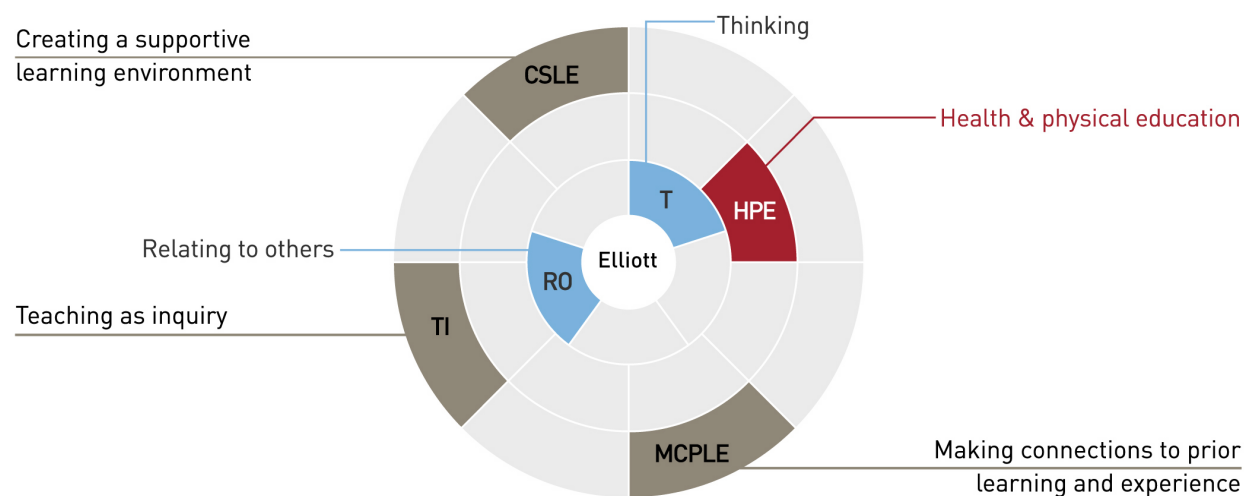


Elliott's journey through puberty

Links to the curriculum



Student background

Name Elliott

Age 14

School Secondary

Elliott is very chatty and has many interests, both in and outside of school. He loves to talk and be involved in all classroom discussions and activities.

Elliott attends a special school in a class of 10 students, which has two teaching assistants and one teacher. Elliott has foetal alcohol syndrome, dyslexia, and attention deficit hyperactivity disorder (ADHD). For the most part in his learning, Elliott is working at level 1 of the curriculum; however, he has reached a stage in his physical and emotional development where he has some knowledge of sexuality and puberty. It had become evident that further teaching was required to clarify misconceptions he had of these subjects. Learning in these aspects of the health and physical education curriculum would usually occur at level 4.

Seven learning stories

- 1. It starts with a bang** 5 May 2008
- 2. Do men have babies?** 10 June 2008
- 3. Penis, testicles and hair, it's all change down there** 18 June 2008
- 4. Do girls eat grass?** 20 June 2008
- 5. Wet dreams and erections** 24 June 2008
- 6. Healthy puberty** 26 June 2008
- 7. What have we learned?** 3 July 2008

This string of learning stories shows Elliott's growing understanding of his pubertal development along with that of his peers. They also show his increased confidence in discussing many of the ideas and issues to do with teenage sexuality in ways that respect all the participants in a class learning this sensitive topic.

How we organised the unit

As a team, we recognised that our middle school classes needed a comprehensive programme to address sexuality and health. It was with this need in mind that we started to plan our unit. Very quickly, we realised that the team needed assistance in this. Health advisors from Family Planning New Zealand and Teacher Support Services provided us with this support. These people helped us through the procedure of parent consultation and resourcing. Parent permission was gained prior to the teaching of this unit. Our teaching was informed from this process.

It starts with a bang!

