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1997

Grade five and six sexuality: questions and concerns

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GRADE FIVE AND SIX SEXUALITY: QUESTIONS AND CONCERNS

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B.Ed., University of Lethbridge, 1987

A One-Credit Project
Submitted to the Faculty of Education
of the University of Lethbridge
in Partial Fulfilment of the
Requirements for the Degree

MASTER OF EDUCATION

LETHBRIDGE, ALBERTA

April, 1997
Sexuality is an integral part of the personality of everyone: man, woman, and child. It is a basic need and an aspect of being human that cannot be separated from other aspects of human life...It is in the energy that motivates us to find love, contact, feel warmth, and intimacy; it is expressed in the way we feel, move, touch and are touched; it is about being sensual as well as sexual. Sexuality influences thoughts, feelings, actions and interactions, and thereby our mental and physical health. Since health is a fundamental human right, so must sexual health also be a basic human right...[including] freedom from fear, shame, guilt, and false beliefs and other psychological factors. (The World Health Organization 1986)

“We believe that the facts of one’s life are not as important as one’s perceptions of those facts.” (Christensen and Thomas 1983 pg. 10)
Part One

Research
INTRODUCTION

My name is David Carnegy, I am an elementary school teacher and counsellor for Medicine Hat School District #76. One of my assignments every year is to teach the grade five and six “Human Sexuality” program. The Alberta Health Curriculum mandates what teachers should teach to grade five and six students who are 10 to 13 years old. I personally feel that the “Human Sexuality” curriculum is suitable for this age group of children and that it will hopefully help them to better understand their sexuality.

Prior to teaching the lessons I meet with parents and teachers to present my resources. At that time I also encourage them to express their concerns and ask questions. Parents and teachers will often reiterate that they would not mind teaching the children Human Sexuality, but they are uncertain about two main points:

a) What kinds of questions do children ask in the classes? and;
b) How does one answer some of these questions?

Over the past eight years parents and teachers have consistently asked me if I can recommend any resources to help them to answer the kinds of questions children ask regarding human sexuality. Unfortunately, I have not been able to find any suitable resources available within our district that would meet the parents’ and teachers’ needs. Therefore, I plan to do a literature review to search for suitable resources for my students’ parents and my fellow teachers.
This literature review will answer and/or address the following questions:

a) What resources are available to help parents and teachers better understand the kinds of questions children ask regarding human sexuality? and;

b) How do they answer these questions?

Five Hundred Questions Kids Ask (Younger, 1992) is a book that has been written in response to adolescent questions regarding sex and sexuality. The intent of the book is to act as an educational tool on “Adolescent Sexuality, Questions and Concerns” for parents, teachers, and adolescents. Younger has created a unique way to assist parents, teachers and adolescents in seeing how other adolescents perceive sex and sexuality by responding to their questions. The majority of the questions were obtained from grade nine or ten students (approximately 15 to 16 years old).

Younger categorized the questions into six different chapters. Chapter one deals with bodily development and sexual maturation. Chapter two explains conception, pregnancy, and childbirth. Issues of relationships in regards to family, surfacing of sexual identity, and sexual expression and sexual relationships are addressed in chapter three. Birth control is discussed in chapter four. Chapter five provides answers to questions about AIDS, other sexually transmitted diseases, and sexually transmitted diseases in general. In chapter six the topic of heredity is discussed. At the end of the book there is a glossary of terms provided which includes slang and street terms.
While the Younger book shares with my own project the premise that sexual expression is a way for people to show affection and love for one another, it is based on questions from older students. The present project is the first to address questions raised by 10 to 12 year old students in this manner and to this extent.

*What's “Verbil” Sex? An Analysis of Adolescents’ Questions about Sex* (Campbell and Campbell, 1987) is a paper that is attempts to understand the nature of questions that adolescents would ask as they move through adolescence to adulthood. The research was to ascertain whether the questions children ask uncovered developmental differences in cognitive abilities. Also, a secondary goal was to evaluate whether there are gender differences in the questions children ask.

Grade seven, eight, and ten adolescents that were participating in a two week sex education program asked 826 anonymous questions of the researchers. One significant difference was that sex information was available to grade seven and eight students but not to grade ten students.

Researchers then created the following ten categories:

(1) reproductive physiology; (2) health risks; (3) behavior norms; (4) intercourse;

(5) contraception; (6) pregnancy; (7) slang; (8) communication; (9) disallowed questions on abortion, masturbation, or homosexuality; and (10) miscellaneous.

Results from categorizing of the questions indicated that there was an overall significant difference between younger and older subjects \( \chi^2 (8) = 33.3, p< .001 \). Younger subjects ask more questions about basic biology, clarification of slang terms, and intercourse than did the grade ten students. The
older students were more concerned with questions regarding birth control, health risks, and communication. Boys appeared to more interested in questions regarding slang terms and intercourse. Association between sex and types of questions asked was significant ($X^2 (8) = 23.6, p < .01$). Girls’ questions indicated a higher concern about communication, relationships, and health risks.

The findings suggested that there was a clear difference of knowledge and understanding among adolescents. Findings further suggested that there was a difference between boys’ and girls’ questions and concerns. Boys asked three times as many questions about slang and profanity than did girls. Girls in turn, asked four times as many questions about relationships. Questions also, indicated that boys were far less concerned about birth control and pregnancy than females. Given the range and depth of the questions, the researchers felt that the middle school years would be a prime time to use sex educations to help adolescent students gain a sense of responsibility for knowledge about birth control and pregnancy.

In responding to childrens questions and concerns regarding human sexuality the “3 R’s” of health are very important. The “3 R’s” are:

a) respect - for ourselves and for each other as unique and valuable human beings;

b) responsibility - to ourselves to learn and grow to our full potential, and to be responsible for our own actions; and,

c) reason - to base personal decisions on all available information. A decision based on accurate information will be better than one based on little or no information.

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This project would suggest that both males and females need to accept responsibility and become more knowledgeable about birth control, safer sex, STD (Sexually Transmitted Diseases), and pregnancy. Furthermore, the “3 R’s” need to be stressed at home and at school to help the children become more responsible, and more respectful towards each other.

Anticipation and experimentation: The sexual concerns of midadolescence (Sonderheimer and Adrian, 1982), deals with the sexual issues and concerns of midadolescents in sex education classes. Junior high students who had an average age of sixteen were allowed to ask the author (a psychiatrist) anonymous questions concerning sexuality. The single sessions meetings last 40 minutes with a mixed-sex class of approximately 30 students.

Questions that the students asked were divided into the following categories: “moral/ethical/social, normality vs abnormality, psychological issues, anatomy and physiology, masturbation, pregnancy and contraception, sexual practices, homosexuality, and adolescent whimsy.” (Sonderheimer and Adrian, Abstract) The misconceptions and sexual concerns disclosed in the questions suggested to the researchers that sexual education programs need to be improved, and be made more extensive to meet the needs of the adolescent students. Sexual education programs work well in a mixed-sex situation. Leaders delivering the program need to communicate to the students using sensitivity and a sense of humor. They must encourage discussion.
This project would fully support the authors' assumption that there is a need for a more extensive sex education program. Hopefully, the material provided for parents and teachers in this project will help improve upon a child's sex education at home and in the school district.

*Adolescents’ questions about Sex* (Davis and Harris, 1983) gave a group of 288 mixed Whites, Hispanics and Native American adolescents age 11 to 18 from urban and rural areas an opportunity to ask anonymous questions about sex. Questions asked by the students were used to help build new presentations for sexual education programs.

The most commonly asked questions were on reproduction, sexuality, and contraception. Other questions asked by the students dealt with, anatomy, venereal disease, pregnancy, abortion, vocabulary, hygiene, and other related diseases. Younger children tended to ask more questions than the older ones. Girls asked considerably more questions, concerning pregnancy, contraception, and anatomy than boys. Students attending rural schools asked more questions about venereal disease than did their counterparts in the urban setting. Lastly, the Ss' questions ranged from sophisticated to total ignorance.

The questions asked by younger children in this project were most often related to the lessons being taught in the classroom and/or questions rising out of answers from the previous classes. However, I would concur with the authors, in that the questions do range from sophisticated to total ignorance. Some of the questions to support theses statements would be: 1) How come men have nipples? 2) What happens to the eggs in an ovary when a female goes through menopause? (Given females are
born with 40 to 400 thousand eggs at birth.) 3) Does sex Hurt? 4) Can boys have the baby? 5) Do boys have periods?

*Perceptions of sexual behavior among urban early adolescents: Translating theory through focus groups* (Stanton, Black, and Kaljee, 1993) is a research project that uses a model of risk-protection behavior and ethnographic techniques to explore the developmental, sociohistorical, and cultural constructs that might have a bearing upon adolescent sexual behavior. Group and individual interviews were used on 35 boys and 29 girls (aged 10-14) and their parents. Ss of sexual activity among early adolescents was perceived to be highly prevalent in the community. The results suggested that abstinence is nonnormative and that girls seemed to believe that sex was a mechanism for establishing an intimate relationships. Furthermore, girls felt that parents discussion about sexuality was an encouragement to participate in sex. In closing the authors stated that youths raised concerns about their ability to ask a partner to use condoms.

Stanton’s, Black’s, and Kaljee’s suggestion that parental discussion about sexuality was viewed as encouraging participation in sex is totally against the premise of this project. Medicine Hat School District #76 has mandated a “abstinence plus” directive for teaching sex education. Consequently, parents and teachers must be aware of the kinds of questions and concerns children will have regarding sex education. By employing the “3 R’s” strategy in teaching sexual education classes, the concern by parents and teachers for “promoting” sexual activity would be eliminated.
In *Adolescent Sexuality: Biosocial Aspects and Intervention Strategies* (Diamond and Diamond 1986) the authors discuss the precarious times, situations and development of adolescent youth. Milton and Grace Diamond feel that there is justification for early intervention of youth seeking negative independence (i.e., adolescent sexual activity) because the negative and/or irresponsible experiences can be very costly for both the adolescent and society. Teachers, social workers, or psychologists can often help adolescents learn what they need to know to deal with sexual issues more effectively.

A child that is going though physical changes does not necessarily have a corresponding development in social maturation and knowledge. The authors suggest that a quality sex education program can help dispel some of the adolescent’s concerns, and actually give him/her great comfort.

Milton and Diamond spent considerable time discussing many of the concerns and issues of adolescents as they go through puberty. Puberty is a transition time for males to change from a child to a sexually mature male who has new found physical strength. Males will have erections, wet dreams, and growth spurts or lack of growth spurts that will cause them considerable stress and concern. Constant reassurance needs to be given to the boys while they go through the pubescent year and suffer with acne, voice change, and the uneven growth spurts.

