

## **Grade 7, Theme Three**

Dear Family,

We are ready to begin Theme Three of *Fully Alive*, our family life program. Because the partnership of home, church, and school is so important, this letter is written to let you know what we talk about in class, and to offer some ideas for your involvement. For more information, please go to [www.acbo.on.ca](http://www.acbo.on.ca).

### **About Theme Three**

Theme Three of *Fully Alive* is called “Created Sexual: Male and Female.” God made us male and female, and all of God’s creation is good. In earlier grades, this theme was presented through a continuing story, which emphasized God’s plan for new life as the result of the love of mothers and fathers. In later grades, the message is unchanged, but the approach is more direct. As students enter puberty, they need to know about the changes they will experience, and about the responsibilities of being created male and female and following God’s plan for them.

### **In Theme Three we will:**

- examine some aspects of sexuality, including sexual characteristics, sexual identity and sexual roles.
- review the changes of puberty and the development of male and female fertility.
- explore the responsibility of caring for our health, including sexual health, and developing a realistic body image during adolescence.
- discuss the experience of sexual attraction and feelings, and examine the need for self-discipline and patience to reach the goal of becoming fully mature males and females.
- learn about the virtue of chastity and the attitudes and behaviours that reflect this virtue and show respect for the gift of sexuality.

### **Looking Ahead**

New terms introduced in Theme Three are this grade level are: *primary sexual characteristic, secondary sexual characteristic, sexual role, femininity, masculinity, sexually transmitted infection (STI), homosexuality, masturbation, pornography*

This theme introduces the experience of sexual attraction and sexual feelings, which begin after puberty, and stresses the need for self-discipline to manage these feelings. Sexual orientation is briefly discussed as part of a discussion of passing attractions young people may have toward people of the same sex. The virtue of chastity is highlighted in this theme, and the serious moral, physical, and emotional risks of intimate sexual relationships between unmarried people are carefully explored. The students are encouraged to recognize the value of the goal of becoming fully mature males and females who follow God’s plan for them.

In Grade 8 the students will learn more about sexual orientation, natural family planning, and artificial contraception from the perspective of Catholic moral teaching.

### **Working together at school and at home**

- You may find your child less open to talking about sexuality at this stage of life. Unlike younger children, young adolescents consider the topic very personal, and often prefer not to talk about it. Look for natural openings — a television program you watched together, an incident involving a friend that your child tells you about, or an item in the news — and try to take advantage of them.
- Young adolescents tend not to pay enough attention to nutrition, exercise, and rest. These areas of physical health are especially important when people are growing rapidly. Many young people spend too much time in sedentary pursuits (television, electronic games, surfing the net). Families can make a difference by participating in a variety of physical activities, and including friends of their children. The presence of friends makes a big difference to children of this age.
- Preoccupation with appearance and weight is normal for this age group, especially for girls. It is important to be patient with young people's worries or dissatisfaction about their bodies, and reassure them that everyone is sensitive during this stage of life, that these feelings do ease as they get older. At school the students discussed the influence of media on young people's body images. You might ask your child about this discussion.
- As part of the discussion of sexual attraction, the topic of pornography was briefly discussed. The internet has made access to pornography widely available. When young people have access to the internet in their bedrooms, there is always a risk that they will get involved in chat rooms that are inappropriate for people of their age or watch pornography. This is a topic that parents do need to talk about. At school the students discussed the harmful nature of pornography, particularly for young people who should be directing their energies toward greater maturity and self-discipline, not to a distorted version of sexuality.
- This year, each theme ends with a reflection on one of the virtues. For Theme Three the virtue is modesty. Ask your child to tell you about this virtue. In school we discussed modesty as the virtue that protects our dignity as persons, especially that which is private and intimate, and guides the way we present ourselves and behave.

### **Theme Three Topics**

*... male and female he created them.*

Genesis 1:27

In Grade 7, Theme Three is developed through five topics. The opening topic provides an opportunity for the students to consider sexuality as a fundamental dimension of human identity, and to examine aspects of what it means to be created male and female. Topics 2 and 3 include a review of basic information about development at puberty, and explore the responsibility to be a good steward of oneself, as a body/spirit person. Topic 4 provides the students with some information about sexual attraction and feelings, including a brief discussion of same-sex attraction. The final topic looks at the need for respect for the gift of being created male and female, and their responsibility to follow God's plan for sexuality.

### **Theme Three Virtue**

The virtue of modesty is highlighted in Theme Three. In the present social environment, this virtue is often seen as old-fashioned. In this theme, modesty is presented as the virtue that protects our dignity as persons, especially that which is private and intimate. Modesty guides the way we present ourselves and behave. This is the reflection on the virtue of modesty from the student text.

### **The Virtue of Modesty**

"Blessed are the pure of heart, for they will see God." (Matthew 5:8)

Modesty is the virtue that protects our dignity as persons, and guides the way we present ourselves and how we behave. A modest person does not seek attention, boast, dress in a provocative way, or reveal personal information inappropriately.

Many people think of modesty as an "old-fashioned" virtue. In particular, they associate it with the way young people dress. In the not-so-distant past, clothing that displayed much of the body was judged to be immodest. Some of today's fashions — low-cut necklines, bare midriffs, and skin-tight jeans and t-shirts — would have been considered shocking for both males and females.

But modesty is much more than a matter of dress. Most of all, it is the habit of protecting that which is, for each person, private and intimate. Modest people:

- don't dress in a way designed to display the body, or post revealing photos of themselves on the internet. Why not? Because we are body/spirit persons created in God's image, and both the female and male body are worthy of respect, not things to be exhibited.

- don't gossip about the intimate details of people's lives or relationships. Why not? Because it violates a person's right to privacy, and causes damage to his or her reputation.
- don't brag about their talents or achievements. Why not? Because God is the source of our gifts. Our worth does not lie in what we do or what we have, but in who we are — beloved children of God.

It often seems that there is very little that is considered private and intimate. But being modest and protecting your dignity as a body/spirit person by the way you present yourself and behave does not mean you are old-fashioned or uncomfortable with your sexuality. It means you are a person who respects yourself and others.

### **Talking to Children about Sexuality**

Before children begin school, they often ask their parents about where babies come from and about the differences between the bodies of boys and girls. These are natural questions and parents are the best people to answer them. No one else has such a special relationship with the child or knows the child as well as parents.

**Sexuality** — God made us male and female and his creation is good. We are made to be images of God's love and this includes our bodies. In marriage, one of the ways we express this love is through our bodies, in sexual intercourse. This special expression of love creates a deep bond between husband and wife. Through sexual intercourse, they can share in God's creation of new life and welcome new children into their families.

Sexuality, of course, is not just about bodies, male and female reproduction, or how babies are born. It is mainly about people, who are male and female. Parents teach their children a great deal about what it means to be men and women. It isn't something parents talk about, or at least not often, but something that they do and are. The way a person feels about herself as a woman and the way a person feels about himself as a man are communicated to children. When parents respect each other, and the work that each parent does, children are learning about sexuality. When children see parents co-operating, helping each other, speaking lovingly to each other, and touching each other affectionately, they are learning very important lessons about sexuality.

**Talking about sexuality** — Most parents want to talk about sexuality with their children, but many find it difficult. They feel shy because of a natural sense of modesty and because they are somewhat unsure of what to say. It's important to realize that the

exact words you use don't matter. What matters is letting children know that you are happy to answer their questions.

In general, 12 – 14 year old children are reluctant to talk about physical development or other topics related to sexuality. There are a number of reasons: embarrassment, reluctance to admit that they don't know everything, and, especially among girls, a strong sense of privacy as they become accustomed to menstruating and adjusting to a developing body.

