



Facilitator Guide for Teachers and Educators

Human Development and Sexual Health: Puberty (Grade 5)

Introduction

This module provides educators who teach students in grade 5 with a lesson on human development. The module supports the learning objectives of The Health & Physical Education Ontario Curriculum.

Learning objectives

By the end of this presentation students will be able to better understand:

- Personal care and hygiene
- Physical changes during puberty
- Emotional and social changes during puberty
- Self-concept
- Conception
- Menstruation and spermatogenesis
- Safe use of technology

Purpose

Improving and protecting the health and well-being of school-aged children and youth is a priority for Ontario's public health sector. Childhood is a time when health practices and behaviours are learned, and adolescence is a period when both positive health behaviours and risk behaviours can be adopted. Because curriculum for the school year may be delivered at various times by different educators, this guide allows the educator to deliver self-paced content related to human development in the classroom at their convenience. Depending on the level of discussion, student engagement, and the



Facilitator Guide – Puberty (Grade 5)

preferences of the educator, the length of this presentation can vary from approximately 30-60 minutes. Please ensure familiarization of the content prior to teaching to ensure there is sufficient time within classroom hours.

About this guide

This guide is intended as a supplemental resource for educators who choose to deliver the health modules developed by Ottawa Public Health (OPH). As content is updated annually and/or when new evidence emerges, we encourage educators to frequently check back on the [School Health Online](#) webpage to access the most up-to-date content.

Additional resources

For more information on human development, available services and resources please visit the following:

- [School Health Online](#)
- [Talking to Your Child about Puberty – Parenting in Ottawa](#)
- [Your Body – Sex and U](#)

Disclaimer

The information provided is not a substitute for professional medical advice. Educators should encourage students to consult their parents or guardians, and/or qualified healthcare professionals for personal guidance related to puberty. Educators should approach questions about puberty with sensitivity, respect, and an understanding of the diverse backgrounds and perspectives of their students. When responding to a student question, the response should be adapted to reflect the age and maturity of the student as well as the classroom environment and individual school policies.

Considerations

Becoming informed about a topic prior to discussing it in a classroom setting, will help create a productive and comfortable conversation with youth. This module includes topics that some students may find uncomfortable and/or difficult to understand. Here are some considerations to support the students' learning experience:

- Be sensitive to different backgrounds and experiences.



Facilitator Guide – Puberty (Grade 5)

- As much as possible, be aware of experiences in your students' lives that may make certain discussions uncomfortable for them. Consider letting students know ahead of time that the topic will be discussed in class and use proper judgment if accommodations are needed.
- Watch for signs of discomfort.
 - Monitor students' faces and body language.
- Allow ample time for discussion.
 - Allow enough time to introduce the topic, discuss as a group, summarize, and answer questions.
 - Using an anonymous "question box" may encourage students to ask questions they otherwise would not feel comfortable asking in front of the class.

Continued collaboration

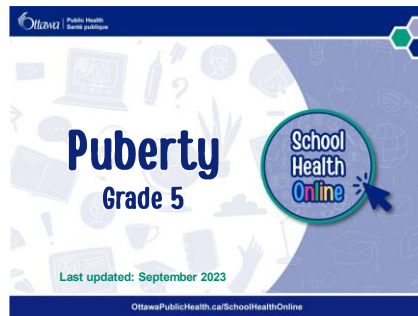
Our commitment to improving health outcomes is an ongoing journey*. We encourage you to share feedback and suggestions for improvement on this module, using our feedback form found on our [School Health Online](#) webpage. Together, we can continuously refine our resources to better the evolving needs of our school communities.

*Last updated: September 2023

Facilitator Guide – Puberty (Grade 5)

Module

Slide 1



Slide 2

Before we start...

Let's cover some ground rules!

*Reminder that support is always available at school.
Other community resources will be shared at the end of the module.

Please use as suggestions only:

Prior to beginning this module, it can be helpful to include a statement such as: "I know this can be a sensitive topic and can make people feel uncomfortable." Let your students know that you are not uncomfortable, and that this is such an important topic to start talking about even before youth may have started thinking about puberty. Reinforce that this is a safe space where students can learn about their bodies and health to be better able to make informed decisions for themselves.


Ground rules: Review classroom etiquette or establish ground rules together as a group, prior to this lesson.

Some examples:



- Refraining from discussing personal situations or stories; however, students are encouraged to speak to their teacher privately if they would like to discuss a topic further.
- Respecting all beliefs and cultural values.
 - **Cultural sensitivity:** People's decisions and behaviours related to one's sexuality are influenced by their cultural beliefs, values and practices. It is important to acknowledge our own personal cultural values and beliefs while respecting that others may not share the same ones.
- Using inclusive language and proper terminology.
- Welcoming all questions.
- Listening attentively.
- Helping create a safe space for students – an environment of respect and sensitivity.
- Keeping classroom discussions confidential.