Females begin to have breast development, menstruation, and ovulation, and become capable of reproducing. In the article, the authors talk extensively about menarche and menstruation. There is discussion regarding menstruation flow, activities females can do while they have their periods, length of cycle, hymen, vaginal wetting, and vaginal discharges.
Although all these changes are happening, the young adolescents are still expected to continue their education, training, and experience to equip them for economic and social independence. The period of adolescence is a very difficult time both physically and emotionally for youth.

The last suggestion that the authors make is to inform the reader that the most successful counsellor for teenagers are their peers. A teenager that is properly educated and willing to participate would be in the best position to be aware of the concerns of his/her peers.

One of the main focuses of this project is to help parents and teachers address boys' and girls' questions and concerns they may have regarding their sexual development. However, I do not feel that 10 to 12 year old children would be the most successful counsellors for their peers. Most grade five and six students would not be mature or knowledgeable enough to give advice.

*Sexuality Education: Sorting Fact from Fiction* (Berne and Huberman, 1995) is a scientific literature review that examines the validity of the 17 most frequently argued points that are put forth by groups that oppose comprehensive sexuality education. School leaders are very aware that the American society is in a state of disarray over values. Interest groups are arguing over school prayer, diversity, and other issues, but the most lengthy battle has been over sex education. In the past, school officials have taken a very low key approach to sex education to minimize the disruption to the sex education curriculum.
There are two new factors that are now forcing educators to make more precise and high profile
decisions. One, is that there is a nation-wide push by special interest groups such as; abstinence-only
education, abstinence-plus, and those that oppose abstinence instruction. All three of the groups are
well-funded and are demanding to be heard. Second, other parent and government agencies are
putting increased pressure on schools to address adolescent health problems that involve sexuality.
Teen pregnancy, AIDS, and sexually transmitted diseases are at the forefront of the parents and
governments concerns.

There are three main groups attempting to have their way with the health curriculum. The first group
believes in "abstinence-only education" and fear that discussion involving intimate sexual behavior
sends a mixed message to adolescents. They believe that topics such as use of condoms and
contraceptives, abortion, masturbation, homosexuality, and other matters of sexual behavior should
not be taught. They feel that the goal of educators should be to influence teens to believe that the
only acceptable place for sexual behavior is within marriage.

The second group believes in "abstinence-plus" and their goal is to encourage adolescent students
to postpone sexual intimacy. Also, they feel that students should have an opportunity to be taught
a wide range of topics, including the topics above. Members of this group are strong promoters of
"skills development" which help students to make decisions based on fact not fiction.

The final group is against the teaching of abstinence because they feel that it creates a feeling of fear
and shame in students. This group tends to be under-represented in public debates. Consequently,
most of the debate on sexuality education takes place between the promoters of the conservative, and moderate positions.

When the special interest groups examining the scientific data they tend to have very biased findings. Berne and Huberman argued that many results from credible researches are taken out of context, misinterpreted, and partially reported. On occasion, both groups have cited the same material, but have presented the material differently, in their own biased way to support their cause.

The authors are very aware of the need for school leaders to make sound decisions regarding the topic of sexual education based on reliable and valid information. To assist school leaders to make the correct decision the authors present the following 17 arguments/counter arguments most frequently used by the various interest group:

1. “Abstinence-until marriage curricula work” - purpose is to create a variety of abstinence based sexual education programs and test their results in support of delaying sexual intercourse until marriage. Five studies were done on the three major abstinence-until marriage program’s students, one to two years after they received the program. There was no real significance found between this group and the control group.

2. “Abstinence-plus curricula with skills development, followed by lessons about contraception, gives students a “mixed message” and encourage sexual behavior.” (Berne and Huberman, 1995) A study of seven abstinence-plus programs surveyed students one to two years after the program, and found that the students maintain the abstinent behaviors longer than a control group.
3. “Sex Respect” works, “so say” researchers from the Institute for research and Evaluation in Utah. However, other studies have shown that the “Sex Respect” program made no significant difference in attitudes or behaviors after one or two years.

4. “Teen Aid” is a highly successful abstinence-until-marriage curriculum. The Teen Ed group in San Marcos California stated that teenage pregnancy was reduced by 86% when the program was taught. Unfortunately, the miraculous change in San Marcos has no scientific study to prove this to be true.

5. “Sex education encourages students to become sexually active at younger ages.” (Berne and Humberman 1995) The World Health Organization recently reviewed 35 sexual education programs in United States and Europe and found no cases that substantiated the above statement.

6. “Teaching students about contraception causes students to initiate sexual activity.” Studies have shown that American teenagers have unprotected sex for the first six to 18 months before they decide to use contraception. Regrettably, most teenagers only look for contraception because of pregnancy or a pregnancy scare.

7. “Teaching students about contraception increases the possibility that they will become pregnant.” There actually is evidence that proves this theory wrong. Europeans include contraception in family life education from middle school to high school. Although, American girls begin having sexual relationships at the same age as Europeans girls, the Americans girls have two to seven times the amount of teenage pregnancies.
8. "Because contraceptives fail so frequently, we should teach teenagers to abstain from sex." Although, teen sexual activity has increased over the last two decades, the teenage (age 15 to 19) rate of pregnancy has decreased by 15%. Because of the large number of sexually active teenagers the overall pregnancy rate of 15 to 18 year old has increased.

9. "Contraceptives do not protect against AIDS and sexually transmitted diseases (STD)." Condoms are the only other significant protection against AIDS other than abstinence.

10. "Condoms have a failure rate of 12% to 40%." The main failure of condoms can be attributed to the people using the condom incorrectly, rather than the condom itself. A better knowledge base of how to use a condom and the compliance of the teenagers involved in sexual activity to use condoms would cause a lower rate of pregnancies.

11. "Condoms break frequently." The quality of condoms do vary considerable, but there are good quality condoms available. Triple latex condom treated with nonoxynol 9 that are less than two months old are considered to be the most reliable. Excessive stretching, reusing, and finger nails (i.e., females nails puncture condom while putting condom on or fondling penis) are some of the reasons that condoms break. In an eight country study of condom breakage, an average of 4% broke in a years study.

12. "Condoms do not prevent HIV from passing though the latex." According to the Center for Disease Control latex condoms have been 100% effective stopping the passage of HIV. However, there is some evidence that the pores of some latex condoms do allow HIV to pass through their walls.
13. "Condoms are not effective in preventing the transmission of HIV." "No uninfected partner acquired HIV from an infected partner with consistent use of condoms in approximately 1500 acts of intercourse." (Berne and Huberman, 1995)

14. "Contraceptives like the pill, Norplant, and the UID (intrauterine device) are dangerous, and unsafe." Most contraceptives do have side affects but are four times safer than becoming pregnant and having a baby.

15. "Abortion is a dangerous procedure." Studies of the complications that happen from a legal abortion are four to 25 times safer than becoming pregnant and having a baby.

16. "Abortion prevents a young woman from having a baby in the future." If a female was to have numerous abortion then there could be concerns about being able to get pregnant again.

17. "Abortion causes mental anguish and psychiatric problems." Former Surgeon General C. E. Koop report on abortion, found inconclusive evidence to consider abortion a physical or mental health problem.

Berne and Huberman felt that they would deem a program successful if it brings about one or more of the following results. 1) delaying the initiation of sexual intercourse, 2) decreasing the frequency of unprotected intercourse, and 3) increasing condom use.

Berne’s and Huberman’s examination of the validity of the 17 above points is extremely well done. However, Medicine Hat School District #76’s administration has advised teachers to use “abstinence plus” while teaching sex education. Their belief is that abstinence is the safest way for students not to contract a STD or become pregnant. In conjunction with that belief, administrators also encourage teaching the following “3 R’s”:
a) **respect** - for ourselves and for each other as unique and valuable human beings;

b) **responsibility** - to ourselves to learn and grow to our full potential, and to be responsible for our own actions; and,

c) **reason** - to base personal decisions on all available information. A decision based on accurate information will be better than one based on little or no information.

It is helpful to be aware of the 17 most frequently argued points that are put forth by groups that oppose comprehensive sexuality education. This knowledge will help me to better understand parents' and teachers' concerns regarding how sex education is taught. However, the grade five and six Health Curriculum states exactly what is to be taught at this age level and the school district has mandated the approach we are to take in teaching sex education.

_The Family Communication Project: Fostering parent-child communication about sexuality._

*Special Issue: Parents, families, and schools.* (Benshoff and Alexander, 1993) reported on the results of the Family communication Project, which was planned to help families improve parent-child communication about sexuality. A group of 1842 completed a pretest, and 1517 completed the post test consisting of responses to informal questions about sexuality. Both parents and children displayed a significant increase in knowledge about sexuality and in their frequency of communicating with each other. There was also a significant improvement in the comfort level of the parents and children to communicate.
The central focus of this project was to locate resources for parents and teachers that would allow them to answer questions that 10 to 12 year children might ask regarding their sexuality. My hope was that better informed parents and teachers would create a healthier atmosphere to encourage children to communicate more openly about human sexuality. Therefore, I feel that Benshoff’s and Alexander’s report on the results of The Family Communication Project supports and validates this project.

*Childhood sexuality in the psychiatric textbook* (Yates, 1982) is a journal article that analyzed 15 current psychiatric textbooks on childhood sexuality to see if there was any apparent biases. The main concern that Yates had was that the authors of texts regarding childhood sexuality were more ready to name and talk about the male anatomy as apposed to the female anatomy. An example of the concern is: authors would use the word penis but they would not as often refer to the word clitoris.

Yates’ article has a very valid point in that most sex education resources at the grade five and six level only mention the breasts, urethral opening, vagina, uterus, fallopian tube, and ovaries. The resources do not mention mons veneris, labia, clitoris, cervix, or hymen. Hopefully, informed communication between children, parents and/or teachers will encourage discussion of all aspects of both the male and female anatomy.

Ford and Norris 1991 in their research titled “Methodological considerations for survey research on sexual behavior: Urban African American and Hispanic” (Ford and Norris 199) reviewed prior
research on methods for data collection, and reported experiences in collection of data on the sexual behaviors of 68 African American and Hispanic youth (all Ss aged 15-21 years). The researchers felt that the sexual behaviors of the population could be collected in face to face interviews. However, researchers further felt, that questions regarding anal intercourse could be a sensitive topic for males and females. Also, that the topic of oral sex could also be a sensitive topic for this population of females. Lastly, there needs to be particular care taken when interviewing Hispanic women concerning the topic of menstruation.