Student	Elliott	Date	5 May 2008
Topic	Health education	Observer	Meegan (teacher)

This morning, I welcomed the class back to school and told them what we were doing for the term. I introduced our topic by saying we are going to talk about emotions, relationships, and what happens to our bodies as we grow up. I said that if they have questions then they could ask me. Most students put their heads in their hands and said "no" loudly. Elliott, however, put up his hand and said that there were questions he wanted to talk about in private.

Elliott and I went into a quiet room. I explained that I wasn't going to answer everything today but that his questions would be answered in the unit. He was fine with that. In the next part of the conversation we discussed Elliott's questions. This gave me a good guide as to what he already knew and what he needed to find out.

He said that these were all of the questions he has at the moment. Afterwards he said to me, "I'm a bit scared of sex, I want to be ready when it happens to me".

Analysis – what learning is happening here?

Key competencies

Participating and contributing

- I can try new things.

Using languages, symbols, and texts

- I can tell you what I think/need/feel.

Thinking

- I can ask questions and look for answers.

Learning areas

Level 4 health and physical education: Personal Health and Personal Development: personal growth and development

It is good to see that Elliott feels confident enough to ask questions. It shows that he has really valid questions regarding his sexuality and wants to learn. His questions give me really clear guidelines about where his learning needs to go.

Where to next?

Scaffold

This was a very powerful dialogue for me because it expressed exactly what Elliott wanted to know and what he wanted to learn. From this, we will talk clearly about relationships and the importance of building good friendships, and the role of feelings in relationships. We will talk about the fact that sex is sometimes for procreation and sometimes because of the fact that it feels good. We will discuss wet dreams and masturbation, and where and when it is appropriate. We will talk about the importance of being responsible about having sex. This learning story provides powerful learning for the teacher.

Do men have babies?

Student	Elliott	Date	10 June 2008
Topic	Health education	Observer	Meegan (teacher)

After Elliott asked me many questions in private, I was concerned that he might not feel able to ask me questions in a whole-class situation. He had demonstrated that he was quite embarrassed about the topic.

In class today we were all talking about anatomy, what girls have, what boys have and what we both have. We discussed that girls have a uterus and that it is where a baby grows and where period blood comes from.

Elliott then asked whether boys could get pregnant. I replied that, "No they couldn't get pregnant, but they do provide sperm to make a baby." He was very interested in this topic. He then asked, "How long does it take to get pregnant?" I replied by showing him how an egg travels down the fallopian tubes and where the sperm goes.

Elliott then made a very astute observation, "If sex makes babies, why aren't there more babies?" So we discussed how contraception works. Elliott asked, "So why do people have sex then if it's not to make babies?" I said, "Sometimes sex is to make babies and sometimes people have sex because it feels nice." I went on to remind the students about how we had talked about friendships and relationships. We talked about how it's important to care about the person we have a sexual relationship with. I also said that it's a good idea to wait before you do this.

Analysis – what learning is happening here?

Key competencies

Participating and contributing

- I am interested in the world around me.

Thinking

- I can use what I already know.
- I can ask questions and look for answers.

Learning areas

Level 4 health and physical education: Personal Health and Personal Development: personal growth and development

Level 4 health and physical education: Relationships with Other People: relationships

Elliott wants to clarify his understanding and is showing that this is very pertinent to his needs. He is thinking in a very constructive way; questioning what he knows and what he has learned in front of the class. Elliott has shown he now has some awareness of the roles and responsibilities in sexual relationships.

Where to next?

Celebrate and consolidate

He is directing his own learning and thinking about what is going on. We will talk more about relationships and the importance of caring. We will talk about knowing when you are ready to have a sexual relationship. I also feel that contraception will need to be addressed.

Penis, testicles and hair, it's all change down there

Student	Elliott	Date	18 June 2008
Topic	Health education	Observer	Meegan (teacher)

Today, we have been looking at the internal and external sexual organs of male and females. We talked about all the things that we have that are the same for boys and girls. Elliott correctly told me that we both have pubic hair and came up to the board and drew it on. He then decided that he needed to add hair on the legs and underarm hair as well. This has shown me that he has picked up a great deal from our previous discussions.