Inclusive language: Inclusive language is used to include individuals of all genders and sexual orientation. Using inclusive language provides a safe space for students, as well as a respectful, caring and welcoming environment. It is also important to note and share with students that during

Facilitator Guide – Puberty (Grade 5)

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| | <p>the lessons, when the female and male anatomy are discussed, they are discussed from a biological standpoint meaning sex assignment at birth. However, it is important to point out to students that for some people, their assigned sex does not match their gender expression and experience and that is okay. The information outlined in this presentation is intended to educate students about the functions of the human body and provide them with valuable knowledge to make healthy and safe choices in their lives.</p> <p>Note to educator: When talking about body parts, emphasize physiology instead of gender. Referring to “bodies with a penis and testicles” or “bodies with a vulva and ovaries” is more accurate and inclusive than referring to boys or girls. It may be useful to show diagrams of the external genitals if students do not know the words “vulva” or “penis”. For example, rather than saying “Girls will go through menstruation”, educators could refer to a diagram of the reproductive system and explain that “For those who have ovaries, menstruation usually begins between the ages of 8-18”.</p> <p>For more information on teaching in a gender-inclusive way, refer to the “Principles of Gender Inclusive Puberty and Health Education”.</p> |
| <p>Slide 3</p> <p>Introduction</p> <ul style="list-style-type: none"> ■ Hygiene ■ Puberty <ul style="list-style-type: none"> • Physical changes • Emotional & social changes ■ Self-concept ■ Reproductive systems ■ Conception ■ Menstruation & spermatogenesis ■ Online safety  <p><small>OttawaPublicHealth.ca/SchoolHealthOnline</small></p> | <p>Topics covered in this module include:</p> <ul style="list-style-type: none"> • Hygiene • Puberty • Self-concept • Reproductive systems • Conception • Menstruation & spermatogenesis • Online safety |

Facilitator Guide – Puberty (Grade 5)

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| <p>Slide 4</p> <p style="text-align: center;">Hygiene Why is it important?</p>  <ul style="list-style-type: none"> • Prevents body odours • Removes excess oils on skin • Creates a healthy lifestyle and healthy habits <p><small>OttawaPublicHealth.ca/SchoolHealthOnline</small></p> | <p>Having healthy personal hygiene is an important part of development. Hygiene is especially important during puberty as sweat glands become more active and skin starts producing more oil.</p> <p>Hygiene is a set of measures to maintain health and lower the risk of getting sick from diseases caused by germs (bacteria and viruses). Personal hygiene includes practices performed to keep the body healthy and preserve our well-being. These include removing excess oil from the skin, creating a healthy lifestyle and a good routine, and preventing body odour.</p> |
| <p>Slide 5</p> <p style="text-align: center;">Personal hygiene includes...</p>  <p><small>OttawaPublicHealth.ca/SchoolHealthOnline</small></p> | <p>Suggested activity: have students guess which aspect of personal hygiene corresponds to each number. Click on each number (in any order) to reveal each component of hygiene.</p> <ol style="list-style-type: none"> 1. Comb or brush hair to avoid tangles as needed. Some may not need to brush their hair daily (e.g., very short hair, braided hair) 2. Wash hair with shampoo and conditioner. The frequency that one should wash their hair will vary for each person. Some people wash their hair every day, while others wash it once or twice a week. It all depends on their hair. People whose hair looks dirty between shampoos may decide to wash it more often. 3. Brush teeth and tongue with toothpaste in the morning and before bedtime. Don't forget the teeth towards the back of the mouth! Flossing should be done at least once a day. 4. Wash face to remove the build-up of dirt and oils. This helps keep the skin clean and healthy looking. 5. Apply deodorant or antiperspirant as needed. The sweat glands in the armpits become active at puberty and produce sweat, which can cause unpleasant odours when it comes into contact with bacteria on the skin. We use a deodorant to cover up this smell. People can use it when they notice body odour. It is applied every day after the shower or the bath or according to the needs. An antiperspirant is used to reduce perspiration. It can also be used to reduce underarm wetness and odour. |

Facilitator Guide – Puberty (Grade 5)