Many parents have found that it is easier to communicate with children who are approaching or well into puberty when natural opportunities come up rather than sitting down to have a "big" talk. For example, a television program that involves a conflict about appropriate dress for 12 or 13 year-old girls; a complaint by a child that he or she is the smallest person in the class; a child's mention of gossip among about girlfriends and boyfriends. All of these situations are opportunities to talk about growing up, which can lead to a discussion of sexuality.

Part of a discussion of growing up and sexuality should be the development that happens during puberty. The physical changes of puberty were introduced and explained in the *Fully Alive* school program in Grades 5 and 6, and are reviewed in Grade 7. Information about puberty is also included in this Online Family Edition for Grade 7 at the end of Topic 2 in this theme.

**Protecting children from abuse** — Another important reason for talking to children about sexuality is the important responsibility parents have to protect their children from sexual abuse. All children need to know that, with a few exceptions (for example, if the doctor needs to examine them), no one is allowed to look at or touch the private parts of their bodies. They should also be told that they should not look at or touch the private parts of another person's body, even if that person asks or tells them to. They should say no and tell you right away. It's important to let children know that if someone touches them in a way that makes them uncomfortable or behaves in a way that worries or frightens them, they can always talk to you and you will know what to do.

**Exposure to sexual content through the media** — In our society, it is very difficult to shield children, even when they are young, from explicit information about sexuality. Television, the internet, popular music, movies, and newspapers all contribute to the

situation. Despite the best efforts of parents, children are exposed to ideas about sexuality that are not Christian. They will also hear about topics such as abortion, pornography, or gay marriage, and are likely to have questions about these issues. Parents can, however, try to limit what children see and hear by carefully monitoring the media to which they are exposed, and by providing clear rules for using the internet.

**Encouraging children to talk about sexuality** — As children begin to develop during puberty, they are often very hesitant to talk to their parents, especially about topics they have heard about, but don't understand. The reason for their hesitation could be a natural tendency to be more private as they develop; not knowing how to start a conversation; or because they are concerned that parents will be shocked or even angry if they want to talk about topics related to sexuality.

It can be helpful if parents let their children know that they are happy to discuss any questions or concerns their children have. If your child raises a controversial topic, you may want to give a brief answer and say you will provide more information when he or she is a little older. If your child asks a question that you don't know the answer to, just say so. You can always ask someone else or look it up and then provide an answer. Children don't need experts. They need parents who care and are willing to talk and listen.

**Vocabulary List** — At the end of Theme Three you will find a list of words that have been introduced in this theme, beginning in Grade 1. This vocabulary list also includes any new terms that are introduced in Grade 7. The *Fully Alive* Teacher Guide includes this list and teachers are given the option of duplicating it for the students. The students are not expected to memorize these terms, but to have some familiarity with them and their meaning. You may find it useful as a reference for yourself as you discuss this theme with your child.

## Topic 1 — Understanding Sexuality

*Sexuality is a fundamental component of personality, one of its modes of being, of manifestation, of communicating with others, of expressing and of living human love.*

*Educational Guidance in Human Love*, Congregation for Catholic Education

### Summary

This topic provides an opportunity for the students to reflect on sexuality as a basic dimension of each person's identity. The students also discuss the meaning of some aspects of sexuality: sex, sexual characteristics, sexual identity, and sexual roles.

### Main Ideas

- Sexual identity refers to people's understanding of themselves as females or as males. Sexual roles refer to the way males and females are expected to act in a particular society.
- Each person's understanding of sexual roles is influenced by the people in his or her life, the media, and the culture in which they are growing up.
- Sexual stereotypes exaggerate the difference between the sexes and are often based on rigid criteria for masculine and feminine qualities and behaviour.

### Family Participation

- **Parents are models** — Many of children's ideas about what it means to be male or female come from their families. Parents are important role models of masculinity and femininity, both in their attitudes and in their behaviour. Within the family, children not only learn about their own sexual roles, but they also absorb attitudes toward the opposite sex. For this reason, it's important for parents to be aware of their influence and to work to create an atmosphere in which children of both sexes are valued and encouraged to develop all of their abilities and respect for each other.
- **Single-parent families** — Children who are growing up in single-parent families can be at a disadvantage. Like all children, they need both male and female adult role models. If contact with the non-custodial parent is minimal, regular contact with an adult relative or family friend who takes a special interest in the child can provide a healthy influence in her or his life.
- **Sexual roles** — Although some families continue to make clear distinctions between the roles of males and females, in many others the roles overlap to a greater or lesser extent. On the whole, men are more involved in raising children and in the work of the home than in the past, and many women have jobs outside the home. There are tensions created by these developments, as there are by all changes, and some issues remain unresolved. When parents are aware that many aspects of sexual roles are the result of learning rather than biology, they can approach this issue in an open way. It's important

to communicate to children that everyone is expected to participate in the work of the home, whether they are male or female; it is a question of fairness, and of being a fully committed family member.

Respect for the task of raising children, which is the responsibility of both parents, is another important value to be developed. As children grow up and notice differences in the way other families are organized, they can be encouraged to discuss these differences without stereotyping or criticizing. Many ways can work well.

- **Criteria for sexual roles and double standards** — In class, the students examined some criteria (standards) for being male and female, some of which place limits on people. Here are two examples of a limiting standard: males have to be good at sports in order to be popular; female appearance is more important than intelligence or personality.

The students also discussed some double standards that involve sexual stereotypes, for example, males should not ask for help or show much emotion, but females can; males are aggressive, and females are weak. You might ask your child about this discussion.

- **Television activity** — A student activity in this topic involves an analysis of sexual roles on television. The students were asked to choose a program, select two characters (a male and a female), and answer some questions about these characters. They were also asked to evaluate both characters as good role models for people their age. This activity provides parents with a good opportunity to talk with their children about healthy female and male role models.

## Topic 2 — The Human Body

*Our bodies are our gardens, to the which our wills are gardeners;  
so that if we will plant nettles or sow lettuce, set hyssop and weed up thyme,  
supply it with one gender of herbs or distract it with many,  
either to have it sterile with idleness or manured with industry,  
why, the power and corrigible authority of this lies in our wills.*

William Shakespeare

### Summary

In this topic the students review the physical development that takes place at puberty. This information, including the male and female reproductive systems, human fertility,

and secondary sexual characteristics, was introduced in Grade 5 and discussed again in Grade 6.

**Note:** At the end of this topic you will find detailed information about puberty, including physical changes, other changes, boys' concerns about puberty, and suggestions for preparing girls for menstruation.

### Main Ideas

- There are two stages in life when the human body develops rapidly: during the first year of life and after the beginning of puberty.
- The changes related to the primary sexual characteristics occur inside the body and lead to the development of female and male fertility.
- The changes related to the secondary sexual characteristics become evident in the appearance of the body, occur over a number of years, and result in mature male and female bodies.

### Family Participation

- In class the students reviewed the primary sexual characteristics and the signs of these characteristics as female and male fertility begin to develop. They also reviewed the secondary sexual characteristics and the progression of this development over a number of years.
- **Talking to your children** — At this time of life, young people are easily embarrassed by the discussion of development during puberty. It's often best not to approach it directly, but to look for openings. For example, a friend of your son has recently had a big growth spurt and looks years older than your son. A casual mention of the wide range of times when people develop might be appreciated, especially if your comment is linked to an experience you had when you were that age. The same approach can be helpful with girls.

