

Health Information Binder

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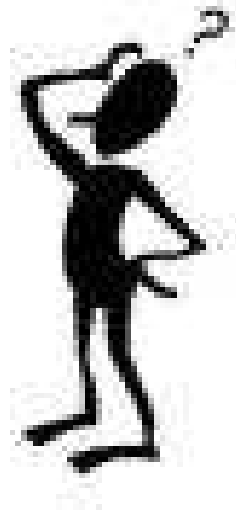
Prepared for:

Bluefield Counselling Centre



How do I use this Binder?

- ☆ The purpose of this binder is to provide you with information on health related topics.
- ☆ In order to obtain information on your topic of interest, find the right section on the next page and then flip to that section of the binder.
- ☆ When you have found the right section use the chapter list at the beginning of the section to find the topic you want.
- ☆ There are several copies of each topic sheet, so you can take a copy with you. Please DO NOT take the coloured copies!
- ☆ Each topic sheet will give you general information on the topic, helpful web sites for you to use for more information, and contact information if you need someone to talk to.
- ☆ If you would like more information on any topic there is more available in the Counselling Centre Resource Filing Cabinet.
- ☆ If you need any help finding the information you need please see one of the School Counsellors.



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Section 1

~ Drugs ~

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Chapter 1

~ Acid/LSD ~

Brief Description:

- Acid or LSD is an hallucinogen and is one of the strongest mood-changing drugs.
- It is sold as tablets, capsules, liquid, or on absorbent paper.
- It is odourless, and has a slightly bitter taste.
- It is usually taken by mouth.

Effects:

- The effects of Acid/LSD are very unpredictable and it depends on:
 - ▶ the amount taken
 - ▶ the user's personality, mood, expectations
 - ▶ the surroundings in which the drug is used
- User usually feels effects of the drug 30 to 90 minutes after taking it and effects can last for up to 12 hours.
- Physical Effects:
 - ▶ dilated pupils
 - ▶ increased body temperature
 - ▶ increased heart rate and blood pressure
 - ▶ sweating
 - ▶ loss of appetite
 - ▶ sleeplessness
 - ▶ dry mouth
 - ▶ tremors
- Psychological Effects:
 - ▶ rapid mood swings
 - ▶ feeling several intense emotions at one time
 - ▶ delusions and visual hallucinations
 - ▶ altered sense of time and self
 - ▶ sensations "cross over," so the user has the feeling of hearing colours or seeing sounds
 - ▶ sensory disturbances can be frightening and can cause panic
 - ▶ severe, terrifying thoughts and feelings
 - ▶ fear of losing control
 - ▶ fear of insanity and death
 - ▶ flashbacks which can occur within a few days or more than a year after LSD use

Risks of Acid Use:

- ▶ decreased awareness of touch and pain that can result in self-inflicted injuries
- ▶ dizziness, nausea, and vomiting
- ▶ convulsions, coma, heart and kidney failure, and even death
- ▶ depression, anxiety, and psychosis
- ▶ bizarre and/or violent behaviour
- ▶ confusion, suspicion, and loss of control
- ▶ memory and thinking problems
- ▶ catatonic syndrome (the user becomes mute, lethargic, disoriented, and makes meaningless and repetitive movements)

If you want further information on the risks of using Acid/LSD check out these websites:

<http://www.nida.nih.gov/Infofacts/LSD.html>

<http://www.nida.nih.gov/DrugPages/ACIDLSD.html>

http://www.teens.drugabuse.gov/mom/mom_hal1.asp

If you would like to talk to someone use one of the contact numbers listed here:

Addiction Services 1-888-299-8399

Island Helpline 1-800-218-2885

Kid Help Phone 1-800-668-6868

Survival Centre for Youth 902-894-5884

Chapter 2

~ Cannabis/Marijuana ~

Brief Description:

- Marijuana is the most commonly used illegal drug.
- It is usually smoked as a cigarette or in a pipe.
- It is a dry, shredded green/brown mix of flowers, stems, seeds, and leaves.
- It can be in a more sticky form (hashish) or in a sticky black liquid (hash oil).
- Marijuana smoke has a sweet and sour odour.

Street Names:

- Pot, ganga, weed, grass, hash, and many others

Effects:

- memory and learning problems
- distorted perception
- difficulty thinking and solving problems
- loss of coordination
- depression, anxiety, and personality disturbances
- burning and stinging of the mouth and throat
- heavy cough and increased phlegm production
- risk of lung infections
- increased heart rate
- increased risk of heart attack
- permanent changes in the brain
- increased risk of developing cancer

The adverse impact on memory and learning can last for days or weeks.

Marijuana is ADDICTIVE

- This means that people will use the drug compulsively even though it interferes with family, school, work, and recreational activities.
- People that are addicted to Marijuana and try to quit will crave the drug.
- They will also go through withdrawal where they will have physical symptoms when they are not using the drug.

Withdrawal Symptoms:

- irritability
- sleeplessness
- anxiety

If you want further information on the risks of using Marijuana check out these websites:

<http://www.nida.nih.gov/Infofacts/marijuana.html>

<http://www.nida.nih.gov/DrugPages/Marijuana.html>

http://www.teens.drugabuse.gov/facts/facts_mj1.asp

<http://www.acde.org/common/Marijana.htm>

If you would like to talk to someone use one of the contact numbers listed here:

Addiction Services 1-888-299-8399

Island Helpline 1-800-218-2885

Kid Help Phone 1-800-668-6868

Survival Centre for Youth 902-894-5884

Chapter 3

~ Cocaine/Crack ~

Brief Description:

- Cocaine is a powerfully addictive stimulant drug.
- Cocaine is a white powder that is either “snorted” through the nasal passages or injected into the veins.
- Crack is a form of cocaine that has been processed to a form for smoking and is more potent

Street Names:

- Coke, snow, flake, blow, nose candy and many others

Physical Risks:

- constricted blood vessels
- dilated pupils
- increased blood pressure, heart rate, breathing rate, and body temperature
- heart attacks, strokes, and respiratory failure
- decreased appetite and malnutrition
- hepatitis or HIV through shared needles
- brain seizures and sudden death
- restlessness, extreme excitability, and sleep disorders
- low birth weight, miscarriage, stillbirth, premature birth and malformation

Psychological Risks:

- feelings of euphoria and increased energy
- hyperstimulation
- mental clarity
- restlessness
- irritability and anxiety
- violent, erratic, or paranoid behaviour with auditory hallucinations
- hallucinations and “coke bugs” (a sensation of imaginary insects crawling over the skin)
- confusion, anxiety and depression, loss of interest in food or sex
- cocaine psychosis (losing touch with reality, loss of interest in friends, family, sports, hobbies, and other activities)

Cocaine Addiction:

- Cocaine and crack addicts are willing to give up anything to obtain the drug: this is where the danger lies.
- Repeated snorting of cocaine powder leads to an incessant runny nose, bloody nose, sores inside the nostrils, and tears in the nasal membrane.
- The risk of AIDS, Hepatitis, and other diseases is increased by taking intravenous (IV) injections of cocaine.
- Smoking crack can seriously damage the lungs; often, there is pain in the throat and chest, accompanied by coughing up phlegm.
- Other side effects of cocaine addiction include sweats, tremors, twitching, a racing heart, weight loss, psychosis, anxiety, and other extremely dangerous symptoms.
- Sudden death can occur in otherwise healthy people.
- Some users become ultra-sensitive to cocaine; they overdose after ingesting a very small amount.
- Due to the short-lived high and the inevitable extreme low, addicts find themselves desperately trying to keep the high by taking cocaine every fifteen minutes or so; this cycle is even shorter with crack.
- Due to this high-low effect, many addicts take other drugs (example: alcohol) to calm the anxiety, inevitably finding themselves in a vicious cycle.
- Cocaine addiction can develop in as little as two months, especially if it is injected or smoked.
- After some time, the brain's natural chemicals become depleted and the ability to get high is lost (these chemicals are never properly restored!).
- Withdrawal is usually characterized by depression, anxiety, insomnia, irritability, and nervousness.

If you want further information on the risks of using cocaine check out these websites:

<http://www.nida.nih.gov/DrugPages/Cocaine.html>

<http://www.drugabuse.gov/infofacts/cocaine.html>

<http://www.uottawa.ca/health/information/addictions-cocaine.html>

If you would like to talk to someone use one of the contact numbers listed here:

Addiction Services 1-888-299-8399

Island Helpline 1-800-218-2885

Kid Help Phone 1-800-668-6868

Survival Centre for Youth 902-894-5884

Narcotics Anonymous 902-892-2103

Chapter 4

~ Date Rape Drugs ~

Brief Description:

- "Date rape drugs" is a term given to any drug that is used for the purpose of getting someone intoxicated to the point where forced or non-consensual sexual activity can take place more easily or with little resistance.
- Typically used by teenagers and young adults at bars, clubs, concerts, and parties.
- The most common date rape drugs are GHB, Rohypnol, and ketamine.

Effects:

- GHB abuse can cause coma and seizures.
- Ketamine in high doses can cause delirium, amnesia, and other problems.
- Rohypnol, when mixed with alcohol, can incapacitate users and cause amnesia.
- Rohypnol and GHB are predominantly central nervous system depressants. Because they are often colourless, tasteless, and odourless, they can be added to beverages and ingested unknowingly.

Rohypnol

- Rohypnol belongs to a class of drugs known as benzodiazepines.
- Rohypnol can incapacitate victims and prevent them from resisting sexual assault.
- It can produce "anterograde amnesia," which means individuals may not remember events they experienced while under the effects of the drug.
- Rohypnol may be lethal when mixed with alcohol and/or other depressants.
- Rohypnol is also known as "rophies," "roofies," "roach," and "rope."
- When mixed with a drink, rohypnol is colourless, tasteless and odourless, which makes it especially easy to go undetected when slipped into a beverage.
- Rohypnol can cause drowsiness, loss of muscle control, slurred speech and unconsciousness.
- Rohypnol often leaves people with little or no memory of what has happened to them while on the drug.
- This can be extremely frightening for someone who thinks they may have been assaulted.

GHB

- GHB can be used both as a recreational and date rape.
- It has euphoric, sedative, and anabolic (body building) effects.
- It is a central nervous system depressant.
- GHB is also known as "liquid ecstasy," "soap," "easy lay," "vita-G," and "Georgia home boy."
- Coma and seizures can occur.

GHB (cont'd)

- Combining use with other drugs such as alcohol can result in nausea and breathing difficulties.
- GHB may also produce withdrawal effects, including insomnia, anxiety, tremors, and sweating.
- GHB causes pleasant relaxation and slight euphoria.
- At higher doses, GHB can cause extreme fatigue and unconsciousness.
- GHB can taste slightly salty, so if your drink tastes funny to you, throw it away!
- GHB is a relaxant and a "downer", so it can be used as a method for facilitating unwanted or unaccepted sexual advances.

Ketamine

- Ketamine can be injected or snorted.
- Ketamine is also known as "special K" or "vitamin K."
- Certain doses of ketamine can cause dream-like states and hallucinations.
- In high doses, ketamine can cause delirium, amnesia, impaired motor function, high blood pressure, depression, and potentially fatal respiratory problems.
- Ketamine comes in a white powder and a liquid that can be snorted, injected or swallowed.
- It produces a numbness and paralysis, and can also (depending on dose) make you feel like you're out of your own body.
- High doses can lead to unconsciousness and can leave the user open to assault

How do I protect myself from date rape drugs?

- The best way to protect yourself from the potential of finding yourself in an unwanted sexual scenario is to be aware of yourself, your drinks and your surroundings. Some simple rules include:
 1. *Always party with friends:* make sure to keep close tabs on those who you are with: don't let friends leave with strangers or people you don't feel comfortable with! It is a good idea to have one friend stay sober for the evening to keep an eye out for those who choose to drink.
 2. *Know where your drink is coming from:* watch your drink being poured by a professional bar staff or pour your drink yourself.
 3. *Watch your drink:* keep your drink with you and don't leave it unattended. Give your drink to a friend to hold if you are going outside or to the bathroom.
 4. *If you feel like you are overly intoxicated or have lost control of yourself tell someone you trust.* Tell them to stay with you until you feel better. If you are with someone who is out of control, do not leave them alone.
 5. *Plan to go home as a group or with someone you trust.* Don't plan to get home by yourself.

What do I do if I think someone has overdosed?

- Do not leave the person unattended.
- If you feel like someone you're with is overdosing on anything (alcohol included) call for help (911) immediately. It is better to be over-reactive than under-reactive, even if you think your friend might be mad at you later. Remember: paramedics are there to save lives and help people who are ill, not to bust drug users.
- If the person should fall unconscious, put them in the recovery position (on their side, so they cannot choke on their own vomit).
- If the person should stop breathing, begin CPR or rescue breathing if you know how, or find someone who does. Phone 911 and remain on the line with the dispatcher who will give you guidance.

If you want further information on the risks date rape drugs check out these websites:

<http://www.nida.nih.gov/DrugPages/Clubdrugs.html>

<http://www.yorku.ca/sclld/healthed/drugs.php>

http://www.upei.ca/healthcentre/html/date_rape.html

If you would like to talk to someone use one of the contact numbers listed here:

Addiction Services 1-888-299-8399

Island Helpline 1-800-218-2885

Kid Help Phone 1-800-668-6868

Survival Centre for Youth 902-894-5884

Narcotics Anonymous 902-892-2103

PEI Rape and Sexual Assault Crisis Centre 1-800-289-5656

Victim Services 368-4582

Chapter 5

~ Ecstasy ~

Brief Description:

- A human-made drug that acts as both a stimulant and a hallucinogen.
- It is taken orally as a capsule or tablet.

Street Names:

- XTC, X, Adam, hug, beans, love drug.

Effects:

- mental stimulation
- emotional warmth
- enhanced sensory perception
- rapid eye movement
- increased physical energy
- increased heart rate and blood pressure
- increased body temperature resulting in kidney, liver, and heart failure
- nausea
- chills
- sweating
- teeth clenching
- muscle cramping
- blurred vision
- confusion
- depression
- sleep problems
- drug craving
- severe anxiety
- long term memory problems
- psychotic episodes have been reported

Long-term effects:

- damage to part of brain critical to thought and memory
- long-lasting, permanent damage to neurons that release serotonin

If you want further information on the risks of using ecstasy check out these websites:

<http://www.nida.nih.gov/DrugPages/MDMA.html>

<http://www.nida.nih.gov/infofacts/ecstasy.html>

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Kid Help Phone 1-800-668-6868

Survival Centre for Youth 902-894-5884

Narcotics Anonymous 902-892-2103

Chapter 6

~ Heroin ~

Brief Description:

- An addictive drug that is processed from morphine and usually appears as a white or brown powder.

