Peer to Peer Manual:
Healthy Relationships, Sexual Health, Drug Abuse, and Internet Safety
(A Peer Mentoring Guide)

Langley, British Columbia
Created by Kwantlen Polytechnic University
Students (Nursing 4142): Baldeep Sahota, Chelsea Hunt, Jaspreet Haer & Priya Gill
BSN Student Contributors: Grace Choi, Cindy La & Colby A. Bickle
Faculty: Balbir Gurm
Mentor: Nancy Smith
Table of Contents

BC PHYSICAL & HEALTH EDUCATION CURRICULUM

INTRODUCTION
   Learning Objectives for Peer Mentors
   What is Peer Mentorship
   Benefits of Peer Mentorship
   Role of Peer Facilitator
   Preparing to be a Peer Mentor
      Self-Awareness
      Confidentiality

STRATEGIES FOR PEER TO PEER COMMUNICATION

HEALTHY RELATIONSHIPS

LEARNING OBJECTIVES

MODULE 1: Characteristics of Healthy Relationships
   Characteristics of Healthy Relationships
   My Relationship Rights

MODULE 2: Characteristics of Unhealthy Relationships
   Characteristics of Unhealthy Relationships
   Activity: Healthy vs. Unhealthy
   Activity: Critical Thinking

MODULE 3: How to Maintain a Healthy Relationship
   Tips to Maintain a Healthy Relationship

MODULE 4: Peer Pressure
   What is Peer Pressure?
   Types of Peer Pressure
   Tips to Deal With Peer Pressure
   Activity: Scenarios

MODULE 5: Assertiveness
What is Assertiveness?
Importance of Being Assertive
Three Communication Styles
Activity: Assertive, Aggressive, or Passive

MODULE 6: Conflict Resolution
Conflict defined
Managing Conflict
Activity: Role Play

MODULE 7: Influences on Relationships
Influences on Relationships

MODULE 8: Community Resources

SEXUAL HEALTH

LEARNING OBJECTIVES

MODULE 1: Basic Anatomy
External Female Reproductive Organs
Internal Female Reproductive Organs
Male Reproductive Organs

MODULE 2: Definition of Sex
Types of Sexual Intercourse

MODULE 3: Consent
What is Consent?
Activity:
Activity:

MODULE 4: Sexually Transmitted Infections (STIs)
Activity: STI True and False
Bacterial and Viral STIs
Signs and Symptoms
How STIs Are Spread
How to Prevent STIs
Testing and Treatment
Where to Get Tested
Activity: Unsafe, Safer, Safest Scenarios

MODULE 5: Contraception
Abstinence
Condoms
Hormonal Birth Control
Intrauterine Devices

MODULE 6: Community Resources

DRUG ABUSE

LEARNING OBJECTIVES

MODULE 1: Types of Drugs
Activity: Name Drugs
Pharmaceuticals
Street Drugs

MODULE 2: How Drugs Enter the Body and the Negative Health Effects
Routes of Entry
Harmful Effects

MODULE 3: Signs of Drug Abuse
Physical Signs
Behavioural Changes
Activity: Q&A
How to Support a Friend
Activity: Role Play

MODULE 4: Overdose
Overdose Defined
Signs and Symptoms
In the Case of an Overdose
Activity: Quick Role Play
Activity: The Recovery Position
After Calling Help

MODULE 5: Community Resources
INTERNET SAFETY

Learning Objectives

MODULE 1: Looking at Cyber-Bullying
   Cyber-Bullying Defined
   Activity: Different Forms of Cyber-Bullying
   How Can I Help My Friend?
   Activity: Scenario
   What If I’m the Victim?

MODULE 2: Making Online Friends
   Internet Friends Defined
   Tips for Staying Safe
   Activity: Scenario
   Meeting Internet Friends in Person

MODULE 3: How to Protect Myself Online
   What Does it Look Like?

MODULE 4: How Do I Disable Location Services?
   For iPhone Users
   For Android Users
   Activity: Discussion
   Stolen Identity
   Top 5 Security Incidents

MODULE 5: Online Dating Sites & Apps

MODULE 6: Community Resources
This peer facilitation manual is aligned with the new British Columbia Provincial Curriculum.

The core competencies, big ideas, and content correlate with grades 7-9 Physical Health & Education curriculum.
Big Ideas

- Healthy choices influence our physical, emotional, and mental well-being.
- Healthy relationships can help us lead rewarding and fulfilling lives.
- Healthy relationships can help us lead rewarding and fulfilling lives.

Learning Standards

Content
- Practices that reduce the risk of contracting sexually transmitted infections.
- Sources of health information.
- Strategies to protect themselves and others from potential abuse, exploitation, and harm in a variety of settings.
- Healthy sexual decision-making.
- Potential short-term and long-term consequences of health decisions, including protection from sexually transmitted infections.

Curricular Competencies
- Identify/propose and describe strategies for avoiding and/or responding to potentially unsafe, abusive, or exploitive situation.
- Describe/apply/propose strategies for developing and maintaining healthy relationships.
- Assess factors that influence healthy choices and their potential effects.
- Identify factors that influence health messages from a variety of sources, and analyze their influence on behavior.
Introduction

Learning Objectives

By the end of the training, peer mentors will have:

- Strengthened their skills using different interactive methods of training
- Gained knowledge and skills to provide sexual health and healthy relationships training
- Acquired accurate information relating to sexual health and healthy relationships
- Explored their attitudes and values regarding sexual health and healthy relationships
- Strengthened these positive attitudes and values
- Developed interpersonal and group communication skills

What is Peer Mentorship

Peer mentorship is the process in which motivated and well-trained youth participate in educational activities with people close to them in age, background, or interests. As a peer mentor, you will aim to develop peers’ knowledge, attitudes, and skills, allowing them to be responsible for their own health.
Benefits of Peer Mentorship

Youth look to peers for information on sensitive matters or issues generally not openly discussed. As a peer facilitator, you will help youth take part in activities that increase their understanding, attitudes, behaviour, skills, and knowledge, as well as your own. As a result, they will receive the necessary information and knowledge to make better decisions about their health. This is rewarding work as you can make a difference in the lives of youth.

Role of Peer Mentor

Peer mentors are youth volunteering to provide information to other youth in order to make better decisions about their health. You are not expected to be an expert on the topics contained in the modules, you are there to start the conversation on these difficult topics. It is important to know what your own personal boundaries are and what you are comfortable with physically, mentally and emotionally. The peer-to-peer relationship is a special type of relationship where each person is seen as equal; there is no ranking of power or status.
Preparing to be a Peer Mentor

Self-Awareness
- Part of being a peer facilitator is being open and aware. You need to be open to and aware of not only your peers’ thoughts and feelings, but yours too. This is called self-awareness.

Important factors to be aware of before you begin working with your peers includes:

- **Bias**
  - Viewing things, people, or situations in a particular way.

- **Boundaries**
  - Identifying appropriate actions and behaviors. You are a peer facilitator. Your relationship is not social, economic or personal.

- **Social Inclusion**
  - Recognizing and accepting other cultures, religions, values, lifestyles, and beliefs. This will help peers feel respected.

It is important to be self-aware before and during your interactions with your peers. While you’re working with your peers, do a quick check-in with yourself from time-to-time. Ask yourself: How are you feeling? What emotions are you experiencing? Why do you think you might be feeling this way?
Confidentiality

Confidentiality is respecting a person’s right to privacy. By keeping your peers’ information and the conversations you have with your peers confidential, you are agreeing not to share any information with others. It also means having conversations in a space where others cannot hear it.

~Remember: what you say in this room, stays in this room, and it does not leave this room~
Strategies for Peer to Peer Communication

**Verbal Strategies**
Often we do not think too much about what we say or how we say it. It is important to take time to think about the words you use and the way you say them.

- Be Empathetic
- Use Open-Ended Questions
- Use Appropriate Language

**Non-Verbal Strategies**
When most people picture communicating, they think of speaking to another person. However, it is important to realize that we also communicate with our facial expressions, tone of voice, and body language.

- Active Listening
- Body Language
- Establish Eye Contact
Verbal Strategies

Be Empathetic
Empathy is attempting to understand another person by seeing things through their point of view. Expressing empathy helps your peers to feel as if you are truly hearing and understanding them. Empathy can be expressed through paraphrasing what the individual has said. For example, “I understand that it must have been hard for you when you were being bullied at school”.

Use Open-Ended Questions
Try to avoid asking your peers questions that will lead to “yes” or “no” answers, as this will create an opportunity for more conversation. Open-ended questions typically begin with words such as "how", or phrases such as “tell me about”. This requires your peers to be descriptive, creating a flow of conversation rather than cutting it short.

Use Appropriate Language
Try to use language that can be easily understood. Do not use slang terms that others might not understand. Talk respectfully and do not speak down to people as if they are not as intelligent as you.

