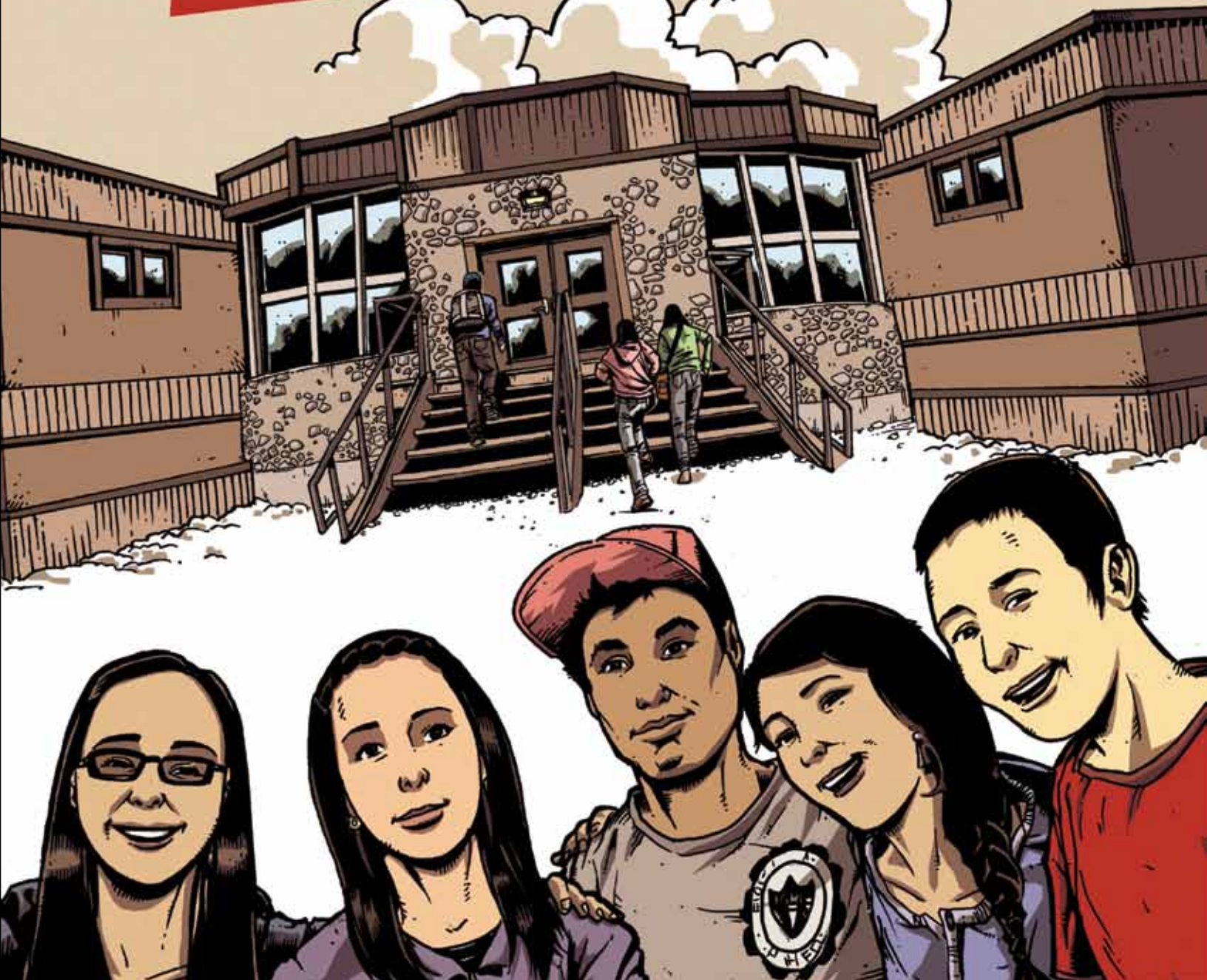


CHOICES



Teacher's Resource Guide

CHOICES

Teacher's Resource Guide



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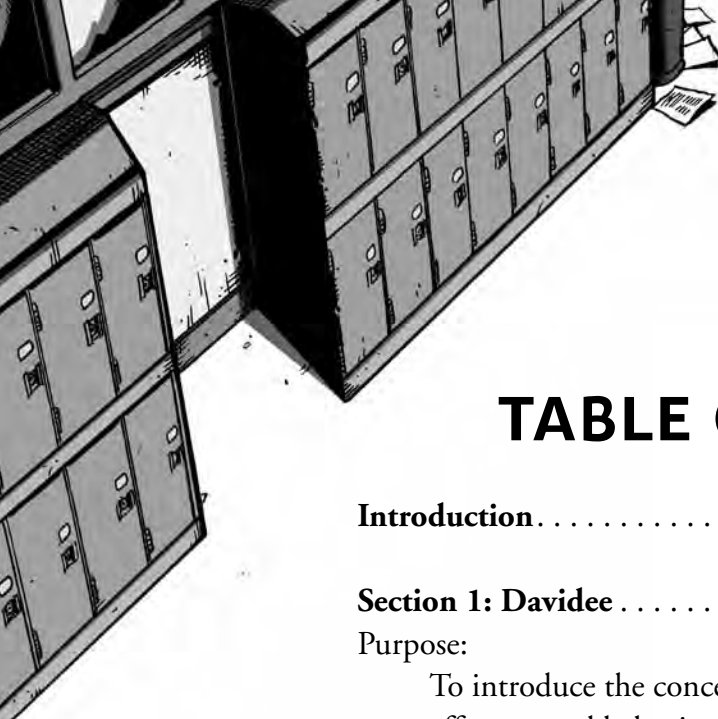


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To promote acceptance and respect for all people, regardless of their sexual orientation.

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Purpose:

To identify the people, places, and resources to go to for help.



Introduction

Background

In the fall of 2010, the Department of Health and the Department of Education collaborated to highlight key health promotion messages that could be used in the development of the Aulajaaqtut curriculum for grades 7 to 9. During these discussions, sexual health was identified as a priority issue from both a curriculum and a health promotion standpoint. The idea for a sexual health graphic novel came from a similar project in the Northwest Territories, and was adapted for Nunavut based on its holistic, multi-faceted approach. Unlike traditional sex education techniques, a story-based product can tackle a variety of interrelated sexual health issues in a way that is immersive, interesting, and fun.

Sexual Health in Nunavut

Nunavut continues to have very high rates of sexually transmitted infections (STIs), such as chlamydia and gonorrhoea. In addition, the recent rise in cases of syphilis indicates a need for better health promotion about safer sex and STIs. STIs make up 75 percent of reportable diseases in the territory, and the majority of cases occur in young people aged 15 to 24. In addition to high rates of infection, the following behaviours contribute to poor sexual health outcomes among young Nunavummiut:

- Nunavummiut are more likely to experience sexual initiation at an early age (sex for the first time at age 13 or younger) (Freeman 2012).
- More students in grades 9 and 10 are sexually active in Nunavut than nationally (Freeman 2012).
- Nunavummiut report high rates of teen pregnancy (Statistics Canada 2012).

Sexual Health Education in Nunavut

A 2003 survey about sexual health attitudes and behaviours in Nunavut found that 67 percent of the youth surveyed thought the sexual health education they receive is inadequate (Cole 2003). Youth focus groups conducted by the Department of Health indicated that young people are interested in getting more information about sexual health and that the school system is a desired location for this education (Youth Voices 2013).