Street Names:

- Smack, H, ska, junk, and many others.

Effects:

- surge of euphoria
- alternately wakeful and drowsy states
- cloudy mental functioning
- warm flushing of the skin
- dry mouth
- feeling of heavy extremities
- collapsed veins
- liver disease
- lung complications
- risk of getting HIV/AIDS
- fatal overdose
- spontaneous abortion

Tolerance, Addiction, and Withdrawal

- With regular heroin use, tolerance develops.
- This means the abuser must use more heroin to achieve the same intensity.
- Physical dependence results when the body has adapted to the presence of the drug.
- Withdrawal symptoms may occur if use is reduced or stopped.

Withdrawal symptoms include:

- drug craving
- restlessness
- muscle and bone pain
- insomnia
- diarrhea and vomiting
- cold flashes with goose bumps ("cold turkey")
- kicking movements ("kicking the habit")

If you want further information on the risks of using heroin check out these websites:
<http://www.drugabuse.gov/Infofacts/heroin.html>

If you would like to talk to someone use one of the contact numbers listed here:

Addiction Services 1-888-299-8399

Island Helpline 1-800-218-2885

Kid Help Phone 1-800-668-6868

Survival Centre for Youth 902-894-5884

Narcotics Anonymous 902-892-2103

Chapter 7

~ Magic Mushrooms ~

Brief Description:

- Magic mushroom contain substances that are hallucinogenic.
- They are eaten or brewed and consumed as tea.

Street Names:

- Caps, Magic mushrooms, Mushrooms, Psilocybin & Psilocyn, Shrooms

Effects:

- nausea before the desired mental effects appear
- altered feelings
- distorted perceptions of touch, sight, sound and taste
- nervousness and paranoia
- terrifying thoughts, and anxiety
- fears of insanity, death, or losing control
- flashbacks

If you want further information on the risks of using magic mushrooms check out these websites:

http://www.drugfree.org/Portal/drug_guide/Mushrooms

If you would like to talk to someone use one of the contact numbers listed here:

Addiction Services 1-888-299-8399

Island Helpline 1-800-218-2885

Kid Help Phone 1-800-668-6868

Survival Centre for Youth 902-894-5884

Narcotics Anonymous 902-892-2103

Chapter 8 ~ Methamphetamine ~

Brief Description:

- An addictive stimulant that is closely related to amphetamine, but has longer lasting and more toxic effects on the central nervous system.
- It has a high potential for abuse and addiction.
- It is taken orally, snorted, or injected.

Street Names:

- Speed, meth, chalk, ice, crystal, glass.

Effects:

- increased wakefulness and physical activity
- decreased appetite
- increased respiration
- hyperthermia
- euphoria
- irritability
- increased heart rate and blood pressure
- insomnia
- confusion
- tremors
- convulsions
- anxiety
- paranoia
- aggressiveness
- psychotic behaviour
- hallucinations
- stroke

If you want further information on the risks of using methamphetamine check out these websites:

http://teens.drugabuse.gov/mom/mom_meth1.asp

<http://www.nida.nih.gov/Infofacts/methamphetamine.html>

<http://www.nida.nih.gov/DrugPages/Methamphetamine.html>

If you would like to talk to someone use one of the contact numbers listed here:

Addiction Services 1-888-299-8399

Island Helpline 1-800-218-2885

Kid Help Phone 1-800-668-6868

Survival Centre for Youth 902-894-5884

Narcotics Anonymous 902-892-2103

Chapter 9

~ Ritalin Abuse ~

Brief Description:

- It is a medication prescribed for individuals (usually children) who have attention-deficit hyperactivity disorder (ADHD).
- It is a central nervous system stimulant.
- Tablets can be taken orally or crushed and snorted.

Street Names:

- Kibbles and bits, Pineapple, speed, west coast, vitamin R and many others

Effects:

- appetite suppression
- wakefulness
- increased focus/attentiveness
- euphoria
- nervousness
- insomnia
- loss of appetite
- nausea and vomiting
- dizziness
- heart palpitations
- headaches
- changes in heart rate and blood pressure
- skin rashes and itching
- abdominal pain
- weight loss
- digestive problems
- toxic psychosis
- psychotic episodes
- drug dependence syndrome
- severe depression upon withdrawal

Long Term Effects:

- malnutrition due to loss of appetite
- tremors and muscle twitching
- irregular heartbeat and respirations
- fevers
- convulsions
- paranoia
- restlessness
- hallucinations
- delusions
- excessive repetition of movements
- formication (sensation of bugs or worms crawling under the skin)

If you want further information on the risks of using ritalin check out these websites:

http://www.drugfree.org/Portal/drug_guide/Ritalin

<http://www.drugabuse.gov/InfoFacts/ritalin.html>

If you would like to talk to someone use one of the contact numbers listed here:

Addiction Services 1-888-299-8399

Island Helpline 1-800-218-2885

Kid Help Phone 1-800-668-6868

Survival Centre for Youth 902-894-5884

Narcotics Anonymous 902-892-2103

Chapter 10

~ Steroids ~

Brief Description:

- Human-made substances related to male sex hormones.
- Some athletes abuse anabolic steroids to enhance performance.
- Steroids are taken orally or injected, and athletes and other abusers take them typically in cycles of weeks or months, rather than continuously, in patterns called cycling.
- Abuse of anabolic steroids can lead to serious health problems, some of which are irreversible.

Street Names:

- juice, rhoids

Effects:

- liver tumours
- cancer
- jaundice
- high blood pressure
- kidney tumours
- increased LDL (bad cholesterol) and decreased HDL (good cholesterol)
- severe acne
- fluid retention
- trembling
- aggression
- impaired judgment due to feelings of invincibility
- depression upon withdrawal
- in males: shrinking of the testicles, breast development, reduced sperm count, infertility, baldness, and increased risk for prostate cancer
- in females: growth of facial hair, menstrual changes, deepened voice, and male-pattern baldness.
- in teenagers, growth may be halted prematurely and permanently

If you want further information on the risks of using steroids check out these websites:

<http://www.nida.nih.gov/infofacts/steroids.html>

<http://www.nida.nih.gov/DrugPages/Steroids.html>

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Addiction Services 1-888-299-8399

Island Helpline 1-800-218-2885

Kid Help Phone 1-800-668-6868

Survival Centre for Youth 902-894-5884

Narcotics Anonymous 902-892-2103

Section 2
~ Alcohol ~

Chapter 1.....Effects of Alcohol

Chapter 2.....Myths About Alcohol

Chapter 3.....Binge Drinking

Chapter 4.....Drinking Problems

Chapter 5.....Drinking and Driving

Chapter 6.....Alcoholics Anonymous and Al-Anon

Chapter 1

~ Effects of Alcohol ~

What does alcohol do?

- Alcohol blocks the messages going to the brain and alters your perceptions, emotions, vision, hearing, and coordination.
- People who are shy in social situations and who turn to alcohol to loosen up frequently end up making fools of themselves by doing things that they later regret.
- Drinking increases the risk of injury. Car crashes, falls, burns, drownings, and suicides are all linked to alcohol and other drug use.
- If alcohol is consumed in large quantities and quickly (drinking games and multiple shots) death can occur from acute alcohol poisoning.

Short Term Effects

- *Loss of Judgment* - Even below the legal limit for driving, coordination and perception are affected, so thinking, judgment, and the ability to estimate distances can be impaired and reaction times increased.
- *Impaired Reactions* - As alcohol reaches the midsection of your brain, reflexes further diminish and significantly more impairment occurs. Loss of peripheral vision, impaired hearing, problems breathing, dizziness, and confusion, may be experienced.
- *Impaired Coordination* - The non-tolerant person is very intoxicated with pronounced motor impairment. Difficulty standing, walking, talking, decreased pain and sensation, erratic emotions, stupor, memory blackouts, semi/total loss of consciousness and coma may be experienced.
- *Loss of vital functions* - Deaths from overdose usually result from excessive alcohol consumption. This kind of consumption has been associated with college parties and drinking games.
- *Other Short-Term Effects* - Alcohol increases stomach secretions which could cause heartburn. Kidneys increase urinary output, contributing to dehydration and a hangover. Blood vessels dilate in the skin causing loss of body heat despite a feeling of warmth, which could be dangerous in situations of extreme cold.

Long-term effects

- Appearance
 - ▶ undernourishment and vitamin deficiencies
 - ▶ making your hair dry
 - ▶ giving you cracked lips
 - ▶ aggravating acne
 - ▶ making your eyes look glassy
 - ▶ giving your skin a puffy, broken vein look

- Nervous system
 - ▶ reduction in learning and memory
 - ▶ long-term and irreversible damage to the brain
 - ▶ sleep deprivation
 - ▶ movement disorders
 - ▶ damage to peripheral nerves
 - ▶ increased risk of serious complications following head injury

- Digestive system
 - ▶ disease of the liver and pancreas
 - ▶ damage to the stomach and intestines
 - ▶ diabetes may occur
 - ▶ increased stomach acidity causing ulcers in the stomach

- Cardiovascular system
 - ▶ increased risk of high blood pressure
 - ▶ abnormal heartbeat rhythms
 - ▶ deterioration of the heart muscle and heart disease
 - ▶ anemia

- Reproductive system
 - ▶ *In men:*
 - ▶ impotence
 - ▶ sterility
 - ▶ atrophy of the testes
 - ▶ enlargement of the breasts
 - ▶ *In women:*
 - ▶ early menopause and menstrual irregularities
 - ▶ low levels of sex hormones can lead to premature bone loss (osteoporosis)

- Immune system
 - ▶ pneumonia
 - ▶ tuberculosis
 - ▶ cancer (especially of the throat, voice box, mouth and esophagus, and liver)

If you want further information on the effects of alcohol check out these websites:

<http://www.uleth.ca/alcohol/risky.html>

<http://www.uleth.ca/alcohol/index.html>

If you would like to talk to someone use one of the contact numbers listed here:

Addiction Services 1-888-299-8399

Island Helpline 1-800-218-2885

Kid Help Phone 1-800-668-6868

Survival Centre for Youth 902-894-5884

Alcoholics Anonymous 902-892-2103

Chapter 2

~ Myths About Alcohol ~

I can be in control when I drink.

FALSE: Because drinking impairs your judgment, you are more likely to do something that you will regret, like have unprotected sex, damage property or be victimized by others.

Eating before I drink will stop me from getting drunk.

FALSE: Although eating will slow down the body's process of absorption, the alcohol will still end up in your bloodstream, and the higher the level of alcohol in your bloodstream the more drunk you'll be. There is no magical way to keep alcohol out of your body if it is consumed.

Drinking isn't that dangerous, the worst thing that can happen is I'll pass out and have a hangover tomorrow.

FALSE: Death can and does occur from drinking too much alcohol. Alcohol poisoning or acute alcohol intoxication occurs when the level of alcohol in the body acts as a poison, causing death from drug overdose. Alcohol is also associated with homicides, suicides, drowning, falls and traffic fatalities.

I'm more friendly and social when I drink.

FALSE: People can also become more sleepy, forgetful, hostile, violent, dangerous, homicidal, or suicidal when they drink. Your chances of taking serious risks also increases when you've been drinking.

If I need to sober up I can.

FALSE: Depending on your weight and other factors, it takes about three hours for your body to eliminate the alcohol content in two drinks. Contrary to the belief that coffee, water or a cold shower can sober you up faster; the fact is that NOTHING can speed up this process.

I'm OK to drive after a few drinks.

FALSE: Almost half of all fatal car accidents among 18-24 year olds involve alcohol. Do you know for sure what your Blood Alcohol level is after a night out? Your judgement can be impaired after even a couple of drinks.

I need to learn how to hold my liquor.

FALSE: If you are continually drinking larger amounts in order to feel a buzz, you are developing a tolerance to alcohol. This is an early warning sign that you are developing a serious alcohol problem.

Beer doesn't have as much alcohol as hard liquor.

FALSE: A 12 ounce regular beer, a 5 oz glass of wine, and a 1.5 oz shot of hard liquor all contain exactly the same amount of alcohol and are considered a standard drink.

Drugs are more of a problem than alcohol.

FALSE: Alcohol and tobacco kill more than 50 times the number of people killed by cocaine, heroin and every other illegal drug combined. Although alcohol is more socially acceptable than using illegal drugs, it is still a drug. Alcohol is one of the most abused drugs in society today.

Alcohol is a good way for me to relax and reduce stress after a tough week at school.

FALSE: Adrenaline levels increase in your body as you drink. You may feel more relaxed at first, but when you drink your body actually undergoes additional stress. Listening to music, doing something physical, or laughing with your friends are healthier ways to relax and reduce stress.

Poor and homeless people are the most likely to have alcohol problems.

FALSE: Addiction is an equal opportunity disease. It does not discriminate in any way against any class of people. It strikes equally among individuals in all ethnic, socio-economic, intelligence and emotional wellness categories.

People with alcohol problems drink everyday.

FALSE: A person does not have to drink every day or every week to have a problem. Some people with problems only drink on weekends and some abstain for months. Dependence is not determined by how often people use alcohol, but whether or not they can control their usage once they start. Even occasional drinkers have higher than normal rates of liver cirrhosis.

It is normal to forget things after a night of drinking.

FALSE: Forgetting things after a night of drinking is not a normal part of drinking behaviour. Blackouts and memory loss can be a sign that you have a drinking problem.

People pass out from drinking all the time. It's nothing to worry about.

FALSE: The fact is you pass out due to the body's inability to tolerate the amount of alcohol that you have put into it. Alcohol is a central nervous system depressant that works to slow down the heart rate, lower your blood pressure, and slow your breathing rate. Once your brain has been depressed enough by the alcohol, you pass out. The amount of alcohol it takes to make you pass out is dangerously close to the amount of alcohol it takes to make you dead

If you want further information on the facts about alcohol check out these websites:

<http://www.uleth.ca/alcohol/risky.html>

<http://www.uleth.ca/alcohol/index.html>

<http://www.zoot2.com/justthefacts/alcohol/index.asp>

If you would like to talk to someone use one of the contact numbers listed here:

Addiction Services 1-888-299-8399

Island Helpline 1-800-218-2885

Kid Help Phone 1-800-668-6868

Survival Centre for Youth 902-894-5884

Alcoholics Anonymous 902-892-2103

Chapter 3

~ Binge Drinking ~

What is binge drinking?