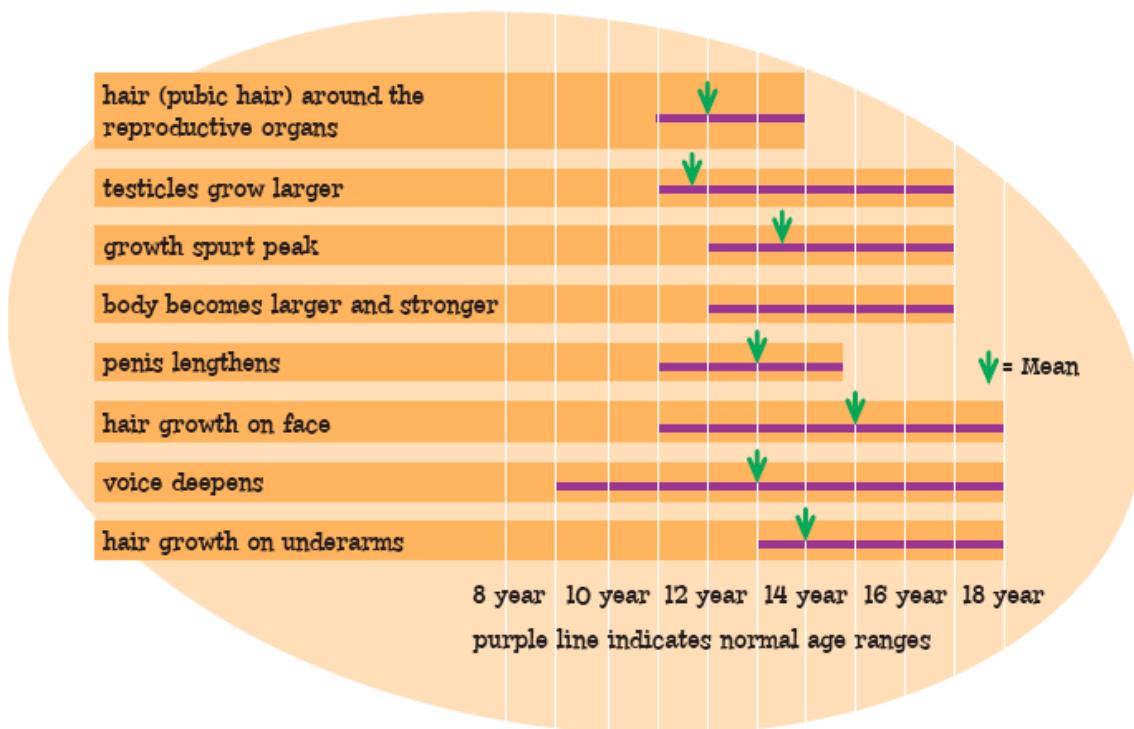
Young adolescents tend to find it easier to talk to the parent of the same sex about intimate matters but, in general, most of them would prefer not to talk at all. This seems to be particularly true of girls, who have to adjust to the experience of menstruation. In order to do this, they may need to withdraw for a time to absorb this change in their lives.

## The Changes of Puberty

## Physical Changes

- Built into each person's body is a special "time-clock" for puberty. A gland inside the brain called the *pituitary gland* controls this biological clock. The pituitary gland releases chemical messengers called *hormones* into the bloodstream. Certain hormones carry messages from the pituitary gland to the ovaries in girls and the testicles in boys. These messages tell the ovaries and the testicles to produce their own hormones. Only then do the bodies of boys and girls begin to develop the physical characteristics of adult men and women.
- This chart shows the physical changes of puberty for boys, and the average age (mean age) at which the changes occur. As you can see there is a wide range of ages for each of these changes.

**Puberty: When Male Sexual Characteristics Develop**



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- Most boys show some signs of puberty by age 13 or 14. But it could be a few years earlier or a few years later. Once puberty has begun, it usually takes about 4 or 5 years for the body to complete the physical changes from boyhood to manhood. Even when males are fully grown, there are differences among them.

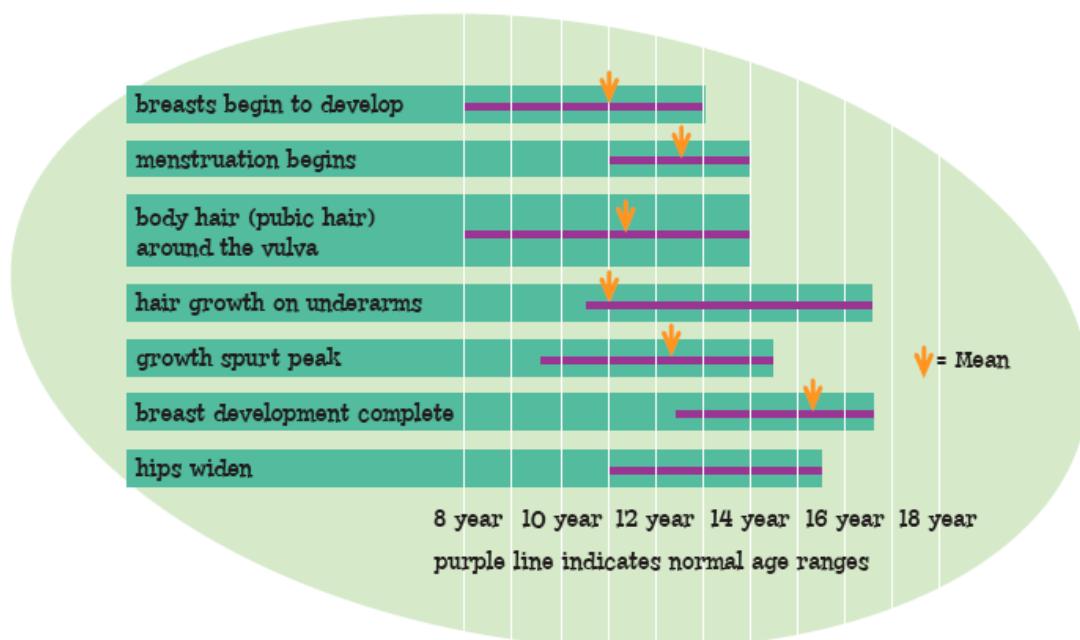
Some men are taller and heavier than others. Some have thicker beards and more body hair than others.

- Some time after a boy's appearance has begun to change, the testicles begin to produce sperm cells and special fluids that nourish and protect the sperm cells.

The mixture of sperm and these fluids is called *semen*. There are special storage areas in the male body for the sperm cells, and at times these areas become too full. When this happens, the body expels semen through the penis. This process of clearing out extra sperm begins a number of years after puberty begins. It can happen so gradually that it may not be noticed, but sometimes it happens all at once, usually when the body is at rest. This is called a *nocturnal emission* because the semen leaves the body while it is at rest during the night. This is a natural body process that is a sign of male fertility.

- This chart shows the physical changes of puberty for girls, and the average (mean) age at which these changes occur. As you can see there is a wide range of ages for each change.

**Puberty: When Female Sexual Characteristics Develop**



- Most girls show some signs of puberty by age 11 or 12. But it could be a few years earlier or a few years later. Once puberty has begun, it usually takes 4 or 5 years for the body to complete the physical changes.
- These physical changes begin at different times. One girl may notice the earliest changes of puberty at age 9 or 10. Another girl may be 15 or 16 before her body begins to take on the appearance of a woman's body. Even when females are fully developed, there are differences among them. Some women are taller and heavier than others. Some have wider hips and larger breasts than others.
- Sometime after a girl's appearance begins to change, she menstruates for the first time. This happens to most girls when they are between eleven and thirteen years old, but it could be one or two years earlier or later. This first menstruation is an important sign that her body is maturing. Menstruation is often called a period, because it is something that happens about once a month for a period of about three to seven days. When girls first menstruate, however, their cycles are not like those of adult women. Instead of a monthly cycle, it may be a number of months between their periods.