Non-Verbal Strategies

Active Listening
If you really want to understand and help your peer then you need to listen to them. Active listening requires you to give your peer your full attention, don’t interrupt, and be patient. It also means paying attention to nonverbal cues such as body language.

Establish Eye Contact
When you speak, make eye contact with the people you are speaking with when it is appropriate. It is also important to make eye contact while your peers are speaking to show that they have your full attention; it is also a way to look for emotions they may not be expressing by talking. However, direct eye contact can make some individuals uncomfortable.

Body Language
Having your arms crossed or facing a direction away from your peer may look as if you are cutting yourself off from them. It is important to show your peers you are open to communicate with them by having an open posture and facing your peer.
Healthy Relationships
Module 1: Characteristics of Healthy Relationships

Note to Mentor:
- As a group, have the students brainstorm on a whiteboard, piece of paper, or out loud what a healthy relationship looks like.
- Have the students complete page 1 in the workbook as you go through this module.

Workbook Pages: Page 1

Characteristics

In a healthy relationship, both partners:

1. Treat each other with respect
2. Listen to each other
3. Talk to each other openly and honestly
4. Say good things about each other
5. Enjoy spending time with each other
6. Trust each other
7. Accept each other’s limits
My Relationship Rights

1. Express my opinions and have them respected
2. Change my mind
3. Choose if and when I want to have sexual activity or to use safer sex practices
4. Have my needs be as important as my partner’s needs
5. Not be emotionally, physically, or sexually abused
6. Choose to stop having sexual activity at any time
7. Choose my friends and/or partner(s) without discrimination or pressure from others
8. Fall out of love or end a friendship and/or a relationship without fear of negative repercussions and/or violence
Module 2: Characteristics of Unhealthy Relationships

Note to Mentor:
- As a group, have the students brainstorm on a whiteboard, piece of paper, or out loud what an unhealthy relationship looks like.
- Have the students complete page 1 to 3 in the workbook as you go through this module.

Workbook Pages: Pages 1-3

Characteristics

In an unhealthy relationship, one person or both people:

1. Disrespects their partner
2. Distrusts their partner
3. Uses threats of harm, physical, and/or emotional violence to get their way
4. Is jealous and/or controlling (about what their partner does or who they talk to)
5. Takes their anger out on their partner
**Activity: Healthy vs. Unhealthy**
Have the students complete the following questions on page 2 of the workbook and discuss the answers as a group. For each behavior, have the students determine if it is healthy or unhealthy.

<table>
<thead>
<tr>
<th>Question</th>
<th>Answer</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Acts controlling or possessive – like you own your partner</td>
<td>Unhealthy</td>
</tr>
<tr>
<td>2. Always feel safe with each other</td>
<td>Healthy</td>
</tr>
<tr>
<td>3. Both apologize when you’re wrong and both accept responsibility for your actions</td>
<td>Healthy</td>
</tr>
<tr>
<td>4. Solve conflicts without putting each other down, cursing at each other or making threats</td>
<td>Healthy</td>
</tr>
<tr>
<td>5. Have close friends and family who like the other person and are happy about your relationship</td>
<td>Healthy</td>
</tr>
<tr>
<td>6. Have equal decision-making power about what you do in your relationship</td>
<td>Healthy</td>
</tr>
<tr>
<td>7. Embarrasses or humiliates the other</td>
<td>Unhealthy</td>
</tr>
<tr>
<td>8. Gets extremely jealous or accuses the other of cheating</td>
<td>Unhealthy</td>
</tr>
<tr>
<td>9. Makes all the decisions about what the two of you do</td>
<td>Unhealthy</td>
</tr>
<tr>
<td>10. Each enjoy spending time separately, with your own friends, as well as with each other’s friends</td>
<td>Healthy</td>
</tr>
</tbody>
</table>
Activity: Critical Thinking
Have the students complete the following questions on page 3 of the workbook and discuss the answers as a group.

1. How can you tell if a relationship is healthy? What are the most important characteristics of a healthy relationship?

2. Describe how two people in a relationship should communicate with each other.

3. Is it normal for people to have feelings of jealousy? How should they deal with these feelings?

4. Is it normal to feel pressured by a partner in a relationship? What should I do if I ever feel pressured by a partner?
Module 3: How to Maintain a Healthy Relationship

Note to Mentor:
- Begin by telling students that positive and supportive relationships help us to feel healthier, happier, and more satisfied with our lives.
- This module has some tips to help you to build more positive and healthy relationships in all areas of your life.

- Ensure that the relationship you have with yourself is a positive one.
- Accept and celebrate the fact that we are all different.
- Actively listen to hear what other people have to say.
- Give people time and “be present” when you are with them.
- Develop and work on your communication skills.
- Learn to be more understanding and empathetic.
- Treat others, as you would like to be treated yourself.
Module 4: Peer Pressure

What is Peer Pressure?

Almost everyone has experienced peer pressure before, either positive or negative. Peer pressure is when your classmates, or other people your age, try to get you to do something. It is easy to give in to peer pressure because everyone wants to fit in and be liked. Especially when it seems like “everyone is doing it”. Sometimes people give in to peer pressure because they do not want to hurt someone's feelings or they do not know how to get out of the situation so they just say “yes”.

Types of Peer Pressure

- **Rejection**
  Pressure by threatening to end a relationship or a friendship

- **Unspoken Pressure**
  Simply seeing all your peers doing something or wearing something can be a form of pressure

- **Insults**
  Making a person feel bad for not doing something, so that they eventually will

- **Reasoning**
  Pressure by giving a person reasons why they should do something

Note to Mentor:
- Ask the students how they would define peer pressure with the group

Workbook Pages: Page 4
Tips to Deal with Peer Pressure

1. Listen to your gut. If you feel uncomfortable, even if your friends seem to be OK with what’s going on, it means that something about the situation is wrong for you.

2. Plan for possible pressure situations. If you’d like to go to a party, but you believe you may be offered alcohol or drugs there, think ahead of how you’ll handle this challenge. Decide ahead of time – and even rehearse – what you’ll say and do.

3. Arrange a “bail out” code phrase you can use with your parents. You might call home from a party at which you feel pressured to drink alcohol and say, for instance, “can you come drive me home? I have a terrible headache.”

4. Learn to feel comfortable by saying “no”. For example, “No thanks, I’ve got a soccer game tomorrow.”

5. Hang out with people who feel the same way you do. Just having one other person stand with you against peer pressure makes it much easier for both people to resist.

6. Blame your parents: “Are you kidding? If my mom found out, she’d kill me.”

7. If a situation seems dangerous, don’t hesitate to get an adult’s help.
Activity

Have a student read out the following scenario. Then have the students brainstorm solutions and provide them with ideas if they cannot think of solutions.

Scenario

I am having problems with my friends at school. We are a group of five. I enjoy being with them and doing things, but sometimes after school we get together and do things I do not feel good about, like stealing and smoking cigarettes. Another time they found a can of paint and sprayed words on a garden wall. I have sometimes said I do not feel it is right, but my friends have all laughed and teased me and called me names. They say that if I do not want to do these things with them, then I must leave the group. I do not want to be without friends, but I feel bad doing these things. Please help me.

Solution Ideas

- Ask adult for help or advice
- Think of excuses to leave; for example, I have to go home for dinner or I have soccer practice
- Invite them to hang out at your house when your parents are home
- Use “bail out” code
Module 5: Assertiveness

Note to Mentor:
- Begin the session by asking the group how they would define assertiveness

Workbook Pages: Page 5

What is Assertiveness?
- The ability to speak up for yourself in a way that is honest and respectful. However, this skill does not come naturally to everyone.

- Here's what it means to be assertive:
  - You can give an opinion or say how you feel.
  - You can ask for what you want or need.
  - You can disagree respectfully.
  - You can offer your ideas and suggestions.
  - You can say no without feeling guilty.
  - You can speak up for someone else.

Importance of Being Assertive
- An assertive communication style can help us do the things we want to do.
- Being assertive shows you respect yourself and others.
- People who speak assertively send the message that they believe in themselves.
Three Communication Styles

Passive
When a person holds back what you really think or feel

Assertive
When people speak up for themselves honestly and respectfully

Aggressive
When a person forcefully states opinion or ignore other’s opinions

Passive
Assertive
Aggressive
Janine has no trouble speaking her mind. But when she does, she comes across as loud and opinionated. Janine dominates the conversation, often interrupts, and rarely listens. If she disagrees with you, she lets you know — usually with sarcasm or a putdown. She has a reputation for being bossy and insensitive.

ANSWER: AGGRESSIVE

When you ask for Ben’s opinion, he gives it honestly. If he disagrees with you, he’ll say so — but in a way that doesn’t put you down or make you feel wrong. Ben is interested in your opinion, too. He listens to what you have to say. Even when Ben disagrees with you, you still feel he respects your point of view.