- It is usually defined as drinking 5 or more standard drinks in a row. (A standard drink is 12oz. beer, a 5oz glass of wine, or 1.5oz of spirits).
- Binge/heavy drinking patterns may be irregular and infrequent, or they may be regular and frequent, lasting only a few hours or several days.
- Binge/heavy drinking may occur at a party, where it may not seem out of place, or it may occur and may continue in less socially appropriate situations.

Signs of binge drinking include:

- Drinking with the intention of getting drunk
- Drinking fast, chugging or slamming
- Reaching a high blood alcohol level
- Over four alcoholic drinks on one occasion for men
- Over three alcoholic drinks on one occasion for women

Do binge drinkers have a drinking problem?

- Although binge drinking or drinking to get drunk may be hazardous to one's health, safety and physical well being, one or two episodes of binge drinking does not necessarily mean that the drinker has a drinking problem.
- If binge drinking happens many times, it may indicate that there is a drinking problem.
- Binge drinking becomes problem drinking when it interferes with the person's family life, friendships, personal relationships, workplace/school performance, physical health etc.

Who is most likely to be a binge drinker?

- Binge drinking is most common among young adults ages 18 to 24 years.
- About half of young drinkers, age 15-17 will report episodes of binge drinking over the past year.
- Frequent binge drinking in early adulthood is a known risk factor for later problem drinking

Binge drinking can lead to:

- sexual assault
- injuries
- violence
- unplanned sexual activity (leading to sexually transmitted diseases or pregnancies)
- car accidents
- poor academic performance

- financial difficulties
- alcohol poisoning
- risk for liver and heart disease, circulatory problems, brain damage, ulcers and some forms of cancer

What are some of the warning signs of alcohol poisoning?

- Loss of consciousness and possibly death.
- Being unable to rouse the person from alcohol induced sleep or stupor
- Cold and clammy skin
- Shallow breathing
- **Medical care is needed.**

If you answer "yes" to three or more of the following questions, you may be using alcohol in ways that are harmful to you and others.

1. Do you set limits on how much you drink and repeatedly violate these limits?
2. Do you drink alone?
3. Do you need to drink to have a good time?
4. Do you ever regret saying or doing things while you were drunk?
5. Do you lie to your family and friends about how much you drink?
6. Do you ever miss classes or work because of alcohol?
7. Do you usually have a hangover the morning after drinking?
8. Do you spend more money than you can afford on drinking?
9. Do others criticize you about how much you drink?
10. Have you ever been in a fight while you were drunk?
11. Have you ever forgotten what happened the night before because you drank too much?
12. Do you ever drink alcohol to forget about your problems?

If you want further information on the risks of binge drinking check out these websites:

<http://www.uleth.ca/alcohol/risky.html>
<http://www.uleth.ca/alcohol/index.html>
<http://students.usask.ca/wellness/info/physical/alcohol/binge/#dangers>
<http://www.bacchusgamma.org>
<http://www.studentlifeeducation.com/>
<http://www.mcneese.edu/community/alcohol/index.html>
www.afm.mb.ca/maaw/Resource_Kit/FastFacts/ffbinge.pdf
<http://www.zoot2.com/justthefacts/alcohol/index.asp>

If you would like to talk to someone use one of the contact numbers listed here:

Addiction Services 1-888-299-8399
 Island Helpline 1-800-218-2885
 Kid Help Phone 1-800-668-6868
 Survival Centre for Youth 902-894-5884

Chapter 4

~ Drinking Problems ~

A Drinking Problem - How can I tell?

- You're probably reading this because you think that you or someone you know may have an alcohol problem.
- You may have an idea of what a problem drinker looks and acts like and it just doesn't fit with your situation. Does that mean there's no problem?

What kind of person becomes a problem drinker?

- All kinds of people. There is no formula to describe a person with a drinking problem.
- Some people think that problem drinkers are only out-of-work, single, poor and homeless. This is just not true.
- Anyone can have a problem with alcohol regardless of their colour or sex or whether they're rich or poor.

There may be a problem if you or someone you know:

- drinks a large amount of alcohol - over 40 drinks a week
- becomes abusive when the subject of drinking is brought up
- has had legal trouble because of drinking
- keeps drinking even though it's causing problems
- stays home to drink instead of going out with friends
- misses school and has falling grades
- has financial problems because of drinking
- drinks to deal with problems
- does and says things when drinking that later regrets
- drinking is affecting relationships with loved ones

What can I do to help someone with a drinking problem?

- Be supportive and state clearly how you feel about the person to whom you're speaking. For example, "I love you very much and I'm worried about your drinking and how it's affecting your life and our relationship."
- If you can, state clearly what you want or expect from the other person. For example, "I want us to see a counsellor about your drinking."
- The most important thing to do is to take care of yourself first.
- If your friend or family member's drinking is causing you so much stress that you can't function normally, you may want to see a counsellor.
- You can see a counsellor about someone else's drinking even if they aren't getting help for themselves.

What kind of help can I get?

- pamphlets and brochures
- books
- videos
- public information sessions to detoxification
- inpatient and outpatient treatment
- self-help groups like Alcoholics Anonymous (AA)
- Al-Anon and Alateen are available for families of problem drinkers.

If you want further information on drinking problems and where to go for help check out these websites:

http://corp.aadac.com/alcohol/the_basics_about_alcohol/alcohol_brochures_drinking_problem.asp
<http://www.gov.pe.ca/hss/addiction/provservices.php3>
http://www.drugwise-droguesoisfute.hc-sc.gc.ca/index_e.asp
http://www.upei.ca/healthcentre/html/support_networks.html
<http://www.zoot2.com/justthefacts/alcohol/index.asp>

If you would like to talk to someone use one of the contact numbers listed here:

Addiction Services 1-888-299-8399
Island Helpline 1-800-218-2885
Kid Help Phone 1-800-668-6868
Survival Centre for Youth 902-894-5884
Alcoholics Anonymous 902-892-2103
Canadian Mental Health Association 902-566-3034

Chapter 5

~ Drinking and Driving ~

- ☆ Play it safe and smart: never drink and drive.
- ☆ If you've been drinking, you do have options
- ☆ No Thanks — I'm Driving

Simply, if you're drinking, don't drive.

- assign a designated driver
- call a cab
- take public transportation
- make arrangements for a family member to pick you up
- make arrangements to stay over night

Other tips if you are going to drink

- Never drink on an empty stomach. Have something to eat before you start drinking. While eating won't necessarily prevent you from getting drunk, the food spreads the alcohol absorption over a longer period of time.
- Pay attention to the strength of your drinks.
- Don't be offended if someone suggests that you've had too much to drive safely. They are probably right. They're only looking out for you. Friends don't let friends drive after drinking too much.
- If you aren't sure whether you're impaired, you probably are. Alcohol impairs even that basic judgment.
- Talk about the plan for the evening and ensure it includes a clear decision about who is driving home.
- Refuse to ride with a driver who has had too much to drink. Call a friend or relative. Or use that cash you put away for a cab.
- Monitor your companion's drinking. Watch for signs of intoxication. Suggest non-alcoholic alternatives and food.
- If your companion suggests that you drive home because you have had less to drink, and you don't feel safe doing so, say so and suggest an alternative.

Tips for Teens

- There's nothing embarrassing about not wanting to lose your licence or risk getting maimed or killed because of drinking and driving.
- Talk about drinking and driving with your friends.
- Help everyone understand that the risks are high even after a drink or two.
- If you use a designated driver, make sure he or she doesn't have any alcohol to drink at all.
- If your driver has been drinking, don't get in the car! Call your parents, a friend or relative to come and get you.
- Carry some extra cash so that you can call a cab if necessary.
- Don't be pressured into having "just one." Graduated licensing and zero tolerance laws mean that you risk losing your licence if you drive after having anything to drink.
- Graduation is a time of celebration. Don't let drinking and driving spoil the party. Promote the "Safe Grad" concept — encourage alternatives to drinking and make sure everyone has a safe ride home.

If you want further information on drinking and driving check out these websites:

<http://www.tc.gc.ca/roadsafety/tp/tp1535/tips.htm>

<http://www.safety-council.org/info/traffic/impaired/options.html>

<http://www.zoot2.com/justthefacts/alcohol/index.asp>

<http://www.mast.mb.ca/TADD/home.htm>

<http://www.madd.ca>

If you would like to talk to someone use one of the contact numbers listed here:

Addiction Services 1-888-299-8399

Island Helpline 1-800-218-2885

Kid Help Phone 1-800-668-6868

Survival Centre for Youth 902-894-5884

Alcoholics Anonymous 902-892-2103

Chapter 6

~ Alcoholics Anonymous and Al-Anon ~

Alcoholics Anonymous

- A.A. is a fellowship of men and women who share their experience, strength and hope with each other that they may solve their common problem and help others to recover from alcoholism.
- The only requirement for membership is a desire to stop drinking.
- There are no dues or fees for A.A. membership; we are self-supporting through our own contributions.
- A.A. is not allied with any sect, denomination, politics, organization or institution.
- *The primary purpose A.A. is to stay sober and help other alcoholics to achieve sobriety.*

Al-Anon Family Groups

- Al-Anon Family Groups are a fellowship of relatives and friends of alcoholics who share their experience strength, and hope in order to solve their common problems.
- We believe alcoholism is a family illness and that changed attitudes can aid recovery.
- Al-Anon is not allied with any sect, denomination, political entity, organization, or institution: does not engage in any controversy; neither endorses nor opposes any cause.
- There are no dues or fees for membership.
- Al-Anon is self-supporting through it's own voluntary contributions.
- Al-Anon has but one purpose: to help families of alcoholics.
- The only requirement for membership is that there be a problem of alcoholism in a relative or friend.
- Is for families and friends of alcoholics.
- Is a separate fellowship from Alcoholics Anonymous (AA).
- Is compatible with professional treatment

Alateen

- Is part of the Al-Anon fellowship designed for the younger relatives and friends of alcoholics through age nineteen.
- Members conduct their own meetings with the guidance of an Al-Anon sponsor.
- Alateen is part of Al-Anon and, as such, all Alateen members are Al-Anon members, welcome at all Al-Anon meetings.
- Al-Anon and Alateen members are helped when they:
 - ▶ Attend meetings on a regular basis.
 - ▶ Make telephone contact with other members.
 - ▶ Read Al-Anon/Alateen literature.
 - ▶ Have a sponsor.
 - ▶ Apply the Twelve Steps of recovery to their lives.
 - ▶ Become involved in Al-Anon service work.

Al-Anon and Alateen Groups Do Not:

- Give advice.
- Indulge in gossip or criticism.
- Discuss members religious beliefs or lack of them.
- Endorse or oppose any cause, therapy, or treatment.

If you want further information on alcoholics anonymous, Al-Anon, or Alateen check out these websites:

<http://www.gov.pe.ca/infopei/index.php3?number=5559&lang=E>

If you would like to talk to someone use one of the contact numbers listed here:

Addiction Services 1-888-299-8399

Island Helpline 1-800-218-2885

Kid Help Phone 1-800-668-6868

Survival Centre for Youth 902-894-5884

Alcoholics Anonymous 902-892-2103

Section 3
~ Smoking ~

Chapter 1.....Effects of Smoking

Chapter 2.....Effects of Second-hand Smoke

Chapter 3.....Smoking and Birth Control Use

Chapter 4.....Smoking and Pregnancy

Chapter 5.....Quitting Smoking Programs

Chapter 1

~ Effects of Smoking ~

Health effects of smoking

- Smoking tobacco is related to more than two dozen diseases and conditions.
- It is the leading cause of preventable death.
- It has negative health impacts on people of all ages: unborn babies, infants, children, adolescents, adults, and seniors.

Serious health problems that can result from smoking tobacco:

- lung cancer
- cancer of the mouth, throat (pharynx), voice box (larynx) and esophagus
- leukemia and cancers of the bladder, stomach, kidney and pancreas
- cervical cancer
- respiratory diseases
- heart diseases (for example, heart attacks)
- circulatory problems
- high blood pressure
- chronic bronchitis
- emphysema
- pneumonia
- tooth decay (cavities)
- gum disease
- osteoporosis
- sleep problems (falling asleep inappropriately and/or frequent waking)
- premature aging
- reduced sense of smell of taste

Female smokers are at an extra risk for:

- cervical cancer
- menstrual problems
- fertility problems
- spontaneous abortion (miscarriage)

Male smokers have an extra risk of:

- erectile dysfunction (impotence)
- fertility problems (problems with sperm)

Tobacco Effects

- Cigarette smoking and other forms of tobacco use are addictive.
- Nicotine is the drug in tobacco that causes addiction.
- Nicotine addiction is similar to heroin or cocaine addiction.
- The human body builds a tolerance to nicotine and the effect of the drug is reduced over time.
- Regular smokers can inhale greater amounts of smoke and therefore greater amounts of toxins, without showing immediate effects (such as coughing, nausea).
- Nicotine is extremely poisonous if consumed in large amounts and most people feel sick and dizzy the first time they smoke.

It takes only 10 seconds for nicotine to reach the brain after being inhaled. This causes:

- increase in heart rate and blood pressure
- constriction of blood vessels causing a temperature drop in the hands and feet
- brain waves are altered and muscles relax

Withdrawal symptoms

- The most severe withdrawal symptoms occur within the first week.
- Cravings for cigarettes usually persists for months and even years.
- The typical withdrawal symptoms are:
 - ▶ headaches
 - ▶ anxiety and irritability
 - ▶ difficulty concentrating and sleeping
 - ▶ hunger
 - ▶ decreased heart rate and blood pressure
 - ▶ craving for nicotine
- Other side-effects, such as tiredness and coughing, are indications that the body is in a state of repair and is cleaning out the poisons associated with smoking.

