



# A SEXUAL & REPRODUCTIVE HEALTH **CURRICULUM & TOOLKIT**

## FOR IMMIGRANT COMMUNITIES

CANADIAN ADVISORY OF WOMEN IMMIGRANTS



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CAWI

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# A B O U T

# U S

The Canadian Advisory of Women Immigrants (CAWI) is a community organization with the mission to empower immigrant women and girls across Canada. In 2021, the Sexual & Reproductive Health (SRH) Campaign team at CAWI received a small fund from the Regina Public Interest Research Group to conduct a community-based research project on the experiences of immigrant women and girls with the Canadian SRH curriculums. The team hoped to use the findings of the study to develop a curriculum and creative community-based solutions for SRH education. In 2022, the team received another grant from Oxfam Canada in partnership with Government of Canada to further continue their work on the campaign and create a toolkit, develop workshops, and host an event on the work of the SRH team.

To learn more about the work CAWI does and the work of the SRH team at CAWI, please visit us at [www.cawicanada.com](http://www.cawicanada.com) or at our social media channels.

For more information and questions, please contact our general email [admin@cawicanada.com](mailto:admin@cawicanada.com)

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# UNDERSTANDING SEXUAL & REPRODUCTIVE HEALTH THROUGH AN ANTI-OPPRESSIVE LENS

The current curriculum and toolkit aim to address various topics of sexual and reproductive health (SRH) through the use of an anti-oppressive lens. This package will aim to recognize and dig deeper into the power and privilege of working with immigrant communities and how one can be an effective advocate and educator for them. Various topics of SRH education are often pursued using a white-feminist, cis-gender, and ableist lens without giving any particular attention to the intersectional identities of participants and students who may also be immigrants, refugees, asylum-seekers, or migrants. Through the use of inclusive language, diversity of content, and lived experiences, this package aims to raise awareness on the issues that immigrant communities, particularly women, girls and other gender-diverse folks face, and educate the younger generations on topics of SRH that are often overlooked in the immigrant community.

This resource is intended to support teachers, facilitators, and community organizers particularly serving immigrant communities, however, the content can be utilized to serve educators who may be providing service to non-immigrant communities or broader youth populations. We would also like to acknowledge the intersectionality in SRH which refers to the ways in which an individual's various identities, such as race, gender, sexuality, socioeconomic status, and ability, interact and impact their experiences and access to healthcare related to sexuality and reproduction. Recognizing the intersectionality of these identities is important in order to provide inclusive and equitable health care that addresses the unique needs and challenges faced by individuals from marginalized communities. It is important to understand how these different factors interact with one another and can exacerbate health disparities.

This resource will use language recommendations from Khan et al., 2022 to create a sense of safety for underserved communities such as immigrant women, girls, and gender-diverse folks who are often not given the privilege of attaining culturally appropriate education.

# WHAT IS IN THE CURRICULUM & TOOLKIT?

The curriculum intends to bring sexual health education to immigrant women, girls, and gender-diverse folks by making SRH knowledge accessible. Additionally, we aim to increase confidence and self-efficacy in our participants in the hopes that they are better able to advocate for their own sexual and reproductive health needs. Through our efforts, our team also hopes to normalize conversations surrounding SRH in immigrant communities where it is highly stigmatized. The goals and vision of the curriculum include (1) addressing the SRH needs of different demographics by using clear terminology and avoiding jargon , (2) ensuring the curriculum is culturally sensitive and uses culturally responsive language, including the importance of self-designated pronouns, (3) offering unbiased and evidence-based information while acknowledging that everyone has unique circumstances and

preferences, and (4) emphasizes that any information that is shared or conversations that take place remain confidential in order for people to feel more comfortable discussing sexual and reproductive health needs. Learning about the needs of immigrant populations may lead to higher sexual health education and knowledge within these communities, which may contribute to increased feelings of empowerment and bodily autonomy within immigrant populations.

This curriculum hopes to help people understand the intersections of SRH with gender, race/ethnicity, and sexual identities while challenging ethnocultural and sexual inequities in ways that would help people assert their rights in areas encompassed by SRH. Our team also plans on assessing validity and reliability of information presented in the curriculum, to ensure information is updated periodically.

According to the Canadian Guidelines for Sexual Health Education, effective sexual health education should be provided in an age-appropriate, culturally sensitive manner that is respectful of individual choice and that:

- 1** Does not discriminate on the basis of race, ethnicity, gender, sexual orientation, religious background, or disability in terms of access to relevant information;
- 2** Focuses on self-worth, respect, and dignity of the individual;
- 3** Integrates the positive, life-enhancing and rewarding aspects of human sexuality while also seeking to prevent and reduce negative sexual health outcomes;
- 4** Incorporates a lifespan approach that provides information, motivational support and skill-building opportunities that are relevant to individuals at different ages, abilities and stages in their lives.
- 5** Provides accurate information to reduce discrimination based on race, ethnicity, gender, sexual orientation, religious background and disability;
- 6** Encourages critical thinking about gender role stereotyping, while recognizing the importance of gender-related issues in society, the increasing variety of choices available to individuals and the need for better understanding and communication to bring about positive social change;
- 7** Recognizes and responds to the specific sexual health education needs of particular groups such as adults, seniors, people who are physically or developmentally disabled, children and adults who have experienced sexual abuse and marginalized populations such as Aboriginal people, immigrants, gay, lesbian, bisexual and transgendered people as well as youth and street youth (Health Canada, 2003, p. 8).