ANSWER: ASSERTIVE

If you ask Paula what movie she wants to see, she’s most likely to say, “I don’t know, what do you want to see?” She usually lets others decide things, but later regrets not saying what she wanted. It bothers her that her friends do most of the talking. But when Paula tries to break into the conversation, she speaks softly that others talk over her without realizing.

ANSWER: PASSIVE
Module 5: Conflict Resolution

Note to Mentor:
- Before beginning this module, ask the students what they believe conflict is and ask how they usually handle or solve conflict.

Workbook Pages: Page 6

Conflict Defined: A struggle or contest between people with opposite needs, ideas, beliefs, or goals. This is often unavoidable in life and often happens because people don’t understand one another. A conflict could happen between you and your friends, parents, siblings, teachers, or anyone else in your life.

Managing Conflict

There are 8 steps you can take to resolve or fix a conflict:

1. Talk to the other person to find out their opinion of the situation, and tell them yours.
2. Set some rules. For example, we will speak one at a time, listen to each other, not talk while the other is talking, or call each other names.
3. Identify the problem clearly.
4. Agree on what each person wants when the conflict is fixed.
5. Look for solutions to the problem.
6. Think of as many solutions as possible.
7. Select those solutions which will give each person something that they want and agree on them.
8. Make a plan on how to give each person something that they want.
**Scenario:** Melanie is 14 and in grade 9. Her mother discovered that she is dating an older guy who is 18. Two months ago, she told Melanie that she cannot date him. Now she has discovered that Melanie is still dating him. She fights with Melanie about this, but Melanie refuses to stop seeing him.

**Some Possible Solutions:**

- ☑️ Melanie should try to understand her mother's opinion by asking her why she does not want her to date the older man; she should also share her own opinion respectfully.

- ☑️ Set rules for relationship between Melanie and her boyfriend if it is going to continue; for example, if she is with him she will have her phone on her, be home by a certain time, let her mom know where she is, etc.

- ☑️ Agree to only hang out at home when parents are there.

**Note to Mentor:** End this session by telling the students that conflicts can have good or bad results. However, through conflicts and disagreements, people can better understand each other and work to make positive changes.
Module 7: Influences on Relationships

Note to Mentor:
- Ask the youth what influences they believe impact relationships.
- State that you will be addressing only some influences and they are more depending on each person’s situation.

Workbook Pages: None
Peer Pressure
- When all of your friends are dating you might feel that there is an unspoken pressure for you to start dating as well.
- There might also be verbal pressure from your friends to start dating as well.
- However, if you do not feel ready to be in a relationship you should wait until you are ready.

Note to Mentor:
- Refer to Module 4 for strategies to deal with peer pressure.

Pressure from Media (Television, commercials, etc.)
- TV shows may show unrealistic relationships which can negatively impact your relationships because these relationships are not real and may be exaggerated.
- You may relate to TV shows and characters; this adds pressure on you as you feel that you should be in a relationship or do certain things that you see.

Social Media
- Social media may be a resource youth use to find someone they are interested in dating.
- A benefit is it allows people to connect people quickly.
- It can be negative because you do not always know who you are communicating with; this makes it unsafe.

Pornography
- Pornography has become easily accessible.
- You, or others, may believe the actions you see in pornographic material is how sex should be in real life, which creates expectations that are not real as this is not actually what sex is like (remember, pornography is like a movie, not true)
- Pornography also views women as sexual objects who are there to fulfill men’s sexual desire.
Module 8: Community Resources

Kids Help Phone
1-800-668-6868
https://www.kidshelpphone.ca/Teens/InfoBooth.aspx

Kids Health
https://secure02.kidshealth.org/teen/your_mind/

Fraser Health Crisis Line
604-951-8855
1-877-820-7444

Emergency Help
9-1-1

Nurses Line
8-1-1

24 Hour Youth Crisis Line
604-872-3311

When you need help or advice, you can ask someone you trust like…

- A parent/guardian
- An older sibling
- A relative
- A neighbor
- A teacher
- A school counselor
- A principal/vice principal
- A coach
- Elders
- A friend
- An older student
Sexual Health
## Module 1: Basic Anatomy

**External Female Reproductive Organs**

<table>
<thead>
<tr>
<th>Reproductive Organ</th>
<th>Definition</th>
</tr>
</thead>
<tbody>
<tr>
<td>Clitoris</td>
<td>A small part for sexual pleasure</td>
</tr>
<tr>
<td>Labia Majora/Minora</td>
<td>The outer and inner pairs of skin folds that covers the vulva</td>
</tr>
<tr>
<td>Urethra</td>
<td>A tube leading from the bladder that carries pee out of the body</td>
</tr>
<tr>
<td>Vagina</td>
<td>An opening that forms the passageway between the cervix and vulva</td>
</tr>
<tr>
<td>Vulva</td>
<td>The “outside” or external sex organs</td>
</tr>
</tbody>
</table>

**Note to Mentor:**
- Have the students fill out the blanks in the diagrams in their workbook on pages 1 to 3

**Workbook Pages:** Pages 1-3
Internal Female Reproductive Organs

<table>
<thead>
<tr>
<th>Reproductive Organ</th>
<th>Definition</th>
</tr>
</thead>
<tbody>
<tr>
<td>Cervix</td>
<td>Located at the bottom of the uterus</td>
</tr>
<tr>
<td>Uterus</td>
<td>A pear-shaped hollow organ where a baby develops</td>
</tr>
<tr>
<td>Fallopian Tubes</td>
<td>A passage through which an egg is carried from the ovary to the uterus</td>
</tr>
<tr>
<td>Ovaries</td>
<td>The pair of organs that store and release eggs</td>
</tr>
</tbody>
</table>
**Male Reproductive Organs**

<table>
<thead>
<tr>
<th>Reproductive Organ</th>
<th>Definition</th>
</tr>
</thead>
<tbody>
<tr>
<td>Penis</td>
<td>External male reproductive organ; delivers sperm into the vagina during sexual intercourse; also used to pass urine out of the body</td>
</tr>
<tr>
<td>Scrotum</td>
<td>Wrinkly sac of skin that holds the testicles</td>
</tr>
<tr>
<td>Testicles</td>
<td>Two round organs located inside the scrotum that make sperm</td>
</tr>
<tr>
<td>Urethra</td>
<td>This tube is a passageway for urine and semen</td>
</tr>
</tbody>
</table>

![Diagram of Male Reproductive Organs](image)
Module 2: Definition of Sex

Note to Mentor:
- Start this section by asking the students how they define sex and sexual intercourse.

Types of Sexual Intercourse

- **Vaginal**: The penis inserted into vagina. This is how people most commonly define sex
- **Anal**: The penis inserted into anus
- **Oral**: The genitals of one partner are stimulated by the mouth of the other
- **Hand-genital**: Using hands to stimulate genitals
Module 3: Consent

Note to Mentor:
- Start the session by asking the participants to explain, in their own words, what the term consent means to them. This will help you determine what they think consent means.
- Keep in mind even though this is a sexual health presentation we want to also emphasize consent does not only pertain to sexual intercourse.

Workbook Pages: Pages 4-5

Legal Definition
- Legal definition of consent in regards to age:
  - 16 years old is the legal age to have sex

- Consent needs to be given from all people involved
- Enforce that they can change their minds AT ANYTIME (whether it is in regards to sexual intercourse or consenting to something else).
- YOU choose who you want to have sex with
- YOU choose what sexual activities YOU are willing to do
- YOU choose what birth control YOU want to use

- Consent DOES NOT count if:
  - If someone else gives consent for you
  - If the person you are getting consent from is under the influence of drugs or alcohol
  - When the person trying to get consent is forcing the other person by abusing a position of trust, power or authority
  - When the other person either verbally or through actions show that they do not want to have sex or perform a sexual activity
  - When someone who initially consented either verbally or through actions but shows they do not want to continue
Activity: “Is This Consent?”

These scenarios are to have students think about what consent looks like in real life. Have the students work through the scenarios individually or in pairs on pages 4 to 5 in the workbook. Come together as a group to discuss answers.

**Scenario**

Sam and Alex are both drinking at a party. Sam becomes extremely drunk. Alex offers to take Sam home. On the way, Sam has trouble walking, and makes several wrong turns. Once in Sam’s room, Alex initiates sexual activity. Sam looks confused and tries to go to sleep. Alex has sex with Sam.

**Answer**

Is this consent?

- Answer: There was no consent to have sex. A person who is incapacitated—lacking the ability to make or act on considered decisions to engage in sexual activity—cannot give consent.

