

## Appendix A

# Questions! Questions!

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### Anonymous Question Box

The discussion of body changes during puberty lessons will raise many questions for students – questions that they may be reluctant to ask openly in the classroom.

The anonymous question box is an important tool that will increase students' ability to get the information they need.

The questions students ask will also assist the teacher to evaluate their learning.

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### Strategies to help the teacher and students use the question box:

- All ground rules discussed in class apply to the question box including:
    - do not use anyone's name in a question
    - no question is a stupid question
    - the teacher is the only person who will look at the questions in the box
    - there will be no questions of a personal nature
    - use whatever word you know if you don't know the dictionary word
  - Let students know when questions will be answered (e.g., at the beginning or end of each class, at the end of all sessions).
  - Discuss and decide with students an appropriate, secure place in the classroom to put the question box.
  - Reword any question that would disclose to other students the identity of the questioner.
    - e.g., "I've got the biggest breasts in class and kids tease me. What can I do?" - consider rewording to "Why do some kids tease other kids when they start to grow breasts and what can you do about it?"*
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### Four Broad Categories of Student Questions:

1. Requests for information
  - e.g., When does puberty start? How are babies made?

2. Students looking for facts

e.g., Am I normal? Is it okay to have a wet dream every night? I got my first period this summer and haven't had one since then – is something wrong?

3. Permission-seeking questions

*\* students are requesting information that will help them make decisions about their behaviour (e.g., permission to make decisions and not engage in certain activities)*

e.g., At what age can you start having sex? Is it okay to masturbate?

4. Social Location questions

*\* although some questions may seem shocking or inappropriate to some teachers, it is important to consider the social location of the student and what life experiences may have prompted this student to ask this question in this way. We recommend the teacher attempts to consider the underlying core of the question and try to speak to that.*

e.g., for a question such as "How many guys have you slept with?" consider that this student may be seeking information regarding the number of sexual partners that is permissive. An appropriate answer may be "individual adults make their own decisions about the number of sexual partners that they personally are comfortable with".

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## Other Information for Teachers

Students may ask questions that are an attempt to embarrass the teacher. Addressing the question in a straight-forward way diffuses the situation. For example, upon receiving the question "How many people have you had sex with?", the teacher can read the question and say "I won't answer that question. It is personal. We have ground rules in this class that say we will not ask personal questions. I can tell you that some people my age have never had sex; some have had sex with only one partner; some have had sex with many partners."

Each question can have an element of more than one group – it may seem shocking that a student in grade 5 would ask about blow jobs, but it may just be a simple request for information about something they have heard about but do not understand.

Some shock questions will be inappropriate for the classroom. Review the ground rules with students. If the language is shocking or inappropriate, reword the question. If the content of the question is inappropriate, indicate to the students that all questions in the box were not answered today. Then suggest that students speak to the teacher personally if they asked a question that was not answered and they still desire an answer for it.

If the question is a disclosure of sexual abuse (e.g. "Someone has been touching me down there."), reword the question to prevent students from trying to guess who asked the question. Change the question to "What happens if an adult touches a child's genitals?" or "What if an adult touches a young person in a sexual way?" In the answer, indicate that it is illegal for an adult or older teen to have sex with a child or make the child touch them in a sexual way. The adult or older teen that is touching someone inappropriately needs help. **It is never the child's fault.** Often the adult or older teen will tell the child they must keep it a secret. The child who is being touched or forced to do something must tell another adult that they trust, like a parent, teacher, or neighbour. They can also contact *Kids Help Phone* ([www.kidshelpphone.ca](http://www.kidshelpphone.ca) or 1-800-668-6868) for advice on how to get help.

Teachers should review their school board's policy about sexual abuse disclosure before beginning Human Development & Sexual Health classes.

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## Suggestions for Answering Questions:

Review the questions in the box ahead of time to prepare the answers. Consult other teachers, a public health sexual health promoter, or the AIDS & Sexual Health InfoLine (416-392-2437) if a question is difficult to answer.

Some teachers choose to use the following **Four Point Plan** in answering each question:

### 1. Self-Esteem

- encourage students to value themselves and to respect others
- remember, the way that a teacher answers a question will show that the question is valued and the person who asked it is respected (e.g. "This is a great question. I'm glad someone asked it.")

### 2. Facts

- state the facts about the question
- dispel myths
- if you do not know the answer, do research to find the answer

### 3. Values

- on many sexual health issues, value and opinions vary greatly (e.g., abortion, non-marital sex, homosexuality)
- answer questions in a way that enhances respect for self and others, and teaches students that it is okay to have different views

### 4. Responsibility

- students' actions have consequences for both themselves and others
- students are responsible for their own actions
- students are learning to take responsibility for their own health and wellness

## Example of Answering a Question with the Four Point Plan

*"Is it okay to touch your genitals?"*

"I am glad someone asked this because a lot of students wonder about this. (*self-esteem*)

Many young people and adults do this. It cannot hurt you. Touching the privates or genitals is called self-pleasuring, or masturbation. (*facts*)

Some people, cultures, and religions teach that touching the genitals for pleasure is wrong, and some believe it is okay. (*values*)

Touching your genitals is a private activity that may make a person feel good. It should be done only in a private place like a bedroom, and hands should always be washed afterwards. (*responsibility*)"

# Glossary

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**ableism** discrimination in favour of able-bodied people

**aggressive communication**

a communication style in which someone expresses their needs or desires in a way that disrespects, puts down, or violates the rights of others

**anus** the opening through which stool (feces/poop) leaves the body (*note: the anus is part of the digestive system, not part of the reproductive system*)

**assertive communication**

a communication style that is respectful of the other person while standing up firmly for yourself

**assisted reproductive technologies**

a general term referring to methods used to achieve **pregnancy** by artificial or partially artificial means; includes AI (artificial insemination), IVF (in vitro fertilization), ICSI (intracytoplasmic sperm injection), IUI (intrauterine insemination)

**bisexual** when a person is attracted to, or sexually interested in, people of both genders (male and female)

**bladder** hollow, muscular organ in the pelvis that collects urine before it exits the body through the **urethra** (*note: the bladder is part of the urinary system, not part of the reproductive system*)

**breasts** glandular organs located on the chest; at **puberty**, if sufficient **estrogen** is produced, milk glands and ducts develop for the possibility of feeding offspring

**cervix** the lower part of the **uterus**, with an opening into the **vagina**; the cervix must dilate open to accommodate the birth of a baby

**classism** prejudice against or in favour of people belonging to a particular social class

**clitoris** a sex organ that is located between the **labia** at the upper end of the **vulva**; the only function of the clitoris is pleasure

## **circumcision**

surgical procedure that removes the foreskin of the **penis**

## **cis**

(short for cisgender) a term used when a person does not change or does not want to change their gender or sex; the male feels like a boy or man, and the female feels like a girl or woman

## **conception**

the moment that a **sperm** and an **ovum** unite

## **crush**

slang term meaning 'a temporary affection'; often unidirectional

## **damp dreams**

a release of vaginal fluid while sleeping

## **diversity**

the many unique characteristics that people possess to distinguish them as individuals

## **ejaculation**

the act of fluid coming out of the **genitals** during **orgasm**; this can happen during sex, **masturbation/self-pleasuring**, or while asleep (**nocturnal emission**)

## **embryo**

the multicellular group of cells that develop into a **fetus** (from **conception** to 8 weeks)

## **erection**

when blood flows into the spongy tissue of the **penis**, making it harder and larger

## **estrogen**

a sex **hormone** made mainly in the **gonads**; it causes body changes during **puberty**

## **FGM (female genital mutilation)**

term that comprises all procedures that involve partial or total removal of the external female genitalia, or other injury to the female genital organs for non-medical reasons<sup>1</sup>

## **fallopian tube**

tube that the **ova** pass through as they move from the **ovaries** to the **uterus**

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<sup>1</sup> World Health Organization. (2015). Female genital mutilation. Retrieved from [http://www.who.int/topics/female\\_genital\\_mutilation/en/](http://www.who.int/topics/female_genital_mutilation/en/)

## **fertilization**

the joining of a **sperm** cell and an **ovum**; if the fertilized ovum gets to the **uterus** and implants inside, then **pregnancy** begins

## **fetus**

the unborn offspring of a mammal, from 8 weeks until birth

## **foreskin**

loose skin that covers the tip of the **penis**

## **gay**

when a male is attracted to, or is sexually interested in, other males. Gay can also be used to describe women attracted to someone of the same gender, although **lesbian** is the more common term for women

## **gender**

the social difference between men and women that is learned, and though deeply rooted in every culture, is changeable over time, and has a wide variation within and between cultures<sup>2</sup>

## **genderqueer**

a person who does not subscribe to conventional **gender** distinctions, but identifies with all, none, or a combination of genders

## **gender creative**

conveys a wider, more flexible range of gender expression, with a range of interests and behaviors; expanding beyond traditional gender stereotypes; this term reinforces the notion that gender is not a binary, but a continuum; and that many children and adults express their gender in multiple ways<sup>3</sup>

## **gender identity**

a person's internal sense or feeling of being male or female which may or may not be the same as one's biological sex

## **gender independent**

a term used for children whose gender expression is different from societal expectations related to gender<sup>4</sup>

## **genitals**

sex organs located on the outside of the body, including the **vulva**, **clitoris**, **penis**, and **scrotum**

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<sup>2</sup> Elementary Teachers' Federation of Ontario. (2007). Roots of equality: Gender-based violence (GBV): Workshop for grade 7 & 8 girls. Retrieved from <http://www.etfo.ca>

