

# 2015 ONTARIO HEALTH CURRICULUM FACTS

GRADE	Old Material	Updated/Revised Curriculum
1	<ul style="list-style-type: none"> <li>• Stages of development</li> <li>• Proper names for major body parts</li> </ul>	<ul style="list-style-type: none"> <li>• Identify body parts using correct terminology (penis, testicles, vagina, and vulva)</li> <li>• Proper hygiene for health and illness prevention</li> </ul>
2	<ul style="list-style-type: none"> <li>• Functions of major body parts and behaviors for good health.</li> <li>• Similarities and differences between themselves and others (e.g., in terms of body size or gender);</li> <li>• Germ transmission and personal hygiene</li> </ul>	<ul style="list-style-type: none"> <li>• Human development (infancy - older adult)</li> <li>• Body changes with the aging process</li> <li>• Identify factors for healthy growth and living for life.</li> <li>• Maintenance of good oral hygiene</li> </ul>
3	<ul style="list-style-type: none"> <li>• Development and growth of humans</li> <li>• Human reproductive processes</li> </ul>	<ul style="list-style-type: none"> <li>• Identifying healthy relationships</li> <li>• Overcoming challenges (bullying, abuse)</li> <li>• Behaviours that affect development</li> <li>• Respecting visible/invisible differences</li> </ul>
4	<ul style="list-style-type: none"> <li>• Stages of human development and changes occurring at their level of development</li> <li>• Healthy relationships and the risks and rewards of relationships</li> </ul>	<ul style="list-style-type: none"> <li>• Physical, emotional, and social changes of puberty</li> <li>• Personal hygiene in puberty</li> <li>• Risks of online communication and safe use</li> <li>• Bullying, social media and text, and responding appropriately</li> </ul>
5	<ul style="list-style-type: none"> <li>• Physical and emotional changes of puberty, menstruation and spermatogenesis, and the need for improved personal hygiene</li> <li>• Coping methods for stressful relationships, and what makes a healthy relationship</li> </ul>	<ul style="list-style-type: none"> <li>• Process of the reproductive system</li> <li>• Emotional and interpersonal stresses of puberty.</li> <li>• Stress management and strengthening mental health</li> <li>• Dealing with bullying or abusive and violent situations</li> </ul>
6	<ul style="list-style-type: none"> <li>• Changes to reproductive organs and their functions at puberty</li> <li>• Problem-solving/decision-making process to address issues related to friends, peers, and family relationships</li> </ul>	<ul style="list-style-type: none"> <li>• Effects of stereotypes: (homophobia, gender roles, culture, etc.)</li> <li>• Responding to and changing assumptions and stereotypes - promote inclusion, prevent bullying</li> </ul>
7	<ul style="list-style-type: none"> <li>• Male and female reproductive systems</li> <li>• STIs and prevention methods</li> <li>• Abstinence as it applies to healthy sexuality</li> <li>• Harassment and helpful resources</li> </ul>	<ul style="list-style-type: none"> <li>• Importance of understanding with a partner about delaying sexual activity and the concept of consent</li> <li>• Common sexually transmitted infections, their symptoms and prevention methods</li> <li>• Impact of different types of bullying or harassment, including sexting</li> </ul>
8	<ul style="list-style-type: none"> <li>• Healthy sexuality</li> <li>• Importance of abstinence as a positive choice</li> <li>• STD prevention and detection</li> <li>• Pregnancy prevention</li> <li>• Supports for concerns about sexuality</li> </ul>	<ul style="list-style-type: none"> <li>• Healthy sexual activity, and sources of support</li> <li>• Gender identity, gender expression, sexual orientation and developing positive self-concept</li> <li>• Relationship-based assault/violence and prevention</li> <li>• Attractions and risks of relationships</li> </ul>

## Parents can support their children by:

- Starting discussion early about changes in their body, good relationships, correct body terminology
- Creating an open environment and using everyday opportunities to talk; talk to them while driving, washing dishes, watching TV. Use social media to start conversations, talk with simple words and create family discussions

- Listening without judgement and having an open mind. Talk and listen if you have concerns (do this with eyes and ears), validate the child's experience
- Modeling your values by what you do and say; your children learn by what they see and hear: how you respond to the media and issues at school. Be aware of your biases
- Having a conversation: talk about information gradually with your child so you can build on it. Create opportunities for questions.

### **Myth: We don't need a new curriculum – ours is working because the teenage pregnancy rate is decreasing.**

✓ **Fact:** While it's true that Ontario's teen pregnancy rate has been decreasing (between 1995 and 2005, Ontario's rate decreased by more than 50%), Public Health Agency of Canada data tells us the rate of chlamydia and gonorrhea has been increasing since the late 90s and mostly affects teenagers and young adults. From 2002 to 2011 in Ontario, chlamydia rate has increased by 81% while gonorrhea rate has increased by more than 20%. Beyond that, a study involving students in Grades 9 and 10 shows us the high level of sexual activity taking place in that age group – 22% of the students indicated they had had sexual intercourse by that age.

### **Myth: Children will be taught to question if they are a boy or a girl.**

✓ **Fact:** The curriculum teaches children that not all fit into the typical male and female stereotypes – not all boys like playing with cars and not all girls like playing with dolls. Students are not pushed to question their own gender identity, but to recognize that others may identify themselves differently. Ontario is the most diverse province in Canada, and our students need to respect and understand there are differences among people.

### **Myth: We're killing the innocence of children by talking about sex at a young age.**

✓ **Fact:** Kids today are bombarded with sexual images every moment through TV, books, and online. The curriculum presents them with facts and accurate information to help them filter and understand what they are seeing on a daily basis. A survey on youth internet safety found that one in four kids have been unintentionally exposed to sexual content online, with about six percent being traumatized by the experience. In another research study, 23% of students in Grades 7-11 admitted to seeking out pornography online. Students today need an alternative place to develop a filter through which they can interpret and understand what they are seeing and experiencing.

### **Myth: Parents were not consulted on the curriculum.**

✓ **Fact:** The revision of the Health and Physical Education curriculum is the result of work undertaken through the curriculum review process which began in 2007. This review is the most extensive curriculum consultation process ever undertaken by the ministry and involved parents, students, teachers, faculties of education, universities, colleges and numerous stakeholder groups including the Centre for Addiction and Mental Health, The Ontario Public Health Association and the Ontario Healthy Schools Coalition. The ministry heard from more than 70 health-related organizations that submitted reports for consideration. Near the end of last year, the Ministry also provided an opportunity for more than 4,000 parents from every elementary school across Ontario and from all four publically funded school systems to provide their input.