**Scenario**

Jessie and Vic have been flirting all semester, and agree to meet at a party. After dancing together for a while, Vic proposes going to one of their rooms and Jessie agrees. Each is interested in hearing what the other wants, and is paying attention to the other’s signals. They reach and sustain clear agreement upon mutually desired sexual activities.

**Answer**

Is this consent?

- Answer: This is consensual sex: Vic and Jessie reached positive and voluntary agreement to engage in sexual conduct together.
Jack and Jess have been going out for a couple of months now. Jack tells Jess he will dump her if she does not perform oral sex on him. He is sick of waiting. Jess is afraid of losing him and agrees to perform oral sex on him.

Is this consent?
- Answer: No. Even though Jess has said yes, she has been pressured into it.
- How do you think Jess feels?
  - Answer: Sad, angry, violated, upset, etc.
- Do you think that coercion like this indicates a mutually respectful relationship?
  - Answer: No. Power does NOT equate to respect, trust, happiness, fairness, etc.
- How can a person who feels pressured manage this situation?
  - Answer: Make an excuse, tell the truth, walk away, etc.

Lee and Adrian are making-out. When Lee starts to run his hands up Adrian’s legs, Adrian responds by pulling away slightly, moving Lee’s hands and saying “not so fast; I’m not sure.” Lee cooperates briefly but then moves his hands up once more. Adrian inches backwards and then becomes still. Regardless, Lee keeps trying to touch Adrian.

Is this consent?
- Answer: No, Adrian did not want Lee to keep touching him however, Lee continued to do so therefore, it was not consensual.
Ryo and Casey are dating. Casey is not sure about whether they should have sex, but Ryo is convincing and finally obtains Casey's consent. As they engage in sex, Casey says “wait – stop – that hurts.” Ryo decides to continue for several more minutes, restraining Casey. Afterwards, Casey is upset. Ryo apologizes, but says they were past the point of interruption.

Is this consent?

- Answer: No. Casey says “stop” and Ryo continues and restrains Casey despite Casey refusing. Therefore, it is not consensual sex.

End with this: Though your body may have the ability to have sex and you may really want to satisfy your curiosity, it doesn’t mean your mind is ready.

Activity: Consent True/False

Have students complete true or false quiz on page 6 in workbook to see if they understand consent.
Question: A person who says “no” really just wants you to try harder.  
Answer: False

Question: It is okay to get someone drunk then try to have sex with them.  
Answer: False

Question: Consent is required for all sexual contact.  
Answer: True

Question: If the other person doesn’t say the word “no”, then that means they consented.  
Answer: False

Question: You don’t need to worry about consent if you’ve made out with the person before.  
Answer: False

Question: A person can mean “no” with an action like turning away.  
Answer: True

Question: It is okay to assume the other person is consenting if that person isn’t fighting back.  
Answer: False
Module 4: Sexually Transmitted Infections (STIs)

Note to Mentor:
- Start the session by having the students complete the true or false activity in the workbook, and then review the answers as a group

Workbook Pages: Page 7

Activity – True or False

Question: A person can always tell if she or he has an STI. Answer: False

Question: You can only have one STI at a time Answer: False

Question: You can get an STI by having unprotected sex with an infected individual. Answer: True

Question: Oral is the safe way to have sex if you do not want to get a STI. Answer: False

Question: Once you have been treated and cured of an STI, you can’t get it again. Answer: False

Question: Abstinence is 100% effective in the prevention of STIs and unintended pregnancies. Answer: True

Question: Taking a shower after sex will avoid STI transmission. Answer: False
**Bacterial vs. Viral STIs**

- STIs are infections that are spread from person to person through intimate contact and sexual intercourse.
- They are caused by tiny organisms and germs (bacteria and viruses).

<table>
<thead>
<tr>
<th></th>
<th>Bacterial STIs</th>
<th>Viral STIs</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Cause</strong></td>
<td>Bacteria</td>
<td>Viruses</td>
</tr>
<tr>
<td><strong>Treatment</strong></td>
<td>Medications called antibiotics</td>
<td>No cure</td>
</tr>
<tr>
<td><strong>Types</strong></td>
<td>o Chlamydia</td>
<td>o Herpes</td>
</tr>
<tr>
<td></td>
<td>o Gonorrhea</td>
<td>o Human Immunodeficiency Virus (HIV)</td>
</tr>
<tr>
<td></td>
<td>o Syphilis</td>
<td></td>
</tr>
<tr>
<td></td>
<td>o Human Papillomavirus (HPV)</td>
<td></td>
</tr>
</tbody>
</table>
Signs and Symptoms

★ Sometimes people who have an STI may not show any obvious signs and symptoms. This may result in the person not seeking treatment for a long time, and may cause other problems.

- Females may experience:
  - White, yellow or greenish discharge, which may smell bad.
  - The genitals may itch, burn or feel sore.
  - May have pain in lower abdomen, backache, fever and chills.

It is important to inform your partner if you have an STI and to encourage him/her to talk to an adult or visit the Surrey Youth Clinic or doctor.
Some people with STIs do not know they have them. These people are in danger of passing an infection onto their sex partners without realizing it.

STIs are spread through contact with infected body fluids such as:

- Blood
- Vaginal Fluids
- Sperm
- Sores in the mouth

★ STIs can be spread through oral, vaginal, and anal sex

★ Sharing needles or syringes for drug use, ear piercing, tattooing can also expose a person to infected fluids, and cause an STI.
Always use a condom with every sexual encounter.

Multiple parents may put you at a higher risk for STIs.

**How to Prevent STIs**

If you think you have an STI, do not have sex until you talk to an adult or doctor.

In new relationships, it is important to talk about past sexual histories.

**Remember, abstaining from sex is the best and safest choice to prevent STIs**
Testing & Treatment

Testing and treatment can decrease the chances of getting an STI!

- Testing does not have to be scary.
- It is better to know your STI status and discuss this with your partners, rather than staying unaware.
- Waiting may allow the disease to get worse and cause more damage.
- If your doctor gives you medication, you must finish the treatment even if you feel better. Even though you may not feel sick, the bacteria may still be in your body.

Testing involves:

- Peeing in a cup
- Swabs taken from your private area
- Blood from the arm taken
Where to Get Tested

If you think you have an STI talk to a trusted adult, visit the doctor, or the Surrey Youth clinic.

Youth clinics offer free and confidential drop in services for youth. At a clinic, you can talk to a nurse about the health issues that are important to you.

Some of the free and confidential services that may be offered include:
- Testing for STIs
- Free condoms
- Emergency contraception
- Pap tests
- Free or low-cost birth control options
- Pregnancy testing and options counseling
- General counseling
- Mental health and addictions counseling

Please share the common questions youth may have regarding the Surrey Youth Clinic:

Q: How much does a visit to the youth clinic cost?
A: Nothing it’s free.

Q: Will I need my care card?
A: No.

Q: Will the information I share with the nurse be confidential?
A: Yes. No records will be given out to anyone without your permission. No information about your visit will be given to anyone but you.
Activity – Unsafe, Safer, or Safest

Materials:
- Unsafe, Safer, Safest signs
- Risk scenario cards
- Tape for posting signs and cards on the wall

Goals:
- Reinforce that STI transmission is about our behaviour, not who we are.
- Give youth a better understanding of the risks associated with various activities.
- Highlight ways of reducing risks.

Instructions:
1. Post the Unsafe, Safe & Safest signs around the room.
2. Ask for volunteers to post the risk scenario cards, or break youth into smaller groups and give each group a card.
3. Instruct the group to read their card then post it under the sign they think best describes the level of risk.
4. You might read one card out aloud to the group as an example and ask “Where should this card go?”
5. If any of the youth are unsure about where the cards should go, encourage them to take their best guess.
6. When all the cards have been posted, go over the activity by reading each of the cards under Unsafe, Safer, and Safest (ending with Safest).
Scenarios:

1. Alysa is not interested in dating right now. She has been kissed once by her first crush. She masturbates sometimes.
   Answer: Safest

2. Brian just broke up with his ex and is seeing someone new. He hates condoms but has used them since he got gonorrhea last year. Now he always carries condoms and is getting used to how they feel.
   Answer: Safer

3. Tyrone dreams about the girls he works with at the gas station. He brags and says that he’s had a lot of sex. He’s never been with anyone sexually, but people think that he must have an STI.
   Answer: Safest

4. Stephanie feels great about her body. She enjoys vaginal and anal sex with both guys and girls. Stephanie has never been tested for STIs. She is on the pill but only uses condoms for vaginal sex.
   Answer: Unsafe

5. Kate got tested at a clinic and found out she doesn’t have any STIs. They both learned how to make sex dams out of condoms and make a new one each time they have oral sex.
   Answer: Safer

6. They are waiting to have intercourse but still like to fool around. They touch (above the waist) and “go down” on each other without condoms or sex dams.
   Answer: Unsafe

7. Teresa has used condoms and the pill with all her boyfriends. She also goes to a community health clinic for free condoms and gets tested for STIs regularly.
   Answer: Safer
Unsafe
Activities where body fluids are exchanged. (Stephanie, Michelle & Rick)

Safer
Activities with condoms and sex dams, getting testing, using clean needles. (Kate & Isabelle, Brain, Teresa)

Safest
Activities where no bodily fluids are being exchanged. (Tyrone, Alysa)
Module 5: Contraception

Note to Mentor:
- The most common forms of birth control will be discussed, but there are many different types. If students have questions about types of birth control not mentioned in this manual, tell them to visit kidshealth.org for more information. Four types of birth control will be discussed: abstinence, condoms, hormonal birth control, and intrauterine devices.