Ford's and Norris' research does have a direct bearing on how some of the questions will be answered in the project. Some of the schools in which I work have an enrolment of 10% to 15% ESL students (English as a Second Language). Many of these students are from Central America with a Hispanic background. Consequently, I will have to take cultural differences and beliefs into account, and be very careful in answering questions regarding anal and oral sex as well as menstruation. For example, I am especially aware of the body language of ESL students when discussing menstruation. I will most often do an overview of what is to be discussed in the next class. If I sense there is discomfort with the topic I will talk to the students and/or to the parents.

The project purpose was to have a resource for parents and teachers to answer children's questions and concerns. Parents and teachers who are uncomfortable with the topics of anal and oral sex and menstruation may choose to pass by the titled sections that cause them concern.
CONCLUSION

In many of the literature reviews there were several different interest groups with ideas about “how to teach” the topic of human sexuality. The approaches for teaching sex education were many and varied ranging from: 1) “abstinence education,” 2) “abstinence plus,” 3) “those that oppose abstinence instruction.” However, the general consensus of the researchers was that the middle ground of “abstinence plus” would best meet the needs of our adolescent youth.

Research by Toni and David Campbell (1987), and Sondheimer (1982) strongly indicates that the depth of questions, and the misconception of questions asked suggests that sex education programs need to be improved, and to be made more extensive. The above researchers were further supported by the results of Davis and Harris (1983) when they found that the questions students asked in sex education class ranged from sophisticated to total ignorance. I would concur with the three groups of researchers, in that I also have been asked a wide range of questions in my grade five and six human sexuality classes.

Research by Stanton, Black, and Kaljee (1993) alluded to the difference between adolescent male, and female thoughts and sexual behaviours. I have concerns about the way we rear our male and female children. I would concur with the authors’ perception that the average female regards sex as a mechanism for establishing an intimate relationship, whereas, the males are all too ready to take advantage of females.
In an attempt to eliminate the above misconception in my program, I implement the following:

a) Prior to instruction I meet with parents and teachers to present my resources and planned teaching strategies. At that time I also encourage them to express their concerns and ask questions.

b) Parents are advised that both boys and girls will be in the same class for sex education lessons. The reason for this is that there are two sexes in the world and the children need to learn to have respect for each other. They also need to be responsible for their own personal behaviour regarding their treatment of the opposite sex. ("Treat others as you would have them treat you.")

c) Inappropriate behavior of students will not be tolerated! Giggling, laughing, and/or trying to conceal talking by covering the mouth lets others know that you are uncomfortable with the topic of sex education. Furthermore, students are advised that those misbehaving will be asked to leave the classroom to write out three copies of the class's handout notes. (In over 400 hours of teaching sex education classes, removal of students from the class has occurred only twice.)

Younger's book and the research of Benshoff and Alexander have made me cognizant that there needs to be a strong educational component that gives the adolescent youth the knowledge and confidence to make a decision based on fact. Hopefully, a "abstinence plus" approach to sex education will help adolescent youth, parents, and teachers to better understand adolescent sex and sexuality.
*Five Hundred Questions Kids Ask* by Younger would be a great resource for parents and teachers whose children are 15 to 16 years. However, children 10 to 13 years old would be at a different stage of sexual and social development and therefore, would ask different questions. Younger’s book would not be an adequate resource for parents and teachers of grade five and six students.

In closing, my literature review identified many resources that responded to questions and concerns of adolescent youth. Many of the resources had excellent ideas that would support my project and give me ideas for teaching sex education. However, none of the reviews specifically addressed the questions and concerns of 10 to 12 year old children. Consequently, there is a real need for a resource for parents and teachers to address “Grade Five and Six Sexuality: Questions and Concerns.”
Bibliography


Part Two

Questions, Concerns, and Answers
PUBERTY

Both Male and Female

How does puberty work?

There are two major types of physical development during puberty; sexual changes and body changes. Sexual changes are those necessary for having children; for example the growth of the womb in girls. Body changes include those that are not necessary for parenthood, like the development of underarm hair.

The primary control of sexual maturation is the secretion of hormones—chemical substances produced by the endocrine glands.

Human emotions and sexual behaviour are also influenced by the brain. The cortex of the brain controls thoughts, memories, motor impulses, and the actions—in particular, voluntary behaviour. The midbrain coordinates involuntary behaviours. The hypothalamus acts as a timing device. It works with the endocrine glands to monitor and control the onset of puberty and sexual arousal.

Just prior to the onset of puberty, the hypothalamus releases a hormone which flows to the pituitary. The pituitary, in turn, releases other hormones which in turn pass through the circulatory system and stimulate the changes that occur at puberty. These hormones directly affect the maturation of the sex organs. Hormones are the direct source of the physical differences between males and females.

An analogy that could be used to help children better understand how the above process works is by using an underground sprinkler system. A normal yard would have grass, trees, flowers, and perhaps a vegetable garden. Each underground sprinkler system has a timer (hypothalamus), tubing to transport the water (circulatory system - chemicals). When the appropriate time occurs the timer will release the water (hormones—chemicals) that will cause the watered area to grow. Then you may relate to the actual changes that occur during puberty.

At what ages does puberty start? When is the latest you will hit puberty?

Puberty usually begins somewhere between the ages of ten and thirteen for most girls, and between eleven and fourteen for boys. However, there can be very wide variations of this.
Some girls may start development as early as eight years old and others not until they are sixteen.

**How do you know when you are starting puberty?**

1) General changes at puberty for males and females

   a) increased oiliness and coarseness of skin;
   b) rapid physical growth
   c) increased sweating and body odour (genitals, armpits, feet);
   d) increased blood volume and the number of red blood corpuscles;
   e) increased lung capacity;
   f) increased size of body tissues; and
   g) bones get harder and change in proportion

2) Male

   a) testicles secrete male sex hormone (testosterone);
   b) rapid growth spurt (mass and height);
   c) testicles (testes), scrotum, and penis enlarge;
   d) first pubic hairs appears at the base of the penis;
   e) shoulders broaden;
   f) voice deepens as larynx grows;
   g) hair begins to appear in the armpits and on the upper lip;
   h) spontaneous erections;
   i) sperm production reaches a level at which semen may be ejaculated during sleep (nocturnal emissions or “wet dreams”);
   j) male genitals--penis and scrotum--darken in colour;
   k) pubic hair begins to show colour;
   l) increase in strength and musculature development;
   m) general growth of body hair; and
   n) increased development of sweat glands.

3) Female

   a) pituitary stimulates ovaries with FSH (Follicle Stimulating Hormone) to secrete the female sex hormone (estrogen);
   b) breasts:
      - sensitivity increases,
      - nipples protrude, and
      - increase in size;
   c) growth spurt;
d) bone structure of pelvis widens;
e) growth of long bones decreases;
f) growth of fatty pads on hips;
g) soft, downy, colourless pubic hair grows;
h) ovulation (the release of mature ova by the ovaries) usually begins;
i) menstruation begins;
j) Changes in sex organs occur:
   - pubic hair continues to grow and show colour
   - enlargement of clitoris and labia

Can puberty happen after the age of 13?

Yes, puberty can start after the age of 13. The normal age for puberty to begin is between the ages of 10 and 13.

Why would you have puberty? Why can’t it just happen when we are little?

Humans go through puberty to allow a child to become a sexually mature adult. A sexually mature adult will be able to reproduce their own kind. If we could not reproduce our own kind the human race would end.

Humans have their own developmental cycle that is unique to themselves. Other living entities have their own developmental cycle unique to their kind.

Why do people grow facial hairs?

Humans have their own developmental cycle that is unique to themselves. Humans have hair growth over most of their body. When there is not a clear answer as to why certain things happen to our bodies you could use the statement, “whether you believe that humans were created by a “Darwinism Theory”, God, or some other means that this is how it was decided that we would appear (with hair on our body).”

Hair growth on different parts of the body is one of the characteristic developments of puberty. Usually during puberty, there is a general development of hair over the body for both males and females. This hair is usually coarser, darker, and much more pronounced in males.
**How come we don’t get facial hairs before puberty?**

Both males and females do have some very fine hair on their face prior to the onset of puberty. However, hair growth on different parts of the body is one of the characteristic developments of puberty.

**Why do we grow pubic hair?**

Hair growth on different parts of the body is one of the characteristic developments of puberty. There is not a good reason why we grow pubic hair. Pubic hair does not keep the genital area warm nor is it particularly sanitary.

**What do pimples tell you?**

Pimples will tell you that you have a small pore on your body that is clogged and that it is infected. Perhaps pimples could be telling you one of the following; you are starting puberty, you need to wash yourself more carefully, you may be eating improper food (foods with excess sugar content), and/or that you may have some condition that may require the care of a dermatologist. As a child goes through puberty changes, such as the increased oil production and sweating can cause pores on the body (particularly the face) to become clogged. Hence, the dreaded pimple attack on young pubescent children.

**What is a hormone?**

Hormones (in Greek means to set in motion) are substances that are chemical “messengers” produced by the endocrine glands that affect the functions of specific receptive organs (ovaries i.e., estrogen - testes i.e., testosterone) or tissues when transported to them by the body fluids.

Both sexual and body changes are triggered by a shift in the level of hormones in the body. Hormones are chemical substances produced by the brain. They are present in the body from birth. However, when a part of the brain called the hypothalamus is sufficiently developed, it sends large amounts of hormones to the pituitary gland, which is also in the brain. This triggers the pituitary into releasing increased amount of hormones: FSH (Follicle Stimulating Hormone) and LH (Luteinizing Hormone). It is these hormone that are responsible for ova (eggs) developing in girls’ ovaries and sperm being produced in boys’ testes. The ovaries and testes then start producing sex hormones which trigger other changes, like breast development and the growth of body hair.
Why does each person grow at a different rate?

Each person grows at a different rate because their own personal clock inside their body (the hypothalamus) decides when the body growth will take place. When the hypothalamus releases hormones it causes the pituitary gland to release more hormones that begin the child’s pubescent period. No two persons develop the same way or at the same rate. Each person’s internal clock (hypothalamus) has its very own special time to activate the child’s entry into adolescence.

How does the voice change? What changes?