<sup>3</sup> Welcoming Schools: A project of the Human Rights Campaign Foundation. (2012). A few definitions for educators and parents/guardians. Retrieved from <http://www.welcomingschools.org/pages/a-few-definitions-for-educators-and-parents-guardians>

<sup>4</sup> My Purple Umbrella. (2015). Gender terminology. Retrieved from [www.mypurpleumbrella.org/gender-terminology/](http://www.mypurpleumbrella.org/gender-terminology/)

**gonads** the **testicles** and **ovaries**

**heterosexual**

when a person is attracted to, or sexually interested in, someone of the opposite gender

**homophobia**

dislike or prejudice against **homosexual** people

**homosexual**

when a person is attracted to, or sexually interested in, someone of the same gender

**hormones** chemical messengers made in the body – **estrogen**, **progesterone**, and **testosterone** are the sex hormones that start the changes of puberty

**internet safety**

the security of people and their information when using the world wide web (also known as cyber safety)

**intersex** a general term used for a variety of conditions in which a person is born with a reproductive or sexual anatomy that does not seem to fit the typical definitions of female or male<sup>5</sup>

**labia**

the inner and outer folds (lips) of skin that surround the vaginal opening; the outer pair is larger and hair grows on them, while the inner pair is smaller and made of a mucous membrane. These folds of skin help cover and protect the **vagina** and the **urethra**

**lesbian**

when a female is attracted to, or sexually interested in, other females

**LGBTQ**

acronym for Lesbian, Gay, Bisexual, Trans\*, Queer or Questioning; people often use LGBTQ to mean all of the communities included in the acronym LGBTTTQQIAA (Lesbian, Gay, Bisexual, Transgender, Transsexual, Two-Spirit, Queer, Questioning, Intersex, Asexual, Ally)

**masturbation**

touching or rubbing the genitals for pleasure (also known as **self-exploration** or **self-pleasuring**)

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<sup>5</sup> Intersex Society of North America. (2008). Frequently asked questions. Retrieved from [www.isna.org/faq](http://www.isna.org/faq)



**menstruation**

the periodic discharge of bloody fluid from the **uterus** (also known as a period)

**menstrual cup**

a reusable silicone cup, worn internally to collect menstrual flow

**nocturnal emission**

an **ejaculation** of **semen** when sleeping (also known as a **wet dream**)

**orgasm**

an intense, pleasurable whole body feeling that happens at the height of sexual excitement

**ovary**

**gonad** that stores **ova** (see ovum) – most female bodies have two ovaries (one on each side of the **uterus**) at the ends of the **fallopian tubes**

**ovulation**

when an **ovum** is released from the ovary – usually 14 days before the next period of **menstruation**

**ovum**

the female reproductive cell – stored in the **ovaries** and released on a monthly cycle (also known as 'egg cell')

**passive communication**

a communication style in which someone avoids expressing their feelings or opinions and standing up for themselves

**penis**

the sex organ on the outside of the body between the legs – made of soft, spongy tissue and blood vessels; the penis is very sensitive and can give a feeling of pleasure when it is touched

**pituitary gland**

small, pea-shaped organ at the base of the brain; responsible for growth and for producing **hormones** that communicate with other glands – during **puberty**, it causes the **testicles** and **ovaries** to produce hormones responsible for the developmental changes

**pregnancy** the period of time from **conception** to birth

**progesterone**

a sex **hormone** made mainly by the **ovaries**; it causes body changes during **puberty**

**prostate**

a gland below the **bladder** in males which releases **seminal fluid**

- puberty** the period of change and development when children's bodies start to mature and become adult-like
- pubic hair** the hair that grows around the **genitals** starting at **puberty**
- rectum** the final section of the large intestine, ending at the **anus** (*note: the rectum is not part of the reproductive system, but is part of the digestive system*)
- scrotum** the soft sac of wrinkled skin that covers and protects the **testicles**
- self-esteem**  
a person's overall sense of worth or personal value
- self-exploration**  
touching or rubbing the sex organs for pleasure (also known as **masturbation**)
- self-pleasuring**  
touching or rubbing the sex organs for pleasure (also known as **masturbation**)
- semen** the whitish, sticky fluid that contains **sperm** and comes out of the **penis** during **ejaculation**
- seminal fluid**  
the fluid component of semen, excluding the sperm
- seminal vesicles**  
a pair of small tubular glands that produce seminal fluid
- sexual intercourse**  
often refers to penetrative sex involving the **penis** and **vagina**, but can mean any type of sexual activity that involves the penetration of an orifice including the mouth (oral sex) or anus (anal sex)
- sexual interference**  
when a person under the age of 16 is touched for sexual purposes
- sexual orientation**  
describes whether a person is attracted to someone of the same gender, opposite **gender**, or both; **sexual orientation** may or may not change over time (**homosexual**, **heterosexual**, or **bisexual** are terms often used to describe someone's sexual orientation)

**sperm** the male reproductive cell – made and stored in the **testicles**

### **spermatogenesis**

**sperm** production – this process begins when a male is part way through **puberty** (after the growth spurt and growth of the genitals and **pubic hair**/underarm hair)

**testicles** the two small egg-shaped organs where **sperm** are produced and stored; protected inside of the **scrotum** and located behind the **penis**

### **testosterone**

a sex **hormone** that is made mostly by the **gonads**; it causes body changes at **puberty**

### **toxic shock syndrome**

a rare, life-threatening illness caused by toxins made by bacteria – tampons left inside of the body too long are associated with these bacteria

### **trans\***

a term used when a person does change or does want to change their gender or sex. This may include transsexual people who want to change their physical body through hormones or surgeries, transgender people whose gender changes but not necessarily their body, and **genderqueer** people who see themselves as a combination of both masculine and feminine or neither

### **transphobia**

dislike or prejudice towards trans\* people

### **Two-Spirit**

an English term coined to reflect specific cultural words used by First Nation and other indigenous peoples for those in their cultures who are gay or lesbian, are trans\*, or have multiple gender identities; historically, Two-Spirit persons were spiritual leaders and healers and were revered by their community<sup>6</sup>

### **urethra**

the small tube that carries urine from the **bladder** to the outside of the body; the urethra is usually located either at the tip of the **penis** or just above the opening to the **vagina** (below the **clitoris**) (*note: in male bodies, the urethra is part of the reproductive system and urinary system*)

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<sup>6</sup> Toronto District School Board, Gender Based Violence Prevention. (2014). Definitions. Retrieved from <http://www.tdsb.on.ca/AboutUs/Innovation/GenderBasedViolencePrevention/LinksandResources.aspx>

- uterus** the hollow, muscular organ that is found inside the lower pelvic area; it is connected to the **fallopian tubes** and opens into the **vagina** via the **cervix**. This is the place where a **fetus** grows during a **pregnancy**
- wet dream** a release of **semen** and **seminal fluid** from the **penis** while sleeping (also known as **nocturnal emission**)
- vagina** muscular, tunnel-like organ that leads from the opening in the **vulva** to the **cervix**
- vas deferens** tubes that allow **sperm** to travel from the **testicle** to the **urethra**
- vulva** external **genitals**, including the **labia** and the **clitoris**
- zygote** the cell formed by the union of the ovum and sperm, that may divide and grow into an embryo and eventually a fetus

## Appendix C: Facial Expressions (1)



## Appendix C: Facial Expressions (2)



## Appendix C: Facial Expressions (3)



## Appendix C: Facial Expressions (4)





## Appendix C: Facial Expressions (5)



## Appendix C: Facial Expressions (6)



## Appendix C: Facial Expressions (7)



## Appendix C: Facial Expressions (8)



## Appendix D: Feelings List

### Feelings List

disturbed  
shocked  
uncomfortable  
impatient  
heartbroken  
miserable  
moody  
frightened  
embarrassed  
bored  
horrificed  
anxious  
helpless

uninterested  
surprised  
uneasy  
irritated  
hurt  
sad  
panicked  
crushed  
ashamed  
resentful  
upset  
nervous  
confused

restless  
troubled  
unsettled  
angry  
lonely  
depressed  
gloomy  
disappointed  
distracted  
disgusted  
lost  
hesitant  
pain

frustrated  
aggravated  
annoyed  
worried  
terrified  
unhappy  
joyless  
afraid  
guilty  
tired  
tense  
stressed out  
jealous

affectionate  
sympathetic  
curious  
intrigued  
content  
delighted  
safe  
eager  
passionate  
fulfilled  
relieved  
rested  
hopeful

compassionate  
tender  
thrilled  
confident  
joyful  
empowered  
secure  
energetic  
peaceful  
mellow  
satisfied  
revived  
encouraged

friendly  
warm  
fascinated  
merry  
glad  
open  
excited  
lively  
calm  
quiet  
trusting  
involved  
optimistic

loving  
alert  
interested  
good-humoured  
cheerful  
proud  
amazed  
enthusiastic  
comfortable  
relaxed  
renewed  
stimulated  
surprised

## ASSERTIVE COMMUNICATION

*Assertive Communication Formula:*

I feel \_\_\_\_\_ when \_\_\_\_\_ and I want \_\_\_\_\_.

*Example: I feel upset when I'm made fun of and I want you to stop.*

Directions: Using the assertive communication formula write an assertive statement for each situation.