Contraception Defined: A way to prevent pregnancy, also known as birth control. Examples below.

Abstinence

- **Definition:** Choosing not to have sex
- You can choose to be abstinent at any time, even if you have had sex before.
- **Pros:**
  - Only 100% effective way to prevent pregnancy and STIs
  - Waiting until you are ready
  - No cost and no side effects - most other forms of birth control have side effects
- **Cons:**
  - None
Condoms

- **Definition:** Rubber covering that goes on a man’s penis, a female version exists, but it is less common.
- Used to decrease chance of getting pregnant and getting STIs because it stops fluids from being exchanged.
- Must be worn during vaginal, oral and anal sex.
- Most effective when used together with another type of birth control such as hormonal birth control.
- Can get at grocery store, pharmacy or youth clinic (often for free).
- **Pros:**
  - Decreases chance of getting pregnant and getting an STI
  - No side effects: unless person is allergic to latex, but there are non-latex options
  - Small and easy to carry with you so you are always prepared
- **Cons:**
  - Does not work 15% of time because often people do not use them correctly

**Note to Mentor:**
- It is important to emphasize to the students that this method (abstinence) the recommended form of birth control, however, we tell them about other types of birth control because we understand that it is not realistic to expect everyone to remain abstinent. That is why we inform them of other types of birth control, to keep them safe, not to encourage having sex.

To aid in the proper use of condoms demonstrate to students how to properly put on a condom and then have them practice this using a prop or you can show them a video on how to put on a condom.
**Tips for Using Condoms:**
- Use a new one every time
- Do not use two at the same time: applies to using two male condoms at the same time and a male and a female condom at the same time
- Do not keep in wallet: friction in the wallet can cause the condom to tear or break
- Do not flush down the toilet: can clog the toilet
- Check the expiry date: condoms are not as successful in preventing pregnancy and the spread of STIs after the expiry date

---

**Hormonal Birth Control**

- **Definition:** Hormones, which are chemicals naturally found inside a person’s body, that a woman takes; it is most commonly taken in pill form every day, but it also comes in other forms such as a patch or an injection.
- Must get prescription from either doctor or youth clinic to get this type of birth control.

**Pros:**
- Helps to prevent pregnancy, most effective when used with condom, but not work all the time usually because not taken right (usually only works 91% of time)

**Cons:**
- Does not protect against STIs
- Need prescription from physician/nurse practitioner
- Has side effects such as increase chance of blood clots, bleeding between periods, possible weight gain, breast swelling or tenderness, nausea or upset stomach, mood changes
Intrauterine Device (IUD)

- **Definition:** T-shaped object placed in a woman’s uterus to prevent pregnancy
- This type of birth control is expensive and must be inserted by a doctor. Can leave in for up to five years.
- **Pros:**
  - Very effective
  - Do not have to remember to take every day
- **Cons:**
  - Does not protect against STIs
  - Has side effects, for example, bleeding, can fall out, can be placed wrong, or stop periods
## Module 6: Community Resources

**Surrey Options for Sexual Health Clinic**
https://www.optionsforsexualhealth.org/providers/opt-surrey-whalley
220-10362 King George Hwy
Surrey, BC
V3T 2W5
604 731-4252

**Surrey Public Health Units**
Monday- Friday 8:30 AM - 4:30 PM
http://www.fraserhealth.ca/health-info/children-and-youth/

<table>
<thead>
<tr>
<th>Location</th>
<th>Address</th>
<th>Phone</th>
<th>City</th>
<th>Postal Code</th>
</tr>
</thead>
<tbody>
<tr>
<td>Surrey - Cloverdale</td>
<td>#205-17700 56 Avenue, Surrey, B.C. V3S 1C7</td>
<td>604.575.5100</td>
<td>Surrey</td>
<td>V3S 1C7</td>
</tr>
<tr>
<td>Surrey - Guildford</td>
<td>#100-10233 153 Street, Surrey, B.C. V3R 0Z7</td>
<td>604.587.4750</td>
<td>Guildford</td>
<td>V3R 0Z7</td>
</tr>
<tr>
<td>Surrey- Newton</td>
<td>#200-7337 137 Street, Surrey, B.C. V3W 1A4</td>
<td>604.592.2000</td>
<td>Newton</td>
<td>V3W 1A4</td>
</tr>
<tr>
<td>Surrey- North</td>
<td>#220-10362 King George Boulevard, Surrey, B.C. V3T 2W5</td>
<td>604.587.7900</td>
<td>North</td>
<td>V3T 2W5</td>
</tr>
</tbody>
</table>

**Got Questions?**
Call: 1-800-SEX-SENSE (1-800-739-7367)

**Victims Info Line**
1-800-563-0808

**Emergency Contraception Hotline**
1-888-668-2528
Teens Health
https://secure02.kidshealth.org/teen/sexual_health/

**Nurses Line**
8-1-1
DRUG ABUSE
Module 1: Types of Drugs

Note to Mentor:
- Begin the discussion by asking whoever has been exposed to drugs in their life to raise their hands. Make sure to voice a wide range of exposure so that your peers will not feel embarrassed to raise their hand. For example: “Who here has ever been exposed to drugs in some way?? This could be anything from being at party where there were drugs, to being around a friend who did drugs, or possibly doing drugs yourself.” This activity is meant to “break the ice” and make your peers feel more comfortable having this discussion as they will see how common exposure to drugs really is.

What is a drug??

Definition:
A drug is as a medicine or other substance which alters the mental and physical state of your mind and body when ingested or otherwise introduced into the body.

More than 90% of people with a substance problem began smoking, drinking or using other drugs before age 18

Activity: Have peers split into groups and have them brainstorm how many types of drugs they can name. After compare the sheets as a group and take note of the more commonly mentioned ones.

FACT: 47,000 Canadian deaths are linked to substance abuse annually.
Common Types of Drugs

Drugs come in various forms, and can be taken in numerous ways. Some are legal and others are not. Drug abuse and misuse can cause numerous health problems, and in serious cases death can occur.

**Pharmaceuticals:**
These are legal types of drugs that are prescribed by a doctor for medical purposes. It is considered drug abuse when someone takes another person’s prescription or takes their own prescription drugs more often than the doctor has ordered.

There are 3 classes of prescription drugs that are often abused:

- **Opioids** used to treat pain:
  - Codeine, Oxycodone, Fentanyl, Morphine

- **Central nervous system depressants** used to treat anxiety and sleep disorders:
  - benzodiazepines (Xanax, Valium, Ativan, Klonopin)

- **Stimulants** commonly used to treat attention deficit disorders:
  - amphetamine and dextroamphetamine (Adderall)
  - or methylphenidate (Concerta, Daytrana, Methylin, Ritalin)
  - used to treat attention deficit disorder
Street Drugs: These drugs are mostly bought and sold illegally and taken recreationally for their mood-altering, stimulant, or sedative effects.

Stimulants: These drugs speed up the body’s nervous system and create a feeling of energy. They are also called “uppers” because of their ability to make you feel very awake. When the effects wear off, the user is left with feelings of sickness and a loss of energy. Constant use of such drugs can have very negative effects on the user. Types of drugs include:

- Cocaine
- Methamphetamines (meth, speed, crystal, ice)
- Nicotine (cigarettes, vapes)

FACT: the average age drug abuse begins is 15!!

FACT: 90% of smokers before begin before age 19. Tobacco is the leading cause of preventable death.
Note to Mentor:

- Ask the group who thinks smoking a cigarette is more harmful then inhaling second hand smoke.
- Actually, second hand smoke is considered more dangerous than the mainstream smoke that is actually inhaled. The smoke that comes off the end of the cigarette has a higher concentration of cancer-causing agents. A person who smokes is smoking the cigarette through a filter which diminishes some of the harmful toxins.