After we discussed the similarities between males and females, we talked about the differences.

Elliott decided that he wanted to come up to the board and add a penis to the man and breasts on the female. He looked at the penis and said, "Something is missing but I can't remember what it's called and I don't think I can draw it". I said, "Can you describe what is missing?" He said, "It's down there," on the boy. I replied with, "What do you call them?" He said, "Balls". I said, "That's what some people call them but here we call them testicles." I said that I wasn't very good at drawing them either, so I got the magnetic one out and got him to put it on the board. Elliott said, "It needs to have hair around it though", and promptly drew in the pubic hair. He then asked what they were for. I explained that sperm was made in them.

I went over what sperm is and what it does. Briefly, we looked at how conception occurs.



Analysis – what learning is happening here?

Key competencies

Participating and contributing

- I am interested in the world around me.

Thinking

- I can use what I already know.
- I can ask questions and look for answers.

Learning areas

Level 4 health and physical education: Personal Health and Personal Development: personal growth and development

Elliott has shown that he has learned the correct names of male external reproductive organs. Elliott has also begun to understand the male role in reproduction.

Where to next?

Celebrate and consolidate

We will spend more time on what happens to girls when going through puberty. As an aside to this, we will look more closely at conception and contraception.

Do girls eat grass?

Student	Elliott	Date	20 June 2008
Topic	Health education	Observer	Meegan (teacher)

Today, with the class we have discussed the female body and the changes that girls go through in puberty.

We looked at the things that were the same for girls and boys. Elliott correctly said, "Pubic hair, growing taller, and doing different things". We then talked about what was different for girls. We talked about periods, growing breasts, and conception. Elliott asked (in reference to pictures of how women change across their lives), "Why do girls' breasts grow bigger"? I talked about hormones and eventually I said that they produce milk for babies after a woman has a child.

Elliott then asked another of his astute questions, "Do girls eat grass?" I asked, "What do you mean Elliott?" He said, "Well, cows eat grass to make milk so do girls have to do that too?" I replied that women don't have to eat grass, but they do have to eat a very good diet to make sure that they have all the right vitamins in their breast milk to feed the baby.

Analysis – what learning is happening here?

Key competencies

Participating and contributing

- I am interested in the world around me.

Thinking

- I can tell you what I'm learning.
- I can use what I already know.
- I can ask questions and look for answers.
- I wonder why...

Learning areas

Level 4 Health and Physical Education: Personal Health and Personal Development: personal growth and development

Elliott has got a growing awareness that girls have a different pubertal change to boys but that there are similarities. He has a good understanding of some female internal and external sexual organs. It also shows that he is happy to ask questions, which is awesome!

Where to next?

Celebrate and consolidate

I feel that the class has taken on a great deal of information recently so I think that we just need to have a lesson on going over the information we have already learned and discussing any confusions that may have arisen.

Wet dreams and erections

Student	Elliott	Date	24 June 2008
Topic	Health education	Observer	Meegan (teacher)

Today, we discussed how to be healthy during puberty. I realised from our last lesson that the students hadn't picked up all that they needed from the girl/boy changes during puberty. I was showing some picture flash cards from the Family Planning Association resource. I showed a picture of an erect penis. Elliott put his hand up and said that his was like that in the mornings and wanted to know why that was. I explained that it was because of hormones and that most teenage boys have erections in the morning and at other times of the day and night.

Some of the boys expressed that they had erections in the morning. Elliott asked why this was and what the stuff that comes out of his penis was. This started a long discussion about erections, sperm, semen, and ejaculation.

