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# Introduction, Values, and Communication

## **Session 1:**

### Introduction, Values, and Communication

#### **Goals:**

- Create a safe space for students to discuss sexual health topics and inform students of their reproductive and sexual health rights and resources
- Provide opportunities for students to ask sexual health questions throughout program without embarrassment
- Give students practice at identifying and articulating their personal beliefs and values within a peer environment
- Recognize the importance of parent and trusted adult communication when it comes to understanding sexual health topics.

## **Session 1:**

### Introduction, Values, and Communication

## **Objectives:**

At the end of this session, students will be able to:

- Name one place that offers help with sexual health needs
- Utilize the anonymous question box
- Identify one trusted adult in their lives that they can communicate with about their bodies, sex, and relationships
- Identify one value they hold about sex or sexual activity

# Introduction and Group Agreements



1 800 697 6575

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# Anonymous Question Box

## **Introduction to the Anonymous Question Box:**

The Anonymous Question Box is a way for students to ask questions that they may not feel comfortable asking during class time, though students are encouraged to ask lots of questions during class time as well.

## **Anonymous Question Box Guidelines:**

- Everyone must put a paper in the box. If students do not have a questions at that time, they can write a statement about what they learned in class that day, a specific topic of interest, or write "no question". This ensures questions remain anonymous.
- No Names. Questions are anonymous and are not to be used t hurt or embarrass others. Questions with names on them will not be read out loud.
- No personal questions of the instructor.
- Nobody can take anything out of the Question Box, except for the instructor.

# Pre-Test

## TTAAA Puberty Talk **Pre Test**

Circle the correct answer.

1. The **changes** that occur during puberty usually **happen**:

- A. Overnight      B. Over 1 year      C. Over several years      D. Not Sure
- 

2. During puberty, **most females**:

- A. Start their period      B. Grow hair under their arms      C. Both of these      D. Not sure
- 

3. The part of the **male body** that **makes sperm** cells is the:

- A. Ovary      B. Testicle      C. Penis      D. Not sure
- 

4. In order to **make a baby**, a sperm cell must fertilize (join with) an ovum (egg).

- ☐ True      ☐ False      ☐ Not sure
- 

5. **Females ovulate (release eggs)** from their ovaries from the time they are born.

- ☐ True      ☐ False      ☐ Not sure
- 

6. It is **normal for males** to get **erections**, even when they are not thinking sexual thoughts.

- ☐ True      ☐ False      ☐ Not sure
- 

7. Sexual consent requires which of the following?

- A. Both partners are 18 or older (in CA)      B. Both partners are sober (not drunk or high)      C. Both partners verbally agree ("Yes!")      D. A, B, and C

There is no correct answer to these questions. Answer how you feel.

8. I feel confident that I could tell someone to stop making fun of another person's body or looks.

- ☐ True      ☐ False      ☐ Not sure
- 

9. I feel confident that I could tell someone to stop touching me in a way that makes me feel uncomfortable.

- ☐ True      ☐ False      ☐ Not sure

## TTAAA Teen Talk Pre Test

Circle the correct answer.

1. Which type of birth control method helps protect against pregnancy and STIs?  
A. Birth control pill      B. Condom      C. Ring      D. Not Sure
2. Choose the fluid that can pass HIV.  
A. Saliva      B. Sweat      C. Blood      D. Not Sure
3. In a healthy relationship, both people feel...  
A. Afraid      B. Frustrated      C. Respected      D. Not Sure
4. Anyone who is having sex should get a regular check-up at a clinic.

TRUE

FALSE

NOT SURE

5. Name ONE local clinic where a teen can go to for FREE and CONFIDENTIAL sexual health services.

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6. What must someone do before they have sex with someone?  
A. Ask politely and wait for the "YES"      B. Hold hands      C. Buy them gifts      D. Not Sure

7. If someone is sexually assaulted, it is never their fault.

TRUE

FALSE

NOT SURE

8. Who could you talk to if someone touched you sexually and you didn't want them to?

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There is no correct answer to these questions. Answer how you feel.

9. I feel comfortable going to a clinic for sexual health services.      YES      NO      NOT SURE
10. I can talk about sexual health with a parent or trusted adult.      YES      NO      NOT SURE
11. I can talk to a current or future partner about what I want to or don't want to do sexually.      YES      NO      NOT SURE

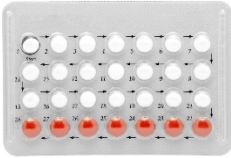


# TTAAA Teen Talk Pre Test

Circle the correct answer.