### **Other Changes of Puberty**

- **Emotional and social changes** — The emotional and social changes of puberty are many but are less predictable than the physical changes. Moodiness, anxiety, embarrassment, and irritability are all normal signs of adolescence, and are in part caused by the changing levels of hormones in the bloodstream. Usually, however, the way a boy or girl handles the changes of puberty is in line with his or her development up to the time of puberty. For example, easygoing children tend to remain easygoing; difficult children often are difficult adolescents.
- **Self-consciousness** — Being self-conscious, especially about the body, is very common during early adolescence. It takes time to get used to a changing body. Young adolescents are easily embarrassed, especially by any comments about their appearance. This sensitivity can make it difficult for parents to know what to say and what not to say. Tactfulness from adults is especially important during this stage of life.

- Relationships with parents — It is normal, especially in the early years of adolescence, for relationships with parents to more uneven than they were during the childhood years. It is normal for young people to complain about family rules and to want more independence and privacy. This can be difficult for parents, particularly since children also tend to be more critical of their parents and more argumentative as they develop. Parents need a sense of humour and of perspective during the early years of adolescence. It is also important for them to give young people as much responsibility and freedom as they prove they can handle. Most families go through a few uneven years, but serious problems are not inevitable.

**Friendship** — Friends are extremely important to young people, especially at the beginning of adolescence. The experience of being left out or of losing a friend is very painful. This may not seem like a large problem to an adult, but to a young adolescent it can be a major upset. Parents cannot solve friendship problems for their children but they can listen and offer suggestions.

**Feelings for someone of the same sex** — It is also normal during adolescence for both males and females to have very strong feelings for people of the same sex. This might be an older student or a teacher whom they admire. Young people may be concerned that this means they are homosexual, but this is not something that they are likely to talk about with anyone. It is helpful if parents have talked about homosexuality, and mentioned the concerns that young people sometimes have and how normal adolescent “crushes” are.

**A time of vulnerability** — Puberty is a time of extraordinary change. It is, therefore, a time of vulnerability. Young adolescents need parents who believe in them, who challenge them, and who provide clear guidelines for them. They also need sympathetic listeners who can remember the time in their lives when they felt overwhelmed by their feelings and their changing bodies.

### **Boys' Concerns About Puberty**

**Appearance** — At this age, many boys do not have a lot of questions or worries about puberty since they are still in the early stages of development. Parents may find that their sons are interested in talking about how tall or muscular they

might be when they reach adulthood, when their voice will change (and why), or when they will grow whiskers and shave. If your son has these kinds of questions, you might want to remind him that his physical characteristics (his height, build, amount of body hair) will probably be somewhat like those of other men in his family. If most of his male relatives are tall, then he is likely to be so also. If most of them have heavy beards, then he probably will too. If some are tall and some are short, then he will have to wait and see.

Boys who are somewhat further along in their development may have more specific concerns and questions, which are best addressed by fathers (other male relatives, or trusted male friends):

- **Nocturnal emissions** — Nocturnal emissions, sometimes called wet dreams, are an absolutely normal occurrence. They are nature's way of making room for new sperm cells. They are often accompanied by sexual feelings, and this too is normal. The frequency of nocturnal emissions varies widely, and is affected by factors like fatigue or illness. Embarrassment, fascination, and alarm are some of the feelings that most boys experience when this first happens to them.
- **Arousal** — Erections become more frequent as boys develop, and can be caused by direct stimulation (masturbation, looking at pictures, thinking about sexual things), or by unintended causes such as tension, nervousness, tight clothing, rough-housing, or other body contact. Or the cause could be nothing more than the normal activity of hormones. All boys find it embarrassing when an erection occurs in a situation where other people can notice. The most effective thing to do is to concentrate on thinking about something else.
- **Size** — Another concern that boys sometimes have is about penis size. Some differences among boys of the same age are related to their stage of development. But boys should also know that penis size is inherited (as are all other physical characteristics), and has no relationship to masculinity, function, or future marriage, despite what they may have heard to the contrary.

**Information and moral guidance** — Two other areas in which both boys and girls are in need of help during adolescence are:

- Masturbation is quite common among young adolescent males (and to a

lesser extent among females.) Unfortunately, young people are often left to struggle with this issue alone. They do need guidance in this area, for although masturbation at this stage of development is common, it is not without moral significance. It uses the gift of sexual pleasure, which is meant to be part of the relationship of marriage, in an immature and self-centred way. It can become a habit that is difficult to break, especially for those young adolescents who are unhappy about themselves.

Young people should be encouraged to grow toward maturity and self-control, to

use the sacrament of reconciliation and prayer, and to keep busy and involved with friends and activities. Sexual urges can be very powerful; they are natural, normal, and healthy. But growth toward real maturity is a process of learning to be in charge of oneself and to overcome self-centredness.

- It's important for young adolescents to recognize the moral difference between deliberately stimulating their sexual feelings, and those that simply happen. This is a more difficult issue for boys since they are more easily aroused than girls, and react more strongly to visual stimulation — pictures, clothing, movies, or videos. All young people need clear guidance in this area, especially since sexually explicit material is so easily available in our society. They need to know that to seek out this kind of material deliberately is a choice that doesn't respect the value of sexuality, or lead them toward chastity and the kind of love they will want to share with another person if they choose to marry.

### **Preparing Girls for Menstruation**

- **Signs of development** — Breast development generally precedes menstruation by one to two years as does the beginning of the growth spurt. Sometime before first menstruation, some girls notice a periodic discharge on their underwear. Since they may be concerned by this and think that something is wrong with them, it is important to reassure them that this is a normal part of development. It is something that all women experience and there is no need for

them to be worried or embarrassed. This is normal and is caused by the hormones produced by the ovaries.

- **Irregular periods** — As you explain menstruation it's a good idea to mention that when girls first begin to menstruate, their periods are often quite irregular. They may have their first period, and then not menstruate again for several months. For many girls it takes a number of years before a regular pattern of menstruating is established.
- **Girls' concerns** — Most often, girls' concerns about menstruation include whether it hurts, the amount of blood that is involved, and how quickly a period starts. You will want to reassure your daughter that there's no reason for menstruation to interfere with any of her activities. The amount of blood that is lost is actually quite small. Explain that periods normally start very slowly with a few drops of blood, which she will notice on her underwear, and that other people will not know that she has started menstruating. Sometimes girls are surprised or worried because the colour of the blood is brown. You might mention that this is what happens when blood is exposed to the air and dries.
- **Discomfort** — You need to explain that often there is mild discomfort at the beginning of a period, which is caused by contractions of the uterus, and this is not anything to worry about. Although a few girls have very painful menstrual cycles, it is not a good idea to mention this since it is the exception rather than the rule.
- **Caring for themselves** — Girls need information about caring for themselves during menstruation. At some point, you should explain how sanitary pads are worn. Many girls eventually use tampons, but generally not until a few years after they have started menstruating. They may have questions about tampons, however, and you could explain how they are used. Often, mothers feel that girls who have just started menstruating are too young to use tampons and the majority of younger girls are not anxious to use them. Girls who are involved in sports such as gymnastics and swimming, however, can find it embarrassing to wear pads and may want to discuss using tampons with their mothers.
- **Worries about the first period** — Girls who are expecting their first period in

the near future are often concerned that they will start when they are away from home. They may want to be prepared by carrying a mini-pad with them. They should also know that they can ask their teacher, the school nurse, or the secretary in the school office. All they have to say is, "I think I've just started my period and I don't have anything with me."