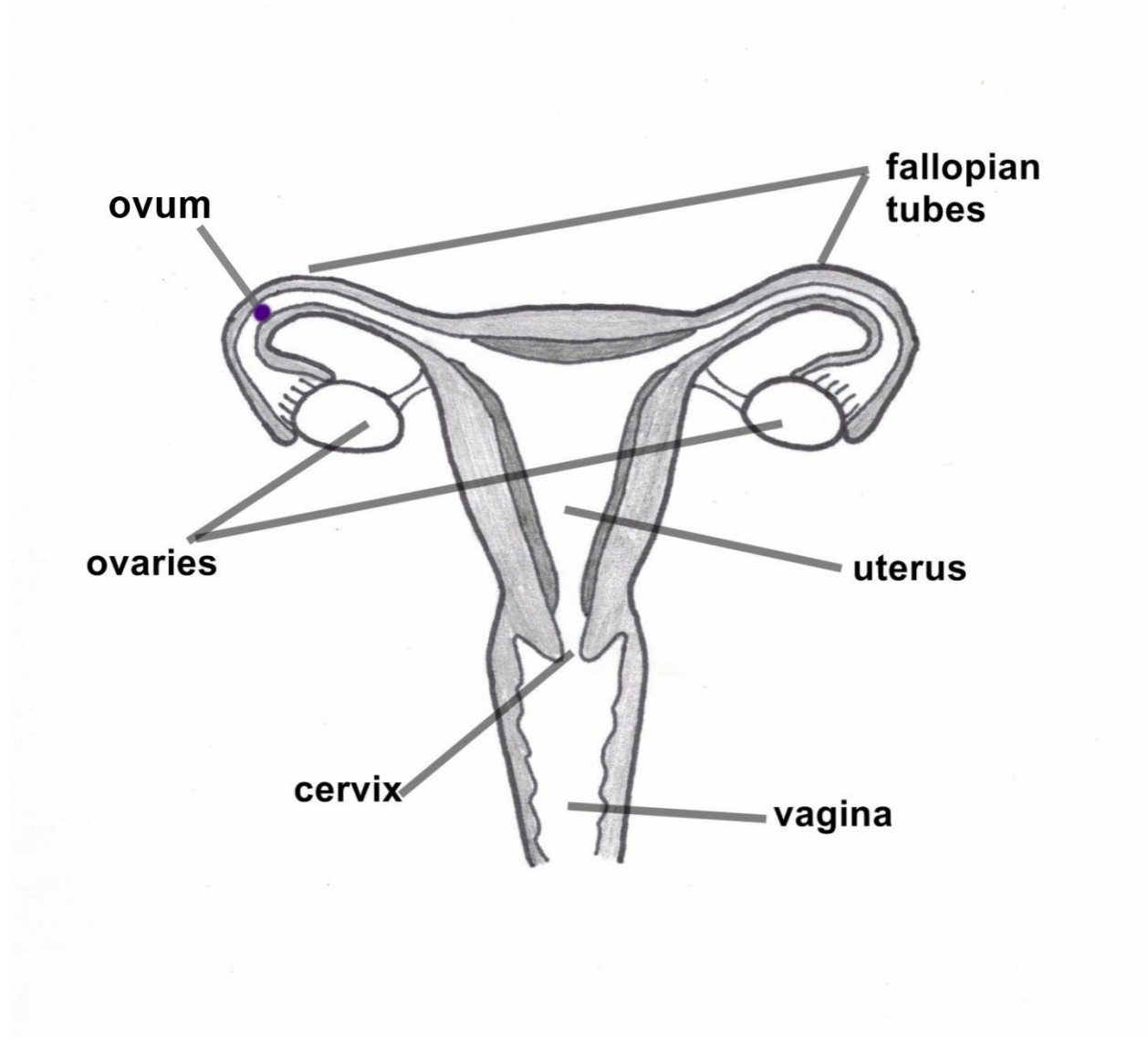
1. Your sister is playing her music too loud.
  
  
  
  
  
  
  
  
  
  
2. Your cousin is always blaming you for leaving the door open but, you know you didn't do it.
  
  
  
  
  
  
  
  
  
  
3. A friend calls you stupid when you make a mistake.
  
  
  
  
  
  
  
  
  
  
4. A friend keeps borrowing your new marker without asking.

## Appendix F: Gender Activity



## Internal Female Reproductive Organs

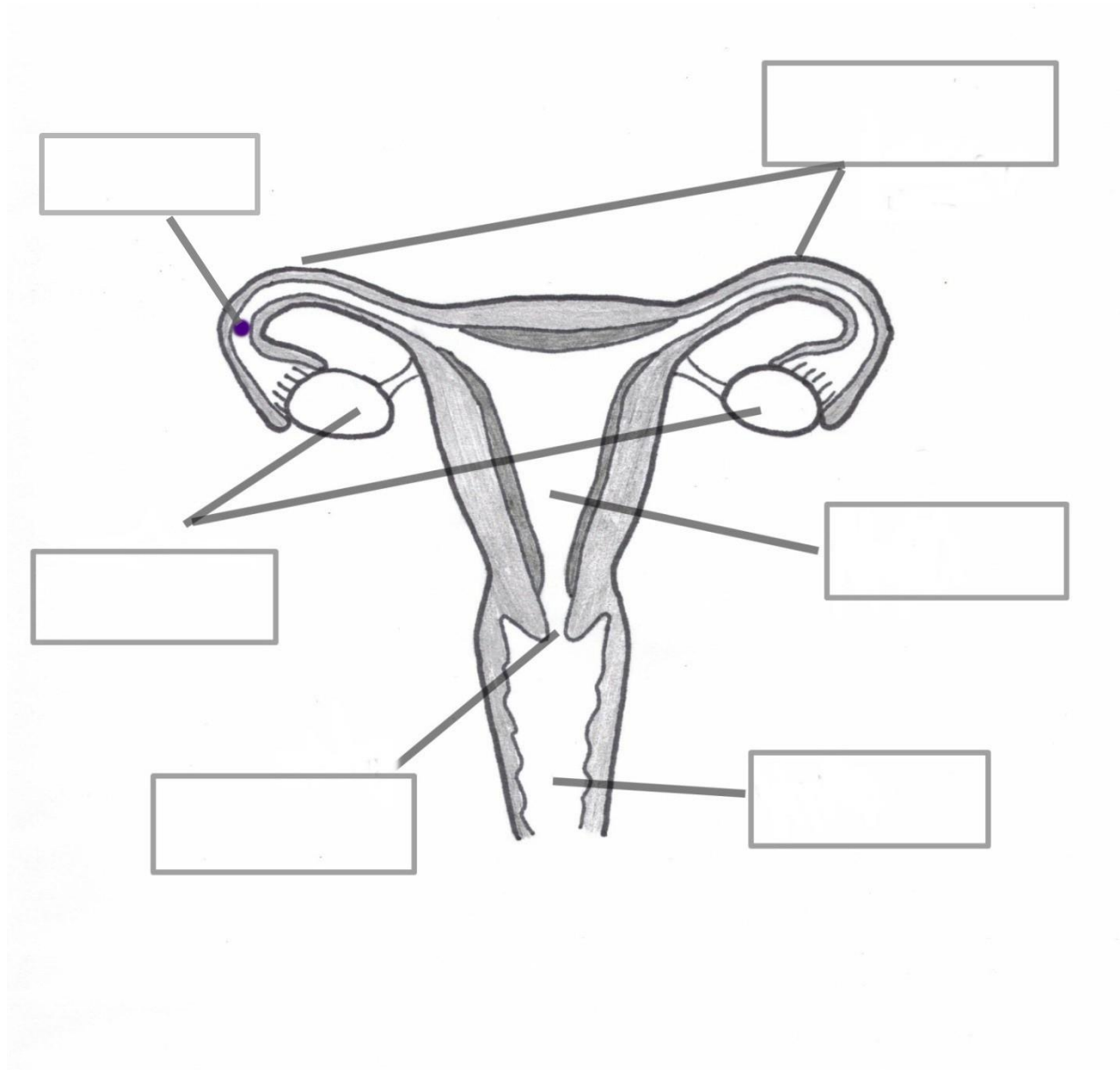
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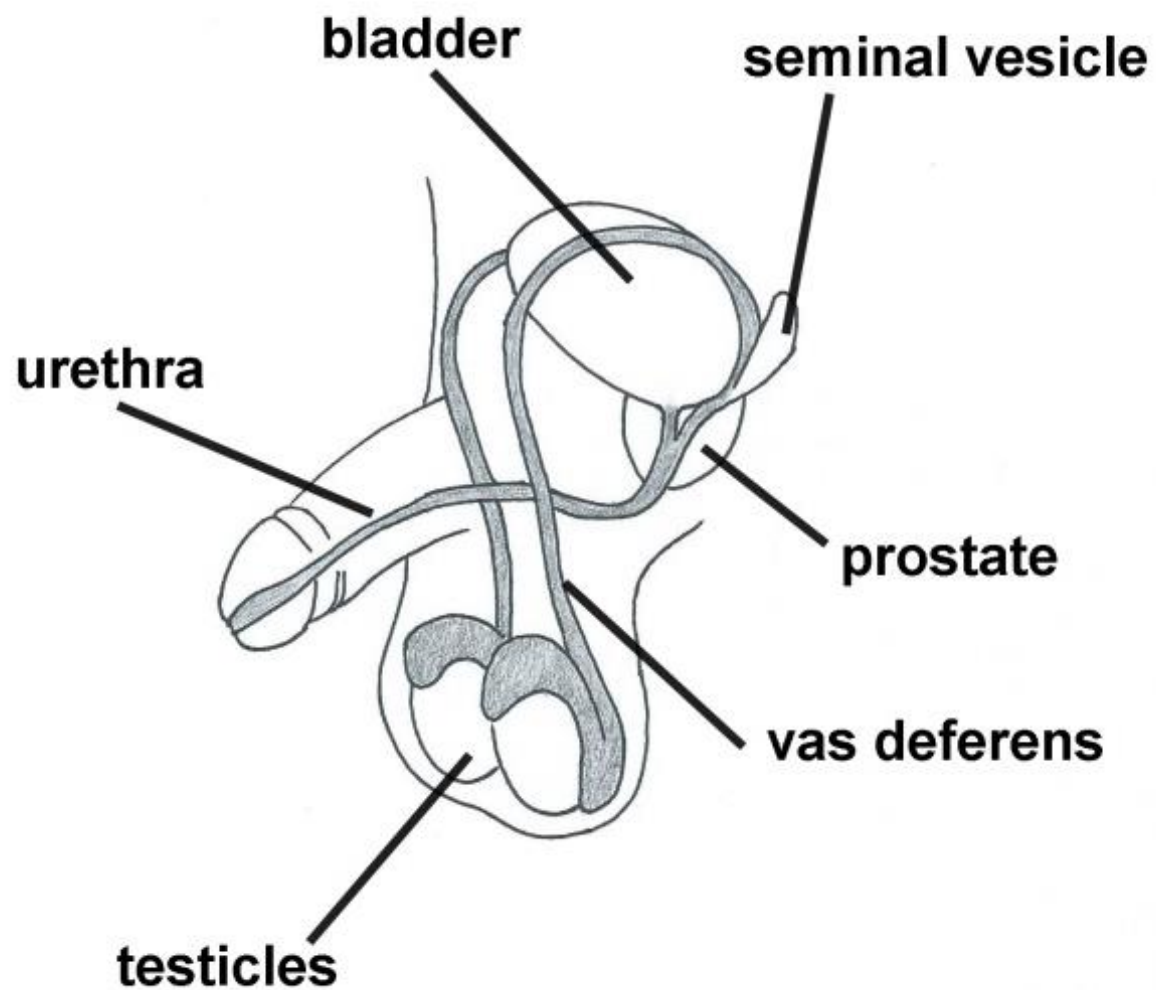
## Internal Female Reproductive Organs