1. Which type of birth control method helps protect against pregnancy and STIs?

B. Birth control pill



B. Condom



C. Ring



D. Not Sure



2. Choose the fluid that can pass HIV.

B. Saliva



B. Sweat



C. Blood



D. Not Sure



3. In a healthy relationship, both people feel...

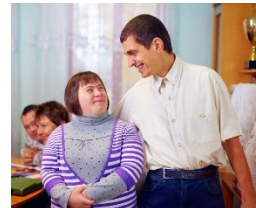
B. Afraid



B. Frustrated



C. Respected



D. Not Sure



4. Anyone who is having sex should get a regular check-up at a clinic.

TRUE



FALSE



NOT SURE



5. Name ONE local clinic where a teen can go to for FREE and CONFIDENTIAL sexual health services.

\_\_\_\_\_



6. What must someone do before they have sex with someone?

B. Ask politely and wait for the "YES"



B. Hold hands



C. Buy them gifts



D. Not Sure



7. If someone is sexually assaulted, it is never their fault.

TRUE



FALSE



NOT SURE



8. Who could you talk to if someone touched you sexually and you didn't want them to?

\_\_\_\_\_



There is no correct answer to these questions. Answer how you feel.

9. I feel comfortable going to a clinic for sexual health services.

YES



NO



NOT SURE



10. I can talk about sexual health with a parent or trusted adult.

YES



NO



NOT SURE



11. I can talk to a current or future partner about what I want to or don't want to do sexually.

YES



NO



NOT SURE



# COMMUNITY RESOURCE LIST

## Grief and Loss

**Cancer Support Community**  
805 379-4777  
[cancersupportvvsb.org](http://cancersupportvvsb.org)

**Hospice of the Conejo**  
805 495-2145  
[hospiceoftheconejo.org](http://hospiceoftheconejo.org)

CA Healthy Youth Act, Education Code 51934(a)(8) requires school districts to provide information about local resources for sexual and reproductive health care such as testing and medical care for HIV and other sexually transmitted infections and pregnancy prevention and care, as well as local resources for assistance with sexual assault and intimate partner violence.

## Housing and Food

**Area Housing Authority**  
805 480-9991  
[ahacv.org](http://ahacv.org)

**Manna**  
805 497-4959  
[mannaconejo.org](http://mannaconejo.org)

**Rain (Transitional Living Center)**  
805 383-7505  
[raincommunities.org](http://raincommunities.org)

**Food Share**  
805 983-7100  
[foodshare.com](http://foodshare.com)

**Many Mansions**  
805 496-4948  
[manymansions.org](http://manymansions.org)

**The Samaritan Center of Simi Valley**  
805 579-9166  
[samaritancentersimivalley.org](http://samaritancentersimivalley.org)

## LGBTQ

**PFLAG**  
818 991-4797 x 27  
[pflag.org/chapter/pflag-oak-parkconejo-valley](http://pflag.org/chapter/pflag-oak-parkconejo-valley)

**Rainbow Umbrella**  
805 836-0099

**Trevor Project**  
24/7 Trevor Lifeline: 866 488-7386  
[thetrevorproject.com](http://thetrevorproject.com)

## Medical

**Clinicas del Camino Real**  
805 498-3640  
[clinicas.org](http://clinicas.org)

**Conejo Free Clinic**  
805 497-3575  
805 328-3100—Dental  
[conejofreeclinic.org](http://conejofreeclinic.org)

**Westminster Free Clinic**  
805 241-8366  
[westminsterclinic.org](http://westminsterclinic.org)

## Mental Health

**CLU Community Counseling**  
805 493-3390  
[clucounseling.org](http://clucounseling.org)

**National Alliance on Mental Illness (NAMI)**  
Helpline: 805 500-6264  
[namiventura.org](http://namiventura.org)

**VCBH—Early Detection and Intervention for the Prevention of Psychosis (EDIPP)**  
805 981-8865  
[vcbh.org/en/adult-services-early-intervention](http://vcbh.org/en/adult-services-early-intervention)

**Coalition for Family Harmony**  
805 983-6014  
[thecoalition.org/](http://thecoalition.org/)

**Ventura County Behavioral Health (VCBH)**  
866 998-2243  
[vcbh.org/en/programs-services/youth-family-services](http://vcbh.org/en/programs-services/youth-family-services)

**VCBH—Rapid Integration Support and Engagement (RISE)**  
805 981-4233  
[vcbh.org/en/get-help/rise-program](http://vcbh.org/en/get-help/rise-program)

**Interface Children and Family Services**  
805 485-6114 x 662 (Main Number)  
805 371-5707 (Thousand Oaks)  
[icfs.org/services/mental-health/](http://icfs.org/services/mental-health/)