If you want further information on smoking and its negative effects, check out these websites:

http://www.hc-sc.gc.ca/fnih-spni/substan/tobac-tabac/effects-effets/index_e.html

<http://ww2.heartandstroke.ca/Page.asp?PageID=33&ArticleID=524&Src=living&From=SubCategory>

http://www.hc-sc.gc.ca/hl-vs/tobac-tabac/body-corps/index_e.html

http://sprojects.mmi.mcgill.ca/smoking/smokedf/health_consequences_smoking.html

<http://www.on.lung.ca/nosmoking/cigarette.html>

If you would like to talk to someone use one of the contact numbers listed here:

Addiction Services 1-888-299-8399

Island Helpline 1-800-218-2885

Kid Help Phone 1-800-668-6868

Survival Centre for Youth 902-894-5884

Chapter 2

~ Effects of Second-hand Smoke ~

The facts about second-hand smoke:

- More than 1,000 non-smokers will die this year in Canada due to tobacco use.
- Second-hand smoke is a combination of poisonous gases, liquids, and breathable particles that are harmful to our health.
- Second-hand smoke consists of mainstream smoke, the smoke inhaled and exhaled by the smoker, and sidestream smoke, the smoke released directly from the end of a burning cigarette.
- Second-hand smoke contains over 4,000 chemical compounds, 50 of which are associated with, or known to cause cancer.
- Two thirds of the smoke from a burning cigarette is not inhaled by the smoker but enters into the surrounding environment. The contaminated air is inhaled by anyone in that area.
- Second-hand smoke is a "class A" cancer-causing substance. Class A is considered the most dangerous of cancer agents and there is no known safe level of exposure.
- Second-hand smoke has twice as much nicotine and tar as the smoke that smokers inhale. It also has five times the carbon monoxide which decreases the amount of oxygen in our blood.
- Second-hand smoke causes disease and death in healthy non-smokers.
- Exposure for as little as 8 to 20 minutes causes physical reactions linked to heart and stroke disease.

The health effects on children exposed to second-hand smoke include:

- Sudden Infant Death Syndrome (SIDS) and breathing problems in children as young as 18 months of age.
- Asthma and permanent damage to their lungs.
- Children are twice as likely to smoke if their parents are smokers.
- More than three times as many infants die from second-hand smoke- related Sudden Infant Death Syndrome as from child abuse or homicide.
- Children breathe faster than adults and they are particularly vulnerable to environmental tobacco smoke.
- Parents who smoke, increase the chances that their children will develop asthma by 200 to 400 per cent.
- Children exposed to second-hand smoke are also more likely to develop ear infections.

If you are a non-smoker, exposure to second-hand smoke increases your chance of:

- lung cancer by 25%
- heart disease by 10%
- cancer of the sinuses, brain, breast, uterus, cervix, and thyroid
- leukemia and lymphoma

What should I do?

- If you smoke, the best solution is to quit.
- If you can't or don't want to quit, limit your smoking to places where others won't be exposed to your smoke.
- Be especially careful around children, pregnant women, and those who have heart disease and breathing problems.
- Remember that smoke travels great distances; smoke from one room can easily spread to other rooms. Because space is confined, it is especially important not to smoke in your car when other people are present.
- Also, if other people live with you, try to make your home completely smoke-free. Smoke outside, away from open windows and air intakes.

If you want further information on smoking and its negative effects, check out these websites:

http://www.hc-sc.gc.ca/hl-vs/tobac-tabac/body-corps/second/index_e.html

<http://www.on.lung.ca/nosmoking/secondhand.html>

If you would like to talk to someone use one of the contact numbers listed here:

Addiction Services 1-888-299-8399

Island Helpline 1-800-218-2885

Kid Help Phone 1-800-668-6868

Survival Centre for Youth 902-894-5884

Chapter 3

~ Smoking and Birth Control Use ~

There are many different options for birth control but it is important to know that some of these birth control methods have serious consequences if you choose to smoke while using them.

Here is a list of various birth control methods:

1. The Shot - Depo-Provera
2. The Pill
3. The Patch - Ortho-Evra
4. The Condom
5. The Diaphragm
6. The Female Condom
7. Spermicide
8. Emergency Contraception

Some rare, but serious health risks, including blood clots, heart attack, and stroke can occur with some methods of birth control if you smoke.

CAUTION:

1. Don't smoke while you take **the pill**. Doing so will increase your risk of heart attack, blood clots, and stroke.
2. Don't smoke while you use **the patch**. Doing so may increase your risk of heart attack, blood clots, and stroke.
3. Don't smoke while you use **the ring**. Doing so will increase your risk of heart attack, blood clots, and stroke.

If you smoke and you have concerns about your birth control method, you should contact your doctor.

If you want further information on smoking and birth control, check out these websites:

<http://www.plannedparenthood.org/pp2/portal/medicalinfo/birthcontrol/pub-bc-choices-teens.xml>

1

http://kidshealth.org/teen/sexual_health/contraception/contraception.html

<http://www.fwhc.org/birth-control/index.htm>

<http://teenadvice.about.com/od/thepill/>

If you would like to talk to someone use one of the contact numbers listed here:

Addiction Services 1-888-299-8399

Island Helpline 1-800-218-2885

Kid Help Phone 1-800-668-6868

Survival Centre for Youth 902-894-5884

Public Health Nursing 902-368-4530

Chapter 4

~ Smoking and Pregnancy ~

The facts about smoking and pregnancy:

- Cigarette smoking during pregnancy can cause serious health problems to an unborn child.
- Smoking during pregnancy has been linked to premature labor, breathing problems and fatal illness among infants.
- The odds of developing asthma are twice as high among children whose mothers smoke more than 10 cigarettes a day.
- Maternal smoking during and after pregnancy has been linked to asthma among infants and young children.
- Smokers inhale nicotine and carbon monoxide, which reach the baby through the placenta and prevent the fetus from getting the nutrients and oxygen needed to grow.
- Secondhand smoke also adds a risk to pregnancy.
- Breast milk often contains whatever is in the woman's body. If the woman smokes, the baby ingests the nicotine in her breast milk.
- Other reproduction related effects of smoking include lower estrogen levels leading to early menopause and links to infertility.

What should I do?

- The most effective way to protect the fetus is to quit smoking.
- If a woman plans to conceive a child in the near future, quitting is essential.
- A woman who quits within the first three or four months of pregnancy can lower the chances of her baby being born premature or with health problems related to smoking.
- Pregnancy is a great time for a woman to quit.
- No matter how long she has been smoking, her body benefits from her quitting because it lessens her chances of developing future tobacco-related health problems, such as lung and heart disease, and cancer.

Quitting smoking during pregnancy has considerable positive health impact for both women and fetuses, and reduces health problems for children born of mothers who smoke.

If you want further information on smoking and its negative effects, check out these websites:

http://www.hc-sc.gc.ca/hl-vs/tobac-tabac/body-corps/preg-gros/index_e.html

<http://www.on.lung.ca/nosmoking/pregnancy.html>

If you would like to talk to someone use one of the contact numbers listed here:

Addiction Services 1-888-299-8399

Island Helpline 1-800-218-2885

Kid Help Phone 1-800-668-6868

Survival Centre for Youth 902-894-5884

Chapter 5

~ Quitting Smoking Programs ~

Quitting Smoking

- The most common reason given for quitting smoking is concern about future personal health.
- Other reasons for quitting were life-style changes, cost of cigarettes, having a baby, and smoke-related illness or death of a friend or family member.
- The most common reason current smokers give for not quitting is lack of will-power.

There are five stages to quitting smoking:

- Pre-contemplation - not thinking about quitting (**Most people are stuck in this stage!!**)
- Contemplation - thinking about quitting but not yet ready
- Preparation - getting ready to quit
- Action - quitting
- Maintenance - remaining a non-smoker

Benefits of Quitting

- Quitting smoking's a good thing no matter how you look at it. No one argues that.
- Of course it's better for your health.
- Once you quit your body shows an amazing ability to start undoing the damage you've inflicted on it and your wallet from smoking.
- In fact, the only thing better than quitting smoking is not starting in the first place!

- Within 8 hours
 - ▶ Your blood oxygen level goes back up to normal and your carbon monoxide level drops.
- Within 48 hours
 - ▶ Your sense of smell and taste begin to improve.
- Within 72 hours
 - ▶ Your breathing gets easier as your bronchial tubes relax and your lung capacity increases.
- Within 2 weeks to 3 months
 - ▶ Your circulation improves and your lungs work up to 30% better.
- Within 6 months
 - ▶ You'll be coughing less, have less sinus congestion and feel less tired.
- Within 1 year
 - ▶ Your risk of smoking-related heart attack is cut in half.
- Within 10 years
 - ▶ Your risk of dying from lung cancer is cut in half

You'll also be wealthier, happier and maybe even more popular.

- You'll have more money that you won't be wasting on cigarettes to spend as you please.
- You'll be better dressed because your clothes may last longer and smell better.
- You'll be better looking without the yellow teeth and fingers.
- You'll have more energy to do the things you love doing that knock the wind out of you now.
- You'll feel prouder because you beat the habit and you'll always look back on the day you quit with pride.
- You'll be in control of your life, not cigarettes.
- You won't be nagged anymore by well-meaning people telling you to quit.

If you want further information on programs to help you quit smoking, check out these websites:

<http://www.spendmoneyonliving.ca/english/>

<http://www.lung.ca/smoking/>

<http://www.cvh.on.ca/programs/smokingquitplan.htm>

http://www.quit4life.com/index_e.asp

If you would like to talk to someone use one of the contact numbers listed here:

Addiction Services 1-888-299-8399

Island Helpline 1-800-218-2885

Kid Help Phone 1-800-668-6868

Public Health Nursing 902-368-4530

Toll-free quit smoking line at 1-888-818-6300

Section 4
~ Sexual Health ~

Chapter 1.....Sexually Transmitted Infections

- 1.1.....Candidiasis
- 1.2.....Chlamydia
- 1.3.....Genital Warts
- 1.4.....Gonorrhea
- 1.5.....Hepatitis
- 1.6.....Herpes
- 1.7.....HIV/AIDS
- 1.8.....Pelvic Inflammatory Disease
- 1.9.....Pubic Lice and Scabies
- 1.10.....Syphilis
- 1.11.....Trichomoniasis

Chapter 2.....Oral Sex

Chapter 3.....Safe Sexual Practices

Chapter 4.....Birth Control Options

- 4.1.....Abstinence
- 4.2.....The Pill
- 4.3.....The Shot - Depo-Provera
- 4.4.....The Patch - Othro Evra
- 4.5.....Male Condoms
- 4.6.....Female Condoms
- 4.7.....Diaphragm
- 4.8.....Spermicides
- 4.9.....Withdrawal
- 4.10.....Emergency Contraception

Chapter 5.....Sexuality

Chapter 6.....Sexual Health

- 6.1.....Pap Tests
- 6.2.....Breast Self Examination
- 6.3.....Testicular Self Examination

Chapter 1
~ Sexually Transmitted Infections ~

- ☆ There are many different Sexually Transmitted Infections and it is very important that you have the important information about each one.
- ☆ In the following sections you will find some general information about the following Sexually Transmitted Infections:

1.1.....	Candidiasis/Yeast Infections
1.2.....	Chlamydia
1.3.....	Genital Warts
1.4.....	Gonorrhea
1.5.....	Hepatitis
1.6.....	Herpes
1.7.....	HIV/AIDS
1.8.....	Pelvic Inflammatory Disease
1.9.....	Pubic Lice and Scabies
1.10.....	Syphilis
1.11.....	Trichomoniasis

1.1-Candidiasis - Yeast Infections

What is it?

- Candidiasis or "yeast infection" is caused by a small fungus.
- Healthy women normally have small numbers of them in the vagina.

How do I know I have it?

- Sometimes the numbers grow and cause such problems as vaginal itching, burning, a heavy, curdy, white discharge, and pain when having sex.

How did I get it?

- Tight clothing, severe obesity, warm weather, stress, antibiotics, birth control pills, pregnancy, diabetes, and steroids can all cause increased numbers of yeast.
- The infection is not usually spread by sexual contact.

What can it do to me?

- Candidiasis is not usually dangerous, but treatment can help the discomfort.

How is it treated?

- With an antifungal cream, tablet or suppositories, available in pharmacies without prescription.
- Insert these into the vagina for the number of days stated on the product.
- Take the treatment even if you are having your period.
- Do not douche while you are taking the treatment.

Does the treatment work?

- Not always. It may be necessary to find you why you have increased numbers of yeast in the vagina.
- You can talk with your doctor or clinic staff about ways to protect against this, such as wearing cotton underwear and loose clothing.

Could I give it to other people?

- It is not usually spread to sex partners.
- They are treated only if they have a problem.
- Sometimes yeast infection can cause a painful swelling of the tip of the penis in men.

This can be treated with an antifungal cream.

Remember, to avoid problems:

- Don't douche (especially with store preparations) unless your doctor or clinic asks you to and tells you what to use.
- Wipe from front to back after bowel movements. This avoids spreading germs from the anus to the vagina.
- Wear cotton underwear and loose clothing. This keeps the vaginal area dry and helps healing.
- Take treatment as directed until it is finished.
- Use condoms to lower the chance of infections in future.

If you want further information on Candidiasis, check out these websites:

<http://www.health.gov.on.ca/english/public/pub/std/cand.html>

http://www.medicresource.com/sdm/sdm/english/disease_detail.asp?disease_id=26

<http://www.uottawa.ca/health/information/sex-yeast-infections.html>

http://www.womenshealthmatters.ca/centres/sex/infections/yeast_infection.html

If you would like to talk to someone use one of the contact numbers listed here:

Island Helpline 1-800-218-2885

Kid Help Phone 1-800-668-6868

Public Health Nursing 902-368-4530

Four Neighbourhood's Community Health Centre 902-368-6930

1.2-Chlamydia

What Is It?

- Chlamydia is an infection caused by a bacterium called *Chlamydia trachomatis*.
- It infects both women and men.
- This bacteria likes to live and multiply in soft, moist tissue.
- Chlamydia can infect the cervix (in women), the urethra (in men), the throat, the anus, and the lining of the inner eyelids.

How Do I Get It?

- Chlamydia is spread by sexual contact with an infected person.
- An infected male will have the chlamydia bacteria in their semen and pre-ejaculatory fluid.
- An infected female will have the bacteria in her vaginal secretions.
- To become infected the bacteria must reach and survive in a soft, moist tissue.
- This can be done through vaginal and anal sex.
- A mother can also give chlamydia to her child during childbirth.