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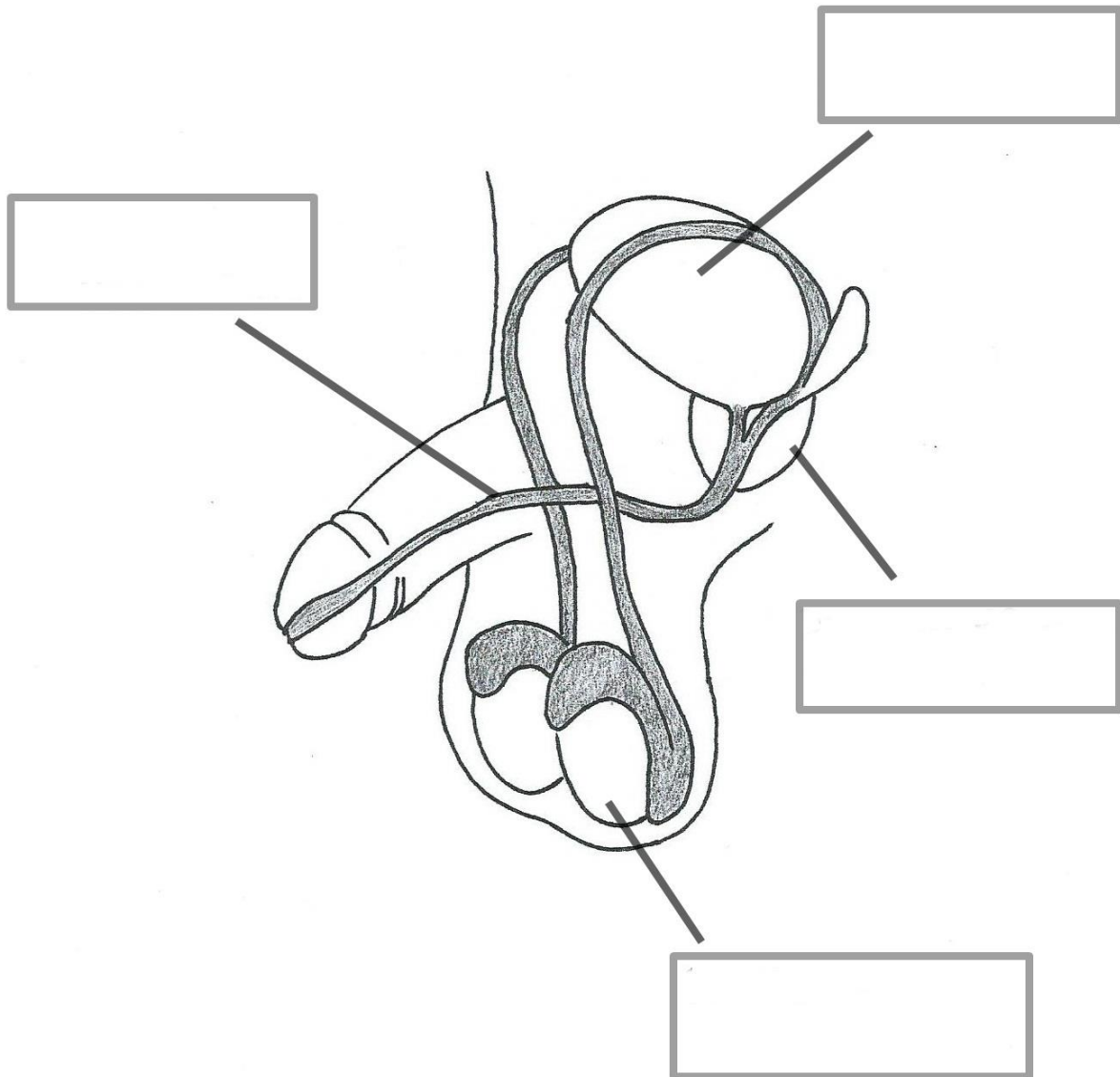
## Internal Male Reproductive Organs

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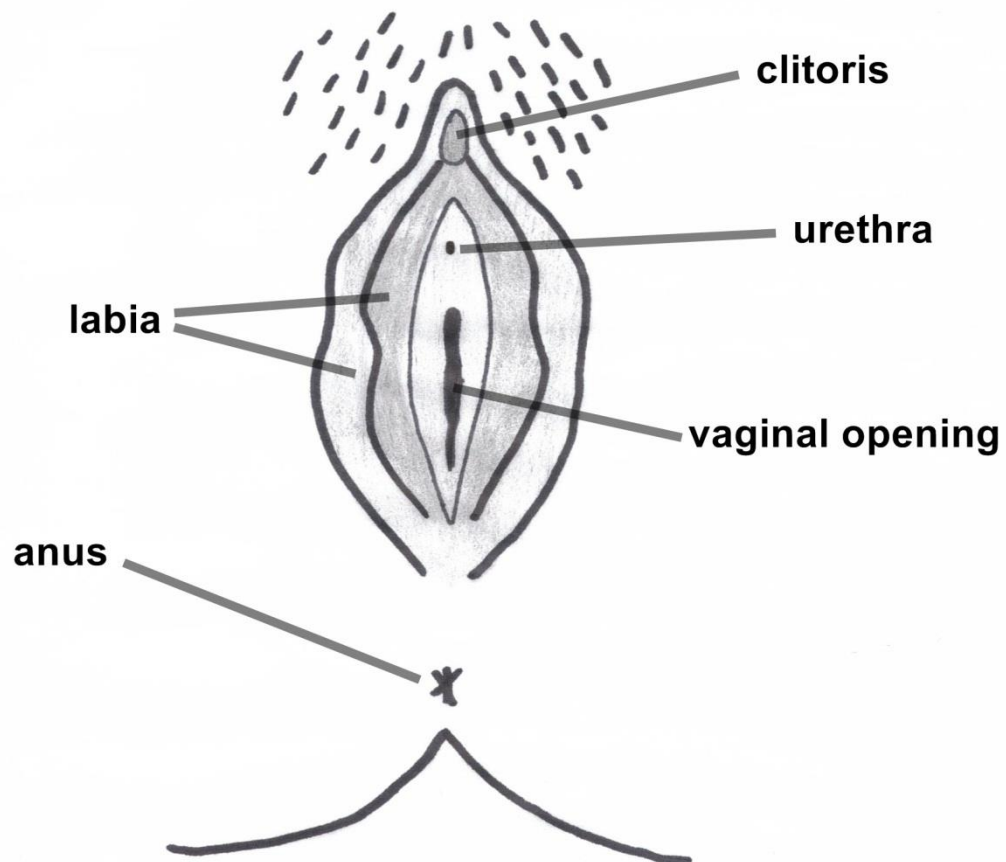
## Internal Male Reproductive Organs