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| | <p>6. Wash hands several times a day (e.g. after going to the bathroom, before eating, if hands feel or seem to be dirty, after touching animals, etc.). Hand hygiene refers to all actions that help reduce the spread of germs that can cause illness. This includes the following gestures:</p> <ul style="list-style-type: none"> • Wash hands • Use hand sanitizer • Cough and sneeze into the crook of the elbow (not into hands) or a tissue • Become aware of the presence of germs on surfaces • Keep hands away from face to prevent germs from coming into contact with the face <p>7. Change clothes (including underwear and socks) and wash clothes regularly. Properly clean the genitals after using the toilet and wear clean underwear. To maintain good hygiene, wear clean, dry clothes every day. Clothes should be washed when they are dirty or smell bad. Likewise, underwear and socks should be changed every day.</p> <p>8. Take a bath or shower regularly. A soap or shower gel is used to remove dirt and oil from the skin and thus reduce the number of bacteria that can cause bad odours. They are used during the shower or bath every day or after intense physical activity. Make sure the water is not too hot and apply lotion as needed to prevent the skin from drying out.</p> |
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Slide 6

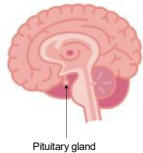
Genital care

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| <p>Vulva</p> <ul style="list-style-type: none"> Wipe from front to back Use mild, unscented soap Dry well Use unscented feminine hygiene products Put on clean underwear | <p>Penis</p> <ul style="list-style-type: none"> Gently pull back the foreskin (if uncircumcised) Wash the head and tip of the penis with mild soap Dry well Bring the foreskin back over the head of the penis Put on clean underwear |
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- How to clean the genitals:**
- Vulva:**
- Clean the vulva from the front to the back to avoid infection
 - Use water and mild, unscented soap to clean the vulva, inner and outer labia
 - Never put soapy water into the vagina. The vagina cleans itself and does not need products
 - Dry well and put on clean underwear
- Penis:**
- Use water and mild soap to wash the head and tip of the penis. Those with foreskin should gently pull back the foreskin to ensure the head of the penis is properly washed.
 - Dry well and pull foreskin back over the head of penis


Facilitator Guide – Puberty (Grade 5)

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| | <ul style="list-style-type: none"> • Put on clean underwear <p>Note: It is normal to have some thick, white discharge under the foreskin. This is called smegma. If there is a lot of smegma or it is smelly, the penis may need to be cleaned more often.</p> <p>If students ask what circumcised means: Circumcised means that the foreskin (the skin covering the head of the penis) has been removed. On an uncircumcised penis, the foreskin is still covering the head but can be slid back. All penises, whether circumcised or uncircumcised, work the same!</p> |
| <p>Slide 7</p> <p style="text-align: center;">Puberty</p> <ul style="list-style-type: none"> ■ What is puberty? ■ Pituitary gland ■ Hormones <ul style="list-style-type: none"> • Testosterone • Estrogen • Progesterone  <p style="text-align: center; font-size: small;">Pituitary gland</p> <p style="font-size: x-small; margin-top: 10px;">OttawaPublicHealth.ca/SchoolHealthOnline</p> | <p>Puberty is a period when the body begins to develop and change during the transition into adulthood. During puberty our bodies go through many physical and emotional changes. On average, puberty happens between the age of 8 to 18, and changes occur gradually. Not all bodies experience changes of the same kind, or at the same time.</p> <p>Physical changes during puberty:</p> <ul style="list-style-type: none"> • These changes occur because of hormones in the body. • The pituitary gland sends messages to the sex glands (ovaries and testes) to release hormones: testosterone, estrogen and progesterone. • Testosterone is produced by the testes and released into the blood to target other parts of the body to change or grow. • Estrogen and progesterone are produced by the ovaries and released into the blood to target other parts of the body to change or develop. |

Facilitator Guide – Puberty (Grade 5)

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| <p>Slide 8</p> <p>Physical changes during puberty</p> <ul style="list-style-type: none"> ■ Growth in height ■ Weight (muscles, hips) ■ Hair (underarm, pubic) ■ Genitals ■ Skin ■ Body odour  <p><small>OttawaPublicHealth.ca/SchoolHealthOnline</small></p> | <p>These changes occur during puberty regardless of the sex assigned at birth:</p> <ul style="list-style-type: none"> ● Growth: Both height and weight. ● Hair: Body, facial, armpits, pubic. Some people choose to remove their body hair, but it is a personal choice and is not necessary. ● Genitals: Further details in the upcoming slides. ● Skin: Can become oily, and pimples start to appear on the face and body. This is normal and happens due to the changes in hormones. <ul style="list-style-type: none"> ● Acne does not mean a person is dirty! A person can have perfect hygiene and still have acne. ● Body odour: Sweat glands become more active and an increase in body odour can occur. Deodorants and antiperspirants can mask body odour; discuss the best option with a trusted adult. <p>Note to educator: Emotional & social changes will be discussed in detail in later slides.</p> |
| <p>Slide 9</p> <p>Specific changes</p> <ul style="list-style-type: none"> ■ Assigned female at birth <ul style="list-style-type: none"> • Breasts • Menstruation • Vaginal discharge ■ Assigned male at birth <ul style="list-style-type: none"> • Facial hair • Erection + ejaculation • Changes in voice  <p><small>OttawaPublicHealth.ca/SchoolHealthOnline</small></p> | <p>Some changes are more specific to an assigned sex:</p> <p>Assigned female at birth:</p> <ul style="list-style-type: none"> ● Weight changes are concentrated around the following areas; breasts, hips, waist, thighs, and buttocks ● Menstruation (getting a period) ● Vaginal discharge: White or clear odourless vaginal discharge is normal, and it helps to clean and moisten your vagina. If there is a change in colour (such as brown, gray, or green), or if there is any itching, burning, or strong odour, these may be signs of an infection. A primary care provider should be seen for screening. <p><i>*Menstrual cycle will be discussed in later slides</i></p> |