Cannabinoids: These drugs result in feelings of euphoria, cause confusion and memory problems, anxiety, a higher heart rate, as well as staggering and poor reaction time. Types of drugs include:

- Hashish
- Marijuana

FACT: Marijuana is most common drug among teens. More teenage girls use marijuana more than all other illicit drugs combined.
**Depressants:** These drugs slow down activity in the central nervous system of your body. These drugs are also called “downers” because they slow the body down and seem to give feelings of relaxation. Types of drugs:

- Alcohol
- GHB (roofie-date rape drug)
- Tranquillizers (ketamine-special K)

By age 18, about 60 percent of teens have had at least 1 drink.

**Opioids**
Opioids cause drowsiness, confusion, nausea, feelings of euphoria, respiratory complications.

Types of drugs include:

- Heroin
- Opium

Heroin bought on the street often contains a mix of substances, including the dangerous opioid called fentanyl. This can be toxic and can clog the blood vessels leading to the lungs, liver, kidney, or brain. This can cause permanent organ damage or death.

FACT: Mixed with alcohol, Ecstasy is extremely dangerous and can, in fact, be deadly.

FACT: nearly 80% of people who use heroin report having first misused prescription opioids.
Hallucinogens: When taking hallucinogens, switching emotions is frequent. These drugs change the mind and cause the appearance of things that are not really there. Hallucinogens affect the body’s self-control, such as speech and movement, and often bring about hostility. Other negative side effects of these drugs include heart failure, increased heart rate, higher blood pressure and changes in the body’s hormones.

Types of drugs include:
- LSD (acid)
- MDMA (ecstasy, molly,
- Magic Mushrooms

Ecstasy smothers the natural alarm signals given out by the body. As a result, after taking the drug, an individual risks going beyond his physical limitations and endurance. For example, a person on Ecstasy may not realize that he has become overheated and can faint or even die of heatstroke.
**Inhalants:** Inhalants are sniffed or huffed and give the user immediate results. Unfortunately, these immediate results can also result in sudden mental damage. When inhalants are taken, the body becomes deprived of oxygen, causing a rapid heartbeat. Other effects include liver, lung and kidney problems, affected sense of smell, difficulty walking and confusion. Types of drugs include:

- **Glues**
- **Paint thinner**
- **Gasoline**
- **Aerosol Cans (whippits)**

22% of inhalant abusers who died of Sudden Sniffing Death Syndrome had no history of previous inhalant abuse—they were first-time users.
Module 2: How Drugs Enter the Body and the Negative Health Effects

Note to Mentor:
- Ask the group to name some ways that drugs can enter the body.

In order for drugs to affect the brain they must first be put into the body. There are five methods of drug use which allow drugs to enter the body: swallowing, smoking, snorting, through suppositories and injecting.

**Swallowing**
The individual takes the drugs by mouth. The drugs pass to the stomach and then into the bloodstream. This method allows the body time to absorb the drug and the digestive system will self-induce vomiting as a defense mechanism to ingesting something that does not agree with it.

FACT: Ingesting or swallowing drugs is the most common method of drug use.

The long-term risks of using drugs in this way can include damage to the stomach, intestines, liver and kidneys. The liver is particularly at risk and can suffer progressive and irreversible damage from excessive use of drugs and alcohol.
Smoking
This method gets the drugs into the body’s system a bit faster than swallowing the drugs because the smoke goes into the lungs where it quickly moves into the bloodstream. The most common drugs that are smoked are marijuana, heroin, crack and opium.

FACT: Marijuana is addictive. 1 in 6 people start using as a teen, and 25-50% of those who use it every day, become addicted to marijuana.

Individuals who smoke drugs are at risk for cancer of the mouth, throat and lung; heart disease and heart attack, stroke, emphysema and bronchitis, pneumonia and other respiratory disorders and high blood pressure.
Snorting

Some individuals snort drugs such as ecstasy, cocaine, heroin and amphetamines. Drugs enter into the bloodstream through the nasal mucus membranes and through the stomach. Individuals snorting drugs will experience the drug sensation within about 15 minutes after snorting their drugs.

Over time, and with chronic snorting behaviors, erosion of the nasal cavity can occur.

Snorting can cause many complications such as: deterioration of the nasal septum, irritation of the nasal mucosa, sinus infections, nose bleeds, loss of sense of smell, problems swallowing, and hoarseness. As well sharing straws and other items to snort the drugs can lead to hepatitis C and HIV.

Suppositories

Drugs entered into the body through suppositories will be delivered into the bloodstream through the rectum’s mucus membrane. While this is not a common method of drug abuse, drugs that have been taken using this method are cocaine, speed and ecstasy.

The mucus membranes in the rectum are sensitive. Certain drugs may have a high level of acidity and can cause the lining to be permanently damaged. There is also a risk of perforating the lower colon which can be fatal.

The Dangers Of Rectally Administering (“Plugging”) Drugs

Though not discussed in mainstream as much as other ways such as oral or intravenous, rectal administration (plugging) is dangerous and frequented in use.
Injection

Injecting drugs is the fastest method for experiencing the high from drug use because it puts the drug directly into the bloodstream. Drugs can be injected into the soft tissue, into the muscle or directly into the vein. Individuals who inject drugs will experience the high within 3 to 5 seconds (immediately). This method of drug delivery goes directly to the brain, escaping the body’s natural defense mechanisms including the digestive system.

FACT: Because of where opioid receptors are located in the brain, heroin and other opioid drugs also activate the brain’s reward center, causing the “high” that puts the user at risk for addiction. In an overdose, it can also cause a person to stop breathing, which is often fatal.

The dangers that come with injecting drugs include infection at the site of injection. There is also the risk that sharing needles have including HIV and hepatitis. Some individuals may experience collapsing veins and arterial damage which can lead to gangrene, blood clots and bleeding.
Module 3: Signs of Drug Abuse

Physical signs to look out for would include:

**Sudden Weight Gain or Loss** – drug addicts have may have a decreased appetite leading to weight loss or may be less active leading to weight gain.

**blood shot or glassy eyes, dilated pupils**

**strange smells on their breath or clothing.**

**Sniffly or Runny Nose**

**Lack of Personal Hygiene** – Drug addicts often cease personal grooming—such as washing clothes, showering, and brushing teeth.

**New Health Concerns** – such as headaches, seizures or tremors, and nosebleeds (i.e., meth or cocaine use)

How would you know if your friend was using drugs?

Note to Mentor:
- Ask the group to brainstorm some signs and symptoms they can think of.
Behavioural changes to look out for would include:

**Memory Loss** - For instance, unable to recall what they did last night or if injured, unable to recall how it occurred.

**Loss of Interest in Social Activities** - A loss of motivation for school, hobbies, exercise, or for things that they enjoyed in the past.

**Financial Requests** - For instance, a sudden unexplained need for money—i.e., borrowing or stealing to pay off unexplained debt.

**Secretive Behavior** - They act sneaky, withdraw from those they love and remain secretive about where they spend their time.

**Change in Social Circles** - A shift from long-time friends and relationships to new friends, hangouts, and pastimes.

**Change in Personality** - Unexplained changes in attitude, mood, increased irritability, and angry outbursts.

**Highs and Lows** - Periods of extreme hyperactivity—followed by periods of fatigue where they seem “out of it”.

**Paranoia** - A sudden fear or distrust of others with no rational explanation.
Activity: Q & A
Read the following questions and as a group, determine the correct answer.

Q#1: What should you do if think your friend may be addicted to drugs?
   a) Just ignore it, the problem will go away on its own
   b) Try to quit by yourself
   c) **Ask your friend to seek help**
   d) Continue using drugs

Note: let group know answer will be explained in next topic.

Q#2: Which of these can be a sign that your friend is abusing drugs?
   a) happy all the time
   b) **withdrawn from friends and family**
   c) too involved with sports
   d) has a new best friend

Note: Others signs to look for which were just discussed. These are just general symptoms to look for if you suspect a friend is using or ask yourself if you use drugs ask yourself if you are presenting any of these signs.

Q#3: If you find out a friend is using drugs you should tell someone immediately
   **TRUE or FALSE**
How Could You Support a Friend Who is Using?

One of the best things you can do for a friend with a serious drug problem is let them know you are there to support them.

Tell them you’re concerned about their drug use and encourage them to seek help from a trusted adult; maybe a teacher, coach, parent, or counselor.

You can also help by being a strong positive influence; help them get involved in non-drug-using activities like joining a club, playing music, or playing a sport.

However, if your friend is becoming a negative influence in your life, you might have to step away from the friendship for a while.

Let them know it takes a lot of courage to seek help for a possible drug problem because there is a lot of hard work ahead, but treatment works, and they can recover.

Repeated drug use lowers the brain’s ability to gain control and make good decisions, so let them know it’s best not to quit on their own.

Direct them to community services which will be discussed later on in the lesson.

If you feel your friend is a danger to himself or herself, or to others, then it is important to tell a trusted adult right away!