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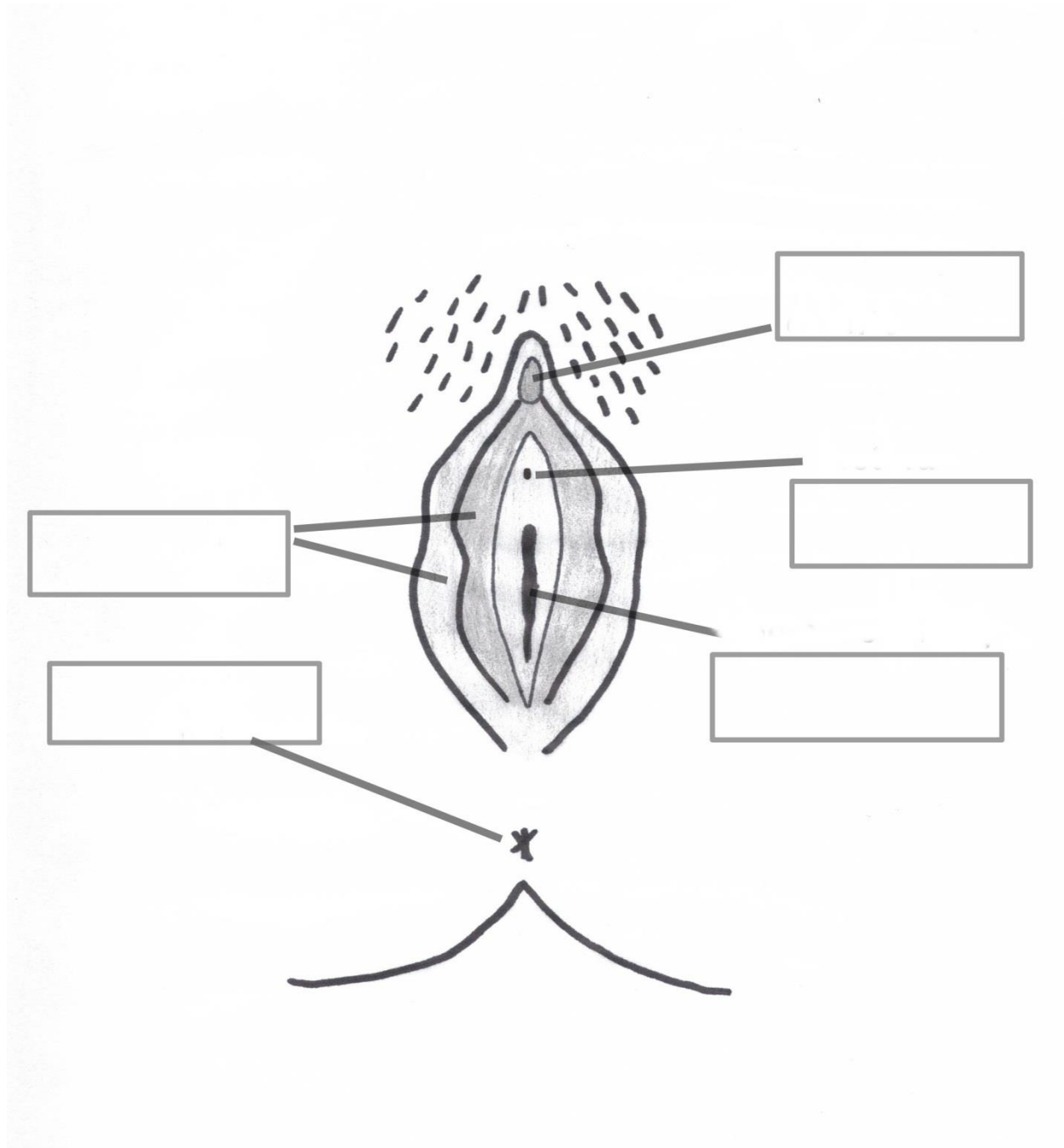
## External Female Reproductive Organs

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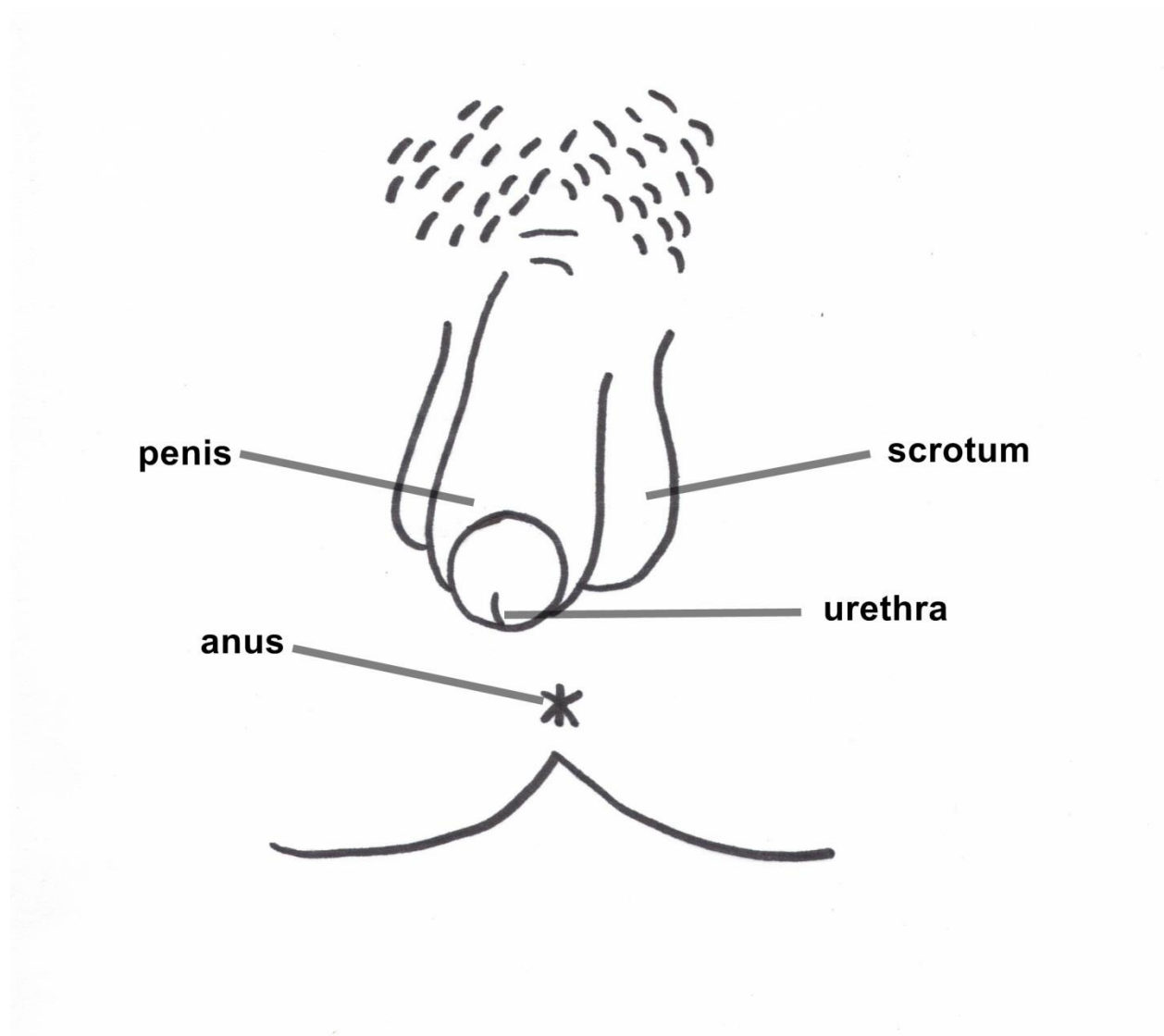
## External Female Reproductive Organs

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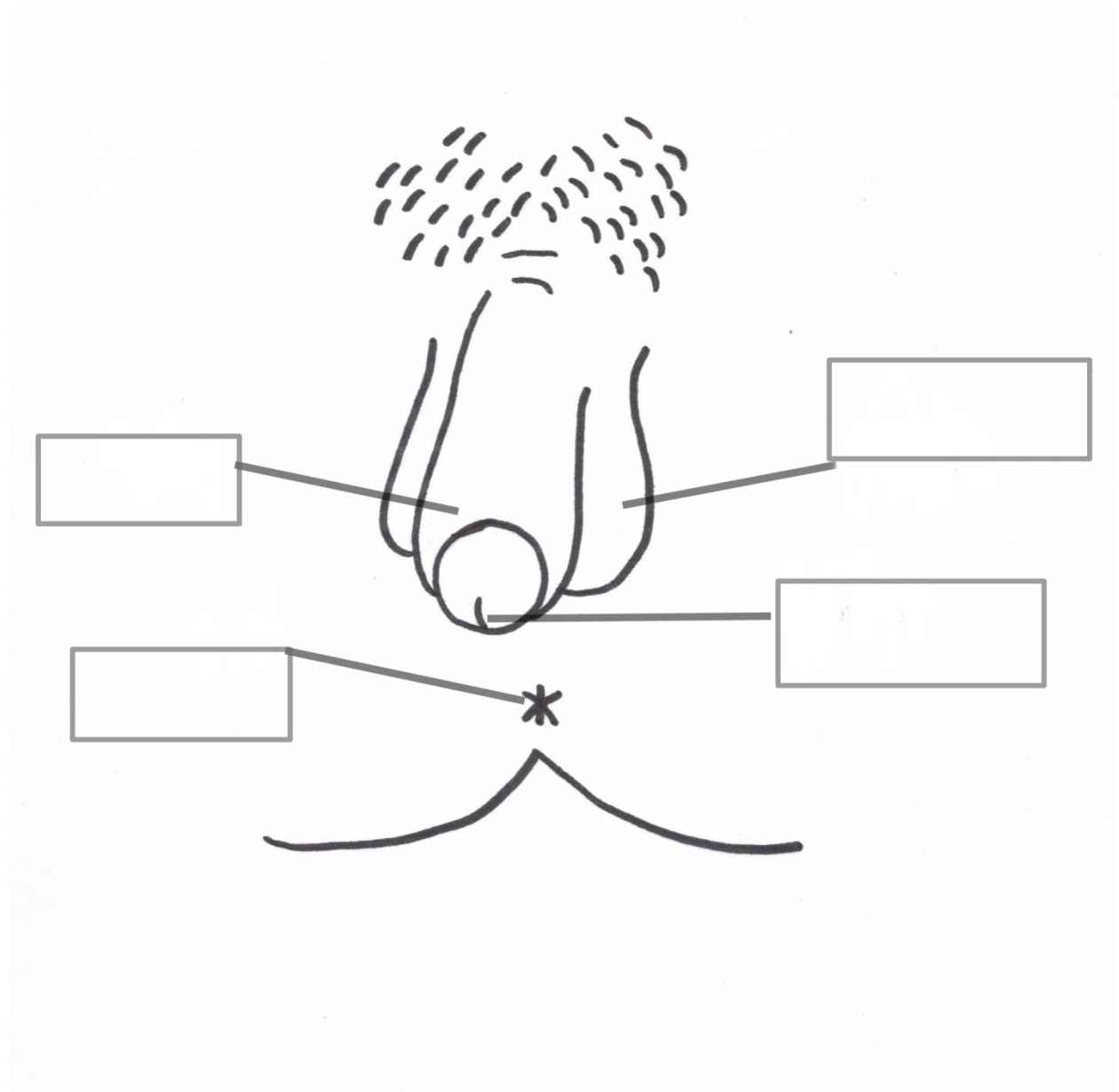
## External Male Reproductive Organs