Source(s):

[Canadian Guidelines for Sexual Health Education](#)



# FOR FACILITATORS, TEACHERS & EDUCATORS

Prior to facilitating discussions or sessions on sexual and reproductive health (SRH), it is important to begin by acknowledging that we do not have all the answers to the youths' questions and will seek information in partnership with the youth. It is also important to acknowledge that we do not know the answers to every question and that this is as much of a process of learning for us as it is for them.

## Anti-Oppressive Teaching

When working towards an anti-oppressive teaching approach, it is important to acknowledge that it will look different for everyone. When talking about social justice in classrooms, it is imperative to use an approach that touches on processes and goals to provide students with a critical understanding of social, historical, cultural, political, economic, and ethical contexts. Anti-oppressive educators have recognized the problematic nature of biased, non-inclusive curricula that are Eurocentric, and gender normative (Kenway & Willis, 1998), heterosexist (Lipkin, 2000), or class-biased (Apple, 1995). It is important for educators to move away from focusing only on certain stories and perspectives as such curricula may privilege certain groups of students over others. For students who are only able to gain partial knowledge, it may influence the way they perceive SRH, how they think, and how they relate to others. As a result, inclusive

curricula are important to ensure we are not only learning but also embracing various social differences while affirming people's personal identities (Kumashiro, 2002).

In the context of SRH, anti-oppressive education would be one which does not marginalize any particular way of being and instead focuses on an inclusive and accessible approach to learning and teaching. Many curriculums will often omit or ignore the request to incorporate important SRH topics such as the spectrum of sexuality, sexual pleasure, birth control, racialization, fetishization and the impact on the perception of relationships, sexual assault, lack of abortion access, and many others. This may be due to various factors as educators are often not supported by institutions to properly address the topics or due to the fear of causing controversies with parents or guardians. Our current sexual health education is often centred around

heterosexuality, and topics around lesbian, gay, bisexual, transgender, queer, or queer questioning sexualities are often not included in SRH education leading to a lack of general knowledge about the LGBTQ2S+ community. This lack of knowledge may lead to further issues as there will be gaps or less significance given to these topics, leading to more oppression and further marginalization of these groups.

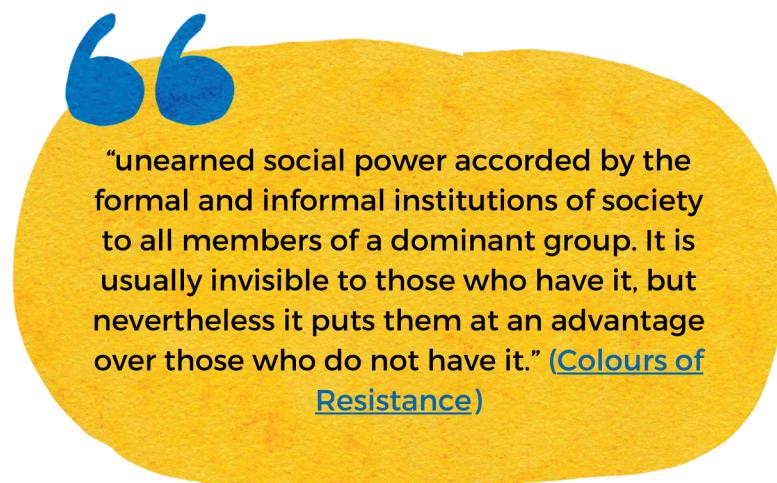
**As educators, you can work towards an anti-oppressive teaching approach by:**

- Treating students from all backgrounds with dignity and respect.
- Supporting students from diverse social and cultural backgrounds by paying attention to their needs.
- Ensuring students feel physically and psychologically safe and secure during conversation or dialogue that is taking place and are able to bring forward any concerns either face to face or anonymously.
- Ensuring that every student has a voice in the decisions that affect them and that they are able to bring their voices and opinions across in a way that is safe and comfortable for them.

Understanding that the “isms” happen at all levels, which are reinforced by societal norms, institutional biases, interpersonal attractions, etc:

- **Individual** e.g., feelings, beliefs, values
- **Interpersonal** e.g., actions, behaviours and language
- **Institutional** e.g., legal system, education system, public policy, hiring practices, media images
- **Societal/Cultural** e.g., collective ideas about what is “right”

Privilege is the systemic or structural advantages we experience based on our social identities or the:



“unearned social power accorded by the formal and informal institutions of society to all members of a dominant group. It is usually invisible to those who have it, but nevertheless it puts them at an advantage over those who do not have it.” ([Colours of Resistance](#))

## **How can we be aware of our privilege when pursuing a teaching role?**

- Pay attention to trends. Who is speaking up? Who is staying silent and why may this be? How can you change the way you facilitate conversations to encourage new voices to join the discussion?
- Give time for participants to process individually or with their partners before beginning big group discussions.
- Consider the layout of the room and how it can be structured in a way to includes more voices.
- Go where the learning is. The learning may be in the activity you planned as a facilitator, but this could also be a story or critical incident that comes up during teaching.