- **A healthy, normal process** — It's extremely important to present menstruation as a normal, healthy process. Girls may have heard menstruation described as the "curse" or that they cannot bathe, wash their hair, or participate in sports while they have their period. They should be reassured that menstruation is not an illness, but a normal part of life, and that they can engage in all of their regular activities.

## **Topic 3 — Stewards of the Body**

*Do you not know that your body is a temple of the Holy Spirit within you, which you have from God? You are not your own, you were bought with a price.*

*So glorify God in your body.*

1 Corinthians 6:19-20

### **Summary**

In this topic the students examine the responsibility they have to care for themselves as body/spirit persons — to be good stewards of their lives. The areas of responsibility they discuss are physical health (nutrition, exercise, sleep), sexual health (sexually transmitted infections), and body image.

### **Main Ideas**

- We are God's stewards of the gift of our lives as body/spirit persons. We also have a responsibility to respect and care for others as body/spirit persons.
- Good stewards make an effort to care for their physical health by paying attention to their need for good nutrition, regular exercise, and sufficient rest. They also recognize and understand the risk of sexually transmitted infections (STIs) to their sexual health and to their future.
- Good stewards recognize the need to balance concerns about appearance with other aspects of their lives and to learn to be comfortable with themselves.

## Family Participation

- **Health** — All parents are concerned with their children's health and most are aware of the importance of nourishing food, regular exercise, and adequate sleep. As children grow up, however, parents have less control over these basic building blocks of good health, although their example and encouragement does make a difference.
- **Nutrition** — Studies of the eating habits of adolescents have found that they consume too many fats and too much sugar. They also tend to skip meals and make up for it with fast-food snacks. These bad habits have short-term consequences — they're not as alert as they could be and lack energy. But poor eating habits may also have long-term consequences, for example, type-2 diabetes and heart disease in later life. Parents can make some difference by providing healthy snacks, limiting the amount of "junk" food in the home, and insisting on regular family meals. Not only are family meals more likely to offer good nutrition, they are also an important opportunity to reconnect at the end of the day.
- **Strong bones** — By the time teenagers are in their early twenties, their bones are as hard and strong as they will ever be. Healthy bones are the result of diet (dairy products that contain calcium, like milk, cheese, and yogurt) and weight-bearing exercise (activities like dancing, aerobics, and sports like volleyball and soccer). With strong bones, people are less likely to develop *osteoporosis* (porous bones) in later life. This condition is much more common in females than in males and can lead to multiple fractures.
- **Exercise** — Studies of the health of North American adolescents also indicate that they are not physically active enough. Regular exercise not only protects the heart and helps to keep people at a healthy weight, it also improves energy level and mood. When family members are physically active, they provide a model for growing children.
- **Rest** — The sleep habits of adolescents are often an area of frustration for parents — they're up all hours and have to be dragged out of bed in the morning. There is, in fact, a biological reason for this sleep cycle that the students discussed in class. All living beings have a *circadian rhythm*, something like a 24-hour internal clock. During puberty, this clock gets reset. A brain hormone, called *melatonin*, which causes people to get sleepy, is released an hour later than in younger children.

Adolescent need 8 – 9 hours of sleep, but most get 6 – 7 hours or less. Lack of sleep has a negative effect on mood, concentration, reaction time, and memory. The students discussed some suggestions from sleep experts to deal with this situation:

- Set a regular time for going to bed and getting up even on the weekend.
- Exercise regularly, but at least three hours before bedtime.
- Avoid drinks with caffeine after 4 p.m.
- Don't nap any longer than a half hour.
- Make sure your bedroom is dark and cool.

You may want to discuss these suggestions with your child, especially if she or he is having difficulties getting enough rest.

• **Sexual health** — The potential health risks of sexual behaviour is a very sensitive topic to discuss with Grade 7 students, but they do have to be aware of the implications of intimate sexual contact for their health as body/spirit persons. In class, the students reflected on some dimensions of sexual health — the value of the gift of sexuality, the need to make moral choices that respect this gift, and appreciation for the gift of human fertility. They also discussed some questions and answers about sexually transmitted infections (STIs). You will find these questions and answers at the end of this theme, along with information sheets about specific sexually transmitted infections.

You might ask your child about the class discussion of sexual health. The topic of sexually transmitted disease is one that most young people say that they could not possibly talk about with their parents. One of the main reasons is that young adolescents believe that parents would automatically think that they were sexually active, or considering it in the near future. In fact, sexual health and the many other consequences of intimate sexual activity are topics that parents should be discussing with their young people.

• **Body image** — Most young adolescents are unhappy with some aspects of their physical appearance at this stage of their lives. There are several reasons for this: the uneven way parts the body develop during puberty; the difference among young people in the timing and rate of physical development; and the greater awareness of self, which leads to self-consciousness. It helps if parents are tactful and avoid drawing attention to their young teenagers' appearance. If the topic comes up, they can also reassure their

children that this stage will pass and they will become more comfortable with their bodies.

- **Body image and anorexia** — It is normal for females to have more body fat than males. Without a certain percentage of body fat, the female fertility cycle cannot be established. It is also normal for girls to experience a rapid weight gain during puberty, which may lead to feelings of unhappiness.

For a very small number of females (and the rare male), a preoccupation with weight and dieting can result in the development of an eating disorder known as *anorexia nervosa*. This disorder includes dieting to the point of starvation, and may involve excessive exercising. Some anorexic people also use weight loss methods that are associated with another eating disorder called *bulimia* — binge eating followed by vomiting, or using large amounts of laxatives.

Many young people, especially girls, have concerns about their weight, but do not have anorexia. Experts suggest that there are some signs parents should pay attention to: a sudden or dramatic loss of weight; obsession with food and calories; a distorted body image (insisting she is fat when it is clear she is not, or constant dissatisfaction with parts of her body); excessive exercise; signs of depression and social withdrawal; nausea or bloating after eating; and feeling cold when the room temperature is normal. Anorexia is a serious psychiatric illness and requires specialized treatment.

- **Body image and media** — The students examined the influence of media on young people's feelings about their bodies. The "ideal" media body type changes over time, but in recent years, the ideal female is slightly built, tall, and quite thin, and the ideal male is tall, has well-defined muscles, and little body fat. Since physical traits are largely determined by a person's genetic heredity, a large number of people have little hope of achieving these ideals.

The students also discussed the consequences of people spending a lot of time trying to look like a super model or a popular actor. Instead of becoming comfortable with themselves and appreciating the gifts they have, they become more and more dissatisfied with their appearance, and neglect other aspects of their lives.

- At the end of this topic the students said a prayer together — A Steward's Prayer. You will find this prayer in *Fully Alive Grade 7 Prayers*.

## Topic 4 — Attraction and Feelings

*How on earth are you ever going to explain in terms of chemistry and physics  
so important a biological phenomenon as first love?*

Albert Einstein

### Summary

In this topic the students are introduced to some basic information about sexual attraction, and have a brief discussion of same-sex attraction during early adolescence. Sexual feelings are also discussed in this topic, along with two delicate subjects, masturbation and pornography.

### Main Ideas

- Sexual attraction is part of the gift of sexuality and draws males and females together. Awareness of each other and strong feelings for each other are signs of sexual attraction.
- Attraction to someone of the same sex may happen during early adolescence, and is confusing. It is not until the later teen years that people have a clearer sense of their sexual orientation. Teasing people about their sexuality is both wrong and harmful.
- Sexual feelings are part of the gift of sexuality. It takes self-discipline and patience to reach the goal of becoming fully mature males and females.