Development of *Choices*

In developing sexual health education resources, the Department of Health regularly consults the guidelines and best practices put forth by the Canadian Federation for Sexual Health, the Canadian Guidelines for Sexual Health Education by the Public Health Agency of Canada, and Nunavut-specific research on sexual health.

Based on these and other sources, *Choices* meets the following important criteria:

1. *Choices* will help support school educators to teach youth about sexual health and healthy choices.
 - Schools remain one of the best mediums to provide sexual health knowledge to youth.
 - Access to knowledge is critical for youth to make healthy choices.
2. *Choices* is a made-in-Nunavut sexual health education resource that covers important sexual health topics, including healthy relationships, gender identity, STIs, and how alcohol can affect decision-making.
 - A tool that is made by Nunavummiut, culturally relevant, and visually appealing improves its chances of succeeding as an effective teaching tool for sexual health.

The content for *Choices* was developed by a Nunavut-based writer with direction from Department of Health and Department of Education staff. The process also included focus groups with youth, Nunavut reference photographs, and translation into all four official languages.

Before Reading *Choices*

This unit is best taught after you have had the time to get to know your students. Some students may find the topic of sexual health difficult to discuss, and thus it would be best delivered once the students have become comfortable within the class and with you as their teacher.

- Introduce *Choices*, telling the students that *Choices* was developed by a Nunavut-based writer with direction from Nunavummiut youth, Nunavut reference photographs, and translation into all four official languages.
- Ask the students what they already know about sexual health to generate discussion. This can be a great way to better understand the students' prior knowledge of sexual health issues. One idea for doing this is to have the students create concept maps (mind maps). To create a concept map about sexual health, instruct the students to write down the term "sexual health" in the middle of a sheet of paper and then fill up the rest of the page with words that they associate with sexual health. This can be a great diagnostic assessment to gauge prior learning.
- Introduce the topic of sexual health within your classroom by having your students view the *Choices* documentary. This video gives the students background information about the making of *Choices*, showcasing Nunavummiut youth discussing sexual health issues and *Choices* itself. It's an excellent ice breaker, showing the students that it's okay to talk about these issues that face all Nunavummiut.

Read *Choices* Straight Through

First, read *Choices* the whole way through so that students can take in all of the messages before zeroing in on specific subtopics or themes. Students could volunteer, or you could assign several students a character in *Choices* and they could read aloud their respective character's lines.

Read *Choices* One Chapter at a Time

Choices is broken into chapters. Read *Choices* again, stopping your reading after each chapter to discuss the students' reactions as a class.

This resource is broken down into units, and each unit follows a certain character's storyline. Each unit has a number of discussion questions and activities that correspond with the issues the characters face in *Choices*. These can be entry points to more in-depth learning about these subtopics. For example, the character Annie and her storyline are associated with the unit on STIs and pregnancy.

Additional Notes for Teachers

Remember that students learn in different ways and we cannot expect that all students will respond in the same way to a specific teaching strategy. Some different learning styles you may encounter include auditory, visual, kinesthetic, and tactile. It is important to keep in mind that you may need to adapt the materials based on the literacy levels of your students.

Outlined below are some useful learning strategies that may assist those students who struggle with their learning, or demonstrate some difficulty with everyday classroom tasks. Students, teachers, and parents must work together to maximize the student's learning potential and create a positive, productive, and successful classroom community.

Give a structured overview before the lesson:

- Provide verbal and written instruction.
- Establish routines that enable the student to check understanding with a peer.
- Provide frequent repetition of important tasks.

Adaptations to consider for assignments, projects, and tests:

- Shorten assignments or divide assignments into parts.
- Provide extended time for completion of assignments.
- Provide additional time for reading assignments.
- Provide assistance with note-taking if needed.
- Use peer support and mentoring.

References:

Cole, M. (2003). Youth sexual health in Nunavut: a needs-based survey of knowledge, attitudes and behaviour.

Freeman, J., King, M., Briand, P., and Pickett, W. Health and Health-Related Behaviours among Young People: Nunavut.

Statistics Canada (2012a). Pregnancy outcomes, by age group, Canada, provinces and territories 2001 to 2005; Table 106-9002.

Government of Nunavut (2013). Youth Voices on Sexual Health: Nunavut.



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SECTION 1: DAVIDEE

Educator Note

At the end of each lesson, you will find a list of discussion questions. You will have the choice of using them to:

- a. Engage the students in whole-class discussions;
- b. Use as a handout for students to answer individually or with a partner; or
- c. Give to the students to answer one or two of the questions as a journal entry.

Handouts for the second two options are provided at the end of each lesson.

Purpose

To introduce the concept of peer pressure and how it affects sexual behaviour.

To understand the qualities of a healthy relationship.

Time

1.5 to 2 hours

Handouts

1. Relationships
2. Reflection Questions
3. Journal Response



Procedure

Part I: Peer Pressure

Introduction: 15 minutes

- Tell the students that the first part of this lesson will deal with the concept of peer pressure.
- Write the following definition on the board and ask for a volunteer to read it to the class:
 - o **Peers:** Peers are people who are around the same age and who have similar backgrounds or lifestyles.
- Next, have the students work in groups of four to brainstorm a definition of peer pressure, and ask for volunteers to share their definitions with the class. Record the main points from their definitions on the board or chart paper.
- Write the following dictionary definition on the board or chart paper:
 - o **Peer pressure** is the social pressure by members of one's peer group to take certain actions, adopt certain values, or otherwise conform in order to be accepted.
- Say to the students: "In simpler terms, peer pressure is the pressure that your friends and the people you know put on you to do something you don't want to do (or don't feel ready to do), such as have sex. There are three different types of peer pressure."
- Record these examples on the board or chart paper:
 - o Obvious peer pressure, such as: "Everyone's doing it—so should you."
 - o Underhanded peer pressure, such as: "You're a virgin, you wouldn't understand."
 - o Controlling peer pressure, such as: "You would do it if you loved me."

Davidée Discussion: 10 minutes

- Tell the students that in *Choices*, Davidée is greatly affected by peer pressure from his friends to have sex. In fact, peer pressure is probably the reason most teens decide to engage in sexual activity before they are ready.

- Hold a class discussion around the following questions:
 1. Who was pressuring Davidee to have sex?
 - Answer: Some of his friends from school.
 2. Why does he feel pressured?
 - Answer: He thinks he is the only one among his friends who hasn't done it.
 - Answer: He wants to feel normal.
 3. How does this affect his relationship with his girlfriend, Jessie?
 - Answer: This has a negative effect on his relationship. At the party, Davidee puts Jessie in an awkward situation in front of their friends by pressuring her to have sex.
 - Answer: Jessie becomes upset and confused by his behaviour.
 4. How does this affect his self-esteem?
 - Answer: Negatively. Davidee wants to be like his friends, but is also worried about his relationship with Jessie, leaving him lost and confused.
 5. How does this affect his actions?
 - Answer: Consequently, Davidee becomes angry and takes out his aggression physically during a school hockey game.