## **How do we create, implement and ensure safer spaces?**

- Setting clear guidelines and expectations for behaviour, actively promoting inclusivity and diversity, and providing resources for those who may need support.
- Actively addressing any instances of discrimination or harassment.
- Maintain ongoing effort and commitment, including regular check-ins and evaluations of the space to ensure that it remains inclusive and safe for all.



## Cultural Sensitivity & Humility

Cultural sensitivity and humility are the foundational pieces to building trust, respect, and meaningful engagement with individuals; this is particularly important when engaging with women and youth immigrants in order to ensure feelings of safety and inclusion. Cultural sensitivity is the knowledge of and respect towards cultural differences (Kubokawa, 2009). Cultural humility involves honouring the beliefs, values, ways, and experiences of other cultures (Tervalon & Murray-Garcia, 1997). Specifically, ongoing learning and reflection about one's own role in the experiences and power dynamics that affect people from other cultures are also important parts of cultural humility (Tervalon & Murray-Garcia, 1997).

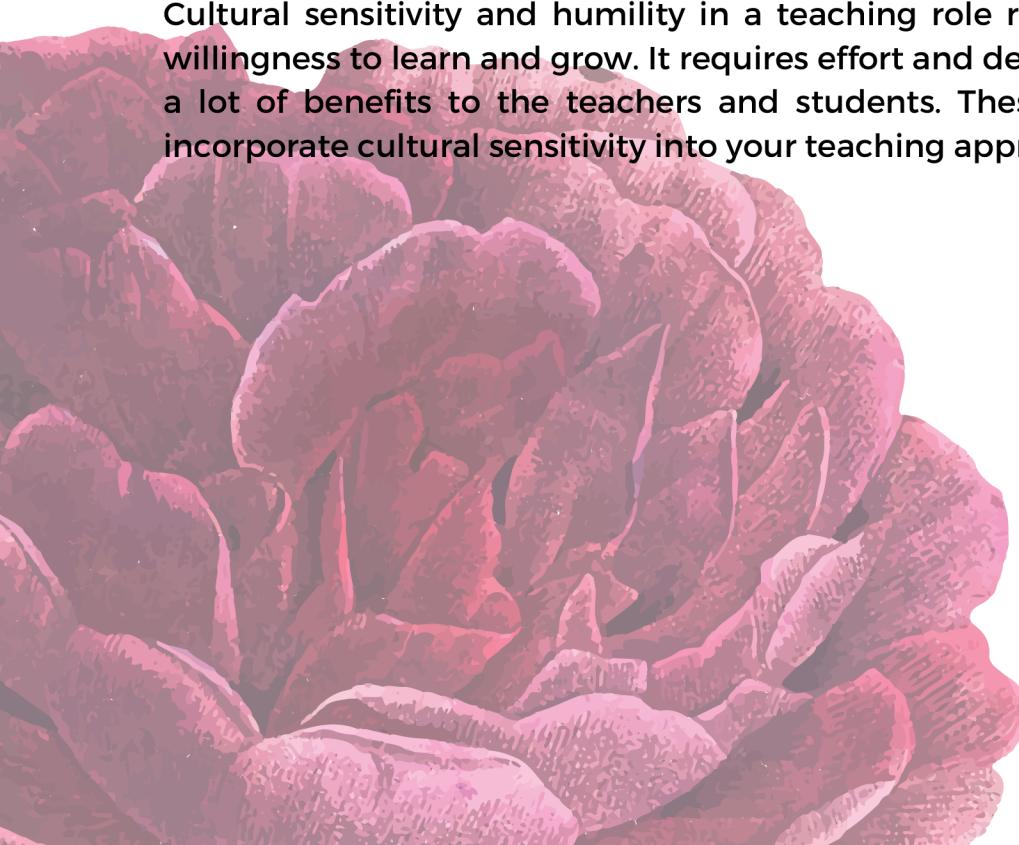
Studies have found that cultural sensitivity does impact the mental health of refugee- and immigrant-youth (Oppen et al., 2020). Cultural humility has also been found to be associated with reduced prejudice, threat (Visintin & Rullo, 2021), and with more positive intergroup attitudes and perceptions (Rullo et al., 2022). Moreover, as stated by Brown, Vesely and Dallman (2016), education is “vital to building respect for the worth, dignity, and equality of every individual in our diverse society”. Therefore, ensuring cultural sensitivity and humility in educational spaces is critical for the success and well-being of immigrant students.

In the journey of cultural sensitivity and humility, there are several key factors. It is foundational to have self-awareness of one's own attitudes, norms, beliefs, behaviours, prejudices, biases, stereotypes. In addition to knowledge about one's own background and culture, cultural knowledge of others' cultures is necessary. This means being open to learning about other cultures while being mindful of not putting a burden of mandatory education on the shoulders of the immigrants themselves. Finally, accountability is key. In the case of immigrant students, accountability refers to holding educational institutions, systems, and agents accountable for providing equity and inclusion. This entails learning about and discussing historical and ongoing racism and discrimination disproportionately experienced by immigrants and other minorities. It is important to become active bystanders and actors of change who create safe and inclusive spaces for immigrant students and who create culturally relevant materials for their use.