Symptoms

- At first there may be no symptoms.
- People who are infected and have no symptoms can still give the bacteria to someone else.
- If there are symptoms they will appear within 1-3 weeks.
- In women, symptoms may include:
 - ▶ a milky, white vaginal discharge
 - ▶ discomfort or burning sensation during urination
 - ▶ repeated vaginal or urinary tract infections
 - ▶ lower abdominal pain
 - ▶ pain during intercourse
 - ▶ heavier menstrual flow or bleeding between periods
- In men, symptoms are easier to see which include:
 - ▶ light penile discharge (drip)
 - ▶ burning during urination

Complications

- In women, complications include:
 - ▶ inflammation of the uterus

- ▶ inflammation of the fallopian tubes which may result in the scarring
 - ▶ narrowing of the fallopian tubes can lead to sterility or an ectopic pregnancy (the fertilized egg implants in the fallopian tube rather than the uterus).
- In men, complications include:
 - ▶ inflammation of the epididymis can lead to sterility
 - ▶ In fact, chlamydia is a major cause of sterility in both men and women.

Treatment

- Chlamydia can be treated with antibiotics.
- Early detection is important in treating the disease before it spreads and causes complications.
- Both partners should be treated in order to prevent reinfection.

Prevention

- Abstinence is the only way to prevent an STI.
- You can decrease your risk by using a condom every time you engage in any type of sexual activity.
- Limit the number of sexual partners you have.
- Avoid or limit the use of alcohol and other drugs that can increase your risk of having unprotected sex.
- If you are sexually active, have an annual STI screening performed by your doctor.
- Spermicidal creams, foams, and jellies are not good enough on their own...use them with condoms.

If you want further information on Chlamydia, check out these websites:

<http://www.sexualityandu.ca>

http://www.phac-aspc.gc.ca/publicat/std-mts/sti_g.html

<http://www.womenshealthmatters.ca/centres/sex/infections/chlamydia.html>

<http://www.health.gov.on.ca/english/public/pub/std/chlam.html>

<http://www.uottawa.ca/health/information/sex-chlamydia.html>

<http://www.sexhealth.org/std/chlamydia.shtml>

If you would like to talk to someone use one of the contact numbers listed here:

Island Helpline 1-800-218-2885

Kid Help Phone 1-800-668-6868

Survival Centre for Youth 902-894-5884

Public Health Nursing 902-368-4530

AIDS PEI 1-800-314-2437

1.3-Genital Warts

What is it?

- It is a skin infection caused by the *human papilloma* virus (HPV).
- There are over 100 viruses in the HPV family, but only about 35 are sexually transmitted.
- The other HPV viruses cause warts in other parts of the body such as the hands or feet.
- These viruses do not appear to spread to the genital area.

Symptoms

- The virus can live in the skin and cause changes that are invisible.
- The first symptoms that appear are usually small warts on or around the genitals or the anus.
- These warts can be pink, red or grey.
- They vary in size and shape.
- They often cluster together which gives them a cauliflower-like appearance.
- They usually are not painful but they can be itchy, have a foul-smelling discharge, or they can bleed, although this is rare.

How Does It Spread?

- The virus is found in the cells of the warts or in a cluster of skin cells which can't be seen.
- The virus can spread to another person's genitals and infect them by simple skin to skin contact.
- Penetration is not necessary to spread the virus.
- People at increased risk for contracting genital warts are those who have multiple sexual partners or who have unprotected sex.

Complications

- The Human Papilloma Virus may cause cervical cancer in women.
- It is important for women to have annual Pap smears which can detect cell changes due to the virus.
- Experts also believe that the human papilloma virus can contribute to cancer of the vulva, vagina, penis or anus.

Treatment

- There is **no cure** for genital warts but the warts may be removed using a variety of techniques such as freezing, surgical removal or chemical removal.
- The choice of treatment depends on the amount, size and distribution of the warts.
- Treatment can take a long time because the virus may still remain undetected in the area after the warts are removed.
- Partners of people with genital warts should also be examined and treated if necessary.

Prevention

- Abstinence is the only way to prevent an STI.
- You can decrease your risk by using a condom every time you engage in any type of sexual activity.
- Limit the number of sexual partners you have.
- Avoid or limit the use of alcohol and other drugs that can increase your risk of having unprotected sex.
- If you are sexually active, have an annual STI screening performed by your doctor.
- Spermicidal creams, foams, and jellies are not good enough on their own...use them with condoms.
- Condoms must cover the area of the warts or it can still be spread!

If you want further information on Genital Warts, check out these websites:

<http://www.sexualityandu.ca>

http://www.phac-aspc.gc.ca/publicat/std-mts/sti_1.html

<http://www.health.gov.on.ca/english/public/pub/std/warts.html>

<http://www.uottawa.ca/health/information/sex-hpv.html>

<http://www.sexhealth.org/std/warts.shtml>

If you would like to talk to someone use one of the contact numbers listed here:

Island Helpline 1-800-218-2885

Kid Help Phone 1-800-668-6868

Survival Centre for Youth 902-894-5884

Public Health Nursing 902-368-4530

AIDS PEI 1-800-314-2437

1.4-Gonorrhoea

What is it and how do I get it?

- It is spread by a bacterium called *Neisseria gonorrhoeae*.
- It can be passed from one person to another through oral, vaginal, and anal sex.
- It can also be passed from a pregnant woman to her baby during birth, which can cause serious eye infections or blindness in the baby.

How will I know I have it?

- There may not be any symptoms of the infection.
- If symptoms do occur, it will be 3-5 days after sex.
- Men:
 - ▶ thick, yellow-green discharge from the penis
 - ▶ burning feeling when urinating
 - ▶ pain or swelling in the testicles
 - ▶ rectal pain
 - ▶ rectal discharge
- Women:
 - ▶ new or different discharge from the vagina
 - ▶ burning feeling when urinating
 - ▶ pain in the lower abdomen
 - ▶ fever and chills
 - ▶ pain during sex
 - ▶ vaginal bleeding between periods
 - ▶ vaginal bleeding after sex
 - ▶ rectal pain
 - ▶ rectal discharge

How do I get rid of it?

- A swab of the area or a urine test will detect the infection.
- The urethra in males and cervix in females, throat, rectum, and eyes can all be infected.
- It is treated with antibiotics and can be cured but a person can be reinfected.
- If left untreated it can lead to many complications including: infertility/sterility, pelvic inflammatory disease in women, and pain and swelling in the testicles of men.

How do I prevent it?

- Abstinence is the only way to prevent an STI.
- You can decrease your risk by using a condom every time you engage in any type of sexual activity.
- Limit the number of sexual partners you have.
- Avoid or limit the use of alcohol and other drugs that can increase your risk of having unprotected sex.
- If you are sexually active, have an annual STI screening performed by your doctor.
- Spermicidal creams, foams, and jellies are not good enough on their own...use them with condoms.

If you want further information on Gonorrhea, check out these websites:

<http://www.sexualityandu.ca>

http://www.phac-aspc.gc.ca/publicat/std-mts/sti_h.html

<http://www.health.gov.on.ca/english/public/pub/std/gonor.html>

<http://www.uottawa.ca/health/information/sex-gonorrhea.html>

<http://www.sexhealth.org/std/gonorrhea.shtml>

http://www.hc-sc.gc.ca/iyh-vsv/diseases-maladies/gonorrh_e.html

If you would like to talk to someone use one of the contact numbers listed here:

Island Helpline 1-800-218-2885

Kid Help Phone 1-800-668-6868

Survival Centre for Youth 902-894-5884

Public Health Nursing 902-368-4530

AIDS PEI 1-800-314-2437

1.5-Hepatitis

What is it?

- Hepatitis is a disease of the liver.
- It usually caused by a virus.
- There are several types of hepatitis but hepatitis B is the form that is transmitted sexually.

How do I know I have it?

- The symptoms of hepatitis B are very similar to the symptoms of the flu such as fatigue, nausea, loss of appetite, fever, vomiting, and abdominal pain.
- In the later stages of the disease there could be jaundice, which is yellowing of the skin and eyes.
- These symptoms may not be present until 1 to 5 months after exposure to the virus.
- Many people don't notice symptoms until they are severe but they may still transmit the disease to others.

Complications

- Hepatitis can cause liver damage and an increased risk of liver cancer.

How is it prevented?

- Abstinence is the only way to prevent an STI.
- You can decrease your risk by using a condom every time you engage in any type of sexual activity.
- Limit the number of sexual partners you have.
- Avoid or limit the use of alcohol and other drugs that can increase your risk of having unprotected sex.
- If you are sexually active, have an annual STI screening performed by your doctor.
- Spermicidal creams, foams, and jellies are not good enough on their own...use them with condoms.
- Refrain from IV drug use or use a clean needle EVERY TIME...DO NOT SHARE NEEDLES!
- Never share needles or equipment tattoos or body piercing.

How is it treated?

- There are drugs that can be used to treat hepatitis B but it may remain in the body forever.

If you want further information on Hepatitis, check out these websites:

<http://www.sexualityandu.ca>

http://www.phac-aspc.gc.ca/publicat/std-mts/sti_m.html

<http://www.bchealthguide.org/healthfiles/hfile25a.stm>

<http://www.health.gov.on.ca/english/public/pub/std/hepb.html>

If you would like to talk to someone use one of the contact numbers listed here:

Island Helpline 1-800-218-2885

Kid Help Phone 1-800-668-6868

Survival Centre for Youth 902-894-5884

Public Health Nursing 902-368-4530

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1.6-Herpes

What Is It?

- It is caused by a virus called the *herpes simplex* virus.
- The virus enters the body through a break in the skin or an inflamed mucous membrane and causes a sore in that area.
- The virus cannot leave the body and will stay within an infected individual for life.
- Under certain conditions the virus can create a new attack known as a "recurrent infection".

Signs and symptoms

- The classic sign of genital herpes is fluid filled blisters.
- In women the blisters can be found:
 - ▶ inside and around the vagina
 - ▶ near the anus
 - ▶ on the cervix
 - ▶ on the thighs and buttocks
- In men they can appear on:
 - ▶ the penis
 - ▶ foreskin
 - ▶ around the testicles
 - ▶ near the anus
 - ▶ on the thighs and buttocks
- The blisters can be very painful.
- They rupture, creating an ulcer, and eventually they heal usually leaving no scar if they are left alone.
- Before the appearance of the blisters there may be tingling or itching in the area.

How Does It Spread?

- It is spread through intimate contact from one person to another at the time of an outbreak.
- An infected person can also spread herpes to another site on his or her body.
- Good personal hygiene is important, especially when blisters are present.
- A pregnant woman with active herpes can transmit it to her baby during birth.
- In the newborn the herpes infection can be severe and can cause brain damage or death.

Complications

- The main complication of herpes is the recurrent infections.
- They can occur as often as monthly or rarely, but generally the frequency diminishes with time.

- One cannot predict when a recurrence will occur but some "triggers" have been found, such as:
 - ▶ sunlight
 - ▶ trauma
 - ▶ fever
 - ▶ menstruation
 - ▶ poor nutrition
 - ▶ stress and certain medications

Treatment

- There is no cure for genital herpes!!!
- Treatment involves the management of symptoms.
- This includes keeping the sores clean and dry to prevent infection and several other measures to reduce discomfort.
- Avoiding triggers may also help in reducing the number of recurrent infections.

Prevention

- Abstinence is the only way to prevent an STI.
- You can decrease your risk by using a condom every time you engage in any type of sexual activity.
- Limit the number of sexual partners you have.
- Avoid or limit the use of alcohol and other drugs that can increase your risk of having unprotected sex.
- If you are sexually active, have an annual STI screening performed by your doctor.
- Spermicidal creams, foams, and jellies are not good enough on their own...use them with condoms.
- Keep the areas of the sores completely covered or the virus can still be spread.

If you want further information on Herpes, check out these websites:

<http://www.sexualityandu.ca>

http://www.phac-aspc.gc.ca/publicat/std-mts/sti_k.html

<http://www.bchealthguide.org/healthfiles/hfile08d.stm>

http://www.hc-sc.gc.ca/iyh-vsv/diseases-maladies/herpes_e.html

<http://www.uottawa.ca/health/information/sex-genital-herpes.html>

If you would like to talk to someone use one of the contact numbers listed here:

Island Helpline 1-800-218-2885
Kid Help Phone 1-800-668-6868
Survival Centre for Youth 902-894-5884
Public Health Nursing 902-368-4530
AIDS PEI 1-800-314-2437

1.7-HIV/AIDS

What is it and how do I get it?

- *Human immunodeficiency virus (HIV)* is the virus that causes AIDS.
- It is spread through blood and body fluids.
- It is spread by:
 - ▶ having unprotected sex with an infected person
 - ▶ Sharing needles for intravenous drug use
 - ▶ babies born to women with HIV

How do I know I have it?

- a blood test can be done to see if you have the virus
- if the test is positive you may have some of the following symptoms:
 - ▶ breathing problems
 - ▶ mouth problems, such as thrush (white spots), sores, change in taste, dryness, trouble swallowing, or loose teeth
 - ▶ fever for more than two days
 - ▶ weight loss
 - ▶ poor vision or "floaters"(moving lines or spots in your vision)
 - ▶ diarrhea
 - ▶ skin rashes or itching

How do I treat it?

- THERE IS NO CURE FOR AIDS!!!
- People can live with HIV for many years with proper medication.
- AIDS makes you more at risk for other infections so your doctor may prescribe antibiotics.

How can I stay healthy longer?

- Make sure you have a doctor who knows how to treat HIV.
- Follow your doctor's instructions and keep your appointments.
- Get immunizations (shots) to prevent infections such as pneumonia and flu.
- If you smoke or if you use drugs not prescribed by your doctor, quit.
- Eat healthy foods. This will help keep you strong, keep your energy and weight up, and help your body protect itself.

- Exercise regularly to stay strong and fit.
- Get enough sleep and rest.
- Take time to relax.

How do I prevent it?

Abstinence is the only way to prevent an STI.