Facilitator Guide – Puberty (Grade 5)

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| | <p>Assigned male at birth:</p> <ul style="list-style-type: none"> • Facial hair growth • Voice changes: the larynx grows, which deepens the voice. It may stick out in the neck area, which is called the Adam's apple. • Weight changes are concentrated around the following areas: <ul style="list-style-type: none"> ○ Broadening of the shoulders ○ Development of muscle tone (thicker and larger muscles) • Testicles get bigger; one may fall lower on one side • Penis lengthens and thickens • Wet dreams/nocturnal emissions and ejaculation <p><i>*Erection & ejaculation will be discussed in more detail later in this module</i></p> |
| <p>Slide 10</p> <p style="text-align: center;">Emotional and social changes</p> <ul style="list-style-type: none"> ■ More intense emotions and feelings ■ Confusion and questions about changing bodies ■ Adjusting to changing relationships <ul style="list-style-type: none"> • More independence • New interest in relationships • Influenced by friends & classmates ■ Searching for identity  <p><small>OttawaPublicHealth.ca/SchoolHealthOnline</small></p> | <p>Just as external changes happen to the body during puberty, changes also happen inside! Puberty and adolescence is a time of social and emotional change and development.</p> <p>Emotional changes are common during puberty. It's normal for youth to have strong feelings at different times, and not always know why. Mood swings may be more common. Youth are learning how to express and control emotions. Remind students that there is always someone to talk to if they are having strong feelings.</p> <p>As youth grow, they may feel self-conscious about their changing bodies. All bodies grow at different rates, and there is no way to speed up or slow down this process. This can lead to stress for youth during puberty. Encourage youth to ask questions or express concerns about their changing bodies, to a trusted adult.</p> <p>Adjusting to changing relationships:</p> |

Facilitator Guide – Puberty (Grade 5)

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| | <ul style="list-style-type: none"> • It is normal for youth to want more independence and want to spend more time with friends. Conflict between youth and parents/guardians may be more common as youth seek independence. • Youth are more heavily influenced by their peers during this transition period. Self-esteem may be affected by their peers and their appearance. • Youth may experience more intense feelings, a new interest in relationships, and “crushes”. <p>Searching for identity: as youth grow and mature, they are exploring who they are and where they fit in the world. This can be influenced by gender, friends, cultural background, media, school and family expectations. Conflicts can arise when there are differences between personal desires and family expectations or cultural teachings and practices.</p> <p><i>*Personal identity will be explored further in the next slide.</i></p> |
| <p>Slide 11</p> <p>What makes me, me?</p> <p>Personal identity</p> <p>Self esteem</p> <p>Self-concept</p> <p>Sexual orientation</p> <p><small>OttawaPublicHealth.ca/SchoolHealthOnline</small></p> | <p>Personal identity:</p> <ul style="list-style-type: none"> • Everyone has their own personal identity. • People realize what their own identity is, at their own pace, as they go through life. Puberty is a time of change when youth often start exploring their personal identity. • This can change throughout life depending on what's going on in one's life, and what's most important to them. • It is unique for each person; however, may include age, culture, interests/hobbies, language, race, appearance, job/education, religion & sexual orientation. • It is important to do what feels right and to stay true to beliefs. • It is important to be surrounded by people who are respectful and accepting. <p>Self-concept:</p> <ul style="list-style-type: none"> • Is an idea that an individual has about their own identity including their abilities, traits and emotions. • Is a person's overall perception and beliefs about themselves. |