Ultimately, it is important to continually engage in discourses that challenge power imbalances between immigrant students, educators, institutions, and societies; and it is important to commit to self-evaluation and self-critique as a part of cultural humility. Maintaining cultural sensitivity and humility in a teaching role involves being aware of one's own cultural background and biases, and recognizing the diversity of the students and community. Here are a few ways to approach this:

- Educate yourself: Continuously learn about different cultures, customs, and traditions, and be open-minded when approaching new conversations or facilitating discussions.
- Be respectful: Avoid making assumptions or stereotypes about students or their cultures, and use inclusive language throughout the conversation.
- Avoid cultural appropriation: Respect the customs, traditions and cultural expressions of the students and community and avoid making any assumptions.
- Encourage diversity: Create a positive and inclusive classroom environment that respects and values different cultures, customs, and traditions.
- Be open to feedback: Allow students and colleagues to give feedback on how you can better improve and address cultural sensitivity and humility in your teaching.
- Be aware of power dynamics in classroom settings: Recognize that as a teacher, you may have more power and privilege in the classroom, and be mindful of how this affects your interactions with students.

Cultural sensitivity and humility in a teaching role require self-reflection, and a willingness to learn and grow. It requires effort and dedication, but may also bring a lot of benefits to the teachers and students. These are a few ways you can incorporate cultural sensitivity into your teaching approach.



## Trauma-Informed Approach

It is broadly understood that students face a number of challenges from external factors, other than academics, during their education journey. For example, discrimination based on race or religion can have an impact on a student's well-being, such as increased anxiety (Maynard et al., 2019) and when faced with topics that they know are considered taboo at home, can create students that are likely to be less engaged in the classroom. As such, a trauma-informed approach is necessary since students that come from immigrant families may be more susceptible to having lived through trauma previously, whether in their home country or simply by identity factors that may be different from their peers. Trauma is multi-dimensional as it includes social determinants like social inequities, institutional inequities, and living conditions. These determinants funnel into downstream consequences including mental health and behavioural health risks. Therefore, a trauma-informed approach focuses on individual harm and injury to a healing-centred practice that fosters possibility and advances collective wellbeing (Klinic).

Educators can use different healing-focused approaches to make sure their students feel safe and welcomed in their classrooms. These approaches can be applied at the individual, interpersonal, or institutional levels. Individual practices may involve self-reflection through storytelling and healing from one's own trauma, while interpersonal practices focus on healing relationships and creating meaningful connections (Klinic). At the institutional level, practices, values, and policies that foster well-being is prioritized, like mental health days (Klinic). In the realm of interpersonal practices, restorative circles can be helpful in supporting youth to share their concerns. In the context of one's classroom engaging with SRH, there could be a support group of students who share a similar

background, and actively engage with youth in conversations about their culture and identity, and the fears they may face in response to learning about sexual reproductive health. Educators that acknowledge the need for anti-racist practices in their schools, and engage with students about their anxiety surrounding their own experience with racial bias, help them feel at ease in their classroom as they feel heard.

Further, interpersonal practices also include being aware of how to frame one's approach to these conversations with their students. Thomas et al. (2019) summarize the six principles for compassionate instruction and discipline in the classroom developed by Western

Washington University. These principles include providing unconditional positive regard, empowering the participants, maintaining high expectations, and providing guided opportunities for helpful participation (Wolpow et al., 2009). It is crucial that these principles are accompanied with intentional action to maintain a compassionate and understanding environment where meaningful relationships are built and sustained between staff and students (Thomas et al., 2019).

When trying to incorporate a trauma-informed approach in SRH education, it is important to be mindful and sensitive to the needs of students and consider factors such as past trauma on individuals, while creating a safe and empowering environment for learning. A few ways you can incorporate a trauma-informed approach into your teaching style are:

- Be aware of triggers: Prior to beginning a section, understand and acknowledge that certain topics may appear as triggers so it is important to ensure that there are appropriate supports and accommodations present for those students. Make sure to incorporate content warnings prior to beginning any sections that may include sensitive information.
- Teach through a holistic approach: Physical, emotional and mental health are interconnected so try to provide a holistic approach that addresses education on trauma and its impact on sexual and reproductive health.
- Offer support and resources to audience members: Provide a list of resources that individuals will have access to locally, particularly for those who may have experienced trauma related to SRH.
- Encourage self-care and compassion: Allow students to check in with themselves and take care of their emotional, mental, and physical health.
- Reflect on your own understanding and biases: Throughout the session and conversations, and activities take time to reflect on your own biases and understanding of trauma and the impact it can have on sexual and reproductive health.

A trauma-informed approach is important to prioritize the well-being and empowerment of students to create a more inclusive and safe environment for learning.

It would also be beneficial for educators to provide resources for self-care, as not all students will benefit from the same approach. Providing a list with healthy coping mechanisms, such as journaling, meditating, or ensuring that counsellors are present in the school could help students that are experiencing anxiety when faced with SRH topics realize that their reactions are normal and that they are allowed and encouraged to seek support.