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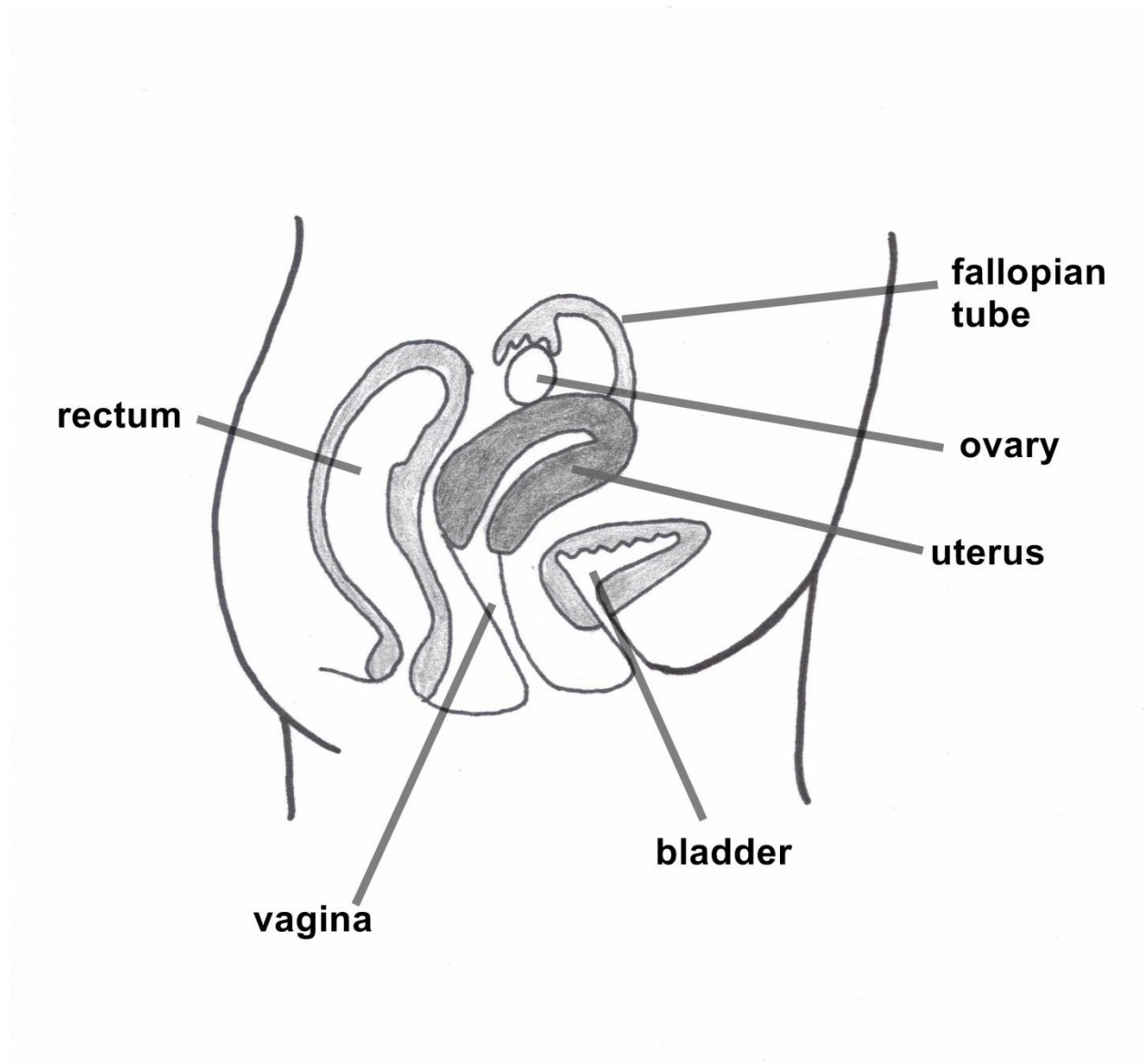
## External Male Reproductive Organs

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## Internal Female Reproductive Organs

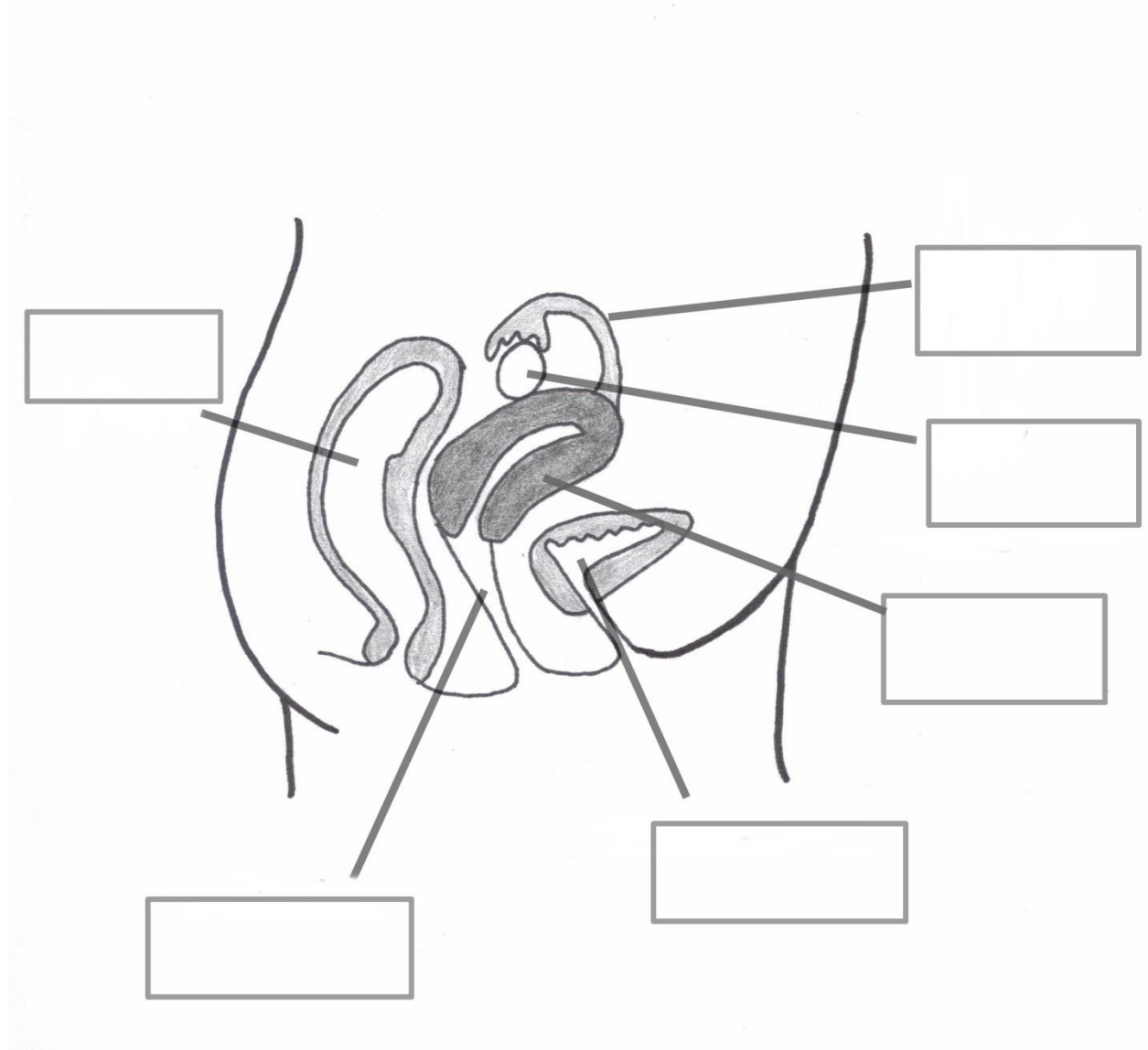
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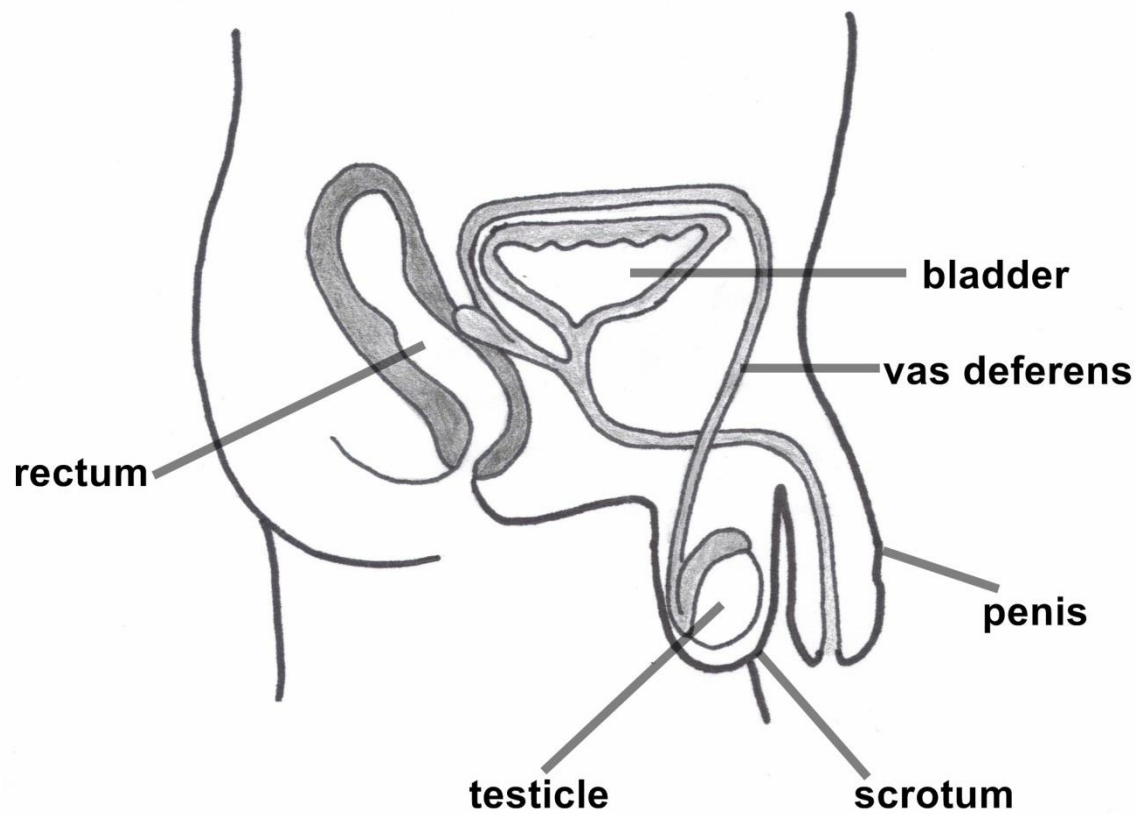
## Internal Female Reproductive Organs