During adolescence, the voice deepens for both males and females. Vocal cords thicken. The change in females, however, is far less evident and is a gradual process in most individuals. Voice change in males is often more pronounced and may continue through several years. In males, there is a physical change in the larynx (increased physical size). During the development stages of the larynx, a common occurrence is ‘voice breaking.” Control over the voice may be lost from time to time causing croaking sounds or changes in pitch. It is important to note that like all other developmental stages of adolescence, voice breaking will occur at different ages and will be more pronounced in some individuals. At this time it is important that both family and peers be considerate and not over-emphasize this phase for voice breaking is simply a time when an adolescent is mastering control of his newly developed larynx.

Why do boys voices change, and girls voices stay the same?

During adolescence, the voice deepens for both males and females. Vocal cords thicken. The change in females, however, is far less evident and is a gradual process in most individuals.

At what age do you start to produce sperm?

Pubescent development may begin as early as 8 years old or as late as 15 years and may finish between 14 and 18 years. One of the stages of development of males is that he begins to produce sperm. The production of sperm could happen between the ages of 8 and 16.

Why do boys and girls get hair on their penis and vagina?

Boys do not have hair on their penises but there is sparse hair growth on the scrotum. Girls do not have hair on their vagina as the vagina is located inside the female body.
Why do boys get more muscular and girls get fatter?

One of the stages of development for a boy as he goes through puberty is for him to start to develop more muscle mass as well as the broadening of his shoulders. As a female goes through puberty some of the following changes do take place: buttocks, hips, thighs, and the upper arms do become fatter.

Female

How old is a female when she starts to go through puberty?

A female may begin puberty as early as 8 years and usually finishes about 16 years of age. In individuals, it may begin earlier or later.

How old is a girl when she starts her period?

The first menstrual flow usually occurs between the ages of 10 and 18. Period or menstruation is the monthly process by which the lining of the uterus is shed from the body of a woman who has not conceived that month. The function of this lining is to nourish a fertilized egg. The onset of menstruation is a signal for a young female that she is capable of becoming pregnant.

Male

About what age would a boy go through puberty?

Boys may begin puberty as early as 8 years or as late as 15 years and may finish between 14 and 18 years.
Why do men grow facial hair and women don’t?

The primary control of sexual maturation is the secretion of hormones. Stimulated by the pituitary gland, the testes begin to produce testosterone. Testosterone is a sex hormone. It is responsible for the development of primary and secondary sex characteristics in males.

Men grow facial hair because the testosterone stimulates the growth hair on the face. Females do not have significant levels of testosterone and therefore, do not grow facial hair like men do. Instead females produce estrogen which cause the females to develop in their own special way.

When do boys produce sperm?

Boys start producing sperm when they are sexually mature. First, a boy must go through the changes of puberty which will begin between the ages of 8 to 15 years old and may finish between 14 and 18 years of age.

At what age does a male get all his muscles?

All males are born with muscles. Males tend to start to develop more muscle mass during puberty. Puberty occurs between the ages of 8 and 18 years. However, many males exercise and work out with weights to further enhance muscle development.

REPRODUCTIVE SYSTEMS

Male

How long does the penis usually grow.

The average non-erect penis is about seven cm long. Usually during sexual arousal, the penis of a man with a smaller non-erect penis increases in size more than the penis of man with a larger non-erect penis. The average male erect penis is 13 to 15 cm long.
What does an erection feel like?

The penis is the primary male sex organ. It is also a passage way for urine. The skin of the penis is loose and hairless to allow for expansion during arousal. There is spongy tissue along each side of the penis and along the bottom.

An erection of the penis occurs when valves in the spongy tissue of the penis closes resulting in the spongy tissue becoming engorged with blood. The tissue expands and becomes firm. Erection can occur from birth onward. An erect penis may feel somewhat like a rigid finger or a long balloon filled full of water.

What do you call it when the man's penis gets hard?

The most common name for a male's hard penis is erection. Some other slang names would be boner, stiffy, woody, or hard on.

How come larger males have breasts?

Larger males only appear to have breasts. Heavier males have been known to have a considerable amount of fat in the chest area. The fatty tissue gives the appearance of a male having breasts. The normal male does not have functioning breasts.

Why do we have our balls in our scrotum under the penis?

The proper name for balls (ball) is the testes (testicle). The scrotum supports and encloses the testes and aids in regulating temperature of the testes. Sperm production can occur only at a temperature slightly lower than body temperature. This temperature regulation is accomplished by:

a) contraction and expansion of scrotum muscles when decreases or increases in the surface area of the scrotum;

b) sweating of the scrotum; and

c) changes in the blood supply
What does circumcision mean?

Circumcision is the surgical removal of the penile skin (foreskin) that overhangs the penis head. This operation used to be performed regularly on new born males. It may also be done for religious reasons.

Can a male ever run out of sperm?

Production of sperm is a continuous process. It takes 60 to 72 days for one sperm to mature. Millions of sperm are produced each day. Production starts at puberty and continues until death unless a male has a vasectomy, or injures his reproductive system. (Production may slow down, but does not completely stop.) Hormone production also continues until death. Young males will often wonder if they masturbate too often will they run out of sperm and not have any for later. As stated above a male produces millions of sperm every day.

Can men produce sperm all month long?

A male produces sperm continuously from the time he has gone through puberty to the day he dies.

How long can sperm live in the uterus before it dies?

A sperm can live in the uterus for approximately one day (24 hours).

Does it hurt when you give off semen?

Semen is a sticky, whitish fluid produced in the male reproductive organs containing sperm. Semen can be ejected from the body by some of the following; sexual contact with another person, masturbation, and/or nocturnal emission. If a male is healthy and aware of the act, a male will tend to feel a pleasurable sensation. However, if he has an infection, the ejection of semen could cause a burning sensation. Most males tend to derive pleasure from the ejection of semen.
What would happen if the scrotum or penis skin got broken from a kick?

The scrotum and penis are very sensitive parts of a male's body. The seriousness of the broken skin would determine whether the cut could heal without a doctor's attention. If the cut was serious enough the male would have to go to the doctor for stitches and perhaps further medical attention. The male most definitely would be in a great deal of discomfort and pain.

Why does it hurt when a boy gets kicked in the balls?

The male's testes are very sensitive organs that are only protected by a very thin layer of skin (the scrotum). Even light contact to the testes can cause considerable pain to a male. Heavy contact to the testes can cause swelling and perhaps even permanent damage to the testes. Permanent damage may mean that the male may not be able to produce or eject sperm.

How come when a male gets hurt in the reproductive system he can't have a baby?

The question is referring to when a male has his testes hurt /damaged so he is unable to produce sperm and therefore unable to father a child. If a male is to father a child he must be able to produce sperm and be able to eject it from his body. Perhaps the testes may be ok but the passage way to outside the body could be damaged/blocked not allowing the sperm to be ejected from the body.

How long does it take for the sperm to travel through the vas deferens and out through the end of the penis?

The sperm may take two to five seconds to travel from the testes to the urethral opening.

How do males produce sperm?

Sperm is produced in the testes. The testes are two oval glands which are approximately 4 cm long by 2.5 cm thick. A testicle consists of hundreds of tiny coiled chambers where sperm production occurs and sperm is stored. A sperm takes 60 to 72 days to mature and millions of sperms are produced every day. Sperm production starts at puberty and is a continuous process until the day a male dies. However, in later years a male's sperm production may decrease.
**How do you know if you produce sperm?**

A man would know that he produces sperm by the mere fact that he ejaculates sperm by one of the following ways:

a) having a “wet dream” that would cause a male to ejaculate sperm while he is sleeping
b) if a male was to masturbate he would then also have sperm ejaculate

**How do you release sperm?**

The penis must be stimulated by mental sexual thoughts and physical touching. When the sensations are strong enough the sperm that is stored and nurtured in the epididymis will provide a path out of the testes. The sperm then will travel along the 22 cm long vas deferens which has thin walls and has very powerful muscles. On each side of the vas deferens there are two seminal vesicles that are situated next to the ampulla. Seminal vesicles produce fluid for sperm nutrition and transportation. The ampulla and the seminal vesicle fuse to form an ejaculatory duct. The ejaculatory duct joins the urethra at the prostate. Secretions from the prostate give most of the bulk to the semen and are also responsible for its characteristic odour. Another important responsibility of the prostate is to ensure that the urethra is closed off to block the flow of urine while the male is aroused.

**What if a male has sex without sperm?**

A mature male does not have to produce sperm to be able to have sex. If a male does not produce sperm or the sperm is unable to leave the body because the passage way is blocked he will not be able to father a child. However, the seminal vesicles and the prostate gland will still allow the male to eject a whitish fluid from his body.

In human sexuality there are two kinds of hurt, physical and mental. If a male is having sex and has not gone through puberty he more than likely will not hurt himself physically but he may cause himself some mental anguish.

**Why does a males penis get long and hard and what causes the erection?**

In regards to the word “long” an average non-erect penis is about 7 cm long and an average erect penis is 13 to 15 cm long. An erect penis occurs when valves in the spongy tissue of the penis are closed resulting in the spongy tissue becoming engorged with blood. The tissue expands and becomes firm. Erections can occur from birth onward. Some males may get an erection for the following reasons:

a) his bladder is full and he needs to go to the bathroom
b) he is having a sexual thought
c) he is being physically touched by someone else or by himself
How big can a penis get?

When discussing adolescent sexuality a parent or teacher may want to only discuss the average and normal situations. Discussions can be easily side-tracked if an adult starts to discuss abnormal sexuality which may lead to confusion and uncertainty about themselves.

The average non-erect penis is about 7 cm long and the average erect penis is 13 to 15 cm long. Males occasionally can be needlessly concerned about the length of their penis. The females vagina has nerve endings for only the first 5 to 8 cm. Further more, stimulation of the clitoris gives the greatest amount of sexual pleasure to the women. Consequently, the size of the penis would not affect most women.

What is a boner?

A boner is another slang name for a male having an erection.

Why can’t you grow hair on your penis?

The best answer that can be offered is that however we evolved or were created we did not have hair on our penis. The sole purpose of the penis is to pass urine from the body and to be used to enter a female’s vagina so he may impregnate a female. In neither case would hair on the penis benefit or enhance the situation.

Why don’t males have a period instead of a female?

Ovaries, fallopian tubes, uterus, and vagina are needed to be able to menstruate. A male does not have a females reproductive system. Consequently, he cannot have a period.

I am a male, will I ever have a baby?

A male does not have the reproductive system that would enable him to have a baby.
Female

**How many eggs does a female have?**

A female at birth has 40 to 400 thousand premature egg cells or ovum in each ovary and these are all the eggs she will ever have. The egg cells will begin to mature when the female goes through puberty.