Group Work and Presentations: 20–30 minutes

- Explain to the students that it is not uncommon for teens to feel pressure to have sex. Tell them, “Sometimes it might feel like everyone’s trying to push you into having sex: your friends, your boyfriend or girlfriend, films, and TV. But it’s up to you when you have sex, and it’s okay to say ‘no.’”
- Divide the students into groups of four.
- Each group should discuss peer pressure as a group and come up with three responses or ways to handle peer pressure.
- Ask each group to present their responses to the class.
- After the presentation, allow the students to ask any unanswered questions.

Part 2: Healthy Relationships

Introduction and Discussion Questions: 15–20 minutes

- Tell the students that this activity will focus on healthy relationships, including friendships and positive role models.
- Ask and discuss the following questions:
 1. How is the relationship Davidee has with Sam different from the relationship he has with his other friends?
 - Answer: Because Sam is older and has probably been through similar situations, he is able to act as a positive role model for Davidee.
 - Answer: Sam is able to give Davidee a lot of good advice about his relationship with Jessie.
 2. What advice does Sam give Davidee about his relationship with Jessie?
 - Answer: Sam tells Davidee that if he cares about Jessie, he has to respect her.
 3. What does respect mean in a healthy relationship?
 - Answer: Understanding each other's boundaries (including sexual boundaries)
 - Answer: Supporting each other in good times and bad
 - Answer: Being honest with one another (expressing openly how you are feeling)
 - Answer: Trusting in each other
 - Answer: Being able to communicate without fear of judgment
 4. What other advice does Sam give Davidee? Focus on key phrases, such as:
 - Answer: "Sex is not something you just 'get over with.'"
 - Answer: "If you are not ready to talk about it, you are not ready to do it."
 - Answer: "It's about respecting each other and keeping each other healthy and safe."

5. How is Sam a positive male role model for Davidee?

- Answer: Sam is able to talk openly with Davidee about sex and his relationship with Jessie.
- Answer: Unlike his other friends, Sam teaches Davidee about respecting Jessie and how they can maintain a healthy and happy relationship.
- Answer: Sam doesn't fit the stereotypes of a guy who just wants to "do it" and doesn't care about his partner's feelings.

Group Work and Presentations: 15–20 minutes

Optional Video: <https://www.youtube.com/watch?v=XQrGxoUxRUc>

What's Your Relationship Reality?

Instructor Note: This video is available on the accompanying *Choices* DVD. The video is about a group of teens and what they think about relationships, love, and sex. Hear what they have to say about Facebook and texting, breaking up, why some teens get into unhealthy relationships, and more.

- After discussing the questions above and (optional) viewing the YouTube video with the students, write the following five qualities on the board or chart paper and ask the group to define them. Use their words as much as possible to create a group definition:
 - Respect
 - Responsibility
 - Understanding
 - Effort
 - Caring

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Definitions:

Respect: Respect means listening to one another, valuing each other's opinions, and listening in a non-judgmental manner. Respect also involves attempting to understand and affirm the other's emotions.

Responsibility: To be responsible means that others can depend on you—that you will fulfill your obligations and will be able to distinguish right from wrong.

Understanding: To be understanding means to be knowledgeable about a person, what he or she wants and needs, and how she or he feels. It means being able to put yourself in someone else's shoes and imagine what life looks like from another point of view.

Effort: To put effort into a relationship means that you work hard to show respect, to be caring, and to be there for the other person.

Caring: To be caring means to be concerned and interested in another person's feelings, needs, and wants, and to want what is best for that person. It means feeling love or a liking for that person and wanting to provide for and/or pay attention to her or him.

- Explain to the class that the best relationships, meaning relationships between friends, parents, teachers, romantic partners, and so on, result from both people contributing to all of these qualities.
- Divide the class into groups of four.
- Assign each group one of the five qualities listed above.
- Distribute **Handout 1: Relationships**, which describes four different imaginary relationships—with a parent, friend, or romantic partner.
- Tell the groups they will create two examples of what the teen on the handout could do to demonstrate the assigned quality.
- When they have finished, each group will share their results.

Discussion Questions/Handout/Journal Response: 10 minutes

1. Describe a relationship in your life that makes you feel very good. What makes that relationship work? This could include a student's relationship with a parent, another family member, a teacher, a friend, a mentor, and so on. In their answers, students may use statements like:
 - They are easy to talk to.
 - They make me feel good about myself.
 - They help me when I need it and are always there to support me.
 - I can be myself when I am around them and don't have to impress them.
 - We have fun together.

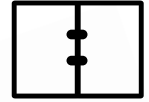
2. Describe a relationship in your life that you would like to improve. What makes that relationship difficult for you? Again, this could include a student's relationship with any of the types of people mentioned in the previous question. In their answers, students may use statements like:
 - I don't feel like they respect me.
 - Sometimes I don't think they are really listening to what I say.
 - They make me feel badly about myself.
 - I feel like I need to act differently around them.
 - I don't think they would be there to support me if I needed help.

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3. How would you feel if a parent or guardian didn't understand you, or if you could not depend on that person? What could or would you do about the relationship? This is a difficult question, because many teens feel their parents or guardians do not understand them during adolescence. Some advice to improve the relationships could be:
- Start an open dialogue with your parents about what's going on in your life. Try to be open and communicate your feelings.
 - Ask them what's going on in their life. All good relationships require mutual respect.
 - Spend time together and appreciate each other's efforts and strengths.
4. How would you feel about a friend who didn't respect you, or a friend who did not put enough work into the friendship? Possible answers might include:
- Disappointed
 - Angry
 - Humiliated or embarrassed
 - Sad



Handout 1
Relationships



Name:

Date:

Circle the relationship quality that has been assigned to your group:

RESPECT UNDERSTANDING RESPONSIBILITY
EFFORT CARING

For each of the relationship problems described below, write two things the individual could do to demonstrate the quality you circled.

1. Jennifer lives with her mom and her stepfather, John. She and John don't always get along, but she is trying to build a better relationship with him.
2. Sarah and Kelly have become better friends this year. They try to do things together on the weekends, but Kelly has been pretty busy lately with her boyfriend.
3. Jack and Henry had a fight they both regret. They both need to apologize before their friendship can get back on even ground.
4. Jake and Sally have been going out for six months. Most of the time they get along really well. Sometimes they argue about stupid stuff. They both want to try to communicate better and argue less often.

TEACHER'S RESOURCE GUIDE

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SECTION 2: JESSIE

Educator Note

At the end of each lesson, you will find a list of discussion questions. You will have the choice of using them to:

- a. Engage the students in whole-class discussions;
- b. Use as a handout for students to answer individually or with a partner; or
- c. Give to the students to answer one or two of the questions as a journal entry.

Handouts for the second two options are provided at the end of each lesson.

Purpose

To understand the importance of delaying sexual activity and communicating with sexual partners and potential sexual partners.