**Youth Crisis Line—Interface**  
805 469-5882  
[icfs.org/services/youth-crisis-homeless-services/](http://icfs.org/services/youth-crisis-homeless-services/)

## Parenting

**Parent Child Interactive Therapy (PCIT) (2-8 years old)**  
805 485-6114 x 662  
[icfs.org/services/mental-health/](http://icfs.org/services/mental-health/)

**Triple P—Positive Parenting Program (0-5 years old)**  
805 485-6114 x 625  
[icfs.org/services/mental-health/](http://icfs.org/services/mental-health/)

**United Parents**  
805 384-1555  
[unitedparents.org](http://unitedparents.org)

## **Substance Abuse**

### **BRITE**

Substance Use Prevention and Education  
805 647-4622  
[straightupvc.org/](http://straightupvc.org/)

### **Ventura County Limits**

[venturacountylimits.org/en/](http://venturacountylimits.org/en/)

### **Not One More**

805 242-6662  
[notonemore.net](http://notonemore.net)

### **Prescription Drug Disposal**

[venturacountyresponds.org/  
medication-safety/safe-medication-  
disposal](http://venturacountyresponds.org/medication-safety/safe-medication-disposal)

### **VCBH Substance use Treatment Services**

844 385-9200  
[vcbh.org/en/programs-services/  
substance-use-services](http://vcbh.org/en/programs-services/substance-use-services)

## **Social Services**

### **Community Conscience**

805 494-3543  
[communityconscience.org](http://communityconscience.org)

### **Conejo Closet**

The Conejo Closet seeks to assist CVUSD families in need by providing toiletries, personal care items, school supplies, and clothing, free of charge.  
[conejousof.org/Departments/Student-  
Services/Student-Support-Services/The-  
Conejo-Closet](http://conejousof.org/Departments/Student-Services/Student-Support-Services/The-Conejo-Closet)

### **Conejo Community Outreach**

Diaper Bank  
[conejocommunityoutreach.com/  
diaper-bank.html](http://conejocommunityoutreach.com/diaper-bank.html)

### **Lutheran Social Services**

805 497-6207  
[lsssc.org/location/ventura-county](http://lsssc.org/location/ventura-county)

### **Harbor House**

855 427-2672  
[harborhouseto.org/](http://harborhouseto.org/)

### **Human Services Agency**

805 449-7320  
[ventura.org/human-services-agency/](http://ventura.org/human-services-agency/)

### **Kids and Family Together**

805 643-1446  
[kidsandfamilies.org](http://kidsandfamilies.org)

## **Additional Services**

### **Big Brothers Big Sisters**

805 484-2282  
[bbsvc.org](http://bbsvc.org)

### **Conejo Youth Employment**

805 496-6868  
[conejoyes.com](http://conejoyes.com)

### **Department of Rehabilitation**

805 371-6279  
[dor.ca.gov](http://dor.ca.gov)

### **PACER-National Bullying Prevention**

[pacer.org/bullying/](http://pacer.org/bullying/)

### **Thousand Oaks Library**

805 449-2660  
[tolibrary.org](http://tolibrary.org)

### **Thousand Oaks Police Department**

Non-emergency Line  
805 654-9511  
[toaks.org/departments/police](http://toaks.org/departments/police)

### **Thousand Oaks Teen Center**

805 494-5156  
[thousandoaksteencenter.com](http://thousandoaksteencenter.com)  
**Tutoring available.** Please visit website or call for more information.

## **Hotlines**

**Ventura County Crisis Team** (24/7) 866 998-2243 [vcbh.org/en/get-help/mobile-crisis-response-team](http://vcbh.org/en/get-help/mobile-crisis-response-team)

**California Youth Crisis Line** (24/7) 800 843-5200 [calyouth.org](http://calyouth.org)

**National Suicide Prevention Hotline** (24/7) 800 273-8255 [suicidepreventionlifeline.org](http://suicidepreventionlifeline.org)

**Crisis Text Line** (24/7) Text HOME to 741741 [crisistextline.org](http://crisistextline.org)

Dial **211** or visit the [211 website](#) for additional Ventura County resources

## **12 Step Resources**

**Alanon**—[alanonventura.org](http://alanonventura.org)

**Alateen**—[alanonventura.org/alateen](http://alanonventura.org/alateen)

**Alcoholics Anonymous**—[aaventuracounty.org](http://aaventuracounty.org)

**Narcotics Anonymous**—[clana.org/index.html](http://clana.org/index.html)

**NarAnon**—[nar-anon.org](http://nar-anon.org)

# Local Teen Clinics

Parents' permission is **NOT** required in CA (but we encourage you to talk with them!)  
Services are **FREE** and **CONFIDENTIAL**