**How come two eggs are released sometimes?**

Two eggs being released at one time is an unnatural occurrence. The health nurse said that it is a “fluke of nature.”

**How big are the eggs?**

The egg or ova is approximately 0.04 cm (0.4 mm) in width.

**What would happen if a female runs out of eggs to early?**

It is highly unlike that a female would run out of eggs considering that she is born with 40 to 400 thousand eggs in each ovary. If a female did run out of eggs see would no longer have a period and would not be able to become pregnant. She would be considered to be in the menopause stage of a women’s sexual development.

**What is a fallopian tube?**

The two fallopian tubes are actually passageways that are attached to the top of either side of the uterus. Each tube is approximately 10 to 13 cm long and about as thick as a straw. At the opposite end of the fallopian tubes there are finger like projections which draw the ova (egg) into the tubes from the ovaries. The inside of the tubes are lined with hairlike cilia. The cilia and muscle contractions of the tube move the egg to the uterus. The eggs journey from the ovary to the uterus takes about 2 to 4 days. If the egg is to be fertilized it will take place in the fallopian tubes.
When can a girl have a baby?

A female may be physically able to have a baby when she has gone through puberty. After a female has had her first period (between 12 and 15 years old) she would be able to become pregnant. However, being physically able and being mature enough to accept the responsibility for a child are two totally different topics. Young girls are not ready to make decisions about childbirth, abortion, or caring for a child.

Can a girl have a baby in the middle of the month?

Each month a female’s internal sex organs work together to complete a menstrual cycle. The cycle begins on “Day One” of a menstrual period and goes to “Day One” of the next period. The average cycle takes about 28 days, but most girls and women get their periods every 26 to 30 days. A female’s cycle may be shorter or longer (anywhere from 17 to 35 days long).

A female is capable of having a baby any day of the month. The female will have the baby approximately 39 weeks (9 months) after the fetus is conceived.

Why doesn’t the girl have a penis and a boy a vagina.

The human race has two sexes, female and male. The female has her own special reproductive system that would include a vagina. A male has a penis which is part of his reproductive system. Females and males of the human race have either evolved or been created to have their present reproductive systems.

Why can’t girls grow hair on their chest and backs?

Females produce different hormones than the male. Males produce the hormone testosterone in their testes that helps males to have hair growth on their face, arms, legs, chest, back, arm pits, and pubic area. Females produce the hormone estrogen in their ovaries which does not cause hair growth on the chest or backs of females. There may be the occasional hair that grows on the female’s chest or back.

Is it Possible for a female to get some kind of erection?

Females do not get an erection like a male. The counter part to the males penis would be the female’s clitoris. It is a small organ, about the size of a pea and the nerve centre of a girl’s sexual feelings. It is covered by a fold of skin and is only just visible. The nipples of a female may become erect.
MENSTRUATION

If a female has a period will she get pregnant?

A female cannot get pregnant when she is having her period. For a female to become pregnant the egg must still be in the fallopian tube. When a female is having her period the egg has already entered the uterus and been washed out of the uterus by the blood flow.

How old is a girl when she gets her first period?

The first period for a female usually occurs between the ages of 10 to 18.

How does she feel when she gets her period?

Some girls when they have their periods have cramps, or muscular aches, in their stomach area, sore back, pains in the legs, have a bloated feeling, swollen breasts, become moody or crabby, and are tired. However, females will feel the above discomforts in varying degrees. Some females will have few problems with their period and other females will have a great deal of discomfort and pain.

When you get your period does your stomach start to hurt?

Females are affected differently by their periods. Most females will feel a cramping feeling in their stomach area that will cause them discomfort. Some females do not have pain during their periods.

How do you know if you are going to have your period? Do you feel like you have to go to the bathroom?

There is no way of a person ever knowing exactly when their first period will begin. Many females are not aware they have started their first period until they go the bathroom and notice a brown spot and/or blood on their underpants. After going to the bathroom, some females state that they wiped themselves and noticed that there was blood on the toilet paper. Other females have said that they had a kind of a weird damp sensation in their vagina area.
**What if you start to menstruating at school?**

A female should not be concerned if she starts her first period at school. Teachers are aware that young girls in grade five and six may begin their periods during these grades. If you have a male teacher and are not comfortable talking to him, ask to speak to a female teacher.

Every school has a supply of sanitary napkins that a student may use. A girl could ask another girl to go to the office and get her a sanitary napkin. If nobody is available to help, you could fold up some toilet paper and place it in your underpants in front of your vagina opening and then go to the office or nurse's office. Most women and girls are helpful in such situations because they experience periods also.

**What is a period?**

A period or menstruation is the normal, healthy process by which the lining of the uterus is shed each month. Menstruation starts during puberty and usually lasts until a woman is in her late forties or early fifties.

**When a female gets her period is it warm or cold?**

When the blood rich lining of the uterus (the nest) that was being prepared for a fertilized egg is not needed that month it separates from the uterine wall and it exits the body via the vagina. The blood material passing through the vagina would be at body temperature which would be considered to be warm.

**Does bleeding occur when you don’t have to go to the bathroom?**

The menstrual period is the time when the menstrual flow is actually leaving the female's body. This will usually last from 3 to 7 days. Even though it may look as if a female is losing a lot of blood, she really isn’t. Most women lose about 50 to 100 ml of blood per period. That would be half a cup (119 ml) at most. The bleeding can occur any time during the 3 to 7 day period.

**What if a teacher doesn’t know when a girl has a period and won’t let her go to the washroom.**

Most females are aware when their periods are happening and should be prepared by either wearing a light days pad, a heavier pad, or a tampon. Should she not be prepared for her period, she should ask the teacher a couple of times to be excused to go to the bathroom.
Perhaps if that does not work she could ask to go to the office to talk to the principal. If all else fails she should get up and go to the washroom and when she is finished she should go to a female principal or teacher and explain her situation.

**What are tampons?**

Tampons are small sticks of absorbent materials that females insert into their vagina. A tampon soaks up menstrual blood before it drips out. When there is a need to change the tampon, it can be pulled out by a string attached to it that hangs outside the vagina opening.

There are different types and sizes of tampons. The two basic types are with and without applicators. An applicator is a plastic or cardboard tube with a plunger or little stick that holds a tampon in position and helps a female to put it in her body. Tampons without applicators are held and pushed in with a finger.

Tampons come in different sizes for different flows: slender for light to medium flow, regular for medium flow, super for heavy flow, and super plus for very heavy flow.

**MENOPAUSE**

**Why do women have menopause?**

When a female gets to be about 45 to 55 years old, she will stop menstruating. This change, called “menopause” or “change of life,” is more or less the opposite natural process of what she would have gone through with puberty. Like puberty, menopause is a series of hormonally caused changes that take place over a period of time. The main event of menopause is the end of menstruation, which usually follows a period of menstrual irregularity. After menopause a woman can no longer get pregnant.

**When a woman has her menopause is there still any eggs in her body?**

When a woman goes through menopause her ovaries no longer produce enough estrogen to cause the eggs to mature. Consequently, the eggs deteriorate and do not develop. No, there is not any developed eggs in a woman when she has gone through menopause.
Does the lining of the uterus still grow each month?

Each month a female’s internal sex organs work together to complete a menstrual cycle. The cycle begins on day one of a menstrual period and goes to day one of the next period. The average cycle takes 28 days, most girls and women get their period every 28 to 30 days. A cycle could be short or longer (anywhere from 17 to 35 days). One aspect of the cycle is the development of the uterus with a blood rich lining that is preparing itself for a fertilized egg. If the egg arrives at the uterus and it has not been fertilized, then the lining will be shed from the uterus. This process happens every month.

PREGNANCY

Can a girl 13 years old get pregnant?

If a girl of thirteen has gone through puberty and has a period then she is capable of becoming pregnant if she has sexual contact with a male.

How do you know if you are pregnant?

When a woman is pregnant she will no longer have her monthly periods. If she misses a few periods she would make a doctor appointment. The doctor would then perform urine tests on the women that would tell her whether she was pregnant or not.

How do you know if your baby is “OK” when you are pregnant?

Most females set regular appointments with their gynecologist to check on the condition of themselves and the fetus. The doctors put a stethoscope to the mothers stomach area and can listen to the heart beat of the fetus. Doctors will also do ultrasounds of the fetus in the placenta. An ultrasound will allow the doctor to take measurements of the fetus and check on the development of the fetus.

How many times can a woman get pregnant?

The average woman in Canada will give birth to approximately two children. Some women have had up to 20 plus children.
**How does a baby grow?**

The beginning of a baby is when the egg is fertilized by the sperm. Usually this takes place in the fallopian tube, where the sperm, after travelling through the vagina and uterus, meets the egg. The fertilized egg will then move along to the uterus where it will attach itself to the uterine wall which is covered with a blood rich lining.

Once the fertilized egg has attached itself to the uterine wall, it starts to develop an umbilical cord, a placenta and amniotic fluid. The placenta is similar to a little self-sufficient apartment that will be the baby’s home for the next nine months. The amniotic fluid is in the placenta to keep the baby’s skin moist and the baby safe. The umbilical cord is the connection to clean, oxygenized, and nutritious blood, as well as a means to take carbon dioxide out of the body. Whatever the mother has eaten and her system has digested the baby will receive some in the blood system. A baby will use the nutrients gained from the mother to grow.

**How does a baby die when it is in the mother’s stomach (uterus)?**

A baby could die for some of the following reasons;

a) damage to the umbilical cord that would not allow the baby to receive oxygen or nutrition needed to survive;

b) damage to the placenta where the water breaks;

c) the fetus has genetic problems;

d) if the mother is hit extremely hard in the stomach area;

e) mother does not receive sufficient nutritious food that would allow the fetus to grow and be healthy; and

f) mother takes drugs that would be harmful to the fetus and even perhaps cause death.

**What if a girl got pregnant and she doesn't want to have a baby. What can she do?**

If a girl becomes pregnant no decisions should be made without first consulting with doctors, psychologists, and or family. The decision that a girl makes regarding a pregnancy needs to be done with great care, as any decision made can have a tremendous effect on her future feelings about herself and her sexuality.

a) A girl may carry the baby to term and then put the baby up for adoption.

b) A girl may have an abortion.
Why does the litmus paper turn different colours when checking to see if a female is pregnant?

Litmus paper is a strip of paper saturated with litmus, and is used as a chemical indicator. The litmus paper that is used to indicate whether a female is pregnant or not identifies the chemicals in a female’s urine that would only be present if a female was pregnant.

Why do females have to have all the babies?