Time

1 to 1.5 hours

Handouts

1. Compare and Contrast
2. At a Party Role-Play
3. Reflection Questions
4. Journal Response



Procedure

Jessie Discussion: 15–20 minutes

- Tell the students that this activity focuses on Jessie’s story and her decision to wait to have sex. Begin the discussion by asking the students the following questions from the reading:
 1. Why does Jessie feel pressured to have sex?
 - Answer: Because she is being pressured by her boyfriend, Davidee, who is also being pressured by his friends.
 2. Why does she want to wait?
 - Answer: Jessie wants to wait because she does not feel ready to have sex. She doesn’t have knowledge of STIs or contraception, and doesn’t think sex is something to rush into.
 3. Why does she get mad at Davidee in the hallway?
 - Answer: Because he tries to kiss her when he knows she doesn’t like doing that in public.
 - Answer: Because she is still upset about what happened at the party.
 4. Do you think Jessie made the right decision not to have sex? Possible answers include:
 - Yes, because she didn’t feel ready.
 - Yes, because she felt pressured.
 - Yes, because she was not prepared to deal with any of the physical and emotional consequences of having sex, such as an unplanned pregnancy, getting an STI, or how it would affect her relationship with Davidee.
- Tell the students that failure to make good decisions about sex is one of the reasons teens can become infected with STIs or experience an unplanned pregnancy.
- Ask the students to provide examples of how these outcomes can be avoided.
- Record their list on the board or chart paper. Some examples include:
 - Waiting to have sex
 - Using condoms and other forms of birth control, like the birth control pill

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Handout Completion: 10 minutes

- Split the students up into pairs. Distribute **Handout 1: Compare and Contrast**. With their partners, ask them to compare and contrast Jessie and Davidee's responses and reactions to the peer pressure they are facing. Please see the chart included on the handout for possible answers.

Handout Discussion: 10–15 minutes

- When the students are ready, bring them together and make a list of their handout answers on the board or chart paper.

Instructor Note: This is a good time to discuss Jessie's conversation with her grandmother and the advice she was given (pages 25–27).

- Ask the students, "What kind of advice was Jessie given from her grandmother?" Possible answers include:
 - Think about your future and health.
 - If you aren't ready for something, then never rush.
 - Respect your feelings.
 - Respect yourself—be your own best friend.
 - Think about your future and plan ahead.
 - There is no need to be afraid.

Role-Play and Presentations: 20 minutes

Instructor Note: The following role-play activity was taken from *Adolescent Sexual Health Education: An Activity Sourcebook* by Josefina J. Card, Ph.D., and Tabitha Benner, M.P.A. (New York: Springer Publishing Company, 2008).

- Tell the students that this activity will help them learn basic strategies for dealing with unwanted sexual advances from someone they are dating.
- Distribute **Handout 2: At a Party: Scripted Role-Play**.
- To begin the activity, ask for two volunteers to read the fully scripted practice scenario to the class.

- While the two volunteers are reading, provide the rest of the class with **Handout 2: Observer Checklist**, and ask them to watch for refusal behaviours.
- In the scenario, the two students are at a party at someone's home, with no parents present.
- After the enactment, ask the volunteers how they felt about the roles, and ask the other students which refusal techniques they observed.
- Second, distribute **Handout 2: Partially Scripted Role-Play**, with a scenario similar to the first.
- In this role-play, the person taking the non-scripted role faces unwanted pressure to have sex.
- Next, have the class break up into groups of three to do the partially scripted role-play.
- Students will rotate through the roles so that each student has the opportunity to read the scripted role, act the non-scripted role, and observe the role-play using the checklist.
- End the activity with a full-group discussion. Students will share their observations of and emotional responses to the skills practice.

Whole-Class Discussion: 10 minutes

- Finish the activity by asking the students to make a list of possible reasons teens may want to wait to have sex. Create a master list on the board or chart paper.
- Examples include:
 - o Religious beliefs
 - o Personal beliefs
 - o Cultural beliefs
 - o Not ready for sex
 - o Want to wait until marriage
 - o Want to wait until out of high school
 - o Risk of pregnancy
 - o Risk of STIs
 - o Don't want to jeopardize goals
 - o Relationship with parents

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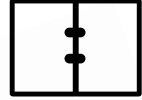
- o Not in love
 - o Want to resist peer pressure
 - o Not interested
- It is important to validate that people have different reasons for choosing to wait to have sex, and that each reason should be valued and respected.

Discussion Questions/Handout/Journal Response:

10–15 minutes

1. Given what we learned today, do you think that there are some good reasons to choose to wait to have sex? Possible answers might include:
 - o Yes, there is a lot to think about before deciding to have sex.
 - o Yes, I want to be prepared and know that I am taking all the necessary precautions to avoid pregnancy and STIs.
 - o Yes, I have my whole future to think of and don't want to risk anything.
2. Is it difficult to stick to the decision to wait to have sex? What are some things people can do to help themselves follow through with that decision? Possible answers might include:
 - o Set goals for yourself. Think about what kind of life you want to lead and how you are going to get there.
 - o Educate yourself on the risks associated with unprotected sex.
 - o If you are dating, make sure you are in a loving, committed, and healthy relationship.
3. What can you do to help your friends if they choose to wait to have sex? Possible answers might include:
 - o Support their decision and tell them it is okay to wait until they are ready.
 - o Don't pressure them the way Davidee's friends pressured him, and Davidee in turn pressured Jessie.

Compare and Contrast

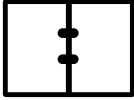


Name:

Date:

Daivee's response to peer pressure	Jessie's response to peer pressure
<p>Actions: What did he do?</p>	<p>Actions: What did she do?</p>
<p>Feelings: How did he feel?</p>	<p>Feelings: How did she feel?</p>
<p>Bottom Line: What was the final result?</p>	<p>Bottom Line: What was the final result?</p>





Handout 1

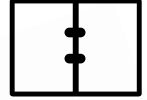
Compare and Contrast: Educator Copy

Name:

Date:

Davidee's response to peer pressure	Jessie's response to peer pressure
<p>Actions: What did he do?</p> <ul style="list-style-type: none">• Became pushy with Jessie at the party when his friends were watching and making fun of him• Tried to kiss Jessie at school and she got mad• Got very angry at his hockey game out of frustration <p>Feelings: How did he feel?</p> <ul style="list-style-type: none">• sad• angry• embarrassed• shameful• frustrated• confused• fearful <p>Bottom Line: What was the final result?</p> <ul style="list-style-type: none">• Gave into peer pressure by in turn putting pressure on Jessie to have sex.	<p>Actions: What did she do?</p> <ul style="list-style-type: none">• Didn't have sex with Davidee because she wasn't ready• Expressed her feelings to Annie• Spoke about the situation with her grandmother <p>Feelings: How did she feel?</p> <ul style="list-style-type: none">• sad• angry• embarrassed• confused• frustrated• fearful <p>Bottom Line: What was the final result?</p> <ul style="list-style-type: none">• Did not give into peer pressure.

At a Party: Scripted Role-Play



Name:

Date:

Setting the Stage: You are at a party with someone you have gone out with a few times. The party is at somebody's home and their parents are gone. A lot of kids are getting drunk and couples are leaving—maybe to have sex. You don't want to have sex and don't want to leave the party.

Person 1: Let's get out of here so we can talk—it's too crowded.

Person 2: Yes, it is crowded in here—but the porch is empty.

Person 1: I just want to be with you. This is our chance.

Person 2: I want to be with you, too, but the party's fun.

Person 1: C'mon, I just want to be alone with you.

Person 2: No, I like this party—I'm glad we came.

Person 1: I've been looking forward to this night with you—please don't spoil it.

Person 2: I hope the night won't be spoiled.

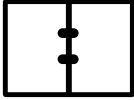
Person 1: If I'd known you'd be like this, I wouldn't have come here with you.