- \_\_\_\_\_  
website: \_\_\_\_\_  
phone: \_\_\_\_\_  
address: \_\_\_\_\_  
\_\_\_\_\_

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\_\_\_\_\_

# What are my values?

**values**

## Values Clarification: AGREE or DISAGREE Statements

Select 3-6 statements from the list below based on the following criteria:

- Grade of class
- Maturity of class
- School/community norms
- Existing knowledge base of class
- Functioning level of class (verbal ability, attention span, etc.)
- Developmental age of person or class

### Group 1 (K-6<sup>th</sup> grade)

- I can talk to my parents/guardians about my body and feelings.
- It is hard to go through body changes.
- You should take care of your body.
- Body changes are exciting.
- I should ask a trusted adult if I have questions about my body or feelings.
- I am comfortable telling a person I have a crush on them.
- Learning about taking care of your body is important.
- You should learn about both boy and girl body parts.

### Group 2 (Middle and High School Students)

- It is easy to tell if a person likes (has a crush on) you.
- People my age can make good decisions about relationships and sex.
- Buying your partner gifts shows them you love them.
- Texting your partner all the time shows you love them.
- It is important to take care of your body.
- I can tell my parents I have a crush on someone.
- If you are going on a date, you should tell a trusted adult.
- I would feel OK talking to my partner about having sex.
- It's easy to use condoms every time a person has sex.
- You should talk to your parents/guardians about your relationships.
- I am OK with asking my parents questions about relationships and sex.
- Telling a partner or friend they are making you feel uncomfortable is not hard.