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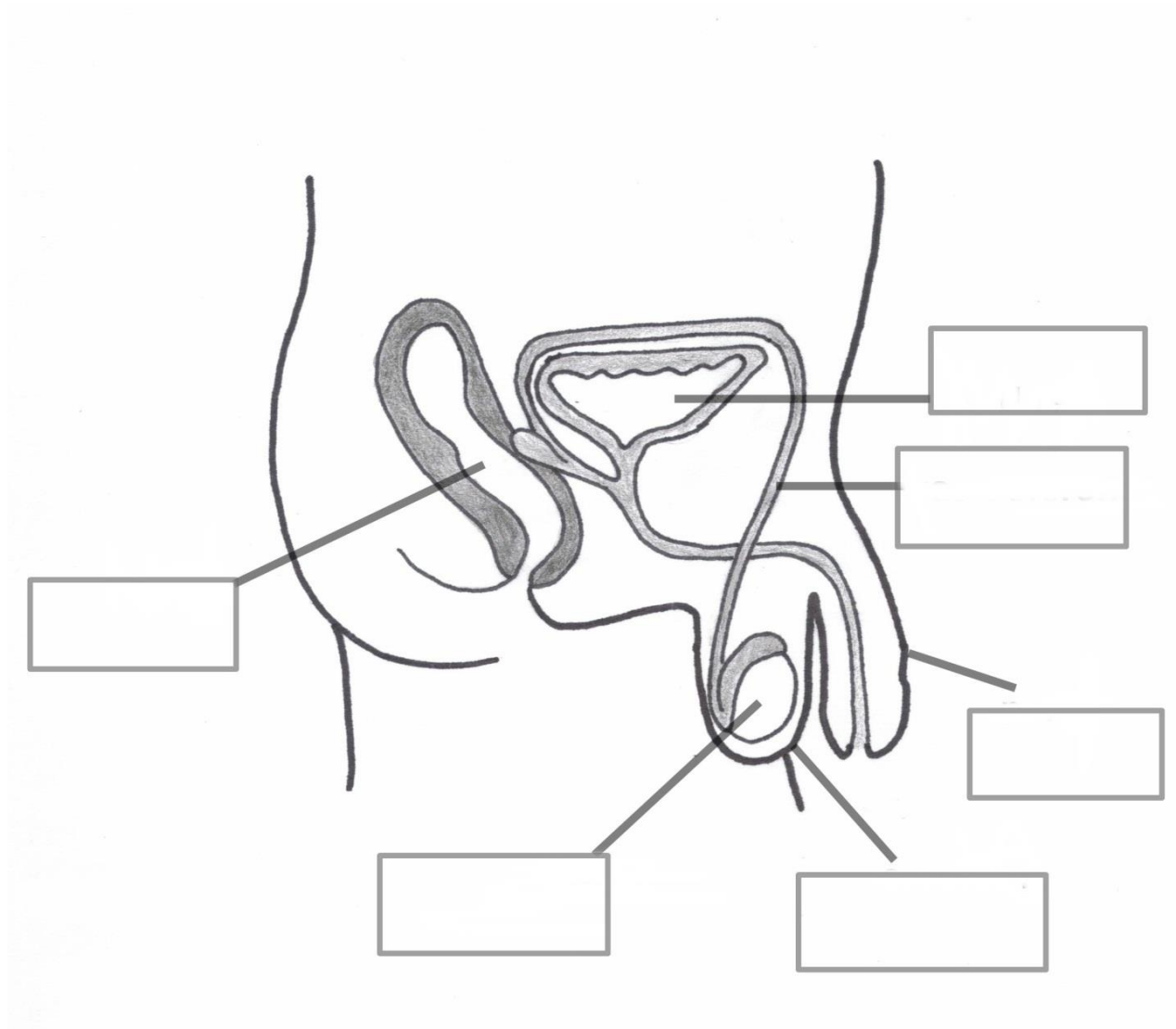
## Internal Male Reproductive Organs

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## Internal Male Reproductive Organs

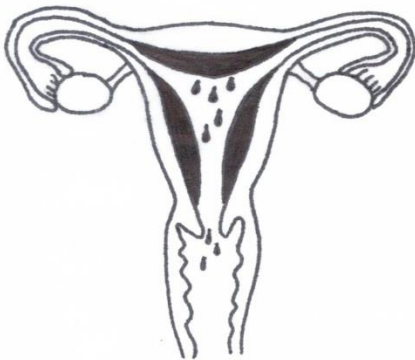
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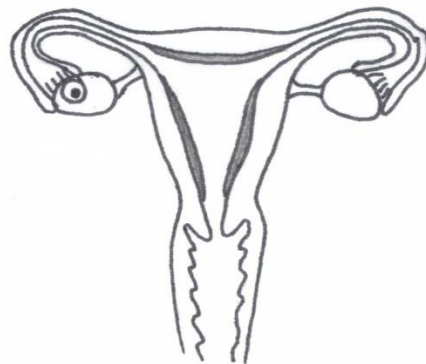
## The Menstrual Cycle

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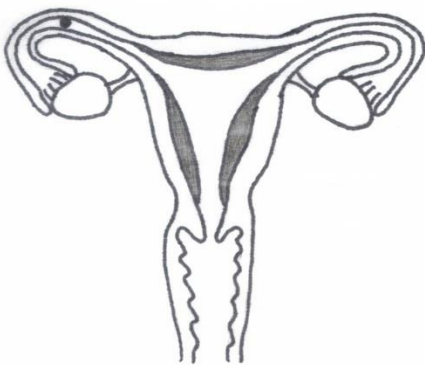
**Week 1**



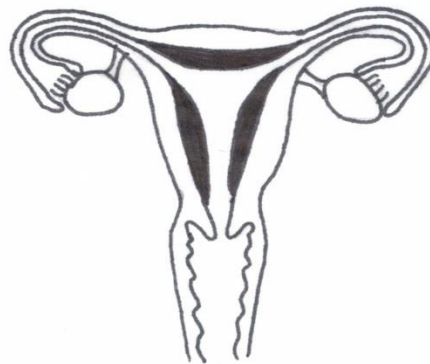
**Week 2**



**Week 3**

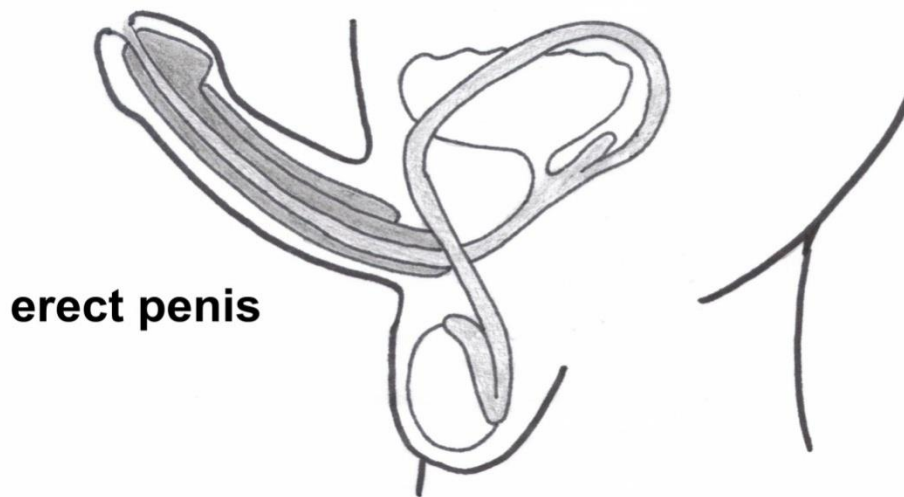


**Week 4**



# Penis

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## LETTER FROM CHRIS

My name is Chris and I want to tell you what's happening to me. It seems like every day brings a new change. It's almost like I'm getting a new body! They tell me I'm going through puberty.