Females have the reproductive system that allows them to have babies. Males do not have the reproductive system that would allow them to become pregnant. Therefore, the female has all the babies.

What happens if you have sex and the female is pregnant?

A female is still capable of having sexual intercourse when she is pregnant. The penis would not come into contact with the fetus because the fetus is in the uterus and the penis would be in the vagina. However a female needs to be careful that heavy contact is not made to the stomach area.

If you use drugs when you are pregnant will your baby die?

A doctor would suggest that a pregnant woman should not take drugs unless absolutely necessary. Anything that the woman consumes is taken into her blood system and will eventually get into the fetus’s blood system. The kind of drug, the amount of the drug consumed, and the length of time the woman takes the drug will have a direct bearing on whether it would be life threatening to the fetus or not. The drug may not kill the baby but the drug could cause problems with how the baby will develop in the womb (i.e., fetal alcohol syndrome). Some babies are born being addicted to the drug that the mother was taking while it was in the womb (i.e., crack cocaine, heroine).

If the mother takes a large amount of a drug and/or drugs it is possible that the fetus could be killed. The main concern about a mother taking drugs is that it is not healthy for the mother or for the fetus.
If a mother gets physically injured while she is pregnant will the baby die or be injured?

The severity of the physical injury to the mother would determine whether the baby would die or be injured. The fetus is in the inside of a females uterus surrounded by the placenta which is a sealed sack filled with amniotic fluid to protect the baby from being bounced around and hurt. An example to explain how the system works would be to tell you to put an egg in a tin and shake it. What would happen to the egg? Of course the egg would break. However, if you put water in the tin with the egg and then started to shake the tin the egg would be protected by the wavy water motions. The same is true for the fetus in the womb.

Any direct blow to the mothers stomach, if severe enough could injure or kill the fetus. A fetus is like us, it’s body has the power to heal small wounds. If the injury is not directly related to the fetus then the fetus would be O.K. In United States there was a female that was terminally injured in a car accident and was diagnosed as being brain dead and she was kept alive by intravenous feeding and artificial respiration until the baby reached term.

How do you know when your water breaks? What happens when your water breaks?

In a normal situation when a female’s water breaks it is an indication that she would be in the third stage of child birth.

Powerful muscle contractions called labour pains would be the first stage or signal. The contractions would be 15 to 20 minutes apart and would last for approximately for 30 seconds. Contractions would steadily increase in frequency until they occur every 4 to 5 minutes. In the second stage a mucus plug from the base of the uterus is expelled from the female’s body.

In the third stage the placenta wall is ruptured and causes a water like fluid (amniotic fluid) to flow through the vagina and out the vagina opening. The flow of the amniotic fluid would be an indicator that your water has broken.

How does a baby get in the sack?

The beginning of a baby is when the egg is fertilized by the sperm. Usually this takes place in the fallopian tube, where the sperm, after travelling through the vagina and uterus, meets the egg. The fertilized egg will then move along to the uterus where it will attach itself to the uterine wall which is covered with a blood rich lining.
Once the fertilized egg has attached itself to the uterine wall it starts to develop an umbilical cord, a placenta and amniotic fluid. The placenta is similar to a little self-sufficient apartment that will be the baby’s home for the next nine months.

**Does an abortion hurt a mother?**

When a mother has an abortion there are two possible kinds of hurt she may suffer. One is a physical hurt in that she is having a baby come out through her vagina and vagina opening along with the after birth. The second hurt would be a mental hurt that the mother could have because she chose to have an abortion. She may be wondering what the child may have been like or was it right to have the abortion.

**CONCEPTION**

**How do you get a baby inside a women?**

The beginning of a baby is when two respectful, responsible, and mature people decided to make love. The male inserts his erect penis inside the female’s vagina. After the penis has become sensitive and excited sperm is ejected into the females vagina. The sperm swim out of the vagina through the uterus and into the fallopian tubes. If a female’s ovaries have released an egg and the egg is in the fallopian tubes, then it is possible that the egg could be fertilized. The fertilized egg will then move along to the uterus where it will attach itself to the uterine wall which is covered with a blood rich lining.

Once the fertilized egg has attached itself to the uterine wall it starts to develop an umbilical cord, a placenta and amniotic fluid. The placenta is like a little self-sufficient apartment that will be the baby’s home for the next nine months.

**Can a female get pregnant alone?**

For a female to become pregnant her egg has to come into contact with the sperm from a male. It is possible for a woman to become pregnant without having physical contact with a male. She may go through in vitro fertilization where an egg is surgically taken out of a female and fertilized by sperm out side of the female’s body. Then the fertilized egg is surgically placed inside the female’s uterus at the appropriate time when the uterus lining would be able to support the fertilized egg.
If you are having sex how does the sperm get in the vagina?

The male inserts his erect penis inside the female’s vagina. After the penis has become sensitive and excited sperm is ejected into the female’s vagina.

How long does it take a female to get pregnant?

Whether a female becomes pregnant or not depends on her having a healthy, functioning reproductive system (ovaries, eggs, fallopian tube, uterus, and vagina). Also the male must have a healthy reproductive system (testes, sperm, epididymis, vas deferens, prostrate, urethra, and penis). If both reproductive systems are healthy and the female is ovulating, then pregnancy could take a matter of seconds once the sperm finds the egg, and fertilizes the egg.

SEXUALITY

What is sexuality/sex?

Sexuality is a very general term that refers to a person as a male or female. The word sexuality would refer to:

a) “Biological sexuality,” refers to whether a person’s gender is male or female and the discussion would be limited to biology, anatomy, and physiology.

b) “Psychological sexuality” which is the blending of biological sexuality and personal identity, refers to one’s masculinity and femininity. Also involves one’s self-concept and how one relates to others. Sexuality is part of the process of socialization and is influenced by parents, peers, culture, and society as a whole.

Why are we male and female why aren’t we just male or female?

Humans happen to have two sexes. The two sexes are male and female and they both have different reproductive systems that allow them to reproduce their own kind. If males and females were sexually the same we would not be able to reproduce our own kind as we presently exist.

Have you ever had sex before?

Yes I have had sex before, I have a wife and two children. My sexual habits are not to be hidden and/or to be ashamed of but I also do not openly discuss my personal life.
Why are boys and girls taught human sexuality in the same class?

The purpose of teaching a human sexuality class is to help the students understand the three “R’s” of a healthy life. The three “R’s” of health are:

a) **respect** for ourselves and for each other as unique and valuable human beings
b) **responsibility** to ourselves to learn and grow to our full potential, and to be responsible for our own actions
c) **reason** to base personal decisions on all available information. A decision based on accurate information will be better than one based on little or no information.

Both boys and girls interact with each other on a daily basis. They do not live in separate worlds. Hence, it stands to reason that boys and girls should learn about human sexuality in one class. Males and females will hear the same message and learn to treat each other with respect. A person’s sexuality is not to be hidden behind closed doors.

Does having sex hurt?

There are two different kinds of hurt, a physical hurt and a mental hurt. The question now needs to be asked:

a) **Does having sex cause mental pain?**

As many females are growing up, adults tell them they should not let boys touch them and that to have sex is not the right thing to do before marriage. When it is time for a female to have a sexual relationship she could be thinking about how she was raised to believe that sex is not right. The guilt that would be in a female may cause her to feel nervous, upset, uncertain, frustrated and dirty. All these feelings could cause a female mental pain.

If a female is comfortable with having a sexual relationship and is prepared to be involved, then having sex can be a pleasurable experience for her.

b) **Does having sex physically hurt you?**

If a female is having sex for the first time and she still has a hymen (a stretchable membrane across the lower portion of the vaginal opening) it may be physically painful. Also if the female is mental stressed over having sex she may be tight and dry which would cause her discomfort and/or pain.

Physically a female may also find pleasure in having sex.
**When you have sex does it hurt the inside of the vagina or penis?**

Having sex should not hurt the inside of the vagina or the penis if the partners are willing. However, if a male or female are not willing, there could be some physical and mental pain involved in having sex. There could be pain inside the vagina and penis if either the female or male had an infection (such as gonorrhea, or syphilis).

**What is a good age to have sex?**

A good age to have sex is when you are ready to accept the responsibility for what could possibly happen in a sexual relationship. Some of the things that need to be considered before having a sexual relationship are:

- a) are you emotionally mature enough to become involved in a sexual relationship
- b) if you became pregnant
- are you capable of caring for a child financially or emotionally
- are you willing to give up your freedoms to care for the child
- if you have a child at a young age are you willing to accept that you would be different than your peers because of the child
- are you willing to have the child adopted if you choose not to keep the child
- c) sexually transmitted diseases
- are you aware of "safer sex" methods
- have you decided what method of birth control you are going to use and do you presently have them
- are you willing to accept the possibility that you could contract a disease that may cause you embarrassment (herpes) pain and discomfort (hepatitis C - D) and even death (AIDS)

**Do you really have to love someone to make love?**

The words making love give the connotations that two people care for each other and are having sex because they want to please each other. However, two people can have sex and not love each other because they are merely satisfying their own sexual/physical drives.

**What is a pervert?**

A pervert is a person whose sexual practices are considered to be abnormal. (i.e., peeping tom, child molester)
Do people have to show their penis or vagina to their boyfriends or girlfriends?

A person does not have to do anything they do not want to do in a relationship. It is totally their own choice if they wish to show themselves as long as the other person agrees to the situation in question.

When you have a wet dream is it always about your girlfriend’s mom?

A wet dream (nocturnal emission) is when a male ejaculates during his sleep. Many males will have dreams of a sexual nature and may have orgasms while sleeping. A male may have dreams about anything that arouses him. If he has dreams about a girlfriend’s mother he may find the mother attractive and desirable but out of his reach. Other males may dream of a girl who they think is cute.

How did sex turn into the words “Making Love?”

Sex is a very general term that refers to a person as a male or female. The word sex would refer to:

a) “Biological sexuality” refers to whether a person’s gender is male or female and the discussion would be limited to biology, anatomy, and physiology.

b) “Psychological sexuality” which is the blending of biological sexuality and personal identity. This refers to one’s masculinity and femininity. Also involves one’s self-concept and how one relates to others. Sexuality is part of the process of socialization and is influenced by parents, peers, culture, and society as a whole.

The words “making love” give the connotations that two people care for each other and are having sex because they want to please each other. Saying to someone you love, “do you want to have sex” would not be as acceptable as saying, “would you like to make love.” The word sex as stated above also has a broader base meaning.

When should people start being interested in the opposite sex?