- You can decrease your risk by using a condom every time you engage in any type of sexual activity.
- Limit the number of sexual partners you have.
- Avoid or limit the use of alcohol and other drugs that can increase your risk of having unprotected sex.
- If you are sexually active, have an annual STI screening performed by your doctor.
- Spermicidal creams, foams, and jellies are not good enough on their own...use them with condoms.
- Refrain from IV drug use or use a clean needle EVERY TIME...DO NOT SHARE NEEDLES!
- Never share needles or equipment tattoos or body piercing.

If you want further information on HIV/AIDS, check out these websites:

<http://www.sexualityandu.ca>

<http://www.canadian-health-network.ca/servlet/ContentServer?cid=1048003175132&pagename=CHN-RCS%2FPAGE%2FGTPAGE%2FTemplate&c=Page&lang=En>

http://www.hc-sc.gc.ca/iyh-vsv/diseases-maladies/hiv-vih_e.html

<http://www.aidsinfo.nih.gov/>

If you would like to talk to someone use one of the contact numbers listed here:

Island Helpline 1-800-218-2885

Kid Help Phone 1-800-668-6868

Survival Centre for Youth 902-894-5884

Public Health Nursing 902-368-4530

AIDS PEI 1-800-314-2437

1.8-Pelvic Inflammatory Disease (PID)

What is it?

- It is an infection that becomes worse over time.
- It infects the fallopian tubes, uterus, cervix, or ovaries.
- It usually develops because of a sexually transmitted infection.

How do I know I have it?

- pain and tenderness in the lower abdomen
- large amounts of foul-smelling or abnormally coloured discharge from the vagina
- pain during sexual intercourse
- heavier than normal periods
- more painful periods with more cramps than usual
- spotting between periods
- chills, fever, and vomiting
- increased tiredness
- loss of appetite
- backache and perhaps even difficulty walking
- painful or more frequent urination
- These symptoms may not appear until days, weeks, or longer after someone has been exposed to a sexually transmitted infection causing bacteria

Complications

- It can cause scarring of the ovaries, fallopian tubes, and uterus.
- This scarring can lead to infertility (the inability to have a baby).
- If a woman gets pregnant after having PID, the fertilized egg may implant in the fallopian tube.

How is it treated?

- PID can be treated with antibiotics and may require hospitalization.

How do I prevent it?

- Avoid getting a sexually transmitted infection by:
 - ▶ Having sex with only one partner who has been tested for sexually transmitted

diseases (STDs), who has been treated if necessary and who is having sex only with you. The more partners you have, the higher your risk of getting an STD.

- ▶ Using a female or male condom every time you have sex. Condoms offer protection against STDs, but they must be used properly.
- ▶ Having regular check-ups for STDs.
- ▶ Deciding not to have sex.

If you want further information on pelvic inflammatory disease, check out these websites:

<http://www.sexualityandu.ca>

<http://www.bchealthguide.org/healthfiles/hfile08c.stm>

http://www.womenshealthmatters.ca/centres/pelvic_health/PID/

http://www.mediresource.com/sdm/sdm/english/disease_detail.asp?disease_id=103

If you would like to talk to someone use one of the contact numbers listed here:

Island Helpline 1-800-218-2885

Kid Help Phone 1-800-668-6868

Survival Centre for Youth 902-894-5884

Public Health Nursing 902-368-4530

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1.9-Pubic Lice and Scabies

What is it?

- You may have heard of someone getting "crabs" from sex.
- This happens when tiny insects spread from an infected person to you.
- This can happen as a result of sex, but not always.
- You can also get scabies and lice from using bed sheets or towels or wearing the clothes of an infected person.

The symptoms and signs

- Symptoms of scabies and lice occur when the insects either bite you or burrow into your skin to lay their eggs.
- With lice, you may actually see the pearly white eggs on the hair in your pubic area, close to the skin.

What to look for

- Scabies:
 - ▶ itching, mainly at night
 - ▶ a rash may appear between your fingers, on your wrists, abdomen, ankles, on the bend of your elbows, or around your genitals.
- Pubic lice:
 - ▶ perhaps an itch in the pubic area
 - ▶ light brown insects the size of a pinhead may be seen
 - ▶ oval, whitish eggs may be seen on the hair.

How scabies and lice are treated

- Scabies and lice may be treated easily with special creams, lotions or shampoos, which are available at a drugstore. Ask the pharmacist for help, and then follow the directions carefully.
- If you don't treat scabies or lice, you may get a skin infection that will require a visit to a doctor.
- Avoid close body contact with others if you have scabies or lice. Get treatment to avoid passing them to others.
- Wash clothes and bed linen in hot water, or dry-clean and press with a very hot iron. Freezing clothes, fabrics or blankets or storing them in an air-tight plastic bag for two

- weeks will also destroy the insects and their eggs.
- If you have scabies or pubic lice, be sure to tell your sex partners. Anyone with whom you have had close contact or who has shared your bed sheets, clothes or towels should be treated, even if they don't have an itch or rash.

If you want further information on pubic lice or scabies, check out these websites:

<http://www.sexualityandu.ca>

<http://www.bchealthguide.org/healthfiles/hfile08h.stm>

http://www.phac-aspc.gc.ca/publicat/std-mts/sti_j.html

<http://www.chebucto.ns.ca/Health/TeenHealth/index.htm>

<http://www.womenshealthmatters.ca/centres/sex/infections/crabs.html>

<http://www.uottawa.ca/health/information/sex-crabs-lice.html>

If you would like to talk to someone use one of the contact numbers listed here:

Island Helpline 1-800-218-2885

Kid Help Phone 1-800-668-6868

Survival Centre for Youth 902-894-5884

Public Health Nursing 902-368-4530

AIDS PEI 1-800-314-2437

1.10-Syphilis

What is it and how do I get it?

- It is caused by a bacterium called *Treponema pallidum*.
- Can be transmitted by oral, vaginal, and anal sex.
- Can be passed from a pregnant woman to her unborn baby, which sometimes causes birth defects or death.

How do I know I have it?

- Symptoms may not be present.
- They may appear days to months after infection.
- There may be painless sores around or in the vagina, on the penis, inside the mouth, or near the anus.
- Sores can go unnoticed and may disappear on their own BUT the infection is still active.
- May have flu-like symptoms.
- May have a rash on the palms of the hands, soles of the feet or over the whole body.

How do I get rid of it?

- A simple blood test will tell you if you have been exposed.
- It can be cured with antibiotics BUT you can be reinfected if you are exposed again.

How do I prevent it?

- Abstinence is the only way to prevent an STI.
- You can decrease your risk by using a condom every time you engage in any type of sexual activity.
- Limit the number of sexual partners you have.
- Avoid or limit the use of alcohol and other drugs that can increase your risk of having unprotected sex.
- If you are sexually active, have an annual STI screening performed by your doctor.
- Spermicidal creams, foams, and jellies are not good enough on their own...use them with condoms.

If you want further information on syphilis, check out these websites:

<http://www.sexualityandu.ca>

<http://www.chebucto.ns.ca/Health/TeenHealth/index.htm>
<http://www.health.gov.on.ca/english/public/pub/std/syph.html>
<http://www.sexhealth.org/std/syphilis.shtml>
http://www.phac-aspc.gc.ca/publicat/std-mts/sti_n.html
<http://www.womenshealthmatters.ca/centres/sex/infections/syphilis.html>
http://www.hc-sc.gc.ca/iyh-vsv/diseases-maladies/syphilis_e.html

If you would like to talk to someone use one of the contact numbers listed here:

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Kid Help Phone 1-800-668-6868
Survival Centre for Youth 902-894-5884
Public Health Nursing 902-368-4530
AIDS PEI 1-800-314-2437

1.11-Trichomoniasis

What is it?

- It is caused by a parasite that is passed from one person to another during sexual intercourse.
- This organism can live for a few hours on damp towels, washcloths, and bathing suits. If someone uses these towels or washcloths or puts on the bathing suit, the disease may be passed on.

How do I know I have it?

- Thick vaginal discharge that can be gray or yellowish-green and foul-smelling.
- The vagina may feel very itchy, and it may be very painful to urinate.
- These symptoms usually appear 3 to 28 days after a person has been exposed.

How it's spread

- Through unprotected sex.

Treatment

- Antibiotics for both partners.

Complications

- complications during pregnancy
- reoccurrence of infection
- increased risk of HIV

Prevention

- Abstinence is the only way to prevent an STI.
- You can decrease your risk by using a condom every time you engage in any type of sexual activity.
- Limit the number of sexual partners you have.
- Avoid or limit the use of alcohol and other drugs that can increase your risk of having unprotected sex.

- If you are sexually active, have an annual STI screening performed by your doctor.
- Spermicidal creams, foams, and jellies are not good enough on their own...use them with condoms.

If you want further information on Trichomoniasis, check out these websites:

<http://www.sexualityandu.ca>

<http://www.chebucto.ns.ca/Health/TeenHealth/index.htm>

<http://www.uottawa.ca/health/information/sex-trichomaniasis.html>

<http://www.health.gov.on.ca/english/public/pub/std/trich.html>

<http://www.carleton.ca/health/trich.htm>

If you would like to talk to someone use one of the contact numbers listed here:

Island Helpline 1-800-218-2885

Kid Help Phone 1-800-668-6868

Survival Centre for Youth 902-894-5884

Public Health Nursing 902-368-4530

AIDS PEI 1-800-314-2437

Chapter 2

~ Oral Sex ~

What is oral sex?

- Oral sex is when a person uses their mouth to stimulate another person's genitals. You cannot get pregnant from oral sex, but you can get or give a sexually transmitted infection.

Oral Sex and STIs

- STIs are caused by viruses or bacteria that like warm, soft, moist places such as your mouth and genital area (penis, vulva, vagina, anus, area between penis and anus, and area between vulva and anus).
- STIs can spread from the genital area to the mouth and from the mouth to the genital area. They are generally passed between people via body fluids or direct contact with skin or sores.
- There's less risk of STIs in oral sex than in vaginal or anal sex, but the risk still exists.
- You can get a bacterial infection of chlamydia, syphilis or gonorrhea in your mouth and/or throat, and in some rarer occasions, can develop genital warts in the mouth.
- Herpes is commonly passed between genitals and the mouth, and HIV can be passed through cuts in the mouth or small abrasions.

Protection

- The only 100 percent effective way to avoid an STI is not to have oral, vaginal or anal sex at all.
- If you are planning to have oral sex, know how to make it safer by avoiding the exchange of bodily fluids and other risky contact.
- Before you have oral sex, talk to your partner about sexual history, history of STIs and protection.
- Communication is essential.
- Do not have oral sex if either you or your partner is on treatment for a STI or is having an outbreak of symptoms (as in herpes).
- If you choose to have oral sex, using a barrier method to prevent direct contact between one partner's mouth and other partner's genitals or anus is the best way to reduce your chance of getting or giving an STI.

Barrier Methods for Protection During Oral Sex

- Dental Dams
 - ▶ May not be easy to find, although some clinics and dental supply stores carry them
 - ▶ Some feel there is less sensation of warmth and feeling
 - ▶ Covers a small area and fluids may seep past the dam (use caution)
 - ▶ Only protects what it covers

- Non-Lubricated Condom
 - ▶ Some say it's dry or don't like the taste
 - ▶ Only protects what it covers

If you want further information on oral sex, check out these websites:

<http://www.sexualityandu.ca>

<http://www.chebucto.ns.ca/Health/TeenHealth/index.htm>

<http://www.serc.mb.ca/SERC/>

<http://www.spiderbytes.ca/>

If you would like to talk to someone use one of the contact numbers listed here:

Island Helpline 1-800-218-2885

Kid Help Phone 1-800-668-6868

Survival Centre for Youth 902-894-5884

Public Health Nursing 902-368-4530

AIDS PEI 1-800-314-2437

Chapter 3

~ Safe Sexual Practices ~

- ☆ Having sex is about making choices.
- ☆ We choose when we are ready and when we want to wait.
- ☆ We choose our partners.
- ☆ We choose what we want to do and what we don't want to do with our partners.
- ☆ We can choose to do it in the safest way.

- ☆ "Safer sex" means making sexual activity safer: safer from sexually transmitted infections (STI), safer from pregnancy, and safer from violence.
- ☆ "Safer sex" means being smart and staying healthy. It means taking control, having self-respect and respect for our partners. It means talking about sex, knowing how to protect ourselves and taking precautions every time we engage in sexual activity.

Staying healthy and developing healthy attitudes requires being armed with knowledge:

- knowing what STIs are
- knowing how they are treated
- knowing how they might complicate our lives
- knowing how to prevent them

Ways to prevent sexually transmitted infections:

- do not have sex or use injection drugs
- do not share needles
- have only one sex partner who doesn't have STI and who has sex only with you
- do not have unprotected sex with any sexual partners
- be knowledgeable about STI and avoid risks
- avoid pregnancy if infected with STI

Protect yourself and your partner:

- learn how to be assertive and refuse risk behaviours
- have regular STI checkups when you change partners
- use latex condoms
- do not mix alcohol and/or drugs with sex

- use latex gloves and bleach around blood and body fluids
- use sterile needles and syringes if you must use drugs: do not share

If you think you have a sexually transmitted infection:

- go immediately to a doctor or clinic for a STI check-up
- follow all instructions for treatment carefully
- take all medication as prescribed: do not share your medication with your partner
- tell your partner so your partner can get treatment
- do not have sex until STD is gone and your partner is treated and cured
- avoid pregnancy - seek medical counselling
- return for a check-up as requested

If you want further information on safe sexual practices, check out these websites:

<http://www.sexualityandu.ca>

<http://www.chebucto.ns.ca/Health/TeenHealth/index.htm>

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Chapter 4
~ Birth Control Options ~

- ☆ There are many different options for birth control and each method has positive and negative things about it.
- ☆ Before you choose a form of birth control you should research all of the options and contact your doctor.
- ☆ In the following sections you will find some general information about the following birth control options:

4.1.....Abstinence
4.2.....The Pill
4.3.....The Shot - Depo-Provera
4.4.....The Patch - Othro Evra
4.5.....Male Condoms
4.6.....Female Condoms
4.7.....Diaphragm
4.8.....Spermicides
4.9.....Withdrawal
4.10.....Emergency Contraception

4.1-Abstinence

- ☆ There is no “best” method of birth control
- ☆ Each method has its own pros and cons
- ☆ Some methods work better than others do at preventing pregnancy
- ☆ NO birth control method prevents pregnancy 100% of the time (except abstinence)

The birth control method you choose should take into account:

- your overall health
- how often you have sex
- the number of sexual partners you have
- if you want to have children
- how well each method works (or is effective) in preventing pregnancy
- any potential side effects
- your comfort level with using the method

Abstinence

- not having sexual intercourse with any sexual partners.