I said to Elliott that teenagers may have what is called a "wet dream". He asked whether that meant he wet the bed. I explained that it wasn't urine/pee. But that it was when semen/creamy-coloured liquid came out of a boy's penis. This prompted a long discussion and Elliott asked whether he should tell anyone about it. I emphasised the importance of cleaning up after himself and keeping clean. I said that if he felt comfortable telling his caregiver about that he could, but in a quiet time when nobody else was around. He was satisfied with my explanation. Elliott asked if this was the stuff that made babies. "Yes", I replied and we referred back to the pictures of how that happened.

Analysis – what learning is happening here?

Key competencies

Using languages, symbols, and texts

- I can tell you what I think/need/feel.

Thinking

- I can use what I already know.
- I can ask questions and look for answers.

Learning areas

Level 4 health and physical education: Personal Health and Personal Development: personal growth and development

Elliott has shown by his questions that he has an increasing understanding of what his body is going through, about conception, and what it means.

Where to next?

Increase complexity

From the discussions we have had, I feel we as a class need to talk about masturbation. The Family Planning Association research suggests that for our student group it is very important to have this discussion and to talk about appropriate behaviours surrounding masturbation.

Healthy puberty

Student	Elliott	Date	26 June 2008
Topic	Health education	Observer	Meegan (teacher)

Today, we spent more time looking at healthy puberty. We looked at how important it is to be healthy and clean. We talked about washing, changing clothes, using deodorant, and cleaning up after ourselves.

We talked about cleaning up after wet dreams. We then discussed, with visual prompts, masturbation and how important it is to clean up afterwards.

Elliott said, "Ooh that's disgusting". I said, "That's okay to think that but at some stage you may not think the same way."

Elliott then asked whether it was the same as wetting the bed. I said, "No it's not the same as that but you do have to clean up." Elliott said, "It's rude to touch yourself like that". I said, "It's rude to do that in public." Elliott said, "I know! I know, Meegan, but it's okay in private with the door closed!"

We briefly went over the public/private flash cards again so we were all clear about what was private and public behaviour in relation to masturbation.

Analysis – what learning is happening here?

Key competencies

Managing self

- I can keep myself clean.

Using languages, symbols, and texts

- I can tell you what I think/need/feel.

Thinking

- I can use what I already know.
- I can ask questions and look for answers.
- I wonder why...

Learning areas

Level 4 health and physical education: Personal Health and Personal Development: personal growth and development

Today's discussion shows that Elliott has an understanding of public/private behaviour. It shows that Elliott has a growing ability to generalise his knowledge.

Where to next?

Celebrate and consolidate

We intend to review the learning that has occurred for both teachers and students as a result of undertaking this unit of work.

What have we learned?

Student	Elliott	Date	3 July 2008
Topic	Health education	Observer	Meegan (teacher)

Today, the class had a group activity to remember some of the things we had learned in our unit. We sat with all of our work in front of us and I asked what have we learned. Elliott said that we all have hair growing in different places.

He also stated that women have breasts and three holes for their private parts. I asked him what they were for. He said, "One is for poo, one is for pee and one is for babies to come out". I then asked what else the vagina was for. He said that when you have sex that's where the boy's "thing" goes. I asked what a "thing" was? He said, "A penis". I then said that the vagina is for something else as well. He couldn't remember. One of the girls in the class reminded him that it was for menstrual blood.

We had an interview at the end of the unit in which Elliott achieved highly in all our assessment criteria. He has shown that he has retained much of what we have learned. He knows the names of body parts, he can explain how babies are made and he has a good understanding of relationships/friendships. Most importantly, Elliott has a good understanding of what is happening to his body as it goes through puberty.

Analysis – what learning is happening here?

Key competencies

Relating to others

- I can share.

Using languages, symbols, and texts

- I can answer questions.

Thinking

- I can tell you what I'm learning.
- I can use what I already know.
- I can ask questions and look for answers.
- I can figure it out.
- I wonder why...