Person 2: I guess not, but I know we can have fun. Let's get something to eat in the kitchen.

Person 1: I guess I don't have much choice.

Person 2: Yes, I suppose so. But I'll give you the choice of the next movie we watch.





Handout 2

At a Party: Partially Scripted Role-Play

Setting the Stage: You are at a party with someone you have gone out with a few times. The party is at somebody's home and their parents are gone. A lot of kids are getting drunk and couples are leaving—maybe to have sex. You don't want to have sex and don't want to leave the party.

Person 1: Let's get out of here so we can talk—it's too crowded.

Person 2:

Person 1: I just want to be with you. This is our chance.

Person 2:

Person 1: C'mon, I just want to be alone with you.

Person 2:

Person 1: I've been looking forward to this night with you—please don't spoil it.

Person 2:

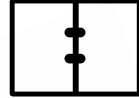
Person 1: If I'd known you'd be like this, I wouldn't have come here with you.

Person 2:

Person 1: I guess I don't have much choice.

Person 2:

At a Party: Observer Checklist



Name:

Date:

Refusal Skills: For each round of the role-play—up to six rounds—observers can use this sheet to check off which verbal and non-verbal behaviours Person 2 uses in practicing refusal skills.

Behaviour	1	2	3	4	5	6
Said “NO”						
Used Body Language						
Repeated Refusal						
Suggested Alternative						
Strengthened the Relationship						



TEACHER'S RESOURCE GUIDE

Choices

SECTION 3: MICHAEL

Educator Note

At the end of each lesson, you will find a list of discussion questions. You will have the choice of using them to:

- a. Engage the students in whole-class discussions;
- b. Use as a handout for students to answer individually or with a partner; or
- c. Give to the students to answer one or two of the questions as a journal entry.

Handouts for the second two options are provided at the end of each lesson.

Purpose

To learn about issues faced by gay, lesbian, bisexual, and questioning people.

To promote acceptance and respect for all people, regardless of their sexual orientation.

Time

1 to 1.5 hours

Handouts

1. Coming Out
2. Reflection Questions
3. Journal Response



Procedure

Michael Discussion: 10–15 minutes

- Tell the students that this activity will focus on the character of Michael.
- Ask the students:
 1. “What emotions does Michael feel in the story and why?” Record their answers on the board or chart paper.
 - Answer: Afraid/scared
 - Answer: Alone
 - Answer: Rejected
- Explain that because many people are afraid to “come out” and reveal their sexual orientation, they are forced to keep many aspects of their lives a secret.
- Much like what happened to Michael, keeping these secrets can lead to feelings of depression, suicide, dropping out of school, drug and alcohol abuse, and much more.
- Explain to the students that often, like Michael, people struggle to decide who is safe to tell because there is so much hatred and fear about homosexuality in our society.
- Ask the students:
 1. “How did Michael deal with his situation? Who did he turn to for help?”
 - Answer: Kamatsiaqtut Help Line, and after this call, he talked to Davidee.

CHOICES

Handout: 15 minutes

- Part 1: Distribute **Handout 1: Coming Out**. Tell the students that they are going to use the pages from the graphic novel (with blank speech bubbles) to create a new dialogue between Michael and the Help Line. Remind the students that the dialogue has to be respectful and supportive. If there is time, have the students share their dialogues in small groups.

Role-Play: 20–30 minutes

- Part 2: When the students are finished the handout, divide them into pairs. Together, they will create a role-play of the Help Line phone call scene. Have students extend the conversation beyond what is in the graphic novel. When the groups are ready, ask them to present their role-plays for the class.

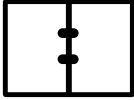
Discussion Questions/Handout/Journal Response:

10–15 minutes

1. What were the first things you remember learning about homosexuality? Do you remember learning anything from your family, friends, community, or faith? Was what you learned positive or negative? If it was negative, do you feel differently now?
2. How would it feel to hide something as important as your sexual orientation? Possible answers might include:
 - Lonely
 - Scary
 - Intimidating
3. What movie or television character have you recently seen who is gay/lesbian/bisexual/transgender/queer (LGBTQ)? How has that affected your thinking?
4. What have you learned today about sexual orientation and coming out? How can you help and support a friend who comes out to you? Possible answers might include:
 - Support them the same way as you would support any friend with a problem.

- Explain to them that they are still the same person they were before, and nothing has changed.
- Listen and be positive.
- Encourage them to be themselves.
- Be positive and respectful of the LGBTQ community.
- Support them coming out to others, including family (if they want to), and don't pressure them.
- Respect their privacy.





Handout 1

Coming Out

Name:

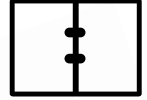
Date:

Use the speech bubbles to write your own dialogue of Michael's phone call to the Help Line.



Handout 2

Reflection Questions



Name:

Date:

1. What were the first things you remember learning about homosexuality? Do you remember learning anything from your family, friends, community, or faith? Was what you learned positive or negative? If it was negative, do you feel differently now?
2. How would it feel to hide something as important as your sexual orientation?
3. What movie or television character have you recently seen who is LGBTQ? How has that affected your thinking?
4. What have you learned today about sexual orientation and coming out? How can you help and support a friend who comes out to you?

TEACHER'S RESOURCE GUIDE

Choices

SECTION 4: ANNIE

Educator Note

At the end of each lesson, you will find a list of discussion questions. You will have the choice of using them to:

- a. Engage the students in whole-class discussions;
 - b. Use as a handout for students to answer individually or with a partner; or
 - c. Give to the students to answer one or two of the questions as a journal entry.
- Handouts for the second two options are provided at the end of each lesson.

Purpose

To present factual information about preventing pregnancy and sexually transmitted infections.

Time

1.5 to 2 hours

Handouts

1. Methods of Contraception
2. STI Quiz
3. STI Quiz: Answers
4. Reflection Questions
5. Journal Response



Procedure

Annie Discussion: 10–15 minutes

- Tell the students that this activity will focus on the character of Annie. Begin the lesson by asking the students the following questions from the reading:
 1. Why was Annie upset?
 - Answer: She had unprotected sex at a party and is worried that she may be pregnant.
 2. What are the risks of unprotected sex?
 - Answer: Pregnancy
 - Answer: Sexually transmitted infections (STIs)
 3. Who does Annie talk to first?
 - Answer: She talks to Jessie and Miali.
 4. How does Miali help her? How is she a positive role model for Annie?
 - Answer: Miali gives her advice about going to the health centre and explains how they can help.
 - Answer: Miali supports Annie and helps educate her about the risks of unprotected sex.
 5. Where does Miali tell Annie to go for help?
 - Answer: She tells her to go to the community health centre.
 6. What happens at the health centre? What does the nurse talk to Annie about?
 - Answer: She talks about unplanned pregnancies, STIs, and HIV.
 - Answer: She tells Annie that she had a scare in high school, too, and ended up talking to her mom about it.
 - Answer: She tells Annie that it is good to talk to people you trust.
 - Answer: She talks to Annie about different methods of contraception.
 - Answer: She gives her pamphlets to take home to learn more.
 7. Why was it important for Annie to go see the nurse?
 - Answer: To take a pregnancy test and get tested for STIs.
 - Answer: To learn about methods of contraception and the importance of safe and protected sex.