### Family Participation

- **Attraction** — Early adolescence brings with it a growing awareness of the opposite sex. In general, because of their earlier development, girls become interested somewhat sooner than boys. Infatuations and teasing about liking a particular boy or girl are quite normal, as are crushes on members of music groups or other entertainment personalities. There are differences among children, of course, and some young people are well into their teens before they show much interest in the opposite sex.
- **Feelings for people of the same sex** — It is also normal during adolescence for both males and females to have very strong feelings for people of the same sex. This might be an older student or a teacher whom they admire. Young people, and especially boys, are often concerned that this means they are homosexuals, but are unlikely to mention this concern to anyone. It is helpful if parents have talked about homosexuality and

mentioned how normal these adolescent “crushes” are.

In class the students also discussed the harmful nature of teasing people about any aspect of their sexuality. It shows a lack of respect for the dignity of others, and is harmful because it causes pain to people at a time when they are vulnerable. In particular, comments about being gay or insults related to a person’s interests or clothes are also disrespectful toward people whose orientation is homosexual. Like all negative attitudes toward groups of people, homophobia reduces unique persons to a single aspect of their identity.

- **Sexual feelings** — The students were introduced to the topic of sexual feelings by examining the concept of the body’s drives. The example that was used is the drive for food. People cannot live without food and when they are hungry the body sends out a number of signals that indicate they must eat. Eating, especially when people are very hungry, is a source of pleasure.

As people develop sexually, the body sends out a new set of signals — sexual attraction, and new physical sensations and urges. On a purely physical level, these sensations and urges are part of the drive to reproduce, to keep the human species going. People, however, are body/spirit persons, made in God’s image. Human sexuality is not just a matter of physical desire and pleasure; it is a gift of the whole person.

It is natural for young people to be curious about the body and its new sensations, but it is also necessary to develop habits of self-discipline. Masturbation leads to self-centredness, and it is important for the young people to struggle with this issue. Sexual pleasure is a gift that each person must learn to understand and respect. God’s gift of sexuality is intended to lead people toward others, ultimately, for most people, to marriage.

- **Pornography** — As part of the topic of sexual attraction and feelings, the students briefly discussed pornography. *Pornography* is the term used for films, internet sites, magazines, other written materials, and photographs that are sexually explicit and intended to cause sexual arousal. The internet, in particular, has made pornography widely available to viewers of all ages.

Males tend to be the majority of users of pornography. They are more quickly aroused, particularly by visual images, and face a greater challenge than females to

integrate their drive for sex with their need for close personal relationships. Meeting this challenge takes time, patience, and self-discipline.

Parents should be aware that pornography is addictive and its distorted view of sexuality can do nothing but harm young people. Their task during adolescence is to grow in maturity and self-discipline. Pornography has no place in this process.

## Topic 5 — Relationships and Respect

*[Sexuality] is in fact the call of God to reach out to others and to develop the profound relationships in selfless love which complete us as man and woman.*

Guidelines for Family Life Education, OCCB

### Summary

In the final topic of Theme Three, the students consider the importance of the habit of respect for the gift of sexuality and how this respect is demonstrated in attitude, speech, and behaviour. They also reflect on the decisions they face in the future and their responsibility to follow God's plan for human sexuality.

### Main Ideas

- Chastity is the virtue that helps us live as males and females in the way God intends.  
Learning to be chaste is an important task of adolescence.
- Each person faces decisions about relationships and sexuality in his or her life.  
Intimate sexual relationships during adolescence are wrong and can cause serious harm to young people.
- Self-respect and confidence help young people to follow God's plan for sexuality and withstand pressures to be sexually intimate.

### Family Participation

- **Chastity and moral choices** — This topic begins with a discussion of moral choices related to sexuality and relationships and a reflection on the virtue of chastity. The students learned that all people are called to be chaste. For married people, an intimate sexual relationship is a sign of their total commitment, and chastity helps husbands and wives to be loving and faithful to each other. For single people, respect for the gift of sexuality excludes an intimate sexual relationship.

It is important for parents to talk to their children about chastity and respect for the gift of sexuality. Young people are continually challenged with other viewpoints — casual sexual relationships on television; song lyrics that focus only on the body, not the person; and tremendous pressure to grow up quickly. In class, the students discussed the support that developing people need to be chaste — support through prayer and the sacraments, and encouragement from the people who care about them.

• **Sexuality and decision-making** —As young people develop and become more responsible and independent, they discover that they face many decisions that can be hard to make. In class, the students discussed an imaginary map that shows some events and decisions in a person’s life. On this map, there are a number of labels, like, “wrong direction,” “back on track,” and “total confusion.” The point of this map is that each person’s life includes many ups and downs, and some decisions that do not work out.

Navigating the way from childhood to adulthood is not easy, and everyone makes some mistakes. Some mistakes, however, are more serious than others, for example, using illegal drugs or under-age drinking. These behaviours can have consequences that change a young person’s life forever. Another serious mistake is getting involved in an intimate sexual relationship. The risks are emotional, physical, and moral.

It may seem premature to discuss pre-marital sex with Grade 7 children, but we are living in a society in which large numbers of young adolescents are becoming sexually active in the early years of high school, not as the result of a conscious decision, but for reasons related to poor self-esteem, peer pressure, and a lack of clear values and adult guidance in this area. It’s important for parents to take advantage of natural opportunities to talk about this issue. Young people need to hear from their parents that intimate sexual relationships outside of marriage are wrong.

• **Dating** — As the question of school dances and mixed parties comes up, parents are faced with new decisions. Some young people also begin to ask the question: When can I date? Each family has to set its own rules, but it is good to think ahead and discuss these issues with children if they are bringing them up. Young adolescents do need opportunities to socialize in mixed groups, but adult supervision is essential.

You will find an “Ask Sophia” feature with a number of questions and answers about dating and sex at the end of this theme. Grade 7 and 8 students do have questions

about these matters. You might discuss this “Ask Sophia” feature with your child. It offers a good opportunity to talk about some very significant issues.

- It is impossible to protect young people from all harm. But the sense of security that comes from being loved and appreciated by their families is in itself a significant protection. It is this security that encourages developing people to accept and believe in themselves, to withstand sexual pressures, and to offer respect to others.

## Theme Three: Additional Resources

**Topic 2:** Sexually Transmitted Infections (STIs) were introduced in Topic 2 of this theme. These questions and answers about STIs were discussed in class. Also included is a short summary of information about several major STIs.

### Sexually Transmitted Infections: Questions and Answers

- **What are STIs?** STIs are infections that are spread primarily by intimate sexual contact, such as sexual intercourse. Some STIs can also be contracted through skin-to-skin contact, and through sexual activities involving the mouth and other parts of the body normally concealed by clothing.
- **How do you know if you have an STI?** You may not know. STIs do not always have obvious symptoms, particularly in females whose reproductive organs are deep inside the body. Some common signs that may indicate an STI are a sore on the sexual organs, a burning sensation when urinating, a rash, irritation, itch, or discharge in the genital area.
- **Do a lot of people get STIs?** It is estimated in reports by Statistics Canada that one in six Canadians will have a STI by the age of 25. A person’s risk is greatly increased if he or she has intimate contact with more than one person. Young persons between the ages of 15 and 24 have the highest rates of STIs in Canada.
- **Can STIs be cured?** In their early stages, many STIs are curable, but several are not. An STI called Chlamydia is the most commonly reported STI in Canada. It can be cured, but in most cases people have no symptoms. Untreated Chlamydia can result in infertility.