Activity: Quick Role Play

Have the students group into pairs and create a scenario about what they would say and do if their friend was using drugs. Have them act it out in front of the group if they are comfortable doing so.
Module 4: Overdose from Drugs

Note to Mentor:
- This module can be a sensitive subject. Allow the students to express their feelings freely and let them know that they do not have to share personal experiences if they do not wish to.

Overdose Defined:
An overdose is a toxic reaction that occurs when a person takes an excessive amount of drugs, much more than their body can handle. This can happen by accident or it can be intentional (self-harm).

Question!
What is an overdose?

Overdoses are situations that put people's life in danger. It is important that you understand what it is and how you can help if you ever encounter a friend, or anyone, experiencing this.

Why is an overdose dangerous?
- It can cause seizures and/or comas
- It can cause difficulty breathing
- It may permanently damage important organs like your kidneys, heart, or brain
- It can cause death
Signs and Symptoms

Detecting the signs and symptoms can be difficult because they may not appear right away. However, in the case of an overdose, the person may experience:

- Difficulty breathing or shallow breathing
- Nausea and vomiting
- Unconsciousness
  - The person may not wake to stimulus or the sound of your voice
- Drowsiness or sleepiness
- Abdominal cramps
- Hallucinations
- Blueness in the face
- Skin that is cold and clammy or hot and sweaty

Once you suspect that someone has an overdose, there are a number of things you should do...
What you should do in the occurrence of an overdose:

1. If you are helping a stranger, be aware of your safety.
2. Dealing with an overdose is quite frightening. Do your best to stay calm.
3. Call 9-1-1 immediately! This person needs medical help from health professionals.
   - Describe the situation
   - Tell them that you are with someone who has overdosed and give them your location/address
   - Stay on the line as the operator may give you further instructions

9-1-1, what is your emergency? Can you tell me where you are? How old is the person you’re with? Are they still conscious or breathing?

Activity: Quick Role Play

Have the students group into pairs. One student will act as the 9-1-1 operator and the other student will act as the caller who is with an overdosed person. Have them practice the telephone conversation, then switch roles.
4. Make sure the person is never alone. Always stay with them.
5. Try to keep them awake.
   - Use your loud voice and shake them
6. Do not put anything in their mouths or encourage them to vomit because this can cause the person to choke.
7. Lay them in recovery position
   - If they happen to vomit, being in this position decreases the chances of choking
   - This safe position helps keep their airway open
8. Monitor their breathing by putting your ear close to their nose, listening for audible exhalation and watching their chest rise and fall (a sign that they are still breathing)
   - If breathing has stopped, perform CPR if you know how to. If not, find someone close by who can help with CPR

**Note:** If you are not alone, you can delegate (meaning you can pass off some tasks to others) to speed up the process of helping the overdosed person. For example, you can tell someone to call 911 while you stay with the victim and move them to recovery position or vice versa.
Activity: The Recovery Position
If the students have access to a computer or phone and the internet, watch the following videos to learn about how to put someone in the recovery position:

1. Animated video (0:44-1:35)
   https://www.youtube.com/watch?v=cHhjskRubbo
2. Real life video https://www.youtube.com/watch?v=DXafn3jSzGw

After watching the videos thoroughly and understanding the steps, have the students get into groups of two or three and practice putting each other in the recovery position.

OR

If there is no internet access, read the following instructions and use the following pictures as a guide.

Step One
- Make sure that they are lying flat on their back on the ground
- Kneel down on one side of their body
- Place the hand closest to you in a perpendicular position (as if they were waving to you)
- Place their other hand on their cheek (the cheek facing your side) and hold it there
Step Two
- While still holding their hand to their cheek, with your other hand, extend the person’s knee upwards (the knee on the leg that is furthest from you)
- Now, place one hand on that knee and another hand on the back of the shoulder that is parallel to that knee
- Slowly and all at once, roll that person over towards you

Step Three
- This is what the person should now look like
Step Four
- Gently hyperextend the person’s neck and open their mouth
- This will open up their airway and let them expel contents if they need to vomit

Note to Mentor:
- Have the students practice this on each other a few times (or until they feel confident performing this position) and then as an entire group, go over why this position is important for overdosed victims.
Now what will happen?

- 9-1-1 has now received your call and help is on the way.
- Continue to monitor and stay with the overdosed person. The paramedics may ask you some questions about what happened.
- The overdosed person will be taken to a nearby hospital to receive medical help from doctors, nurses, and necessary health professionals.
- They will most likely be given an antidote. An **antidote** is a medication that is used to reverse the effects of an overdose. One of the most-used antidotes is called Nalaxone (or also called Narcan).
Module 5: Community Resources

Alcohol and Drug Information Referral Service
604-660-9382
Toll free: 1-800-663-1441

ASTRA Youth Outreach Addiction Services
604-317-8498
Provides assessments, counselling and referrals

Creekside Withdrawal Management for Youth
604-587-3755
Helps youth with detoxification and withdrawal symptoms

Concurrent Disorders Program for Youth
604-614-1734
Provides services (such as therapists), information, and support to youth who are experiencing emotional/psychiatric problems and substance abuse

DEWY South – Pacific Community Resources Society
604-533-7101
Helps youth overcome substance abuse issues and also provides education

Surrey Substance Use Services
604-580-4950
102-13670 94A Avenue
Surrey BC V3V 1N1
Monday – Friday (8:30 AM – 4:30 PM)

Kids Help Phone
1-800-668-6868

Emergency Help
9-1-1

Nurses Line
8-1-1

Websites for more Information:
www.teens.drugabuse.gov
www.drugfreeworld.org
Internet Safety
Module 1: Looking at Cyber-Bullying

Note to Mentor:
- Begin this session by asking the participants how often they think cyber-bullying occurs in today’s society

More than half of the teen population (>50%) have experienced being bullied on the internet and the same number have engaged in cyber-bullying.

One reason why it has become so common: increased access to cell phones and social networking sites...

What is Cyber-Bullying?
It is a form of violence that occurs on the internet or through other means of technology. Usually, hostile or aggressive language is used. It can include tormenting, harassing, threatening, or embarrassing another person/group of people with the intention to hurt them.

Ask the group:
What does cyber-bullying look like?
Activity
Discuss the different forms of cyber-bullying with the students. Tick off the answers displayed as they are mentioned, then read out the ones that were missed.

- Stealing someone’s identity/photos, pretending to be them, and portraying them negatively to the public to intentionally hurt them or their reputation
- Sending hurtful messages to a person’s phone, e-mail, social media account
- Taking unflattering photos of someone and spreading them on the internet without their consent
- Threatening to share embarrassing photos/information to blackmail the victim
- Sending sexually suggestive photos of a person and spreading them on the internet or through text messages without their consent
- Intentionally and cruelly excluding someone from an online group then harassing that person
- Creating a fake identity to harass or threaten another person anonymously
- Humiliating another person by spreading their private information without their consent (this is called outing)
- Repeated, extreme harassment or threats via social media or text messages (this is known as cyberstalking)
- Spreading rumours, lies, or gossip online
My friend is being bullied… How do I help?

**Know the Signs**
(Here are some signs that may indicate that your friend is a victim of cyber-bulling. It includes but it is not limited to the following…)

- They seem nervous when receiving a text message, phone call, or e-mail
- They refuse to leave the house and they no longer want to engage in social activities that they used to enjoy
- You have noticed that they don’t eat or sleep well and their grades have been falling
- They suddenly delete their social media accounts and withdraw from computer or phone usage
  - When you ask why, they refuse or become reluctant to tell you
- Your friend appears to be more agitated and show signs of aggressive behavior that is unexplained

You know your friends!
If you feel that there may be something wrong, chances are you’re right
Here are Some Things You Can Do

1. Encourage your friend to tell a trusted adult about their situation. However, if they refuse to and your friend’s safety is at risk, it is important for you to let someone know right away.

2. They may be afraid and feel sensitive towards the issue… be supportive and ask what you can do for them.

3. Don’t pry, but let them know you’re there for them when they’re ready to talk and let them know you care.

4. Ask your friend to keep a screenshot/copy of the cyber-bullying incident as proof.

5. If your friend is visibly being bullied on a social networking site, report it (most sites have a “report” link).

6. Be careful not to make the situation any worse or put yourself in any danger – only if it is safe to do so, you can tell the bully to stop.

7. Suggest that your friend block the bully’s number.

8. Call Kid’s Help Phone with them or use one of the Community Resources (module 8) of Healthy Relationships.
Activity
Read the following scenario. Then as a group, brainstorm solutions. Provide them with the following ideas if they need some help.

Scenario
I stumbled upon my classmate Leslie, who I speak to occasionally, crying in the girl’s washroom. I asked her what was wrong and she told me that there was a group of girls from her gym class harassing her. They were posting embarrassing photos of her along with her information on dating websites. She wanted to get help to stop them, but they threatened her with a photo that they took while she was changing in the locker room. She is visibly in distress and explained to me that she felt helpless. I barely know her, how can I help?