Learning areas

Level 4 health and physical education: Personal Health and Personal Development: personal growth and development

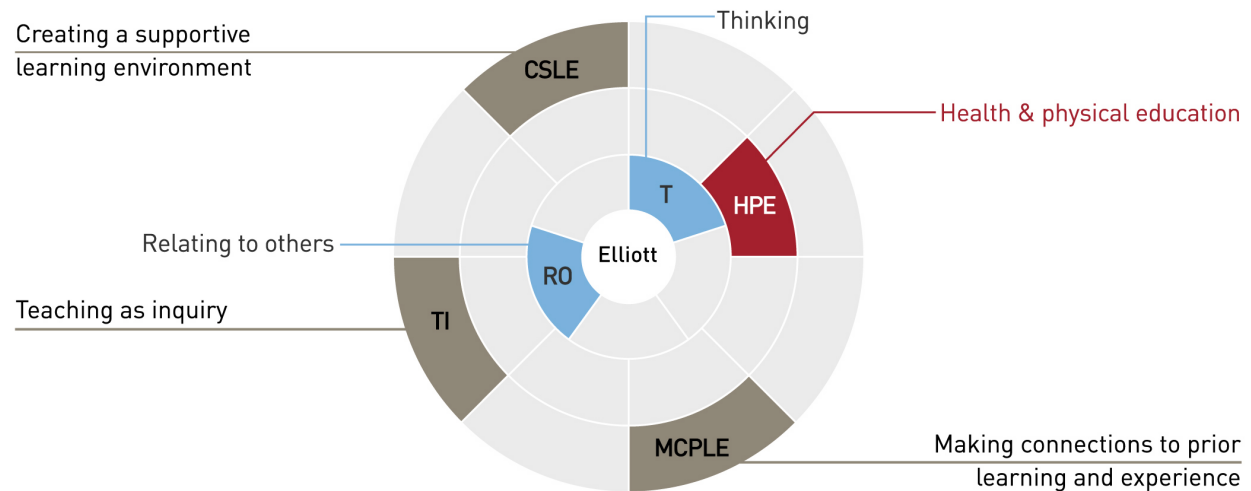
Elliott has achieved well in this unit and retained the learning over the holiday period. This is likely to be due to the fact that this was pertinent to his needs and was planned out of his (and his peers') questions.

Where to next?

Celebrate and consolidate

At the end of the unit Elliott asked what you would do if you did not want to have a baby? So I talked about contraception. He keeps reminding me that I need to bring in condoms to show what they look like and how they work. So I have set up a meeting for him to discuss this early next term.

Reflection – what the stories exemplify



Key competencies

The key competency that Elliott displays most strongly in this string of stories is that of thinking. In the early stories, he is asking questions based on what he already knows. He is bringing his prior knowledge into the classroom to highlight what he needs to learn now. He demonstrates in later stories that he is highly motivated to direct his own learning by asking further questions about what he wants to know. He is starting to wonder why things happen.

By the end of the lesson sequence, Elliott's questions and responses are beginning to show a much greater ability to successfully relate to others in his learning community than when we embarked on this unit.

How might these stories strengthen Elliott's identity as a learner?

Elliott took the initiative to ask the teacher questions in private, demonstrating he wanted to share what he already knew. He indicated that he wanted to open the door to what he sought to learn (agency and breadth).

During the course of these lessons, Elliott's ability to contribute appropriately to the class learning programme grew significantly. From being reluctant to ask significant questions publicly, he became assured enough to contribute pertinent questions and answers, and to share his new learning and understanding in front of his peers using the whiteboard, diagrams, and other resource materials (continuity and depth).

For more information on the four dimensions of agency, breadth, continuity, and depth (ABCDs), refer to *Narrative assessment: a guide for teachers*.

Learning areas

Level 4 health and physical education

This learning is situated in health education within the health and physical education learning area, in the strands concerning personal health and physical development and relationships with other people. Elliott is learning about what is happening to his body as he goes through puberty. It will also provide him with the knowledge that his friends in class are all going through similar issues. He is also learning about how to build friendships and be respectful. All of these skills will serve him well in his interactions with peers, family, and the wider world.