Effectiveness

- 100% - it is the only 100% effective method to prevent pregnancy and sexually transmitted infections

Advantages

- no medical or hormonal side effects

Disadvantages

- People may find it difficult to abstain for long periods of time.
- Women and men often end their abstinence without being prepared to protect themselves against pregnancy or sexually transmitted infections.

Advantages for teens

- Sexual relationships present physical and emotional risks. Abstinence is a very good way to postpone taking those risks until you are able to handle them.
- Women who abstain until their 20s — and who have fewer partners in their lifetimes — may have certain health advantages over women who do not.
- They are less likely to:
 - ▶ get sexually transmitted infections
 - ▶ become infertile
 - ▶ develop cancer of the cervix

If you want further information on birth control options, check out these websites:

<http://www.sexualityandu.ca/eng/teens/CN/methods.cfm>

http://www.kidshealth.org/teen/sexual_health/contraception/bc_chart.html

<http://www.chebucto.ns.ca/Health/TeenHealth/index.htm>

<http://www.plannedparenthood.org/pp2/portal/medicalinfo/birthcontrol/pub-bc-choices-teens.xml>

<http://www.4woman.gov/faq/birthcont.htm>

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CHANCES 902-892-8744

4.2-The Pill

- ☆ There is no “best” method of birth control
- ☆ Each method has its own pros and cons
- ☆ Some methods work better than others do at preventing pregnancy
- ☆ NO birth control method prevents pregnancy 100% of the time (except abstinence)

The birth control method you choose should take into account:

- your overall health
- how often you have sex
- the number of sexual partners you have
- if you want to have children
- how well each method works (or is effective) in preventing pregnancy
- any potential side effects
- your comfort level with using the method

For the pill:

- You need to have an appointment with your doctor so they can prescribe the right pill for you.
- You must take one pill once every day. Complete one pill pack every month.
- Combination pills contain estrogen and progestin. Others are progestin-only.

What does the pill do?

- It prevents the release of an egg.
- It thickens cervical mucus to keep sperm from joining the egg.
- It thins the lining of the uterus, which may prevent implantation of a fertilized egg

Effectiveness

- 92–99.7%
- not effective against sexually transmitted infections
- latex or female condoms can reduce risk of infection

Advantages

- nothing to put in place before vaginal intercourse
- less menstrual cramping and menstrual flow
- reduces the risk of pelvic inflammatory disease
- less acne, iron deficiency anemia, and premenstrual tension
- periods become more regular
- reduces risk of ovarian and endometrial cancers, noncancerous growths of the breast, and

ovarian cysts

- can be used to control timing and frequency of periods
- fewer tubal pregnancies
- may protect against osteoporosis (thinning of the bones)

Disadvantages

- must be taken daily
- temporary side effects that usually clear up after a few months include irregular bleeding, loss of monthly period, weight gain or loss, nausea, breast tenderness, changes in mood, headaches, and other discomforts
- rare but serious health risks, including blood clots, heart attack, and stroke
- women who are 35 and older and smoke are at greater risk of serious side effects
- should be taken at the same time of day, every day

Caution

- Don't smoke while you take the pill. Doing so will increase your risk of heart attack, blood clots, and stroke.
- Don't forget to take your pill.
- If you choose the pill, schedule taking it with something else you do every day — like brushing your teeth.
- If you forget ONE pill, take it as soon as you remember. This means you may take two pills in one day. If you forget TWO or more pills, call your clinician immediately.
- Remember to take your pill whether or not you're having sex.
- Don't share your pills. Prescription methods like the pill are personalized for each woman's use. They should not be shared.

If you want further information on birth control options, check out these websites:

<http://www.sexualityandu.ca/eng/teens/CN/methods.cfm>

http://www.kidshealth.org/teen/sexual_health/contraception/bc_chart.html

<http://www.chebucto.ns.ca/Health/TeenHealth/index.htm>

<http://www.plannedparenthood.org/pp2/portal/medicalinfo/birthcontrol/pub-bc-choices-teens.xml>

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Survival Centre for Youth 902-894-5884

Public Health Nursing 902-368-4530

CHANCES 902-892-8744

4.3-The Shot-Depo-Provera

- ☆ There is no “best” method of birth control
- ☆ Each method has its own pros and cons
- ☆ Some methods work better than others do at preventing pregnancy
- ☆ NO birth control method prevents pregnancy 100% of the time (except abstinence)

The birth control method you choose should take into account:

- your overall health
- how often you have sex
- the number of sexual partners you have
- if you want to have children
- how well each method works (or is effective) in preventing pregnancy
- any potential side effects
- your comfort level with using the method

If You Choose Depo-Provera

- You will have to go to the doctor for a shot of the hormone progestin in the buttocks or arm every 3 months.
- The hormone will usually prevent release of an egg.
- Depo-Provera may also thicken cervical mucus to keep sperm from joining an egg.
- Depo-Provera may also thin the lining of the uterus, which may prevent implantation of a fertilized egg.

Effectiveness

- 97–99.7%
- It does not protect against STIs or HIV
- Latex or female condom can reduce risk of infection

Advantages

- prevents pregnancy for 12 weeks
- doesn't need to be taken daily or put in place before vaginal intercourse
- can be used by women who cannot take estrogen
- may reduce menstrual cramps
- reduces anemia
- helps prevent cancer of the endometrium (lining of the uterus)

- can be used while breastfeeding

Disadvantages

- You should not use the shot continuously for more than two years unless no other method is right for you.
- Women who use Depo-Provera may have temporary bone thinning. It increases the longer they use it, but bone growth begins again when women stop using the shot.
- Whether or not temporary bone thinning leads to greater risk of bone fracture from osteoporosis much later in life is also unknown.
- To protect your bones, get regular exercise and get extra calcium and vitamin D — either through your diet or by using supplements.
- Side effects include irregular or late periods as well as weight gain, headaches, depression, abdominal pain, hair loss, increased hair on the face or body, nervousness, skin rash, or spotty darkening of the skin.
- Side effects cannot be reversed until medication wears off (up to 12 weeks).
- May cause delay in getting pregnant after shots are stopped.

If you want further information on birth control options, check out these websites:

<http://www.sexualityandu.ca/eng/teens/CN/methods.cfm>

http://www.kidshealth.org/teen/sexual_health/contraception/bc_chart.html

<http://www.chebucto.ns.ca/Health/TeenHealth/index.htm>

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Public Health Nursing 902-368-4530

CHANCES 902-892-8744

4.4-The Patch - Ortho-Evra

- ☆ There is no “best” method of birth control
- ☆ Each method has its own pros and cons
- ☆ Some methods work better than others do at preventing pregnancy
- ☆ NO birth control method prevents pregnancy 100% of the time (except abstinence)

The birth control method you choose should take into account:

- your overall health
- how often you have sex
- the number of sexual partners you have
- if you want to have children
- how well each method works (or is effective) in preventing pregnancy
- any potential side effects
- your comfort level with using the method

If you choose the patch:

- Ortho Evra is a skin skin patch worn on the lower abdomen, buttocks, or upper body.
- It releases the hormones progestin and estrogen into the bloodstream.
- You put on a new patch once a week for three weeks, and then do not wear a patch during the fourth week in order to have a menstrual period.
- You will need to visit your doctor for a prescription and to make sure you are not having problems.
- The hormones released by the patch prevent release of egg, thicken cervical mucus to keep sperm from joining egg, and thin the lining of the uterus.

Effectiveness

- Up to 99.7%
- not effective against sexually transmitted infections
- latex or female condoms can reduce risk of infection

Advantages

- protects against pregnancy for one month
- nothing to put in place before vaginal intercourse
- no pill to take daily
- periods become more regular
- less menstrual cramping, acne, iron deficiency anemia, premenstrual tension, and menstrual flow

- reduces risk of ovarian and endometrial cancers, pelvic inflammatory disease, noncancerous growths of the breast, ovarian cysts, and may protect against osteoporosis (thinning of the bones)
- fewer tubal pregnancies

Disadvantages

- skin reaction at the site of application
- may not be as effective for women who weigh more than 198 pounds
- temporary side effects that usually clear up after a few months include irregular bleeding, loss of monthly period, weight gain or loss, nausea, breast tenderness, changes in mood, headaches, and other discomforts
- rare but serious health risks, including blood clots, heart attack, and stroke
- women who are 35 and older and smoke are at greater risk for serious side effects

Caution

- Don't smoke while you use the patch. Doing so may increase your risk of heart attack, blood clots, and stroke.
- The patch works best when it is changed on the same day of the week for three weeks in a row.
- Pregnancy can happen if an error is made in using the patch — especially if it becomes loose or falls off for more than 24 hours
- the same patch is left on the skin for more than one week

If you want further information on birth control options, check out these websites:

<http://www.sexualityandu.ca/eng/teens/CN/methods.cfm>

http://www.kidshealth.org/teen/sexual_health/contraception/bc_chart.html

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Survival Centre for Youth 902-894-5884

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CHANCES 902-892-8744

4.5-Male Condoms

- ☆ There is no “best” method of birth control
- ☆ Each method has its own pros and cons
- ☆ Some methods work better than others do at preventing pregnancy
- ☆ NO birth control method prevents pregnancy 100% of the time (except abstinence)

The birth control method you choose should take into account:

- your overall health
- how often you have sex
- the number of sexual partners you have
- if you want to have children
- how well each method works (or is effective) in preventing pregnancy
- any potential side effects
- your comfort level with using the method

If you choose condoms:

- Condoms are barrier methods of birth control because they put up a block, or barrier, which keeps the sperm from reaching the egg.
- Condoms come lubricated (which can make sexual intercourse more comfortable and pleasurable) and non-lubricated (which can also be used for oral sex).
- You can use KY jelly or water-based lubricants.
- DO NOT use oil base lubricants. Oil-based lubricants like massage oils, baby oil, lotions, or petroleum jelly will weaken the condom, causing it to tear or break.

Effectiveness

- 85–98%
- Latex condoms offer very good protection against HIV — the virus that can cause AIDS.
- Latex condoms reduce the risk of other sexually transmitted infections, including gonorrhea, syphilis, chlamydia, trichomoniasis, HPV, and herpes.

Increase your protection:

- Do not use oil-based lubricants, like Vaseline on latex condoms.
- Use correctly: Place rolled condom on tip of hard penis. Squeeze air out of half-inch space at tip. Pull back foreskin and roll condom down over penis. Smooth out any air bubbles. Lubricate with water-based lubricant, like K-Y jelly. Hold condom against penis

- to withdraw.
- Also use spermicides for increased contraceptive effectiveness.

Advantages

- inexpensive and easy to buy in drugstores, supermarkets, etc.
- can help relieve premature ejaculation
- can be put on as part of sex play
- can be used with other methods to reduce risk of infection

Disadvantages

- uncooperative partners
- latex allergies
- loss of sensation
- breakage

Caution

- No matter how old you are, it is very important to use condoms with your other method of birth control — whenever you are at risk for getting a sexually transmitted infection.

If you want further information on birth control options, check out these websites:

<http://www.sexualityandu.ca/eng/teens/CN/methods.cfm>

http://www.kidshealth.org/teen/sexual_health/contraception/bc_chart.html

<http://www.chebucto.ns.ca/Health/TeenHealth/index.htm>

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CHANCES 902-892-8744

4.6-Female Condoms

- ☆ There is no “best” method of birth control
- ☆ Each method has its own pros and cons
- ☆ Some methods work better than others do at preventing pregnancy
- ☆ NO birth control method prevents pregnancy 100% of the time (except abstinence)

The birth control method you choose should take into account:

- your overall health
- how often you have sex
- the number of sexual partners you have
- if you want to have children
- how well each method works (or is effective) in preventing pregnancy
- any potential side effects
- your comfort level with using the method

If you choose the female condom:

- Worn by the woman, this barrier method keeps sperm from getting into her body.
- It is made of polyurethane, is packaged with a lubricant, and may protect against STDs, including HIV.
- It can be inserted up to 24 hours prior to sexual intercourse.

Effectiveness

- 79–95% — female condom
- The female condom reduces the risk of sexually transmitted infections, including HIV

Advantages

- easy to buy in drugstores, supermarkets, etc.
- insertion may be part of sex play
- erection unnecessary to keep female condom in place
- female condoms can be used by people allergic to latex or spermicide
- external ring of female condom may stimulate clitoris

Disadvantages

- may be noisy
- may irritate vagina or penis
- may slip into vagina during intercourse
- may be difficult to insert

If you want further information on birth control options, check out these websites:

<http://www.sexualityandu.ca/eng/teens/CN/methods.cfm>

http://www.kidshealth.org/teen/sexual_health/contraception/bc_chart.html

<http://www.chebucto.ns.ca/Health/TeenHealth/index.htm>

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4.7-Diaphragm

- ☆ There is no “best” method of birth control
- ☆ Each method has its own pros and cons
- ☆ Some methods work better than others do at preventing pregnancy
- ☆ NO birth control method prevents pregnancy 100% of the time (except abstinence)

The birth control method you choose should take into account:

- your overall health
- how often you have sex
- the number of sexual partners you have
- if you want to have children
- how well each method works (or is effective) in preventing pregnancy
- any potential side effects
- your comfort level with using the method

If you choose the Diaphragm:

- it is a barrier method that blocks sperm from entering the cervix and reaching the egg
- the diaphragm is shaped like a shallow latex cup
- the diaphragm comes in different sizes and you need a doctor to “fit” you for one
- before sexual intercourse, you use a diaphragm with spermicide (to block or kill sperm) and place them up inside your vagina to cover your cervix (the opening to your womb)
- barrier methods must be left in place for 6 to 8 hours after intercourse to prevent pregnancy

Effectiveness

- 84–94% — Diaphragm when used appropriately
- not effective against sexually transmitted infections
- latex or female condoms can reduce risk of infection

Advantages

- no major health concerns
- can last from six months up to several years

Disadvantages

- can be messy
- allergies to latex, silicone, or spermicide
- should not be used during vaginal bleeding or infection
- increased risk of bladder infection
- can only be left in place for up to 24 hours

Caution

- Do not share them with friends.
- The diaphragm should be checked to see if it's the right size after a change of 20 percent of your weight, childbirth, or abortion.
- Check for weak spots or holes by holding diaphragm up to a light or filled with water and check for leaks.