# Pick-a-Side

Agree

Disagree



Insert  
statement  
here





# Agree



# Agree



# Agree



# Agree



# Disagree



# Disagree



# Disagree



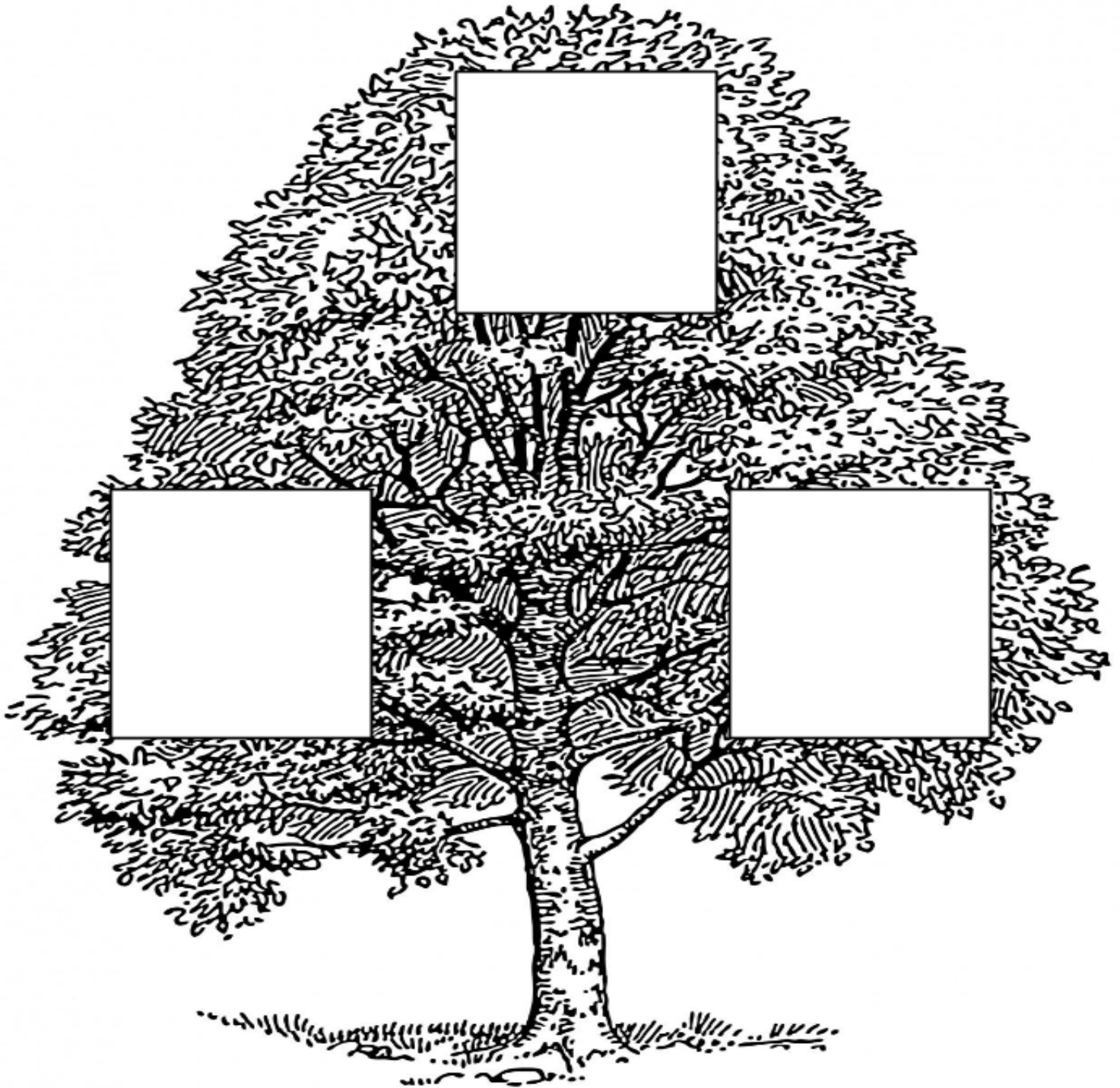
# Disagree



# Tree of Trust

# Tree of Trust

*Directions:* Draw or paste a picture of up to three adults that you can trust.



I can talk to \_\_\_\_\_, \_\_\_\_\_,  
and \_\_\_\_\_ about sex, relationships, and my body.

## MY TRUSTED ADULT

My name is

---

and I can talk to

---

*(trusted adult)*

about my body,  
relationships, or sex.

## ASK YOUR ADULTS

**Directions:** Please pick a trusted adult at least 18 years old to interview for this activity. It could be a parent, an older sibling, a trusted family member, or another adult you trust. Ask them the questions below and write down their answers.

Student's Name: \_\_\_\_\_ Trusted Adult's Name: \_\_\_\_\_

**Talk #1. Due:** \_\_\_\_\_ **Adult signature:** \_\_\_\_\_

1. How old were you when you started going through puberty? What were your questions about puberty? Who did you talk to?
2. What advice do you have for me as I try to be a good friend?
3. Is there anything you want me to know about using the internet, especially when you are not around?

**Continue on other side**



**Talk #2.**      **Due:** \_\_\_\_\_      **Adult's signature:** \_\_\_\_\_

4. If you are not around and I have questions, who would you want me to talk to?

5. If someone says something to me or touches me in a way that makes me feel uncomfortable, what would you want me to do?

**Thank you for having this important conversation!**

# BACK IN THE DAY...

**Directions:** Please interview a parent/guardian or an adult you trust over age 18 for this activity.

Student's Name: \_\_\_\_\_ Trusted Adult's Name: \_\_\_\_\_

**Talk #1.**      **Due:** \_\_\_\_\_      **Adult signature:** \_\_\_\_\_

1. What did you do in your free time when you were my age?
2. What did you want to be when you grew up?
3. What did your parents/guardians teach you about puberty and body changes?
4. What is one thing you wish you knew about puberty when you were my age?

**Reflection:** What are two things you learned from your trusted adult? 

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**Talk #2.**      **Due:** \_\_\_\_\_      **Adult's signature:** \_\_\_\_\_

5. Did you have sex education or family life education in school? What was it like?
6. What is one thing you wish you knew about sexual health when you were my age?
7. How has the subject of gender changed since you were a child?
8. Did you know anyone who was bullied because of their sexual orientation or gender identity?
9. Is there anything you wish you had done differently in your friendships or romantic relationships when you were my age?

**Reflection:** In what ways are your trusted adult's past experiences similar or different to your own? 

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**Continue on other side**





**Talk #3.**      **Due:** \_\_\_\_\_      **Adult signature:** \_\_\_\_\_

10. How do you feel about the messages media (TV, music, movies, internet) send youth today?  
11. Did you ever feel pressured to do something you didn't want to do? How did you handle it?  
12. If someone pressures me to do something sexual, can you give me some suggestions of what to do or say?

**Reflection:** How has this conversation changed your thinking? 

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**Thank you for having this important conversation! Almost done...**



**Check out the CVUSD Community Resource List on the following pages to help continue this important conversation.**



**This section below is for your trusted adult to fill out after completing the interview.**

**I have talked through all of the questions on this homework sheet with my student.**

Adult's signature: \_\_\_\_\_

**Do you think this homework helped you and your student talk more openly about sexual health and relationships?**

☐ **YES**

☐ **NO**