Effective pedagogy

What does this tell us about teaching and learning in this setting?

Elliott's learning was supported by teaching that provided him with a safe and supportive environment in which to express his thoughts and needs. At the outset of this unit, the teacher decided that she wanted to have an environment that allowed the students to ask any questions and have them answered. The teacher informed the students they could ask questions wherever they felt more comfortable. That could either be during the class lesson or individually at another time (creating a supportive learning environment).

With consideration paid to initial information gained via questioning, the teaching provided Elliott with the opportunity to make connections with what he already knew. This was shown by Elliott being able to draw conclusions from both what he knew previously and what he learned during the unit. This allowed him to build a clearer picture of his sexuality (making connections to prior learning experiences).

As part of the preparation to teach this lesson sequence, the teacher built a rapport with the caregiver of this student to ascertain the family's perspectives on this unit. This was done by sending home a questionnaire and also through a teacher/parent evening to discuss the sexuality unit in an open forum. During this meeting, discussion arose around how the unit would be taught. Concerns were raised by caregivers around public/private touching and socially appropriate behaviour. In an individual education programme (IEP), and through a questionnaire, Elliott's caregiver indicated that she wanted the school to cover some work around sexuality, particularly in relation to public and private behaviour. She expressed that Elliott needed to have consistent messages given between home and school to build on what she had already said to Elliott regarding erections and masturbation (teaching as inquiry).

Using information gained from the questionnaires and meetings, and from questions raised by Elliott, his caregiver, and his peers, the teacher planned the unit. The reflective practice used by the teacher determined the way the unit progressed. As Elliott and his classmates asked questions within the classroom, the teacher altered planning and resources to accommodate the understandings and needs of the students as they became evident.

Reflective questions for the reader

"What are some of the best ways to create an environment of trust in classrooms so that students feel they have the necessary support to ask questions that may expose their vulnerabilities?"

"What ways do you consult with your parent community on sexuality education?"

Useful resources

Cole, B. (2001). *Hair in funny places*. London: Red Fox.

Comment: Appropriate for more junior classes. It is available at the National Library.

Every Body Needs to Know: a sexual and reproductive health education resource for teaching people with a disability. Australia: Family Planning Queensland

Comment: An excellent resource made specifically for special needs students with various needs levels. It has 36 lessons on a range of topics, and includes a good set of visual flash cards for each lesson.

Freymann, S., & Elffers, J. (2004). *How are you peeling?: foods with moods*. New York: Scholastic Inc.

Comment: Good conversation starter regarding emotion identification.

Hager, D. (2004). *Every body [kit]: FPA body boards teaching kit*. Wellington, N.Z.: Family Planning Association.

Comment: Another kit with visuals and lessons.

Let's talk about puberty: a booklet for about growing up for young people with a learning disability. Down's Syndrome Scotland. Weblink:

<http://www.dsscotland.org.uk/health/puberty>. Accessed on 1 June 2009

Comment: Well written and good visuals.

Libra Kit: This kit contains a DVD with about six lessons as well as other good visual resources, such as the menstrual cycle. The DVD has a three-part programme: *The changes of puberty; Sexual maturity – Dealing with physical changes; and sex and relationships*. The kit contains tampons, pads, and so on.

McGrath, H., & Francey, S. (1991). *Friendly kids, friendly classrooms: teaching social skills and confidence in the classroom*. South Melbourne: Longman Cheshire.

Comment: About teaching social skills in the classroom.

Ministry of Education (2001). *Kotahitanga = Getting on together: social relationships years 1-3, key area of learning, mental health*. Wellington, N.Z.: Learning Media.

Price, G. (2005). *Puberty boy*. Crows Nest, N.S.W.: Allen & Unwin.

Comment: Reference book for any teacher who has not been a boy going through puberty.