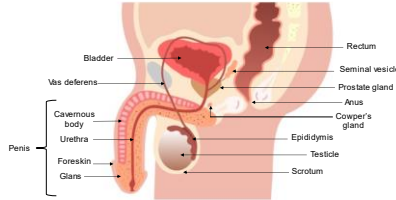
Facilitator Guide – Puberty (Grade 5)

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| | <ul style="list-style-type: none"> • Includes both the individual's perceived positive qualities (ex: intelligence/kindness) and perceived negative qualities (weakness/insecurities). • Can be influenced by other people and their opinions. • Can at times make people feel good or bad about themselves. <p>Part of an individual's self-concept and personal identity includes sexual orientation.</p> <p>Sexual orientation:</p> <ul style="list-style-type: none"> • Relates to an individual's physical, emotional and sexual attraction to others. • May stay the same over their whole life, or it may change. • Connected to how an individual sees themselves and also interacts with others. <p>Self-esteem:</p> <ul style="list-style-type: none"> • The value, respect and opinion that a person has about all aspects of themselves. It impacts the way a person takes care of themselves emotionally, physically, and spiritually. |
| <p>Slide 12</p> <p>Assigned male at birth External genitalia</p> <p>Penis Testicles</p> <p><small>OttawaPublicHealth.ca/SchoolHealthOnline</small></p> | <p>Describe each part of the body and its role:</p> <ul style="list-style-type: none"> • Testicles/testes: glands that produce and store sperm • Penis: external organ used to urinate. Also for sexual pleasure and for ejaculation of semen |

Facilitator Guide – Puberty (Grade 5)

Slide 13

Assigned male at birth
Reproductive system



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Description of each part of the body and its role:

Bladder: organ that contains urine

Urethra: tube that carries urine from the bladder to the outside of the body; also carries semen, but not at the same time

Penis: external organ used to urinate. Also for sexual pleasure and for ejaculation of semen

Penis glans: rounded head of the penis that is exposed when the penis is circumcised or erect

Foreskin: layer of skin that covers the glans (uncircumcised) that can be retracted to expose the glans

Cavernous body: erectile tissue that forms the body of the penis; swells with blood to create an erection

Rectum: last part of the intestines that contains stool before it is removed from the body

Anus: sphincter attached to the rectum that passes stool or fecal matter from the body

Testicles: glands that produce and store sperm

Epididymis: coiled segment where sperm is stored, matures, and is transported from the testes to the vas deferens

Vas deferens: tube that carries sperm from the testes to the urethra; sperm becomes mixed with secretions along the way and forms semen

Scrotum: pocket of skin that contains the testes, epididymis, and vas deferens

Seminal vesicle: provides the semen with clear liquid mucus with a high sugar content

Prostate: reproductive gland shaped like a walnut; creates a thick white fluid rich in protein which mixes with semen

Cowper's gland: releases fluid that mixes with semen

Facilitator Guide – Puberty (Grade 5)

Slide 14

Spermatogenesis & ejaculation



■ Sperm production begins at the onset of puberty.

■ The first sign that an individual can reproduce is having an erection that produces ejaculation.

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Sperm production

- Sperm production begins at the onset of puberty (around age 13).
- The testicles are responsible for making millions of sperm.
- The scrotum is used to protect the testicles by hardening to keep the testicles closer to the body or softening to move them away from the body, so that their temperature is 3°C lower than the rest of the body. This keeps the testicles at the right temperature for sperm production.
- Sperm passes from the testicles to the epididymis and are stored here for about 20 days until they mature.

Ejaculation

- The first sign that an individual can reproduce is having an erection that produces ejaculation.
- Ejaculation is the release of sperm and other liquids from inside the male reproductive tract that comes out through the penis.
- First begins with a male becoming sexually aroused.
- The penis becomes hard and rises. The penis also becomes larger and longer. This is called an erection. **(Image on the bottom left)**
- During ejaculation, the vas deferens carry sperm to the urethra and the sperm mixes with secretions along the way to form semen.
- Along the sperm's journey to the urethra, the prostate gland produces a white fluid rich in protein to help nourish semen outside of the body.
- The seminal vesicle, which lies behind the bladder, produces thick secretions that make up 60% of semen, and nourishes the sperm.
- During ejaculation, the prostate gland enlarges to block urine from leaving the bladder.