Methods of Protection: 5–10 minutes

- Tell the students that if they are sexually active or plan to become sexually active, it is important for them to understand the basics of practicing safe sex and protecting themselves from unintended pregnancies and STIs.
- Ask the students to name as many methods of protection as they can, and create a master list on the board or chart paper.
- From the list, ask the students what method of protection protects people from contracting STIs (answer: condoms).

Instructor Note: If the students are not aware of the various methods of contraception, use the handout provided at the end of the lesson (**Handout 1: Methods of Contraception**) to go through the different methods as a class and for them to keep as a reference.

- Make sure the following methods of contraception are listed:
 - Condoms (male and female)
 - Birth control pill
 - IUD
 - The Patch
 - Diaphragm
 - Spermicidal jelly or cream
 - Emergency contraception
 - Contraceptive implant
 - Injectable contraception (Depo-Provera)
 - Withdrawal
 - Abstinence (choosing to wait to have sex; go to <http://www.irespectmyself.ca/Talking%20Sex> for more information)
- Tell the students that other methods are effective at protecting against pregnancy, but that condoms are used to prevent both pregnancy and STIs. Make sure the students understand that condoms can also be used in combination with another form of contraception.

CHOICES

- Ask the students if they know where to get free condoms. Provide them with answers (answer: health centre).

Quiz and Discussion: 20–25 minutes

Optional Video: <https://www.youtube.com/watch?v=nmxjPiATrsU>

All About STIs—Inuktitut

Instructor Note: This video is available on the accompanying *Choices* DVD. This is an informational video on STIs that includes Inuktitut subtitles.

- Tell the students that the rest of the lesson will be broken up into two parts. The first part will have the students work in pairs to complete a quiz on STIs.
- Split the students up into pairs and distribute **Handout 2: STI Quiz**. Give them 10 minutes to complete the true-or-false quiz.
- When they are finished, discuss the answers with them as a class. The answers are provided at the end of the lesson in **Handout 2: STI Quiz: Answers**.

Mock Visit to the Sexual Health Centre: 30–35 minutes

Optional Video: <https://www.youtube.com/watch?v=C5nJdf-oLec>

My First Contraception and STI Exam—Inuktitut

Instructor Note: This video is available on the accompanying *Choices* DVD. The video is a guide to a “mock visit” of a teenager’s first contraception and STI exam.

- The second part will have the students again work in partners and perform a mock visit to the health centre.
- Give the students a scenario for the visit (e.g., possible STI, pregnancy, etc.) and have them create a dialogue between the nurse and the patient to present to the class.
- Remind the students to use the dialogue between Annie and the nurse as a guide (pages 20–24).
- Ask for volunteers to present their mock visits to the sexual health centre.

Discussion Questions/Handout/Journal Response: 10–15 minutes

Optional Video: <https://www.youtube.com/watch?v=nmXjPiATrsU>
All About STIs—Inuktitut

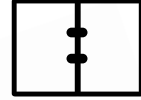
Instructor Note: This video is available on the accompanying *Choices* DVD. This is an informational video on STIs that includes Inuktitut subtitles.




1. Many girls who are having sex wait until they suspect they are pregnant before they go to the health centre. Why wouldn't they go before they have sex to get birth control? What advice would you give a friend who was having sex without using any contraception or condoms?
2. Which of the contraception methods make the most sense for teens to use and why? A possible answer might include:
 - Condoms are the easiest-to-use and the most readily available form of birth control. Condoms are also the only form of birth control that prevents against STIs.
3. How important is it for a male to be involved in his female partner's use of contraception? A possible answer might include:
 - Very important. A male should know if his partner is using another form of contraception, and if so, that she is taking it properly. The consequences of an unplanned pregnancy will affect both partners in a relationship.
4. Do you feel more comfortable talking about and using contraception now that you are more knowledgeable on the topic? Why?
5. What are the two most effective ways to avoid STIs? Possible answers might include:
 - Waiting to have sex (abstinence)
 - Using condoms
6. What three things should you do if you are worried that you are infected with an STI? Possible answers might include:
 - Go directly to the health centre and get tested.
 - Get treatment if you are infected with an STI.

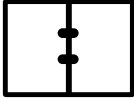
CHOICES




- Contact your sexual partner(s) and inform them, or inform the nurse, who will in turn inform them that they should also get tested.
7. What would be the most difficult thing about having an STI? Possible answers might include:
- Feeling embarrassed or dirty.
 - Having to tell your sexual partner or partners.
 - Being afraid to seek treatment.
8. What are common signs and symptoms of STIs? Make sure the students understand that there are often no signs, but their answers may include:
- Painful urination
 - Lower abdominal pain
 - Discharge from the penis in men
 - Pain during sexual intercourse in women
 - Testicular pain in men
 - Thick, cloudy, or bloody discharge from the penis or vagina
 - Abnormal menstrual bleeding
 - Painful, swollen testicles
 - Painful bowel movements
 - Anal itching
9. If you have unprotected sex, why is it important to get tested for STIs even if you don't have any noticeable symptoms? A possible answer might include:
- Because many STIs don't show symptoms, but can still be passed on and cause other long-term health problems, such as infertility.
10. What is the only way to completely protect yourself from STIs and unplanned pregnancy? A possible answer might include:
- Abstinence. It is perfectly okay if you, or your partner, choose to wait to be sexually active. You and your partner must respect each other's decisions, and remember, people can change their minds about whether or not they want to have sex.

Methods of Contraception



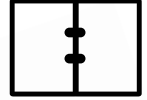
Method	How does it work?	How effective is it?	Does it protect against STIs?	How much does it cost in Nunavut?
Male/ Female Condom 	Condoms are worn on the genitals and prevent sperm from entering the vagina.	If used correctly, male and female condoms prevent pregnancy 95 to 98 percent of the time.	YES.	FREE. Condoms are free at all community health centres.
Oral Contraceptive Pill 	Prescription medication that must be taken by a girl at the same time every day. The Pill works by preventing the ovaries from releasing an egg.	If used correctly, the Pill is 99.9 percent effective at preventing pregnancy.	NO.	FREE for Nunavut Land Claims Beneficiaries (NLCB). Free with some health insurance providers (either your own health insurance or your parents'). \$38 per month if not covered.
Contraceptive Patch 	The Patch sticks to a girl's skin and releases hormones to stop the ovaries from releasing an egg. The Patch must be changed once every seven days.	If used correctly, the Patch is 99 percent effective at preventing pregnancy.	NO.	\$34 per month (FREE for NLCB).