It is quite common for young children to model after adults and show an interest in the opposite sex at a very young age. However, children in grade five or six (10 to 12 years old) begin to show an interest in the opposite sex. A person can start to show an interest in the opposite sex when they feel they are able to be respectful and responsible to the person.
What is the youngest age that anyone has ever had sex?

Sex is referred to in the dictionary as a coupling between individuals by vaginal penetration anal, oral, and or masturbation. In our classes we state that we are wanting to deal with the normal sexual behaviour.

a) A response to this question could be that a person has a sexual relationship when they are mature enough to deal with the emotion and/or physical responsibilities that could happen in a sexual encounter.

b) Young babies have been sexually abused and by the definition of sex this could be considered as a person having had sex.

c) Some cultures have allowed children as young as eight years old to be married and engage in sexual activity.

If you have sex with someone that is having their period could the female become pregnant?

When a female is having her period she is not at the right stage of her menstrual cycle to be able to get pregnant. For a female to become pregnant she must have an egg in the fallopian tube and have the uterus ready to receive a fertilized egg. The uterus at the time of a period is shedding its lining and would not be able to support a fertilized egg. A female cannot become pregnant during her period.

Can a bi-sexual person have a penis and a vagina?

A bi-sexual person refers to a person who has a sexual preference for or has sexual activity with both sexes. A bi-sexual person is either physically a male or female.

How do homosexuals have sex?

A homosexual person refers to a person who has sexual preference for or has sexual activity with a person of the same sex. Male homosexuals have sex by either masturbating each other, oral sex, and/or anal sex. Female homosexuals have sex by either masturbating each other, and/or oral sex.

Why do people get wrinkles?

Wrinkles can be caused by too much weather (sun, wind, cold) over an extended period of time or deteriorating skin due to age.


SEXUAL BEHAVIOUR

*Why do some teenagers want to have sex and get pregnant?*

Teenagers may want to have sex for the following reasons:

a) to show an expression of love to another person
b) to be accepted by a person
c) the person is being manipulated by another person that wants to have sex
d) to do as the peer group does
e) a person could be inquisitive about sex and want to experiment
f) a person may feel the need to satisfy a sexual need

Teenagers may want to become pregnant for the following reasons:

a) to have a baby that would be theirs and love them like no one else does
b) to get out of going to school
c) to rebel against authority and even perhaps to hurt parents
d) to try to keep a boyfriend
e) to get out of their parents home and get social assistance

*How do you have a wet dream?*

Many males and females have wet dreams of a sexual nature and may have an orgasm while sleeping. The male may ejaculate during sleep. This is called a “wet dream” or a nocturnal emission. Males and females may masturbate themselves in their sleep by touching themselves or rubbing themselves against some object in their bed.

*What happens when you masturbate?*

Masturbation is the manipulation by individuals of their own bodies, usually in the genital area. Masturbation may begin as early as a few months old, and it is a natural part of the child’s learning experience. By puberty, many males and females masturbate. It is normal for people at any age to sometimes masturbate. It is also normal not to masturbate.

Masturbation is not dangerous to a male’s or female’s health. When a female masturbates her vagina may become moist and a warm pleasant feeling may travel through her body during her climax. A male’s penis will have moisture come out of the end and eventually have sperm come out of the end of the penis and like the female have a warm feeling travel through his body.
**What would happen if you had sex at fifteen years old?**

Most 15 year old females or males are physically able to have sex. The female and/or male could contract a sexually transmitted disease that could require medical attention. Also a female could become pregnant.

The 15 year old youth may not be mentally ready to deal with having a sexual relationship and could cause themselves a considerable amount of guilt and mental anguish. However it is also possible that nothing could happen other than they have sex.

**Do people masturbate for fun?**

Yes, some people masturbate for the sexual pleasure they receive.

**If you are having sex how does the sperm get in the vagina?**

The male inserts his erect penis inside the female’s vagina. After the penis has become sensitive and excited by back and forth movement, sperm is ejected into the females vagina.

**SEXUAL CHARACTERISTICS**

**Why is our hair different colours and why are some guys short??**

The characteristics that you get from your mother and father are called your heredity. It includes what your body will look like, whether you will be short or tall, or heavy-boned, and so on. Heredity decides your eye color, your skin and hair color, and whether you will have straight or curly hair. Heredity may also include some of your talents for music, sports, art, numbers, words, or work with your hands for example. All these characteristics are passed on to a child by the “blueprint” in the mother’s egg and the father’s sperm. When the egg and sperm join there is a recessive and dominate gene. The dominate gene will decide what is to happen (i.e., the dominate gene is for red hair and the recessive gene is for blonde hair, the child will have red hair).
BIRTH

Why do some women die when she delivers her baby?

In North American modern day society very few women would die from giving birth to a baby. Women have easy access to excellent medical help that would be able to effectively deal with any major problems. If there are complications with the baby’s birth a doctor can operate and do a Cesarean (also known as a C section). A C section is where the doctor surgically cuts through the stomach area and into the uterus. The baby is then taken out of the opening that the doctor made.

In third world countries and in the old days some women did die while trying to give birth to a child. Sometimes the baby would try to come out sideways, feet first, or one leg down in the birth canal and the other up in the uterus. On occasions a baby may have been too big to come down through the birth canal. In numerous cases with problem births, the female could have internal damage, external tearing, and/or get an infection which could lead to the mother’s death.

Does it hurt the mom when the doctor cuts the umbilical cord?

A mother is in a considerable amount of pain as she goes through the three stages leading up to the birth of her baby. As the baby forces his/her way through the tight birth canal the mother is tired and still in pain. When the baby is outside of the mother’s body and the umbilical cord is cut the mother appears not to feel any added pain.

Why are babies born on the day that they are?

Each month a female’s internal sex organs work together to complete a menstrual cycle. The cycle begins on “Day One” of a menstrual period and goes to “Day One” of the next period. The average cycle takes about 28 days, but most girls and women get their periods every 26 to 30 days. A female’s cycle may be shorter or longer (anywhere from 17 to 35 days long).

A female is capable of having a baby any day of the month. The female will have the baby approximately 39 weeks (9 months) after the fetus is conceived.
When a female is going to have a baby does she go to the bathroom or does the baby just come out?

The most common way for a female to have a baby is to be lying on her back. Birthing beds have stirrups on either side of the end of the beds where a female will place her feet. The stirrups are placed so the female will have her knees up in the air and her legs split. This position will allow the doctor easy access to assist the mother with the birth.

Does the baby sometimes come out feet first?

The proper way for a baby to come out is face down and head first. Some babies do try to come out feet first but it can be a very difficult birth. If the baby could not be turned by the doctor so it could come out properly he may do a C section.

How come our belly button is closed if food goes through the umbilical cord when you are a baby?

When a fetus is in the womb it receives its nutrition, and oxygen from the mother by way of the umbilical cord. After the baby is born a clamp is placed near the baby’s stomach and the umbilical cord is cut. From that moment on the baby will have to eat its own food and breathe for itself.

What happens if someone is suppose to be a boy but comes out as a girl?

While a mother is pregnant many people will try to guess whether the baby will be a boy or a girl. Some say when the mother carries the baby high it’s going to be a girl. But, there is no sure way to tell if the baby is going to be a girl or boy without doing medical tests. On occasions a doctor can tell if the baby is a boy when he is doing an ultrasound because he may see the boy’s penis. The only sure way to tell whether it is a boy or girl is do an amniocentesis on the mother. An amniocentesis is when a doctor sticks a long needle through the mother’s stomach into the uterus and extracts some of the amniotic fluid. The doctor then grows a culture of the fluid in a little dish. Once the culture is grown the doctor can see part of the genetic code of the baby indicating whether it is a boy or girl. If it has the genetic code of a boy then it will be a boy.
If a child is born premature past two months is it likely to die?

It is best for the baby if it goes to full term which is approximately 39 weeks. Babies can survive when they are three months premature. At 25 weeks a baby, if born, can live several hours or days but only one in ten would survive.

If babies are born nine months after being conceived why are there premature births?

Normally a mother is pregnant for approximately 39 weeks. However, sometimes a baby is born premature due to problems with the fetus or the mother's placenta or umbilical cord.

Multiple Births

How do they get two sacks?

The normal process for a mother to become pregnant is that one egg is fertilized by one sperm. On occasion a female will release two eggs and each egg will be fertilized by a different sperm. In this case we would refer to the twins as fraternal twins. Consequently, there will be two individual and independent placentas (sacks).

When a female has twins do the babies come out one after the other?

When a female has baby twins one baby comes out at a time. The first baby is most often followed by the second shortly after.

How do you have twins?

There are two different kinds of twins. Fraternal twins develop when two different eggs are fertilized by different sperm at about the same time and each fetus could be a boy or a girl. Identical twins develop when a fertilized egg divides into two cells and each cell develops independently and both of the eggs would have to be either both boys or both girls.
**How do babies get stuck when they are born?**

Most births (99%) occur in the longitudinal position, usually with the head present first. However sometimes babies will have a hard time being born. Some of the reasons a baby may have difficulty at birth are:

a) the baby is too large to come out the vagina opening -- doctors will cut the vagina opening (episiotomy), take the baby out and then stitch up the mother

b) the baby may try to come out buttocks or legs first, and this is referred to as a breech birth -- doctors will try to get the baby to change position but if all fails then the doctors will do a cesarean (C-section)

c) the baby lies crosswise with a shoulder, arm, or hand entering the birth canal first and this is referred to as a transverse birth -- doctors will try to get the baby to change position but if all fails then the doctors will do a Cesarean (C-section)

**How are siamese twins born?**

Siamese twins develop when the initial separation of the cells into two cell masses is not complete. A normal single baby birth forms from one egg and one sperm. Identical twins are created when the one fertilized cell separates into two identical embryos. Siamese twins are formed when the fertilized egg does not completely separate. Hence, the two fetuses will be joined together (i.e., head to head, hip to hip).

**Could you have one boy and one girl if you had twins?**

If a female had one boy and one girl she would be having fraternal twins. On occasion a female will release two eggs and each egg will be fertilized by a different sperm. Each of the individual and independent fertilized eggs could be either a boy or a girl. Therefore, it would be possible to have twins that are a boy and a girl.