## Diversity & Representation

As stated by Elia and Tokunaga (2015), a multidimensional approach to sexual health is important. This approach identifies non-inclusive education and attempts to remedy it so that it serves the diversity of its students and is hence more effective (Hendrick & Howerton, 2010). One-size-fits-all sexual health curriculums are inadequate and problematic for a highly diverse student body (Elia & Tokunaga, 2015). For example, the often explicit ways in which sexuality is discussed in a classroom including both boys and girls may be contradictory to the values or wishes of Islamic families. In turn, cognitive learning theory, which examines the mental processes that give rise to learning, states that we are more capable of learning new information when we have background knowledge and frameworks to that we can attach it (Garcia, 2009). In the context of sexual health, youth come into these topics with different cultural understandings of sexuality, which might cause them to feel alienated by the education they receive. Developing cultural competencies will allow teachers to be aware of the different cultural perspectives on different topics, and thus effectively teach with these perspectives in mind.

A systematic review by Laduke (2022) discusses the ways in which creating an environment that acknowledges and celebrates diversity can positively affect education (Garcia, 2009). Laduke argues that embracing individuality in the form of diverse identities allows for the cultivation of equality in the classroom (Garcia, 2009). Instead of asking students to leave the unique aspects of their identity, such as ethnicity or religion, outside of lessons, it is important to acknowledge them (Garcia, 2009). Teachers must in turn also embrace their own unique background, acknowledging the unique parts of themselves and teaching from it; not only to students from different backgrounds but also transferring their unique knowledge to all students as a way to foster greater

understanding and new perspectives (Garcia, 2009). Personalizing education to suit the diversity of a classroom allows for the creation of new and more advantageous ways to learn. Overall, creating a culture of diversity and valuing representation in the classroom cultivates an environment in which it is safe for all teachers and students to be themselves, thereby generating inclusive learning experiences, especially in sensitive topics such as sexual health (Garcia, 2009).



When teaching sexual and reproductive health, it is important to recognize and acknowledge the different experiences and perspectives of individuals and communities. A few educators can do this by:

- Being aware of and being sensitive to different cultural norms, values, and beliefs that affect individuals, understanding and experiences with sexual and reproductive health.
- You might also want to consider reaching out and consulting with individuals from underrepresented groups in the planning, development, and implementation of sexual and reproductive health programs.
- Offer resources and materials that include different voices and perspectives.



## Working with Immigrant Youth

When working with immigrant youth, it is important to address how structural racism may influence SRH inequities among immigrant youth. According to Valdez et al. (2022), some major themes that have come out of their research include lack of culture-centred SRH support for recently immigrated youth, immigration enforcement and fear impacting access to SRH education and services for adolescents, and perceived ineligibility related to tenuous legal status as a barrier to accessing SRH services.

In order to prioritize youth agency and voice when engaging in SRH education, Valdez and colleagues' research shows that rooting sexual education curricula in a way that recognizes local cultural understandings will help acknowledge the structural constraints that young people face (Valdez et al., 2022).

A structural barrier to SRH education is often the translation of English-language curricular materials and the use of translators as the primary strategy for providing sexuality education and SRH care for English language learners. This can be problematic as English-language translation of SRH curricula and resources has historically been a quick fix for making programs more inclusive for immigrant youth community members. This solution is deemed superficial and does not center the deeper histories and current lived experiences, the local cultural dynamics, or the creativity and voice of the communities served (Valdez et al., 2022). In order to address the linguistic barriers and uninformed assumptions that this strategy causes, it is important for us to understand that educators must participate in systemic reforms that will ensure educational equity.

According to Valdez et al. (2022), developing culture-centered sex-ed programs for youth requires us to take into account local cultural understandings, values, and structural constraints in order to position youth into their own agency and provide them with a voice. Strategies that have been promising in the past include didactic and participatory methods such as storytelling, body mapping, story circles, and poetic enquiry. These have helped engage youth, by increasing their sense of autonomy and self-expression, by valuing and amplifying the voices in ways that do not require English-language skills or being spoken. Further, another study by Louie-Poon et al. (2021) found that immigrant adolescents' knowledge requires needs on STIs, HIV's, transmission and protection,



unintended pregnancy, sexual activity, family planning, pubertal education, navigating the healthcare system, and also confidentiality legislation. Therefore, approaches to SRH education and services for immigrant youth should include cultural sensitivity, intersectional

approach, interactive learning, strength-based approach, and reassurance of confidentiality rights (Louie-Poon et al., 2021). An important example of this is the need to have facilitators learn about FGM/C and have the proper training to support youth.

Creating a safe space for immigrant youth is imperative when discussing sexual and reproductive health topics. A few ways you can support immigrant youth is by:

- Create an inclusive and non-judgemental environment by making youth feel comfortable about asking questions and discussing sensitive topics. You can do this by fostering open communication, and avoiding stereotyping and biases.
- Build trust with youth by being sensitive to youth's unique needs, experiences and cultural backgrounds. Also, listening actively to their concerns and questions will also open space for dialogue.
- Provide accurate and culturally relevant information to immigrant youth so they can make informed decisions about their own sexual and reproductive health.
- Address immigration-related concerns for those who may have concerns about access to services.



## **Anti-Oppression and Anti-Islamophobia in SRH**

The aftermath of 9/11 as well as the harmful stereotypes created by it have had devastating impacts on Muslims across the world, especially in the context of the classroom and educational settings. Not only that but Muslims who may be racialized may face double the burden of stereotypes, oppression, as well as racism in their day-to-day activities. As educators and community advocates, it is everyone's duty to create safe spaces where Muslims will feel safe and heard. In the context of the current toolkit, it is imperative to create SRH education settings with a sense of safety and confidentiality.