One of the things that's happening is this new hair that's growing in places it's never been before. Like under my arms. I know this is supposed to happen and all, but it still takes getting used to.

I don't mind some of the changes I'm seeing. In fact, some things I even like. I'm taller than I was last year. I know I'm smarter just because I'm able to think and write about what I'm going through now.

But then, there are some changes that aren't so great. Like B.O. (body odour). The first time I noticed it, I thought it was coming from someone else! Now I realize it's not too bad if I wash often, use deodorant, and change my shirts and socks before they get stinky!

A really dirty trick, though, is acne. I remember I was getting ready to go to a party when I looked in the mirror and saw this big zit staring back at me! I went to the party anyway. I noticed that many other kids had the same or a worse time with their zits.

There's one thing I get kind of embarrassed about. When I was at the party the other night, I was with someone I "like" (I'm not mentioning any names). I got this funny feeling "down there." It was strange, but felt good at the same time. I wonder if that's normal.

They tell me I'm going through puberty. That means I have to go to school with my zits and B.O. But, I'm taller and smarter. I guess I'll survive.

Positive Spaces

harassment



## How to Handle Harassment in the Hallway\*

It is vital to stop harassment immediately! Remember that homophobic, transphobic and gender-based put-downs and actions hurt everyone. Homophobic, transphobic, and gender-based put-downs and actions are bullying. Bullying hurts the person targeted, the witnesses, and the person bullying. Act right away! Do not let harassment—verbal or physical—go on for even a minute. Make it clear that **Harassment Is Never Okay!**

### **STOP the harassment or hurtful behaviour**

- Interrupt the hurtful behaviour or comment.
- Make sure everyone in the vicinity can hear you. You want everyone—all the youth and adults nearby—to know that *all* young people are safe in this place.
- Do **NOT** pull the student aside for a confidential discussion—stopping the harassment should be as public as the harassment has been.

### **IDENTIFY the harassment. NAME the hurtful behaviour.**

- Label the behaviour: "You just put someone down based on perceived (sex, race/ethnicity, sexual orientation, gender identity or expression, age, health status, etc.)" Or, "You just shoved someone."
- Put the spotlight on the behaviour. Do **NOT** say anything to imply that the person being harassed belongs to the group just named. Everyone needs to understand that what was said or done is unacceptable.

### **EXPLAIN why the behaviour is hurtful and prohibited.**

- Identify the offense and its consequences: "Homophobic name calling is hurtful to everyone who hears it. At this school, we respect everyone and are responsible for the impact of our words/behaviours."

### **ASK for a change in future behaviour.**

- Personalize the response: "Chris, please think about what you say. This language isn't what we would have expected of you."
- Quietly, check in with and reassure the person who was harassed: "Are you okay? Do you want to talk with me or someone else? Please let me know if this happens again, and I will take further action. Everyone should feel safe and be safe here. What happened was totally unacceptable, and you are very important to all of us."



## Appendix J

### **It's Your Duty!** **A Guide to Reporting Child Abuse & Neglect**

The Child and Family Services Act (Section 72) states that members of the public, including professionals who work with children, must promptly report any suspicions that a child is or may be in need of protection to a Children's Aid Society. A person has an ongoing duty to report when there are additional reasonable grounds to suspect abuse or neglect, or risk of abuse or neglect, even if he or she has made previous reports with respect to the same child.

The Toronto District School Board's Policy, P045 Dealing with Abuse and Neglect of Students states that all staff must report immediately to a Children's Aid Society any concerns, suspected concerns, disclosures, or third party reports relating to any incidents of abuse or neglect for all students. In addition, PR560 Dealing with Abuse and Neglect of Students, Section B.3, provides guidance on reporting concerns of abuse or neglect for students over the age of 16.

#### **What do I report? (For full definitions see PR560, Section 2.0)**

**PHYSICAL ABUSE** includes all acts by a caregiver that results in physical harm to a child.

**SEXUAL ABUSE** occurs when a person uses his/her power over a child and involves a child in any sexual act. This sexual act is intended to gratify the needs of the abuser. Touching is not the only criteria in defining sexual abuse.

**EMOTIONAL ABUSE** is a pattern of overt rejecting, isolating, degrading, terrorizing, corrupting, exploiting, denying emotional responsiveness, and punishing a child's attempts to interact with the environment.

**NEGLECT** is the chronic inattention or omission on the part of the caregiver to provide for the basic emotional and/or physical needs of the child, including food, clothing, nutrition, adequate supervision, health, hygiene, safety, medical and psychological care and education. The child who does not receive adequate emotional, cognitive and physical stimulation, physical care and nutrition may experience lags in development. (Child neglect may be easily confused with poverty or ignorance, or may be associated with parents who are overwhelmed with other problems. However, because chronic neglect results in physical and emotional harm to a child, it cannot be ignored, whatever its cause).

**EXPOSURE TO FAMILY VIOLENCE** includes witnessing or hearing violent acts or threats of physical, sexual, or emotional harm between intimate partners or family members. This may include direct involvement or experiencing any aftermath. (All incidents of family violence must be reported. The child does not have to be present to be impacted by it).



### **What do I do when I suspect abuse or neglect?**

Do not investigate. You may need to clarify the nature of the complaint. If this is a third party disclosure, do not interview the victim. The responsibility to report lies with the employee or volunteer who suspects abuse or neglect. Do not discuss your concerns prior to making the call to a Children's Aid Society.

### **What if I'm unsure if I should make a report to a Children's Aid Society?**

If you are in doubt about whether or not to make a report, consult a Children's Aid Society intake worker. They will decide if you need to make a report.

### **What do I do when I report abuse or neglect to a Children's Aid Society?**

When making the call be objective and non-judgmental when describing what you have seen or heard or what your suspicion is based upon.

### **What should I ask when I contact a Children's Aid Society?**

1. Will an investigation be undertaken as a result of the report? If yes, who, how and when should the parents be contacted?
2. Will the student be interviewed?
3. Do the investigators plan to come to the school or home? When? Will they be investigating or only consulting?
4. May the student go home at lunch or after school? If the student attends child care, can they be released to the child care? What information can be shared with the child care?
5. Are there any instructions for the supervision/release of the student? What happens if the parent/guardian arrives at the school?
6. What, if any, information should be shared with the student and/or family about having made the referral?
7. What is the name and number of the Children's Aid Society worker?
8. Will my name be disclosed?

<b>Children's Aid Societies:</b>	
Catholic Children's Aid Society (416) 395-1500	Jewish Family & Child Services (416) 638-7800
Children's Aid Society (416) 924-4646	Native Child & Family Services (416) 969-8510

### **What are my next steps?**

- Inform the principal or supervisor that you have reported abuse or neglect to a Children's Aid Society or Police.

## Complete the following forms:

- ☒ Record of Report of Abuse or Neglect (Form 560A) sent in sealed envelope to Area Chief of Social Work and
- ☒ Attendance Notice of Report to Children's Aid Society (In OSR) signed by Principal (Form 560B)

### *Excerpt from P045 Dealing with Abuse and Neglect of Students*

#### 6.0 Institutional Accountability

#### 6.1 The Toronto District School Board will hold all employees accountable for the following:

- 6.1.1 Behaviour that leads to a CAS finding or criminal conviction for abuse or neglect of any child or student (whether or not the behaviour took place in the workplace).
- 6.1.2 Behaviour that leads the Toronto District School Board to verify that the employee has abused or neglected any child or student (whether or not that behaviour took place in the workplace).
- 6.1.3 Failure to complete the prescribed Toronto District School Board training on abuse and neglect.
- 6.1.4 Failure to report abuse or neglect in accordance with the Toronto District School Board's procedures and/or the Child and Family Services Act.
- 6.1.5 Any other violation of this policy or related procedures.
- 6.2 If a Toronto District School Board employee is found or convicted of abusing a child or youth or if an internal investigation determines, on a balance of probabilities, that the employee abused a student, the employee will be subject to disciplinary action up to and including termination.
- 6.3 Any volunteer found to have abused or neglected a child or youth will no longer be permitted to volunteer.
- 6.4 If the Toronto District School Board becomes aware that a volunteer has failed to make a report of abuse or neglect of a child, Toronto District School Board reserves the right to end the person's volunteer activities in our schools.
- 6.5 A school principal may discipline a student for sexual misconduct, including sexually intrusive behaviour (see Definitions 3.0) in accordance with the Education Act and related Toronto District School Board policies and procedures even if the student has not yet reached the age of criminal responsibility under the Youth Criminal Justice Act.

For further procedural details regarding reporting abuse and neglect, please see Operational Procedure PR560

## Appendix K

### **For further resources, please visit:**

Toronto Public Health, Sexual Health Promotion: [www.toronto.ca/health/sexualhealth](http://www.toronto.ca/health/sexualhealth)

Ontario Ministry of Education: <http://www.edu.gov.on.ca/eng/>

OPHEA (Ontario Physical and Health Education Association): <http://www.ophea.net/>