Ejaculations can occur during sleep. This is called “**wet dreams**” or “**nocturnal emissions**” and is very common. When wet dreams occur, students might notice that their underwear or pajamas are wet. This is semen that came out from the penis while sleeping. Wet dreams start to happen during

Facilitator Guide – Puberty (Grade 5)

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| | <p>puberty, when the body is starting to produce testosterone. They are completely normal, and part of growing up. It is the body's way of physically preparing for reproduction. If someone experiences a wet dream, they should simply remove the sheets and have them washed.</p> |
| <p>Slide 15</p> <p>Assigned female at birth External genitalia</p> <p><small>OttawaPublicHealth.ca/SchoolHealthOnline</small></p> | <p>Describe each part of the body and its role:</p> <p>Vulva: includes the labia minora and labia majora; often mistakenly called the vagina when, in fact, the vagina is the canal that runs from the opening of the vagina to the cervix</p> <p>Clitoris: most sensitive part of the vulva and provides sexual pleasure</p> <p>Labia majora: outer fold of skin that functions to protect the opening of the urethra and the vagina</p> <p>Labia minora: inner fold of skin that functions to protect the opening of the urethra and the vagina</p> <p>Urethral orifice: opening that leads to the urethra and where urine exits the body</p> <p>Vaginal orifice: opening that leads to the vaginal canal; a thin membrane called the hymen surrounds the opening of the vagina, and usually erodes over time. Just like other parts of the body, hymens differ from person to person (some people have very little hymen tissue, while others have more).</p> <p>Anus: sphincter attached to the rectum that passes stool or fecal matter from the body</p> |
| <p>Slide 16</p> <p>Assigned female at birth Reproductive system</p> <p><small>OttawaPublicHealth.ca/SchoolHealthOnline</small></p> | <p>Describe each part of the body and its role:</p> <p>Ovary: reproductive gland the size and shape of an almond that produces eggs and hormones (estrogen and progesterone)</p> <p>Fallopian tube: tubes that carry the egg from the ovary to the uterus, where it can be fertilized by a sperm</p> <p>Uterus: pear-shaped organ in the lower abdomen; during a pregnancy, it grows to allow the fetus to develop</p> <p>Cervix: lower, narrow part of the uterus; it forms a duct that opens into the vagina</p> <p>Vagina: muscular canal that runs from the cervix to the outside of the body; it is used for sexual pleasure or to give birth to a child</p> |

Facilitator Guide – Puberty (Grade 5)

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| <p>Slide 17</p> <p>Conception Sperm transport</p> <p><small>OttawaPublicHealth.ca/SchoolHealthOnline</small></p> | <p>①</p> <p>Conception: A pregnancy, which is the development of a baby in the uterus, can occur when sperm is ejaculated into the vagina, and the sperm and egg connect. Babies can also be conceived by having the sperm and egg connect using assisted reproductive technologies.</p> <p><u>Sperm transport</u></p> <ul style="list-style-type: none"> • Sperm (semen) leaves the penis and enters the vagina. • If semen gets into the vagina, the sperm cells will swim up through the vaginal canal, through the cervix, and towards the fallopian tubes. • Sperm can live up to six days, waiting to join with an egg, before they die. |
| <p>Slide 18</p> <p>Conception Egg transport</p> <p><small>OttawaPublicHealth.ca/SchoolHealthOnline</small></p> | <p>②</p> <p><u>Egg transport</u></p> <ul style="list-style-type: none"> • About halfway through the menstrual cycle, the ovaries release a mature egg from its sac (the corpus luteum) into the fallopian tube — this is called ovulation. • The egg travels from the ovary down one of the fallopian tubes (towards the uterus) where it will wait for a sperm cell, and can survive for up to 24 hours. Fertilization may take place if sperm are present. |

Facilitator Guide – Puberty (Grade 5)

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| <p>Slide 19</p> <p>Conception Fertilization ③</p> <p><small>OttawaPublicHealth.ca/SchoolHealthOnline</small></p> | <p><u>Fertilization</u></p> <ul style="list-style-type: none"> • When one sperm meets one egg and they join together, they begin to develop into what is called an embryo. This is the process of fertilization. • Fertilization usually takes place in a fallopian tube. • The embryo then continues to develop and travels down the fallopian tube and into the uterus. |
| <p>Slide 20</p> <p>Conception Implantation ④</p> <p><small>OttawaPublicHealth.ca/SchoolHealthOnline</small></p> | <p><u>Implantation</u></p> <ul style="list-style-type: none"> • If the embryo attaches to the lining of the uterus, this is called implementation. This is when pregnancy officially begins. • When the embryo implants in the uterus, the body releases pregnancy hormones that prevent the lining of the uterus from shedding. This is why people do not get their period while pregnant. • This lining is filled with nutrients and provides support to the developing and growing embryo. <p>As weeks pass, the embryo develops into a fetus which continues to grow in the uterus and the pregnancy usually lasts just over 9 months.</p> <p>There are many reasons why some individuals are unable to conceive a baby on their own (infertility, single parents, same-sex couples). Assisted human reproduction can help these individuals build their families.</p> <p>Additional ways of conceiving: Some examples using assisted human reproduction include:</p> |