Educators can employ some of the following tips to create safe spaces for Muslim and racialized students in SRH education settings:

- Acknowledge that anti-Islam and anti-Black hate exists in all oppressive education settings. It is important to address and acknowledge this and also addresses it with your audience to ensure they are aware of the consequences of their actions such as bullying others based on their religious or racial identity.
- When discussing content related to racialized students, do not single them out, or create an awkward environment where they might feel uncomfortable due to their visible identity markers, such as a hijab or their skin colour.
- Create a space for open communication and active listening to foster a sense of trust and understanding among the students. Provide training and resources for educators to understand and also address issues that are related to race, religion, and culture. Try to ensure that the curriculum that is being taught includes perspectives from diverse communities.
- Encourage active participation and input from students in creating and maintaining a safe and inclusive environment through anonymous ways. Offer support and resources for students who are experiencing discrimination or harassment.



## **Stereotypes in the Classroom**

Gender stereotypes are often deeply entrenched in the ways that sexual and reproductive health education is taught. In their analysis of the political and legal constraints on sex education curriculums in American public schools, Hendricks and Howerton (2010) noted that harmful gender and heterosexual norms tend to be reinforced. For example, elements of abstinence-only education add to the idea that it is the responsibility of women to keep their (male) partners faithful, as well as to refuse premarital sex in order to maintain their “purity” (Hendrick & Howerton, 2010). Sex is often implicitly associated with contamination, and thus, in having casual sex with multiple partners, a young woman loses her “value”. While young women are taught that they are “sexual gatekeepers” of this kind, the idea that young men have little control over their sexual behaviour is reinforced, which is deeply problematic (Hendrick & Howerton, 2010). These attitudes erase women’s sexual agency and the idea that women can have strong sexual desires too, and that these desires are normal. The assumption of heterosexuality present in most curricula also synonymizes sex with vaginal intercourse (Hendrick & Howerton, 2010). There is generally no discussion of any other sexual activity, which results in a failure to normalize non-heterosexual sex between gender-diverse people, or even sexual activity that may be more enjoyable for women specifically. Young people, especially young people of colour, are often moulded into a box of heterosexuality (Elia & Tokunaga, 2015).



Sexual stereotypes related to race can also be perpetuated during education about sexuality. For example, young Black and Latina women are often portrayed as more promiscuous and more likely to experience teen pregnancy (Elia & Tokunaga, 2015). Young people of colour are often not treated with the same forgiveness that is afforded to white youth, because they are perceived as more

adult-like (Garcia, 2009). As a result, their sexual activity and their actions can be perceived as more threatening and dangerous, both to themselves and to their communities. When information is presented to them about sexuality, it often portrays them as being “at risk” (Elia & Tokunaga, 2015; Garcia, 2009).

The intersection of identity stereotypes reinforced in common teaching materials with the diverse identities and cultures of young immigrant women may result in it being more difficult to achieve the type of education they deserve. Being aware of these stereotypes and actively acknowledging and countering them is an important step to helping all students to develop a healthy, comprehensive understanding of sexual health.



## Immigrant-Serving Community Organizations

According to Statistics Canada (2022), nearly a quarter of Canadians are either an immigrant to the country or permanent residents. This speaks to the need for immigrant-serving community organizations in the country. These organizations can exist on a federal, provincial/territorial or regional level. The Government of Canada has provided a resource that lists various organizations that cater to newcomers to Canada, and the site sorts these organizations by Orientation, Language and Skills, Labour Market Access, Welcoming Communities and Policy and Program Development ([Government of Canada, 2022](#)). This site would be most beneficial for new or current organizations that wish to cater to immigrants. The site also provides a resource service-providing organizations can refer to when assisting newcomers ([Volunteer Canada, 2016](#)).

The Government of Canada also provides a website that allows individuals to search for local organizations that cater to immigrants ([Government of Canada, 2022](#)). This site is especially useful, as one can search for organizations by postal code, city, province, full address and type of service (which includes services for women, youth and LGBTQ2S+).

Points to consider:

- SRH-related organizations/resources for immigrant communities
- Stigma regarding SRH and immigrant women and girls
- Canada-wide (Accessibility for permanent residents vs citizens)

[Alberta Association of Immigrant Serving Agencies](#) is an organization that facilitates collaboration and leadership within the settlement-serving sector and provides integration services. They offer an inclusive and welcoming environment for newcomer immigrants.

[Calgary Region Immigrant Employment Council](#) is dedicated to connecting newcomer professionals to strategies that will lead to successful employment outcomes.

[Edmonton Region Immigration Employment Council](#) is dedicated to ensuring immigrants feel welcomed and are able to participate in the Edmonton economy to their full potential.



[Affiliation of Multicultural Societies and Services Agencies of BC](#) is an organization that serves immigrants and newcomers in BC, and also builds culturally inclusive communities with the knowledge, resources, and support needed.

[Immigrant Services Society of BC](#) provides a supportive environment for newcomers to Canada of all backgrounds.

[Manitoba Association of Newcomer Serving Organizations](#) is present to facilitate newcomer integration in Manitoba by providing leadership, support and a unified voice for settlement and integration organizations.

[New Brunswick Multicultural Council Inc.](#) is working to enrich and grow our communities and enhance life in our province by enabling newcomers and members of the multicultural community to fully participate in society.