Possible Solutions:

- Don’t turn away by the fact that you “barely know her.”
  A little help goes a long way. Comfort and support her.
  If you can, report the profile on the dating website.
- Even though she is being threatened by another photo, let her know that the best thing right now is to not ignore it and let someone know (i.e., family member, teacher, counselor, police officer)
What if I’m the Victim of Cyber-Bullying?

If you can, block the person. If the issue is related to text messages and phone calls, try to get a new phone number.

If you are in immediate danger, report the incident to the police as soon as possible.

Keep all forms of bullying as proof.

Most social media websites have links to “report” the bully – use this page to block and report.

Find support and tell someone (preferably an adult) you trust.

OR

If you don’t have someone close to you that you can trust or need to speak with someone immediately, please call Kids Help Phone.

Remember! Do not share photos on the internet that you do not want to be made public, things posted online may not be 100% secure despite privacy settings.

Unplug from internet while the situation is being dealt with and find ways to deal with your stress.

Understand that this is not your fault. You may feel like it at the time, but you are not alone.
Module 2: Making Online Friends

Note to Mentor:
- As a group, make a “Pros & Cons” list about making friends online

In this day and age, it is relatively common for people to have “internet friends.”

Internet friends can be defined as a friendship between two people who have met online and only know each other through the internet.

While many enjoy having internet friends, it is important to consider the risks of these relationships.
You may feel trusting of your internet friend but the truth is, you never really know who is on the other side!

Here are some tips to keep you safe:

1. Never give out personal information like your full name, your address, or where you go to school
2. If your internet friend makes a request that makes you uncomfortable or pressures you into doing something you don't want to do, remember that you have every right to say no!
   - If they become persistent, you can terminate the relationship by blocking or removing that person
   - It is important that you tell someone you trust about the situation
3. Avoid using video chats or sending personal photos
4. Do not be ashamed to listen to your gut feelings – if you feel that something is wrong, listen to yourself
5. If someone cares about you, they will respect your wishes – your safety is very important!
Activity – Safe or Unsafe

Have a student read out the scenarios. Then, as a group, decide whether the situation is safe or unsafe.

Scenario #1: Cathy met her internet friend, Jordan, on Tumblr. They have been messaging each other nonstop for the past two weeks, talking about their shared interest in art. Jordan wants to mail a drawing he created for her and asks for Cathy’s address. 
Answer: Unsafe
Why? Although Jordan has good intentions, it is unsafe for Cathy to give out her home address and her full name. Instead, she can ask him to take a picture of the drawing and send it to her via e-mail.

Scenario #2: Danny met Eric on a gaming forum. After discussing the new characters on a game that they both own, Danny asked Eric if he could add him on the game. Eric feels comfortable and accepts his request. 
Answer: Safe
Why? Eric is not revealing any personal information or photos by accepting Danny’s request (in most games, friends are added by usernames) and he feels comfortable doing so.
I want to meet my online friend! How can I do this?

- If at any time you feel uncomfortable about meeting your internet friend, don’t – trust your gut!
- Ask your parents for permission
- Let your parent (or a trusted adult) know what your plans are:
  - Tell them about your internet friend, where you’re meeting and when you’re coming home
  - Stick to these plans and don’t make any changes unless your trusted adult has approved
- For your safety, it is important to meet in a public place in the daytime like a mall, a popular restaurant, or your local coffee shop – never meet in private
- If you can, bring another friend or a trusted adult with you – if your internet friend really wants to be friends with you, they will not mind that you brought another person
- After you have your spent time together, leave separately – do not let them drive or walk you home
- Tell your parent (or trusted adult) about how it went – let them know about how you felt meeting them and if there were any moments where you felt troubled
Module 3: How to Protect Myself Online

Note to Mentor:
• Begin this session by asking the participants which social media sites/apps they use? (eg. Facebook, Instagram, Twitter, Snapchat, etc.)

Workbook pages:

What Does Protecting Myself Online Look Like?
Remaining anonymous online as much as possible. You should never allow the public to see:
• Your full name
• Any type of photograph (even of your pet)
• Your current location
• Home or school address
• Phone numbers
• Social Security Number
• Passwords
• Credit card numbers
Module 4: How Do I Disable Location Services?

For iPhone users

1: Go to your iPhone’s Setting
2: Tap Privacy > Location Services
3: Scroll down and click each app, changing the “Allow Location Access” from ‘While Using the App’ to “Never”

Example: Step 2

Example: Step 3
For Android users

1. Open the App Drawer and go to Settings
2. Scroll down and tap Location
3. Scroll down and tap Google Location Settings
4. Tap Location Reporting and Location History, and switch the slider to off for each one
5. To delete your phone’s location cache, tap “Delete Location History” at the bottom of the screen under Location History

Repeat this process for each Google Account you have on your Android device.
Activity: Discussion

Lead a discussion on the following questions and let each student reflect about how they feel about the Internet

Do you feel safe on the internet?

Who do you video chat with online?

Have you ever been asked for information/content that made you feel uncomfortable?

What are the most common things you share with your friends and others you are connected to?

Have you activated any of the privacy settings or other controls on your account?

What are the most unusual requests you have received online?

After this discussion, review as a group together:

1) Chat Options
   - Some services allow users to restrict who can chat with them to only those on their contact or “friends” list rather than being open to all users of the service

2) Information Entered into Profile
   - When creating a profile on a social networking site, many services require certain fields to be completed but allow users to choose the information they enter into others.

3) Privacy Settings
   - Some services provide privacy settings that allow users to limit what is shared with others
Someone is using my photo on their profile, and stealing my identity. What can I do?

1. If the picture/video is already online, you can take action to have it removed. Report the following profile and photo/video, and contact the service (e.g., Facebook, Instagram) to have it removed.
2. Private all of your accounts to protect your privacy from now on.
3. Remove your full name from your accounts, and any other information that might give away your place of residence or school.
4. Block any users you do not know from your accounts. By limiting your followers and friends to people you legitimately know, this will keep you safe.
5. Do not panic or worry. These accounts are usually disabled and banned by the services within a few days of receiving the report. Let your friends, family, and followers know that the fake account is not you.
Top 5 Cyber Security Incidents for Your Family to Know

1. **Hacked Passwords**
   - Majority of passwords can be hacked in less than one second

2. **Phishing**
   - Not fishing! Do not get confused!
   - A kind of identity theft – when criminals lend you to a counterfeit website in hopes you’ll enter your personal information
   - A phishing message can come through email, text, or social media

3. **Unsecured public WIFI**
   - Unauthorized people access anything you are doing if the WiFi network is not encrypted
   - They could access your passwords or read private emails
   - Save the urge and do not log onto the public networks within the mall or your nearby Starbucks

4. **Ransomware**
   - Criminals can unlock your computer from a remote location, and display a pop-up window on your computer, informing you that it won’t be unlocked until a sum of money is paid

5. **Online bullying**
   - aka Cyber-Bullying (addressed in the next module)
Module 5: Online Dating Sites & Apps

Note to Mentor:
- Begin this session by asking the participants what the age limit for using online dating sites/apps are.

Workbook pages:

Tinder is officially 18+. However, it is still being used by under-aged kids – it is not foolproof!

The use of online dating sites and apps can allow strangers (like older men) to pose as teenagers, make fake accounts with fake photos, and lure kids into meeting them in real life.

You can see how dangerous this can become.

Question: I met a boy on Tinder and am planning on meeting him at his house. Is it safe to go?

Absolutely not!

Remember, the Internet is full of predators. You never know who you are speaking to behind the computer screen.

Many criminals make fake profiles online to lure young girls to meet with them – sexual assault and rape can result.

Be Internet safe and do not join dating apps – especially if you are underage.
# Module 6: Community Resources

<table>
<thead>
<tr>
<th><strong>Kids Help Phone</strong></th>
<th>1-800-668-6868</th>
</tr>
</thead>
<tbody>
<tr>
<td>Talk with a counsellor - everything you share will be kept a secret and safe with just you and the counsellor</td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th><strong>Emergency Help</strong></th>
<th>9-1-1</th>
</tr>
</thead>
</table>

<table>
<thead>
<tr>
<th><strong>Nurses Line</strong></th>
<th>8-1-1</th>
</tr>
</thead>
</table>

<table>
<thead>
<tr>
<th><strong>National Suicide Prevention Lifeline</strong></th>
<th>1-800-273-8255</th>
</tr>
</thead>
<tbody>
<tr>
<td>If you, or someone you know, is experiencing helplessness or have thoughts of self-harm, call this number for counselling or mental health referrals</td>
<td></td>
</tr>
</tbody>
</table>
References


Sex Info Online. (2016). Teaching consent for your classroom. Retrieved from