**GENETICS**

**If two white people were to have sex and make a baby could the baby ever be black?**

If one or both of the people that appeared to be white had a black person in their past gene pool then it would be possible for two white people to have a black child. The characteristics that you get from your mother and your father is called your heredity. It includes what your body will look like, whether you will be have skin colour that is black, mixed, or white, short
or tall, and so on. Heredity decides your eye color, your skin and hair color, and whether you will have straight or curly hair. Heredity may also include some of your talents for music, sports, art, numbers, word, or work with your hands for example. All these characteristics are passed on to a child by the “blueprint” in the mother’s egg and the father’s sperm. When the egg and sperm join there is a recessive and dominate gene. The dominate gene will decide what is to happen (ie the two white people have had a Negro for a grandfather and now the dominate gene for skin colour is black and the recessive gene is mixed the child will have black skin).

**Could a woman have an animal baby?**

The genetic make up of a human and animals are totally different and it would be impossible for a woman to have an animal baby.

**Could a human get an animal pregnant?**

The genetic make up of a human and an animal are totally different and it would be impossible for a human to impregnate an animal.

**BABIES**

*What is the average size of a baby at birth?*

The average or normal weight of a baby would be approximately 3.2 kg (7 lb), a heavy baby would be considered to be above 3.8 kg (8.5 lb) and a premature could weigh approximately 500 gm (1.1 lb) or more.

*Could males have a baby?*

No, males do not have the reproductive system to be able to have a baby.

*Is it true that babies have webbed feet and gills before it's born?*

No it is not true. Babies are in a little self-sufficient apartment that is called the placenta. The baby receives all its food and oxygen from the umbilical cord that is attached to the babies belly button and to the mothers blood system. The baby does not have to breathe for itself
because it receives all it needs through the mother’s blood system. Therefore, the fetus would not need gills. Nor would it need web feet because there is no need to swim around in the water (amniotic fluid) that is contained in the placenta.

Does it matter if the new born baby drinks from a bottle or nurses from the mother’s breast?

Doctors feel that a baby should begin by nursing from the mother’s breast because in the first secretions from the mother’s breast the baby will receive colostrum. Colostrum is a substance that is high in protein content and is thought to help in preventing infectious diseases during the baby’s first months. Some doctors also think that colostrum helps clean mucous from the baby’s intestines.

What happens if you have to give up a baby but no one wants to adopt it?

 Normally there is a high demand to adopt healthy babies by people that are unable to have their own children. However, if a home cannot be found for a baby and the mother is not capable of caring for the child social service may have to find a foster home for the baby.

SAFE SEX

Boys use a condom, what do girls use?

A boy may use a condom to prevent pregnancy and to prevent getting any sexually transmitted diseases. Girls use some of the following methods to not get pregnant:

a) birth control pill which stops the eggs from ripening and coming out of her ovaries;

b) natural family planning where a female does not use any artificial means of contraception -- this is accomplished by the woman studying her own body very carefully and keeping careful records;

c) IUD which is placed in the women’s uterus and prevents the egg from settling into the lining of the uterus;

d) sterilization - a female may have her fallopian tubes tied or even cut so that neither eggs nor sperms can pass; and,

e) spermicide is sprayed inside the vagina which will kill any sperm that have entered the female’s body.

The best way for a female not to get a sexually transmitted disease is to not have sex or not to have sex with people that she does not know extremely well. She should also make sure
the male wears a condom. If the female feels she is going to be having sex then she should consider carrying her own supply of condoms for her partners to use.

**What will prevent a person from getting a disease when you have sex? How does it work?**

The safest sex is not to have sexual intercourse at all. If a person is going to have a sexual relationship and they are not absolutely sure whether their partner has a disease, then it is best to use a condom. However, condoms are not foolproof and only provide “safer sex.”

A condom’s purpose is to keep the sperm from getting to the female and to not allow any sexually transmitted diseases into or out of the condom.

**If a women gets her tubes clamped can she ever get them off and have a baby?**

Today with microscopic surgery the clamps can be taken off. However, the procedure is not guaranteed to work.

**What if one person wore a condom and the other one didn’t?**

A condom worn by a male should be enough. However, condoms are not foolproof and only provide “safer sex.” If the female is concerned about getting pregnant, then she should consider using some form of contraceptive.

**Can you get pregnant if you use protection?**

Yes, a female can get pregnant even if both partners are practising safe sex. The only true safe sex is not to have sexual intercourse. No method of safe sex regarding pregnancy is totally foolproof, unless, the female has her tubes successfully tied or she has a hysterectomy.

**What is a condom used for?**

A condom has two main purposes and they are:

a) to prevent the male’s sperm from entering the female’s body, therefore, not allowing the female to become pregnant; and,

b) to prevent sexually transmitted diseases from entering the male’s or female’s body
It is important to state that condoms are not totally foolproof and are only a means of having “safer sex.”

**How does birth control work?**

Girls use some of the following methods to not get pregnant:

a) birth control pill which stops the eggs from ripening and coming out of her ovaries
b) natural family planning where a female does not use any artificial means of contraception -- this is accomplished by the woman studying her own body very carefully and keeping careful records
c) IUD which is placed in the women’s uterus and prevents the egg from settling into the lining of the uterus
d) sterilization - a female may have her fallopian tubes tied or even cut so that neither eggs nor sperms can pass
e) spermicide is sprayed inside the vagina which will kill any sperm that have entered the female’s body
f) condom is a sheath that fits over a male’s penis and does not allow his sperm to go into the females vagina

**If you use both kinds of protection would there be a less chance of getting pregnant or a disease?**

The more that a person can do to ensure their safety the better off they will be. However, there is still no way to protect yourself that comes with a 100% guarantee short of abstinence.

**DISEASES - INFECTIONS**

**How do you get Hepatitis B or C?**

There are four known ways that a person can contract hepatitis B or C and they are:

a) sexual intercourse which would include vaginal, anal and possibly oral intercourse;

b) sharing of needles for intravenous drug use and also possible through the use of tattoo needles;

c) transfusion of blood or blood products that have been infected with hepatitis B or C; and,

d) during the birthing process or from breast milk the fetus (baby) could be infected by the mother.
What would happen if you had HIV or Hepatitis B or C and then got shots a little while later? Would the disease go away?

No the disease would not go away. A shot for hepatitis must be received before contact with the disease. At present there is no preventative product to keep a person from getting AIDS. However, there is a shot for hepatitis.

Why do people get AIDS?

People get AIDS because their blood system has had contact with another person’s blood system who has AIDS. Please read the next question for more information pertaining to AIDS.

How do people get AIDS? How do you get AIDS if you haven’t had sex? How does AIDS spread?

There are four known ways that a person can get AIDS and/or spread AIDS and they are:

a) sexual intercourse which would include vaginal, anal and possibly oral intercourse
b) sharing of needles for intravenous drug use and also possible through the use of tattoo needles
c) transfusion of blood or blood products that have been infected with hepatitis B or C
d) during the birthing process or from breast milk the fetus - baby could be infected by the mother

How did AIDS begin?

AIDS (“Acquired Immune Deficiency Syndrome”) breaks down a part of the body’s immune system, leaving a person vulnerable to a variety of life-threatening illnesses. AIDS is caused by a virus.

It is thought that AIDS began in Africa. In Africa people hunt monkeys for food. Monkeys have a virus that is very similar to AIDS. Perhaps when a person was killing the monkey they also cut themselves and the monkey’s blood came in contact with their blood. This is one way that humans could have come into contact with the AIDS virus.

What is HIV Positive and HIV Negative?

HIV positive or negative blood tests tells a person whether the AIDS antibodies is presently active or not in their body. HIV positive means that the blood sample indicates that
antibodies to the virus are present in their blood system. The person has been infected with the AIDS virus and antibodies have been produced. Most people with AIDS antibodies have an active AIDS virus in their body.

HIV negative indicates that the person has not been infected with the AIDS virus. However, contact may have been made with the virus but the person has not become infected. It is possible that the person could produce the antibodies in 2 to 8 weeks to 6 or more months. Some people may never produce the antibodies.

**Do you usually get HIV positive?**

HIV positive is the first step in having a full blown case of AIDS. A person that has been diagnosed as being HIV positive has the AIDS antibodies present in their blood system. The person must have come into blood contact with a carrier of the AIDS virus to be considered HIV positive. If a person has not come into contact with the AIDS virus then they would not be considered to be HIV positive.

**How do you know you have AIDS?**

A person must go to a doctor’s office for an examination where the doctor will do a series of tests. The tests will tell the doctor if the AIDS virus has entered a person’s blood system.

**Can a baby be born with AIDS?**

Yes, a baby can be born with the AIDS virus present in their blood stream. The mother could infect the baby in the womb, during birthing or by breast feeding.

**If people know about AIDS and STD (Sexually Transmitted Disease) why do people continue to have sex and take a risk of killing themselves?**

Some people may continue to have sex and take a risk of killing themselves by contracting an STD for some of the following reasons:

a) the belief of being indestructible, “it wouldn’t happen to me;”
b) the feeling that the person knows their sexual partner well and that they don’t have to practise safe sex;
c) being addicted to drugs and sharing needles and the need for the drug out weighs the danger;
d) low self-esteem and being pressured into making an unwise sexual decision; and,
e) a mixture of curiosity and experimentation without a real understanding of the possibilities of the dangers of sexual activity.

What happens to the AIDS virus when the body is dead?

The AIDS virus lives in the blood system of a human. When the blood is no longer alive the AIDS virus is thought to also die. However, there has been a documented case where a doctor cut himself while doing an autopsy of an AIDS infected person and contracted the AIDS virus. It is possible that the corpse’s blood was still kept warm and alive long enough to infect the doctor.

The general belief is that once the blood has no life the AIDS virus will die and not longer exist.

Why do antibodies die when a person gets AIDS?

Inside the blood system of a human there are antibodies. Antibodies act like “Pac Man” travelling through the blood system looking for germs and diseases to attack and eat up. They help protect our body from getting sick.

The AIDS virus attacks and starts to kill the antibodies. When the antibodies are gone, so is the human’s ability to rid itself of simple germs and diseases. Hence, a person could die from a simple cold that would lead to pneumonia.

What would happen if a mosquito bit a person that had AIDS? Would the mosquito be able to pass the AIDS virus on to another person?

No, there is no evidence that would suggest that a mosquito would pass the AIDS virus on to a human.

What would happen if you would put chlorine in a person with AIDS? Would the chlorine kill the AIDS?

Yes, the chlorine would kill the AIDS virus but it would also kill the human. Therefore, chlorine could not be used to do away with the AIDS virus.
What is yeast infection?

A yeast infection is an imbalance of the normal bacteria that helps to keep the proper acidic environment in the vagina. The symptoms of a yeast infection is a thick, white discharge that looks like cottage cheese. Also, there is often itching of the vulva and vaginal area with white patches of fungus over raw, sore areas.
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