<p>Contraceptive Injection (Depo-Provera)</p> 	<p>The injection is given every 12 to 13 weeks and uses a hormone to stop the ovaries from releasing an egg.</p>	<p>The contraceptive injection is 99.7 percent effective at preventing pregnancy.</p>	<p>NO.</p>	<p>\$46 per injection if not covered (FREE for NLCB).</p>
<p>Vaginal Ring (NuvaRing)</p> 	<p>The vaginal ring is worn inside the vagina, where it releases hormones to stop the ovaries from releasing an egg. Females wear the ring for three weeks and then have it out for one week.</p>	<p>If used correctly, the ring is 99.7 percent effective at preventing pregnancy.</p>	<p>NO.</p>	<p>\$34 per month (FREE for NLCB).</p>
<p>Intra-Uterine System or Device (IUS or IUD)</p> 	<p>Inserted into the uterus by a health care professional, the IUS or IUD releases a hormone that prevents an egg from implanting, makes it harder for sperm to enter the cervix, or destroys sperm completely.</p>	<p>The IUS and IUD are 99.1 to 99.8 percent effective at preventing pregnancy.</p>	<p>NO.</p>	<p>From \$67 to \$204 (FREE for NLCB).</p>
<p>Abstinence</p>	<p>Abstinence is an individual choice to wait to have sex.</p>	<p>It is the only way to completely (100%) protect yourself from STIs and unplanned pregnancy.</p>	<p>YES.</p>	<p>FREE.</p>

Handout 2

STI Quiz



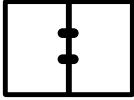
Name:

Date:

True or False: Write **T** for True or **F** for False.

1. A person can always tell if she or he has an STI.
2. With appropriate medical treatment, all STIs except HIV can be cured.
3. Using latex condoms will help prevent the spread of STIs.
4. The germs that cause STIs can only enter the body through either the woman's vagina or the man's penis.
5. Women who have regular Pap smears will also find out if they have an STI.
6. Teenagers can receive testing and treatment without having their parents notified.
7. You cannot get an STI by masturbating, or by holding hands, talking, walking, or dancing with a partner.
8. STIs are a new health problem.
9. STIs can cause major health problems, and some can even result in death.
10. Only people who have vaginal or oral sex can contract an STI.
11. If you are infected with an STI, the sooner you get treatment, the better your chances of full recovery.



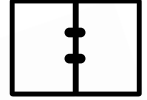


12. A woman using oral contraceptives should still insist that her partner use a latex condom to protect against STIs.
13. It is possible to get some STIs from kissing.
14. Oral is a safe way to have sex if you don't want to get a disease.
15. People usually know they have an STI within two to five days after being infected.
16. The most important thing to do if you suspect you have been infected by an STI is to inform your sexual partner or partners.



Handout 3

STI Quiz: Answers



STI Facts: True or False?

1. A person can always tell if she or he has an STI.

False. People can and do have STIs without experiencing any symptoms. Women often have STIs without symptoms because their reproductive organs are internal, but men infected with some diseases, like chlamydia, may also have no symptoms. People infected with HIV, the virus that causes AIDS, generally have no symptoms for some time, even years, after infection.

2. With appropriate medical treatment, all STIs except HIV can be cured.

False. Herpes and HPV (human papilloma virus, which causes genital warts) are two STIs caused by a virus that cannot be cured at the present time.

There are now two HPV vaccines authorized for use in Canada: Gardasil® and Cervarix™. Gardasil® provides protection against four HPV types: two that cause approximately 70 percent of all cervical cancers (HPV-16 and HPV-18), and two that cause approximately 90 percent of all anogenital warts in males and females (HPV-6 and HPV-11). It is approved for use in females and males aged 9 to 26. In April 2011, Gardasil® was approved for use in women up to the age of 45.

Cervarix™ provides protection against the two HPV types that cause approximately 70 percent of all cervical cancers (HPV-16 and HPV-18). It has been approved for use in females aged 10 to 25.

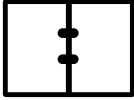
Ask your health care provider if the HPV vaccine is appropriate for you. For more information, visit <http://www.phac-aspc.gc.ca/std-mts/hpv-vph/hpv-vph-vaccine-eng.php>.

For more information on the symptoms and treatment of HPV and herpes, go to the Centers for Disease Control and Prevention: <http://www.cdc.gov/>.

Nunavut has a publicly funded HPV immunization program for girls in grade 6. In Nunavut, Gardasil is the product used for HPV immunizations.

3. Using latex condoms will help prevent the spread of STIs.

True. Latex condoms can help prevent the spread of STIs, but they must be used correctly. Latex condoms are not 100 percent effective because they can occasionally break or come off during sex. As well, condoms do not always protect against some STIs, such as herpes, HPV, and syphilis. This is because the condom does not always cover the infected area. To be safe, it is important to know that your sexual partner has been tested for any possible STIs before engaging in sex.



4. The germs that cause STIs can only enter the body through either the woman's vagina or the man's penis.

False. STI germs (bacteria and viruses) can enter the body through any mucus membrane, including the vagina, penis, mouth, and, in some cases, the eyes. HIV can also enter the body when injected into the bloodstream from shared IV drug needles.

5. Women who have regular Pap smears will also find out if they have an STI.

False. The Pap smear is a test specifically designed to detect cervical cancer and may detect a herpes infection, but it will not indicate the presence of other STIs. A woman who thinks she may have been exposed to an STI must ask her health practitioner for STI tests. For a full STI examination, the doctor will do:

- o A blood sample to check for HIV, syphilis, and hepatitis B and C
- o A urine sample to check for chlamydia and gonorrhea
- o A swab from the vagina to test for any other possible infections

6. Teenagers can receive testing and treatment for STIs without having their parents notified.

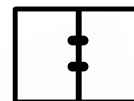
True. Records are confidential, so that no one can go to the health centre and find out if a teenager was treated there. In Nunavut, health centres provide STI tests at no cost, and treatment is also available at no cost.

7. You cannot get an STI by masturbating, or by holding hands, talking, walking, or dancing with a partner.

True. STIs are only spread through close contact with an infected person. Anyone can be infected by having oral or vaginal sex with a partner who is infected.

8. STIs are a new health problem.

False. STIs have existed since people began recording history. There is evidence of negative health impacts caused by STIs in ancient writings, art, and skeletal remains. Writers of the Old Testament, Egyptians writing on papyrus, and the famous Greek physician Hippocrates all mention symptoms of diseases and sufferings that we know today were caused by STIs. Cures for most STIs were not discovered until the 1900s, and some still cannot be cured.



9. STIs can cause major health problems, and some can even result in death.

True. HIV infection, which can be spread through sexual contact, is at present always fatal. Genital herpes can damage babies born to infected women. Some STIs, such as gonorrhea and chlamydia, can cause pelvic inflammatory disease (PID). If untreated, PID may lead to sterility, heart disease, or death. Syphilis is called “the great imitator” because it shows signs that other diseases also show. There are three stages of syphilis: stage 1 starts with a small, painless sore where the bacteria entered the body. In stage 2, a person may develop a general feeling of being unwell, or flat, smooth warts in the genital area. In stage 3, syphilis that has been left untreated can cause heart problems, mental issues, and even death.

10. Only people who have vaginal or oral sex can contract an STI.

False. Infants can contract STIs, such as herpes, gonorrhea, and HIV infection, during their mother’s pregnancy and/or during the birthing process.

11. If you are infected with an STI, the sooner you get treatment, the better your chances of full recovery.

True. Once an STI infects a person, it begins damaging their health. If someone waits weeks or months before getting tested and treated, her or his health may be permanently damaged, even after treatment begins. In addition, the person can spread untreated STIs to sexual partners.

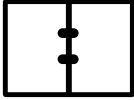
12. A woman using oral contraceptives should still insist that her partner use a latex condom to protect against STIs.

True. Oral contraceptives do not prevent STIs, so a condom is still necessary for protection.