### Major Sexually Transmitted Infections

#### Chlamydia

**Symptoms:** There are usually none in females, but possibly an abnormal discharge from the vagina or a burning sensation when urinating. Male

symptoms may include a burning feeling when urinating, frequent need to urinate, watery discharge from the penis, and itching or pain around the opening of the penis.

**Treatment:** Chlamydia is a bacterial infection and can be treated with antibiotics. Since this infection may not have symptoms, many people do not seek treatment.

**Consequences/Complications:** It can result in sterility in both males and females and can be passed on by a pregnant woman to her child.

## Gonorrhea

**Symptoms:** Both males and females may not have any signs or symptoms. If there are symptoms, females may notice an abnormal discharge from the vagina, pain in the lower abdomen, or a burning sensation when urinating. Males may experience a burning feeling when urinating, a thick discharge from the penis, burning or itching around the opening of the penis, and pain in the testicles.

**Treatment:** Gonorrhea is a bacterial infection and can be treated with antibiotics. Since people may not experience any symptoms, they may not seek treatment.

**Consequences/Complications:** Can result in sterility in both males and females. It can cause serious health problems and be passed on by a pregnant woman to her child.

## Syphilis

**Symptoms:** In most cases, the first symptom is a sore that does not hurt and eventually disappears. The next symptoms are usually a body rash, fever, and loss of hair.

**Treatment:** Syphilis is a bacterial infection and can be treated with antibiotics, usually penicillin. Once treated, people must have regular blood tests for a period of time to ensure that they are free of infection.

**Consequences/Complications:** Untreated syphilis can lead to damage to the heart, brain, and other organs of the body, and may lead to death. The infection can be passed on by a pregnant woman and can result in birth defects for the child or death.

## Genital Herpes

**Symptoms:** A tingling, itching, burning or numb sensation in the affected areas, followed by a sore or blister.

**Treatment:** Genital herpes is a viral infection and cannot be cured, although the symptoms can be controlled.

**Consequences/Complications:** It can be passed on by a pregnant woman to her child during birth if the disease is active at the time. In these circumstances, the child is delivered by Caesarian Section. Genital herpes may be related to an increased risk of cervical cancer for women.

## HPV

**Symptoms:** HPV stands for Human Papillomavirus, a virus that can cause warts in the genital area. Both males and females may not be aware of any symptoms.

**Treatment:** A vaccine for young females is now available, and protects against some types of HPV, but not all. For people who already have genital warts, there are several methods by which a doctor or nurse can remove them, although there is a chance they will return.

**Consequences/Complications:** HPV is known to affect the cells of a female's cervix and potentially lead to cancer. It has also been known to lead to other genital cancers in both males and females.

## HIV/AIDS

**Symptoms:** HIV stands for Human Immunodeficiency Virus, and AIDS stands for Acquired Immune Deficiency Syndrome. HIV invades the immune system and reduces a person's ability to fight off infections and cancer. AIDS is the most severe form of HIV infection. Common symptoms of HIV are tiredness, fever, rashes, vomiting, weight loss, swollen glands, and muscle aches. Newly infected persons, however, may have no symptoms for some time.

**Treatment:** There are several antiretroviral medications that can slow the process of HIV developing into AIDS.

**Consequences/Complication:** The antiretroviral medications now available allow people with HIV to prolong their lives. The medications must be taken on a regular schedule, are expensive, have unpleasant side effects, and do not always work.

**Topic 5:** This is an Ask Sophie about dating, a topic the students discussed in class.

## Dating

Young people have a lot of question about dating and sex.

### **My mother says I can't go out on a date with a boy until I'm 16. Is that fair?**

What do you mean by fair? Do you really think your mother made her decision without thinking about your wellbeing? I think you mean you don't like her decision, and therefore it must not be fair.

There are good reasons for young couples not to date on their own when they are in their early teens. They need time to work on their friendships with people of the same sex, and to socialize with people of the opposite sex within groups, not as couples. At 13 or 14, it's best to concentrate on developing the skills you need for healthy relationships later on, and that includes a sense of who you are and what your values are. **Sophia**

**If you don't have sexual intercourse, but you do other stuff, is that okay?**

I guess it depends on what you mean by "stuff." The bottom line is that anything beyond holding hands and briefly kissing, moves fairly quickly into the area of intimate sexual behaviour. It is difficult for people to make a decision about sexual activity in a situation where they feel pressured or sexually aroused. The decision not to be sexually active has to be made earlier in order to avoid such situations. A large number of young people — both females and males — have regrets about early sexual experiences. **Sophia**

**There was alcohol at a party I went to and I'm not sure what I did. I know I didn't have sex, but people in my Grade 8 class are spreading nasty rumours about me. What should I do?**

The simple answer is, don't drink alcohol at parties. In fact, no one your age should be drinking alcohol at all. It lowers your inhibitions, which means you are far more likely to do things you would not ordinarily do. Drinking alcohol at a party at such a young age is also very risky behaviour. Nasty rumours are unpleasant, but the outcome could have been much worse.

Do you have a good friend who was at the party, someone you really trust? If so, talk to her about what happened, and see what she knows. You might ask for her help in stopping the rumours. If this isn't possible, you will just have to wait until the rumours fade away. Ignore them as much as you can, and use this bad experience to inspire you to look after yourself more carefully. **Sophia**

**People always say that boys come on to girls, but sometimes girls do the same to boys. It's unfair to say it's always the boy's fault. Do you agree?**

I do agree. Some girls can be quite assertive, which is generally a positive quality — self-confident and strong. But being pushy and aggressive is another matter.

In the past, the general social rule was that girls who pursued boys got a bad reputation. That rule is long gone, but that doesn't give either girls or boys the right to force their attentions on another person — constant texting, telephone calls, making excuses to see the person. And it should go without saying, that pressure from either girls or boys to become sexually involved is always wrong. **Sophia**

**I'm 14 years old, and my boyfriend is 17. Sometimes he's nice to me, but not always. He hit me once, but he apologized. I really like having a boyfriend, but my best friend thinks I should break up with him. What do you think?**

Your boyfriend hit you — that is physical abuse, and it is absolutely unacceptable. I'm sure your friend is right, and I suspect you know that, too. From reading your letter, I think you don't really believe that you're a valuable person who deserves to be treated with respect. An abusive person cannot give you a sense of self-worth.

You probably don't know this, but research in Canada and the United States has shown that girls who start dating at a very young age, especially with someone who is more than two years older, are vulnerable to physical, emotional, and sexual abuse. Before young people begin to date they need to have healthy friendships with both males and females. They also need to have the self-confidence to avoid people who use relationships as an opportunity for power and exploitation.

If you can't confide in your mother or father, find an adult you trust to give you some advice. You deserve much more than your boyfriend is offering. **Sophia**

### **Fully Alive Theme Three Glossary**

**Amniotic fluid:** the liquid inside the amniotic sac that cushions and protects the fetus.

**Amniotic sac:** a thin membrane filled with amniotic fluid; the new human life develops inside the amniotic sac.

**Birth canal:** the passageway from the uterus to the outside of the female body, which includes the vagina and cervix; the term is used most often during the birth of a baby.

**Caesarian section:** an operation in which the baby is delivered through an incision made in the abdomen and uterus of the mother; usually performed because the baby is too large for the birth canal, or in the wrong position for a safe delivery.

**Cell:** tiny structure of living creatures, both plant and animal. The adult human

body is made up of billions of cells.