Facilitator Guide – Puberty (Grade 5)

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| | <ul style="list-style-type: none"> • Artificial insemination: The partner’s own semen or donor semen is inserted into the vagina or cervix. • Intrauterine insemination: The sperm is placed into the uterus. • In-vitro fertilization (IVF): An egg is fertilized outside of the body in a lab and is then placed in the uterus. • Ovarian stimulation: Medications are used to induce ovulation in women who are not ovulating. |
| <p>Slide 21</p> <p>Menstrual cycle</p> <p><small>OttawaPublicHealth.ca/SchoolHealthOnline</small></p> | <p>Many changes happen during puberty. One of the changes that occurs for people who have a uterus, is menstruation. Menstruation is also called a period and is part of the menstrual cycle, which is controlled by hormones in the body.</p> <p>General information on menstruation that can be discussed prior to explaining the menstrual cycle:</p> <ul style="list-style-type: none"> • The medical term for <i>getting periods</i> is menstruation or “menses”. • Having periods is a sign of fertility, meaning someone can get pregnant if they have sex. • Periods usually start between the ages of 8 and 18 and last until menopause. • Periods may be irregular for the first few years, as it can take time for the body to adjust. Eventually, it will settle into a schedule and periods will become more regular. It is important to note, however, that some individuals will continue to experience irregular periods, and this is normal. If someone has concerns, they should seek advice from a health care professional. • Periods generally last between 3-6 days. <p>The menstrual cycle</p> <p>The menstrual cycle is the body’s way of preparing for a possible pregnancy every month, which is the process of growing a baby. When a pregnancy does not happen, a monthly period will occur. Just because someone’s reproductive system is physically able to grow a baby, does not mean they are ready to have a baby.</p> |

Facilitator Guide – Puberty (Grade 5)

There are four stages to the menstrual cycle:

1st stage: Menstruation

The 1st day of the menstrual cycle starts on the 1st day of the period.

The period happens when the egg does not get fertilized by a sperm.

The uterus does not need the lining of extra blood and tissue to grow a pregnancy, so it sheds the lining out of the vagina as menstrual blood.

The unfertilized egg (ovum) is also shed. The egg is not visible to the naked eye.

2nd stage: Follicular

After the period ends, the uterine wall begins to thicken again due to increasing hormone levels, to prepare for pregnancy. If a person becomes pregnant, this nutrient rich lining provides support to the developing embryo.

About a week after the period ends, one of the eggs matures in the ovaries.

The body is getting ready to release an egg.

Fun fact: At birth, ovaries have an average of 400,000 immature eggs in them. Only 300 to 500 of these eggs will be released during menstrual cycles during their lifetime.

3rd stage: Ovulation

About halfway through the menstrual cycle, one of the matured eggs will be released from an ovary – This is called ovulation.

As the mature egg is released from the ovary, the egg travels from the ovary down one of the fallopian tubes and towards the uterus where fertilization may take place, if sperm are present. It will wait for a sperm cell up to 24 hours.

If the egg is not fertilized, it disintegrates within 24 hours.

Ovulation generally occurs on day 14 of the menstrual cycle, but ovulation is influenced by many factors, and has been known to occur any time during the cycle, even during the menstrual period.

Lining of the uterus continues to get thicker.

Stage 4: Luteal Stage

Facilitator Guide – Puberty (Grade 5)

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| | <p>Because the egg was not met by a sperm the body will realize that there is no pregnancy. The corpus luteum breaks down which certain hormone levels to drop. This signals the uterine lining to break down, and therefore the cycle returns to stage one and a new menstrual cycle begins.</p> <p>The cycle repeats itself monthly, or every 21-35 days.</p> |
| <p>Slide 22</p> <p>Menstrual products</p> <p>Sanitary pad or liner</p> <p>Tampon</p> <p><small>OttawaPublicHealth.ca/SchoolHealthOnline</small></p> | <p>Sanitary pads</p> <ul style="list-style-type: none"> • Pads are placed directly inside the underwear and absorb the menstrual blood. • They come in different shapes and sizes so that people can chose which ones work best for them. <ul style="list-style-type: none"> ○ Some are made with wings to protect the sides of the underwear, while some don't have wings. ○ Some are shorter and some are longer. ○ Some are thicker and some are thinner. This is especially useful as not everyone bleeds the same amount during their period. • How to dispose of soiled pads: <ul style="list-style-type: none"> ○ Throw pads in the trash can or in the metal box that contains a paper bag in the public restroom. ○ Pads can be put in the plastic wrap of the new pad (if there is one) or in toilet paper. ○ DO NOT flush pads in the toilet. <p>Tampons</p> <ul style="list-style-type: none"> • Tampons are made from an absorbent material. • They are almost the size and shape of a finger. • They are placed in the vagina (some with the help of a plastic or cardboard applicator). • They enlarge and absorb the menstrual blood that is in the body. <p>When to change a pad or tampon:</p> <ul style="list-style-type: none"> • It depends on the amount of period flow. • Keeping a product in place for a long time causes bacteria to grow and can cause odours. It is recommended to change it every 4 hours. |