13. It is possible to get some STIs from kissing.

True. It is possible to be infected by syphilis through kissing, if the infected person has chancres (small sores) in or around the mouth. The herpes virus can also be spread through kissing if active lesions are present.





14. Oral is a safe way to have sex if you don't want to get a disease.

False. It is possible to be infected with HIV, gonorrhea, and herpes through oral sex.

15. People usually know they have an STI within two to five days after being infected.

False. Many people never have symptoms, and others may not have symptoms for weeks or years after being infected. HIV infection may not show symptoms for years, but the infected person is capable of infecting other partners during that time.

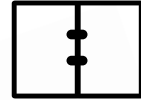
16. The most important thing to do if you suspect you have been infected by an STI is to inform your sexual partner or partners.

False. The most important thing to do is to seek immediate medical treatment. Symptoms of an STI may never appear, or may go away after a short time, but the infection continues inside the person's body. An infected person can suffer serious physical damage and can continue to infect others. Once medical treatment has begun, the infected person or a health practitioner can inform his or her sexual partners. In the meantime, it is also important for the infected person to abstain from any sexual contact.



Handout 4

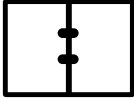
Reflection Questions



Name:

Date:

1. Many girls who are having sex wait until they think they are pregnant before they go to the health centre. Why wouldn't they go before they have sex to get birth control? What advice would you give a friend who was having sex without using any contraception or condoms?
2. Which of the contraception methods make the most sense for teens to use and why?
3. How important is it for a male to be involved in his female partner's use of contraception?
4. Do you feel more comfortable talking about and using contraception now that you are more knowledgeable on the topic? Why?
5. What are the two most effective ways to avoid STIs?
6. What three things should you do if you think you have an STI?
7. How would you talk about using condoms if you were about to have sex with a partner? How would you feel if your partner wanted to talk about condom use when you were about to have sex? What would you say to her or him?
8. What would be the most difficult thing about having an STI?



Handout 5
Journal Response

Name:

Date:

Write a short journal response answering one of the questions below.

1. Do you feel more comfortable talking about and using contraception now that you know more about the topic? Why?

2. What are three things you learned about STIs that surprised you or that you didn't know before? How could you help a friend who tells you they have an STI?

TEACHER'S RESOURCE GUIDE

Choices

SECTION 5: ALL

Educator Note

At the end of each lesson, you will find a list of discussion questions. You will have the choice of using them to:

- a. Engage the students in whole-class discussions;
- b. Use as a handout for students to answer individually or with a partner; or
- c. Give to the students to answer one or two of the questions as a journal entry.

Handouts for the second two options are provided at the end of each lesson.

Purpose

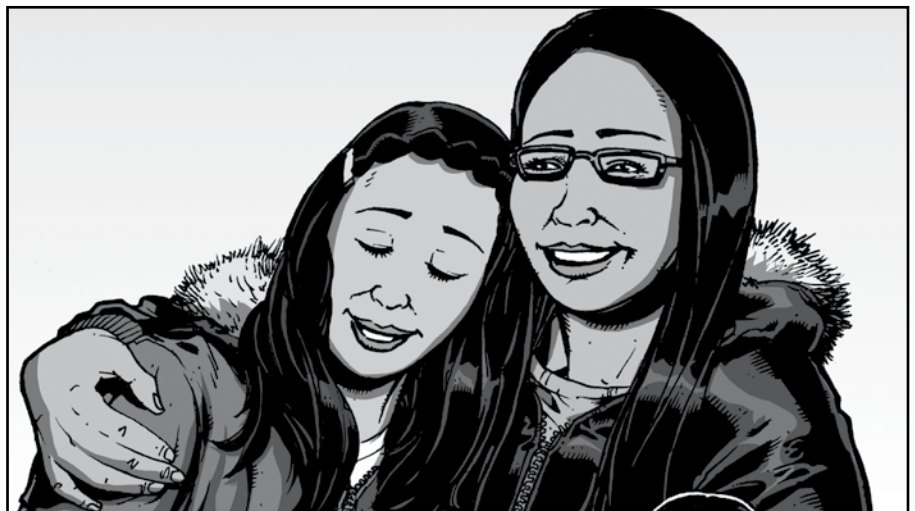
To identify the people, places, and resources to go to for help.

Time

45 to 50 minutes

Handouts

1. I Would Go To...
2. Reflection Questions
3. Journal Response



Procedure

Introduction and Handout: 30 minutes

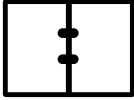
- Tell the students that everyone has relationships with different kinds of people with whom they share different things. Explain that in this activity they will identify people, places, and resources they can go to for information and help for any of the issues discussed in the previous lessons.
- Begin the activity by asking the students to brainstorm a list of people they can talk to comfortably. Make sure you clarify that you want them to list the type of relationship they have to the student, not their real names. On the board or chart paper, list all the relationships the group provides.
- Next, say to the students, “Like some of the characters in *Choices*, sometimes we don’t feel comfortable talking to anyone we know personally.” Ask the students where else they can get help and answers for any of their needs or questions.
- Record their answers on the board or chart paper.
- Distribute **Handout 1: I Would Go To...** to each of the students.
- There are eight sections on the handout. Each section has a topic or problem written in it.
- Instruct the students to think about the topic or problem and the person, place, or resource you might go to for help with the issue.
- Tell the students they have 10 minutes to finish the handouts.

Discussion Questions/Handout/Journal Response:

15–20 minutes

1. How and why did you choose the person, place, or resource for each situation?
2. What kind of help will be provided or what questions will be answered by these people, places, or resources?
3. Do you expect to get a lot of help from these people, places, or resources?





Handout 1

I Would Go To...

Name:

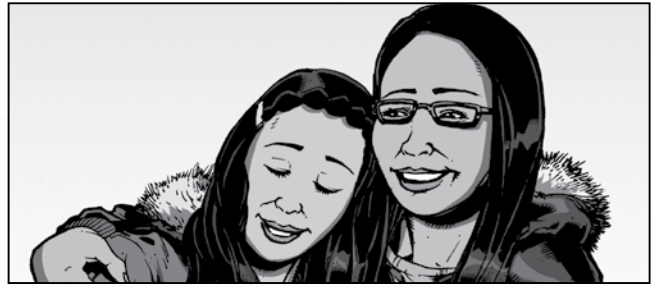
Date:

Read each statement carefully. Think about the statement and whom you would go to for help or advice. You do not have to write the person's name, but what their relationship is to you. For example: parent, teacher, friend, sibling, nurse, and so on.

Statements:

1. You've been going out with someone for two months and she or he wants to have sex. You're not sure you want to do that.
2. You found several small lumps on your genitals.
3. You think you are gay, but are too afraid to tell your friends.
4. You had unprotected sex.
5. You want to break up with your boyfriend or girlfriend, but are scared of what their reaction will be.
6. You don't feel comfortable talking to your friends about oral sex, but you are interested in learning more.
7. For girls: you missed your period and are afraid you might be pregnant.
8. For guys: you forgot to use a condom with your girlfriend and now she is pregnant.
9. You want to learn more about the different kinds of contraception.
10. You don't feel comfortable talking to your parents about sex, but need some advice.

Appendix



Community Agreements

Mutual Respect

Appreciation

Attentive Listening

Right to Pass

Responsibility to Participate

Language of Choice





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