[Association for New Canadians](#) delivers settlement and integration services to immigrants and refugees in Newfoundland and Labrador.

The [Immigrant Services Association of Nova Scotia](#) provides an immigrant settlement service agency in Atlantic Canada, through many kinds of services—language, settlement, community integration, and employment—both in person and online.

[Ontario Council of Agencies Serving Immigrants](#) acts as a collective voice for immigrant-serving agencies and to coordinate responses to shared needs and concerns.

[Ottawa Community Services Organization](#) supports immigrants and refugees through the journey of making Canada home.

[Regina Open Door Society](#) offers many programs to help immigrants adjust to their communities with childcare, employment, language, and more.

[International Women of Saskatoon](#) is dedicated to improving the status of immigrant and refugee women as well as their families residing in Saskatoon.



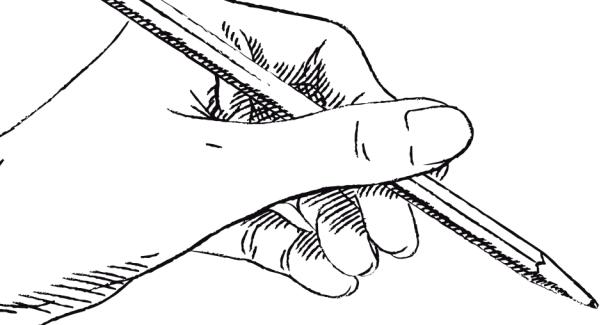
## **Accessibility and Inclusion**

Like everyone, children with disabilities have the right to receive an education about their changing bodies and sexuality in a way that is inclusive of their specific needs. This is especially important due to findings that suggest that children with disabilities are more vulnerable to maltreatment, abuse and sexual assault (Murphy et al., 2006; Sullivan & Knutson, 2000), as well as sexually transmitted infections (STIs) (Mandell et al., 2008). However, the needs of these children are often ignored or not met.

Allowing children with disabilities to access appropriate sexual health education is a required step to equipping them with the knowledge of what healthy sexuality and relationships look like, to allow them to become self-determined individuals with their own distinct sexualities (Treacy et al., 2018). To provide truly inclusive SRH, barriers to education must be removed so that students with disabilities are always included in conversations about sexual health, feel represented, and feel that their needs are understood (Treacy et al., 2018). Students' diverse intersectional identities must be embraced and approached with cultural competence to provide truly equitable sexual and reproductive health education.

Educators and facilitators can create more accessible and inclusive spaces by:

- Understanding the diverse needs and experiences of individuals with disabilities and ensuring that accommodations are made to ensure accessibility in all aspects of SRH education.
- Providing information and resources on the various ways in which SRH is impacted by disabilities.
- Incorporating a variety of teaching methods to cater to different learning styles and abilities.
- Encouraging active listening and providing opportunities for individuals with disabilities to share their perspectives and experiences, while fostering an understanding and appreciation of the diversity of identities and experiences related to SRH within disabled communities.
- Providing resources and referrals for individuals with disabilities who may be experiencing discrimination or marginalization related to their SRH.
- Making sure the physical setting of the education is accessible, and that the materials are accessible to individuals with different abilities.



## Teaching Resources

We have included several additional teaching resources for those looking for further information on certain topics.

[Teen Health Source's Sexual Health Blog](#) has resources for teens that explain sexual health topics in a youth-friendly manner. Many topics are included; ones that may be of particular help are "[The role of culture in teen sexuality](#)", "[Talking to your parents about sexual health](#)", [self assessments](#) for which birth control may be right, and [quizzes](#) related to STI and healthy relationship knowledge, and many more.

[Sex and U](#) offers a resource for body image for boys.

[Planned Parenthood](#) offers a fact sheet detailing a wide variety of topics related to sexual health, including anatomy, birth control, and STIs.

[Sex Information & Education Council of Canada's](#) website includes the Promising Practices Portal which provides teaching documents and curriculum documents from each Canadian province/ territory. Sexual Health Education resources include helpful Q&A publications on Inclusive Practice Among Ethnocultural Minorities and Sexual Health Education for Youth with Physical Disabilities.

[Talking about Sexuality in Canadian Communities](#) provides tools and resources for high-risk youth and youth with disabilities. This includes a [Puberty kit: Description of Teaching Aids](#) and a [Birth Control Kit](#).

[Teaching Sexual Health](#) offers teachers specific workshops, webinars including a [resource for managing sensitive issues](#) such as abuse, sexual orientation, or pregnancy and being able to handle disclosures in a non-judgemental manner.

[York Region Public Health](#) offers sexual health lesson plans and classroom activities for grades 7-12, including resources surrounding student decision-making.

[The Canadian HIV/AIDS Black, African, and Caribbean Network](#) have developed a fact sheet related to HIV stigma in African, Caribbean, and Black communities.

The Texas Institute of Child & Family Wellbeing at the University of Texas at Austin's School of Social Work offers a [guide to trauma informed sex education](#) through their Cardea Connections Project.

Interior Health offers a [list of sexual health resources](#) for educators including lesson plans organized by grade level and topic.

[Canadian guidelines for sexual health education](#) published by the Canadian Public Health Agency.

SextEd offers a [resource for using inclusive language](#) during sexual education.