Facilitator Guide – Puberty (Grade 5)

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| | <ul style="list-style-type: none"> • Even if the pad/tampon is not full, it's important to change it often. • If the pad or tampon is not full, a lighter or smaller type may be more appropriate; therefore, choose the best option dependent on menstrual flow. |
| <p>Slide 23</p> <p>Menstrual products</p> <p>Menstrual underwear Menstrual cup</p> <p><small>OttawaPublicHealth.ca/SchoolHealthOnline</small></p> | <p>Period/menstrual underwear</p> <ul style="list-style-type: none"> • Made from absorbent clothing, to be worn during menstruation. • Worn like a regular pair of underwear but are designed to absorb the menstrual blood. <p>How long can period underwear be worn?</p> <ul style="list-style-type: none"> • The length of time worn depends on the amount of menstrual flow; however, it is encouraged to change the period/menstrual underwear every 8-12 hours or more frequent (as needed). <p>Menstrual cup</p> <ul style="list-style-type: none"> • A reusable rubber or silicone container inserted by hand into the vagina and covers the cervix to collect menstrual blood. • Note to the educator: This option is not common for this age group. Sanitary pads and menstrual underwear are usually an easier option to start with. <p>How long can it be used?</p> <ul style="list-style-type: none"> • The container must be emptied and cleaned regularly every 4 to 6 hours. • It is encouraged not to use the menstrual cup at night. • The menstrual cup should be discarded and replaced once a year. |

Facilitator Guide – Puberty (Grade 5)

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| <p>Slide 24</p> <p>Consent</p> <ul style="list-style-type: none"> ■ Consent is permission for something to happen or an agreement to do something. ■ Nobody can make someone do something they don't want to. ■ If a person tells someone to stop, they should stop. ■ No one should touch another person without their consent. <p><small>OttawaPublicHealth.ca/SchoolHealthOnline</small></p> | <p>Consent includes knowing and respecting a person's own boundaries as well as the boundaries of others</p> <p>Understanding consent means that a person has the skills to leave a situation that doesn't feel comfortable, and respects when other people want to do the same</p> <p>Everyone has the right to make decisions about their body. This includes deciding if they would like a hug or kiss from family members or friends.</p> |
| <p>Slide 25</p> <p>Online safety</p> <ul style="list-style-type: none"> ■ Never share personal information online. ■ Never share naked pictures online. ■ Only use social media with individuals that you know and trust. ■ Do not accept friend requests from people who you have no connection to. <p><small>OttawaPublicHealth.ca/SchoolHealthOnline</small></p> | <p>Online Safety:</p> <ul style="list-style-type: none"> • Social media should only be used with people that a person has met in real life and not online. • Never meet up with a stranger alone. • Never share naked pictures. • Never share an address, phone number or school location with anyone on the internet. The person may not be who they say they are. • Talk to a trusted adult if there are questions or specific concerns about online safety. |
| <p>Slide 26</p> <p><small>OttawaPublicHealth.ca/SchoolHealthOnline</small></p> | <p>Suggestion: Have a “question box” where students can submit questions anonymously.</p> <p>Refer to “FAQs by students” for frequently asked questions and answers about puberty.</p> |

Facilitator Guide – Puberty (Grade 5)

Slide 27

Resources & services

■ **Where to find credible information on puberty:**

- Talk to a trusted adult such as a parent or guardian
- The Link
 - Ottawa Public Health
- Community health clinic
- Primary health care provider and other health care professionals



OttawaPublicHealth.ca/SchoolHealthOnline

Slide 28

References

- Canadian Pediatric Society
- The Society of Obstetricians and Gynaecologists of Canada
- Parenting in Ottawa
- The Link
- Canadian Paediatric Society
- The Ontario Curriculum: Health and Physical Education
- Ontario Ministry of Education
- Planned Parenthood
- Kids Help Phone
- Niagara Region Public Health
- MediaSmarts
- Health Link BC
- KidsHealth.org
- Kids Helpline
- www.healthdirect.gov.au

OttawaPublicHealth.ca/SchoolHealthOnline