**Cell division:** the process by which one cell multiplies to two, from two to four, from four to eight, and so on.

**Cervical mucus:** secretions from the cervix (the neck of the uterus), which are stimulated by hormones in preparation for ovulation, and assist the sperm to survive and reach the ovum.

**Cervix:** part of the female reproductive system; the neck or narrow, lower part of the uterus, leading to the vagina.

**Chromosome:** a threadlike chemical structure that carries the genes, which determine the characteristics that are inherited from the parents; 23 pairs (46) chromosomes are found in the nucleus of each cell of the body with the exception of the sperm and ovum, which have only 23.

**Conception:** the time of fertilization when a new human life begins, which occurs when the sperm and the ovum join together and form a single new cell.

**Contraction:** the process by which a muscle tightens and becomes thicker and shorter; during the birth of a baby, the uterus regularly tightens and relaxes over a period of time in order to push the baby through the birth canal.

**Cycle:** a series of events that are continually repeated in the same order. The female reproductive cycle is sometimes described as a *menstrual cycle* or a *fertility cycle*, which refers to the building up of the lining in the uterus, the ripening of an ovum, ovulation, and menstruation if the ovum is not fertilized. In adult women a fertility cycle is completed every three to five weeks.

**DNA (deoxyribonucleic acid):** a long molecule that stores coded information for building living things.

**Ejaculation:** a series of muscular contractions by which semen leaves the male body through the penis.

**Embryo:** the term used for the new human life from the time of implantation in the wall of the uterus until the end of the second month of pregnancy.

**Erection:** the condition of the penis when its soft tissues are filled with blood, causing it to become larger and firm.

**Fallopian tube:** part of the female reproductive system; two narrow tubes leading from the ovaries to the uterus, providing a passageway for the ova.

**Female:** the sex of a girl or woman.

**Femininity:** the term used for the behaviours, interests and qualities that are associated with females (see sexual role).

**Fetus:** the term used for the new human life from the end of the second month of pregnancy until birth.

**Fertility:** the physical ability or power to procreate, to give life.

**Fertilization:** conception; the uniting of the sperm and the ovum to form a single new cell.

**Gene:** a tiny chemical structure carried on a chromosome by which characteristics are passed from parents to children.

**Heterosexuality:** an exclusive or predominant attraction to members of the opposite sex.

**Homophobia:** a fear or strong disapproval of people whose sexual orientation is homosexual.

**Homosexuality:** an exclusive or predominant attraction to members of the same sex.

**Hormone:** a chemical substance that is released by a gland in the body; hormones act as messengers to other organs in the body

**Implantation:** the attachment of the tiny zygote to the wall of the uterus; implantation occurs from five to seven days after conception, and is usually completed by twelve days.

**Labour:** the time during which the child is born; labour occurs in three stages during which the baby, the amniotic sac, and the placenta are pushed out of the

uterus through the birth canal.

**Male:** the sex of a boy or man.

**Masculinity:** the term used for the behaviours, interests and qualities that are associated with males (see sexual role).

**Masturbation:** deliberately touching the genitals in order to experience sexual pleasure.

**Membrane:** the thin covering of a cell.

**Menopause:** the end of menstruation, which usually happens when women are between the ages of fifty and fifty-five.

**Menstruation:** the shedding of the lining of the uterus; a small amount of blood, mucus, and cells from the lining of the uterus leaves the female body through the vagina; in adult women menstruation occurs once every three to five weeks if the ovum has not been fertilized.

**Navel:** the mark on the body (in the center of the abdomen) where the umbilical cord was attached; belly button.

**Nocturnal emission:** an ejaculation during sleep (sometimes called a “wet dream”); nocturnal emissions are the body’s way of making room for new sperm cells, and begin to happen to boys sometime after the testicles have begun to produce sperm cells.

**Nucleus:** the part of a cell that contains the chromosomes.

**Organ:** a part of the body that has a specific task, for example, the heart or the lungs.

**Ova:** the female reproductive cells produced by the ovaries; mature egg cells.

**Ovaries:** part of the female reproductive system; two small almond-shaped organs inside the abdomen on either side of the uterus; the ovaries ripen the egg cells and produce the female hormones.

**Ovum:** a female reproductive cell; a single mature egg cell.

**Penis:** part of the male reproductive system; a tube-shaped organ made of soft tissues that can fill with blood; at the end of the penis is the tiny opening of the urethra.

**Period:** a menstrual period, the time during which menstruation occurs, usually lasting from two to seven days.

**Pituitary gland:** an organ that releases hormones into the bloodstream: located inside the skull at the base of the brain; the pituitary is sometimes called the master gland of the body, and is responsible for the beginning of puberty.

**Placenta:** a large flat organ that develops during pregnancy and is attached to the wall of the uterus; the fetus is attached to the placenta by the umbilical cord and receives nourishment and oxygen and eliminates wastes through the placenta.

**Pornography:** term used for films, internet sites, magazines, other written materials, and photographs that are sexually explicit (clear and obvious) and are intended to cause sexual arousal.

**Procreation:** the creation of a new human life; parents co-operate with God in the creation of a new life.

**Puberty:** the period of time during which the bodies of males and females develop and become fertile.

**Reproductive system:** the system of the body that allows people to have children (to procreate); the reproductive systems of males and females differ, and begin to mature at puberty.

**Scrotum:** part of the male reproductive system; the sac of skin behind the penis that holds the testicles outside the body.

**Semen:** the mixture of sperm cells and fluids that is ejaculated from the penis.

**Sexual:** having to do with sex or gender; being either male or female.

**Sexual identity:** (also called *gender* identity) a person's understanding of herself

as a female, or of himself as a male.

**Sexual intercourse:** an act which is intended to be a sign of the deep and committed love that exists between a husband and wife, and may result in the beginning of a new human life; during sexual intercourse the husband's penis fits inside the wife's vagina and at the time of ejaculation millions of sperm cells are released into the vagina and may travel into the uterus and fallopian tubes.

**Sexuality:** the maleness or femaleness of the whole person, body and spirit.

**Sexually transmitted infection (STI):** an infection that is spread primarily by intimate sexual contact.

**Sexual orientation:** the direction of a person's sexual attraction, for example, to people of the opposite sex or to people of the same sex.

**Sexual role:** (also called *gender* role) the way males and females are expected to behave in a particular society.

**Sperm:** the male reproductive cells produced by the testicles.

**Testicles:** part of the male reproductive system; two oval organs that are held outside the body inside the scrotum; the testicles produce sperm cells and the hormone testosterone.

**Trimester:** a term used to describe a three-month stage in a pregnancy; there are three trimesters in a normal pregnancy.

**Umbilical cord:** the rope of tissue that connects the fetus to the placenta through which the fetus receives oxygen and nourishment and eliminates wastes.

**Urethra:** a narrow tube through which urine passes out of the body from the bladder; the urethra is part of the male reproductive system since it is also the passageway through which semen is ejaculated.

**Uterus:** part of the female reproductive system; a hollow muscular organ inside the lower abdomen; the uterus is shaped like an upside down pear and is the

place where a new human life grows during pregnancy.

**Vagina:** part of the female reproductive system; the vagina is a muscular passageway which leads from the cervix (the bottom of the uterus) to the outside of the body. Together, the cervix and vagina are sometimes called the birth canal.

**Vas deferens:** part of the male reproductive system; two tubes that lead from tiny tubes inside the testicles, and move the sperm cells along inside the man's body.

**Vulva:** the term used for the external organs of the female reproductive system (the parts which cover the opening to the vagina).

**Zygote:** the term used for the new human life from conception until implantation.