Simcoe Muskoka District Health Unit offers sexual health resources and lesson plans for grades 1-8.

End FGM Canada Network offers the online course [FGM/C foundation training module: Understanding Female Genital Mutilation / Cutting: A Canadian Issue](#). This online module provides an overview of FGM/C, the Canadian context, and the Canadian FGM/C laws. In addition, they also offer training specifically for teachers to identify girls at risk and support girls impacted by FGM/C.



## **Cultural Adaptations to Sexual and Reproductive Health Education**

It is important to understand ways in which educators and facilitators can make cultural adaptations to the present curriculum and resources. Although there are many ways one can incorporate culture into the curriculum, we will be highlighting four different strategies to do this. Before you begin, please consult our sections on the use of inclusive language and creating safe spaces. It is also important to note that you should never use a ‘one size fits all’ approach. Individuals from the same cultural background may have different needs from one another, so be mindful of that and consider taking an intersectional and trauma-informed approach. To avoid generalizing, it may be important to conduct a baseline assessment on sexual and reproductive health (SRH) topics of the individuals you are working with.

### **Language**

This one is especially important when working with newcomer populations. It is crucial that you perform a baseline assessment to inquire about the individual’s native language as well as the language they feel most comfortable communicating. It may also be helpful to get an understanding of whether there are multiple languages the individual feels safe communicating with. To make a language adaptation, it is important that you work with a qualified translator to translate the lesson plans into the preferred language. Do not use Google Translate, especially if you do not have any fluency in the preferred language. Another way to make a language adaptation is to hire a facilitator who speaks the preferred language. For example, you could hire a facilitator who is fluent in Urdu or Korean if the group or individual you are working with has a preference for those languages.

### **Delivery**

It is important to consider adapting the delivery of the lesson plans, such as the setting, accessibility, and costs involved. Due to structural barriers and inequities, many individuals may find it difficult to allocate time for attending SRH seminars or workshops, which is why you may need to shorten lesson plans depending on the needs and interests of the group or individual you are working with. In addition to this, you might also consider doing the lesson plan over an online platform, such as Zoom, to reduce the costs of transportation and time allocation. If possible and allowed, you may consider conducting the lesson plan in the individual’s home if they feel comfortable doing so.

## **Family Involvement**

Many cultures place a high value on family involvement and family-oriented values, which is why it may be helpful to include family members in lesson plans or seminars. You can do this by also inviting family members to community lessons or seminars in addition to the immigrant youth. However, keep in mind that some family members may not feel comfortable being in the space, and it is important to respect that. Furthermore, always inquire the youth if they feel comfortable with having their family present before extending an invitation.

## **Cultural Norms and Practices**

The inclusion of idioms, folk stories, and culturally relevant scenarios into the SRH content may be helpful, especially when working with ethno-racial minorities. Due to historical oppression against marginalized groups such as Black and Indigenous folks, it is imperative to understand that there may be mistrust towards individuals in healthcare spaces, including spaces where SRH education is delivered. It is important to meet people where they are and understand their needs and comfort level through a trauma-oriented approach. In this case, this may mean that you learn about their culture and traditions in order to respectfully incorporate them into the content and conversation. If you are not sure about something, do not assume you know what it means. It is also important to consider hiring a facilitator that may identify with the same community as the students or their families in order to increase comfort and a sense of belonging.

## INCLUSIVE AND ACCESSIBLE LANGUAGE GUIDE

When translators are working with this toolkit, we advise educators, facilitators and teachers to utilize this resource to ensure they are creating safe spaces for youth to bring forward their feelings, thoughts, and perspectives during workshops, seminars, and discussions.

It is important to incorporate inclusive and accessible language when facilitating a conversation on SRH. Language is inclusive when it does not exclude anyone based on characteristics such as gender, physical or mental disability, as well as cultural or religious background. According to Caroline Forsey at Blog Hubspot:

"Inclusive language is the words and phrases you use that avoid biases, slang, and expressions that discriminate against groups of people based on race, gender, socioeconomic status, and ability. When used, you can resonate with more audiences by speaking and writing in ways that everyone understands and makes everyone feel welcome." (Forsey, 2022).

If you're wondering, 'Why is it important to use inclusive and accessible language?', you wouldn't be the only one! Lots of people don't realize the value and importance of speaking in a way that is respectful to all. Let's think about it. We all use language to communicate with one another, and we all know that the common saying "Sticks and stones will break my bones but words will never hurt me" is actually NOT true. A lot of times, words CAN hurt and words CAN be used as a form of oppression.

On the other hand, words can be very beautiful too (think of all the stories on love out there) when they are used in a certain way. It all comes down to this: willingness. You must be willing to use inclusive language. Using inclusive language will take into consideration other people's identities, and "offer the validation and acknowledgment of [those] identities" (Jain, 2020).

By not using inclusive and accessible language is disrespectful and ignorant towards those who already face difficulties in life by excluding them which "contributes to the marginalization of people/communities" (Jain, 2020). The use of language greatly impacts our sense of belonging, whether that is in a classroom, a workplace, or within a group of friends.

To conclude, try to use inclusive and accessible language as that will help other people to feel safe, included, and that they belong. As Neha Jain from Medium states, “Inclusive Language acknowledges diversity, conveys respect to all people, is sensitive to differences, and promotes equitable opportunities” (Jain, 2020).