If you want further information on birth control options, check out these websites:

<http://www.sexualityandu.ca/eng/teens/CN/methods.cfm>

http://www.kidshealth.org/teen/sexual_health/contraception/bc_chart.html

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4.8-Spermicides

- ☆ There is no “best” method of birth control
- ☆ Each method has its own pros and cons
- ☆ Some methods work better than others do at preventing pregnancy
- ☆ NO birth control method prevents pregnancy 100% of the time (except abstinence)

The birth control method you choose should take into account:

- your overall health
- how often you have sex
- the number of sexual partners you have
- if you want to have children
- how well each method works (or is effective) in preventing pregnancy
- any potential side effects
- your comfort level with using the method

Spermicides are:

- foams, gels, or creams, that work by killing sperm
- inserted or placed in the vagina no more than one hour before intercourse
- Do not douche or rinse out your vagina for at least six to eight hours after intercourse.

Remember:

- You will need to use more spermicide before each act of intercourse.
- You may protect yourself more against getting pregnant if you use a spermicide with a male condom, female condom, or diaphragm.

Disadvantages

- not particularly effective when used alone
- effectiveness increases when used with condoms or a diaphragm
- can be messy
- may irritate vagina or penis — which may increase risk of infection
- may set off allergies

If you want further information on birth control options, check out these websites:

<http://www.sexualityandu.ca/eng/teens/CN/methods.cfm>

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4.9-Withdrawal

- ☆ There is no “best” method of birth control
- ☆ Each method has its own pros and cons
- ☆ Some methods work better than others do at preventing pregnancy
- ☆ NO birth control method prevents pregnancy 100% of the time (except abstinence)

The birth control method you choose should take into account:

- your overall health
- how often you have sex
- the number of sexual partners you have
- if you want to have children
- how well each method works (or is effective) in preventing pregnancy
- any potential side effects
- your comfort level with using the method

If you choose the withdrawal method:

- The man takes his penis out of the woman’s vagina (or “pulls out”) before he ejaculates, or has an orgasm.
- This works better when the man also wears a condom.
- This stops the sperm from going to the egg.

Effectiveness:

- 73–96%
- Not effective against sexually transmitted infections.

Disadvantages

- Many young men lack the experience and self-control to pull out in time.
- Some men have been known to say they will pull out, and then they get so excited and carried away that they don't.
- Some men cannot tell when they are going to ejaculate.
- Some men ejaculate very quickly, before they realize it.

- Before ejaculation, almost all penises leak fluid — pre-ejaculate — that may contain sperm and cause pregnancy.

If you want further information on birth control options, check out these websites:

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4.10-Emergency Birth Contraception

- ☆ **This is NOT a regular form of birth control and should not be used as one!**
- ☆ Emergency birth control, is used to keep a woman from getting pregnant when she has had unprotected vaginal intercourse.

“Unprotected” can mean:

- no method of birth control was used
- a birth control method was used but did not work (the condom broke)
- forgot to take birth control pills
- a woman was abused or forced to have sex
- he didn't pull out in time

Emergency Contraception (EC)

- is designed to prevent pregnancy after unprotected vaginal intercourse
- can reduce the risk of pregnancy if started within 120 hours of unprotected sex
- they work best when taken within 72 hours (during this time they can reduce the risk of pregnancy from 75 to 89%)
- the sooner a woman starts EC, the more effective it may be
- nausea, vomiting, and cramping are common side effects when combined hormones (estrogen and progestin) are used.
- is for use only if a woman is sure she is not already pregnant from a previous act of intercourse
- it delays release of egg or keeps sperm from joining with egg
- it will not cause an abortion.

- ☆ **Emergency Contraception does not protect against sexually transmitted infections.**

Don't use emergency hormonal contraception if you:

- are pregnant
- are allergic to the medication

If you want further information on birth control options, check out these websites:

<http://www.sexualityandu.ca/eng/teens/CN/methods.cfm>

http://www.kidshealth.org/teen/sexual_health/contraception/bc_chart.html

<http://www.chebucto.ns.ca/Health/TeenHealth/index.htm>

<http://www.plannedparenthood.org/pp2/portal/medicalinfo/birthcontrol/pub-bc-choices-teens.xml>

1

<http://www.4woman.gov/faq/birthcont.htm>

If you would like to talk to someone use one of the contact numbers listed here:

Island Helpline 1-800-218-2885

Kid Help Phone 1-800-668-6868

Survival Centre for Youth 902-894-5884

Public Health Nursing 902-368-4530

CHANCES 902-892-8744

Chapter 5

~ Sexuality ~

What is sexual orientation?

- Sexual orientation is determined by the sex or sexes you are romantically, physically, emotionally, and sexually attracted to.
- Heterosexuals are individuals attracted to the opposite sex, homosexuals are individuals who are attracted to the same sex, while bisexuals are people who are attracted to both sexes.
- Homosexual men are usually referred to as gay while homosexual women are referred to as lesbians.

Your sexual orientation will emerge over time, probably little by little.

- Experimentation is natural - as long as you look out for the safety of yourself and others.
- You may want to date the individuals of the opposite sex or you may decide to date those of the same sex.
- Exploration doesn't determine your sexual orientation, it just helps to discover your feelings.
- You shouldn't label yourself as gay just because you've had homosexual feelings or even homosexual encounters. These experiences are very common among people your age.
- Explore and experience your sexual feelings with an open mind. If it turns out you're gay, you'll probably face some unique challenges but you'll also get a lot of support along the way.

What causes homosexuality?

- It is believed that homosexuality is caused by our biological make-up.
- What this means is that homosexuals are no more responsible for their homosexuality than heterosexuals are for their heterosexuality.
- It is not a "lifestyle" you choose for yourself as much as something you discover in yourself.

Helping a friend who's gay

- When you learn that a friend is gay, you may experience surprise or shock. A person you thought you knew so well turns out to be gay. You may be upset that they kept this from you or you may wonder if you can continue the friendship, now that you know the truth.
- It's okay to express surprise to your friend. If you pretend like you're not surprised, or you try to hide the way you are feeling, your friend is going to see through you. On the other hand, you owe it to your friend to offer your support, even if you have to push yourself in that direction. It may help to think of your friend's gayness as being neither good nor bad, but simply the way it is - like being left-handed in a mostly right-handed world.
- Even if you believe that homosexuality is "wrong", your friend stands nothing to gain from your harsh disapproval - he or she will only feel more rejected and unloved. Bear in mind that gay teens carry out a high number of all teenage suicides. You may disapprove of what your friend is doing, but try to find it in yourself to accept who your friend is - a homosexual.
- By supporting your friend through this difficult period, you have the opportunity to make a real difference in the life of a struggling person. Here are some concrete ways you can help
 - ▶ Find out if your friend has come out to his or her parents. If not, offer your support while your friend approaches this monumental task.
 - ▶ Do not reveal anything about your friend's sexual orientation unless he or she has specifically given you the go-ahead.
 - ▶ Protect your friend from cruel remarks from schoolmates or other people...at the very least, don't participate in such discussions. If you're worried about your own safety, consult an adult such as a school counsellor.
 - ▶ Listen, listen, listen - preferably without judgment. Take the opportunity to learn what it's like to be gay.

If you want further information on sexuality and sexual orientation, check out these websites:

<http://www.sexualityandu.ca/eng/teens/SGO/>

<http://www.chebucto.ns.ca/Health/TeenHealth/SexOrien/gay.html>

<http://www.pflagcanada.ca>

If you would like to talk to someone use one of the contact numbers listed here:

Island Helpline 1-800-218-2885

Kid Help Phone 1-800-668-6868

Survival Centre for Youth 902-894-5884

PFLAG PEI 902-367-3727

Abegweit Rainbow Collective 902-894-5776

Chapter 6
~ Sexual Health ~

- ☆ There are many things that we can do to take care of ourselves physically, mentally, and emotionally.
- ☆ When it comes to our sexual health, there are a few things we can do to help prevent a problem or recognize a problem before it gets too serious.
- ☆ In the following sections you will find some general information about some things you can do to ensure you remain healthy:

6.1.....Pap Tests
6.2.....Breast Self Examination
6.3.....Testicular Self Examination

6.1-Pap Tests

What is a Pap test?

- A Pap test is one of the most important reasons for a woman to see her doctor.
- It is a simple, painless test and only takes a few minutes.
- This test shows any changes in the cells of your cervix which might develop into cancer.
- This doesn't happen if found early and treated.

Why should I have a Pap test or encourage my partner to have one?

- Annual Pap tests can prevent cancer of the cervix. A Pap test can also find early cancer of the cervix, which can be treated and is 100% curable.
- A woman should start having yearly Pap tests as soon as she becomes sexually active or reaches the age of 18. A woman should continue having a Pap test every year even if she is no longer sexually active.

Facts about cervical cancer

- cancer of the cervix is a preventable disease
- there are no symptoms of the precancerous stages of cervical cancer
- risk factors include
 - ▶ early onset of sexual activity
 - ▶ multiple sexual partners
 - ▶ having sex with partner(s) who have multiple sexual partners
 - ▶ cigarette smoking
 - ▶ the greatest risk for cervical cancer is never having had a Pap test

How is a Pap test done?

- When you go for a Pap test, you will be asked to remove your pants/skirt and panties and lie on an examining table.
- The lower half of your body will be covered with a sheet and you will be asked to slide your bottom down and put your feet in footrests ("stirrups").
- You will be asked to relax and let your knees fall to the side.
- Your doctor will use a lamp during this part of the examination.
- An instrument called a speculum is gently placed in the vagina.
- The speculum opens up the vagina so the doctor can see.

- You will feel some pressure when the speculum opens.
- If you feel tenderness or pain, tell the doctor so that the speculum can be adjusted to make you feel more comfortable.
- You should also try taking deep breaths and relaxing as it is inserted.
- Your doctor will then use a small wooden/plastic stick or spatula, or a brush, to gently scrape the surface of the cervix in order to pick up cells.
- The cells are placed on a glass slide and are examined using a microscope.

How do I get ready for a Pap test?

- do not douche or use contraceptive creams or jellies for 48 hours before your visit
- do not have sex for 24 hours before your visit
- A mid-cycle test is best (between 10 and 20 days after the first day of your menstrual period).

If you want further information on PAP tests, check out these websites:

<http://www.chebucto.ns.ca/Health/TeenHealth/sexualhealth/girls/pap.htm>

http://www.cancer.ca/ccs/internet/standard/0,3182,3172_10175_275239_langId-en,00.html

http://www.sexualityandu.ca/eng/news/e-newsletter_0205.cfm

If you would like to talk to someone use one of the contact numbers listed here:

PEI PAP Screening Clinic 902-368-2010

Four Neighbourhood's Community Health Centre 902-368-6930

6.2-Breast Self Examination (BSE)

Examining your breasts is an important way to find a breast cancer early.

- Not every cancer can be found this way, but it is a critical step you can and should take for yourself.
- No woman wants to do a breast self exam (or "BSE"), and for many the experience is frustrating—you may feel things but not know what they mean.
- The more you examine your breasts, the more you will learn about them and the easier it will become for you to tell if something unusual has occurred.
- Try to get in the habit of doing a breast self-examination once a month to familiarize yourself with how your breasts normally look and feel.
- Examine yourself several days after your period ends, when your breasts are least likely to be swollen and tender.

Breasts tend to have different "neighborhoods."

- The upper, outer area—near your armpit—tends to have the most prominent lumps and bumps.
- The lower half of your breast can feel like a sandy or pebbly beach.
- The area under the nipple can feel like a collection of large grains.
- Another part might feel like a lumpy bowl of oatmeal.

What am I looking for?

- What's important is that you get to know the look and feel of YOUR breasts.
- Has anything changed?
- Bring to the attention of your doctor any changes in your breasts that:
 - ▶ last over a full month's cycle, OR
 - ▶ seem to get worse or more obvious over time

The Five Steps of a Breast Self Exam

Step 1: Begin by looking at your breasts in the mirror with your shoulders straight and your arms on your hips.

- Here's what you should look for:
 - ▶ breasts that are their usual size, shape, and color.
 - ▶ breasts that are evenly shaped without visible distortion or swelling.

- If you see any of the following changes, bring them to your doctor's attention:
 - ▶ nipple discharge
 - ▶ dimpling, puckering, or bulging of the skin
 - ▶ a nipple that has changed position or an inverted nipple (pushed inward instead of sticking out)
 - ▶ redness, soreness, rash, or swelling.

Step 2: Now, raise your arms and look for the same changes.

Step 3: While you're at the mirror, gently squeeze each nipple between your finger and thumb and check for nipple discharge (this could be a milky or yellow fluid or blood).

Step 4: Next, feel your breasts while lying down

- Use your right hand to feel your left breast and then your left hand to feel your right breast.
- Use a firm, smooth touch with the first few fingers of your hand, keeping the fingers flat and together.
- Cover the entire breast from top to bottom, side to side—from your collarbone to the top of your abdomen, and from your armpit to your cleavage.
- Follow a pattern to be sure that you cover the whole breast.
- You can begin at the nipple, moving in larger and larger circles until you reach the outer edge of the breast.
- You can also move your fingers up and down vertically, in rows, as if you were mowing a lawn. Be sure to feel all the breast tissue: just beneath your skin with a soft touch and down deeper with a firmer touch.
- Begin examining each area with a very soft touch, and then increase pressure so that you can feel the deeper tissue, down to your ribcage.

Step 5: Finally, feel your breasts while you are standing or sitting.

- Many women find that the easiest way to feel their breasts is when their skin is wet and slippery, so they like to do this step in the shower
- Cover your entire breast, using the same hand movements described in Step 4.

If you want further information on breast self examinations, check out these websites:

<http://www.chebucto.ns.ca/Health/TeenHealth/sexualhealth/girls/breast.htm>

<http://www.sexualityandu.ca/eng/adults/CT/breast.cfm>

http://www.breastcancer.org/dia_detec_exam_idx.html

<http://www.breastselfexam.ca/index.html>

<http://www.uottawa.ca/health/information/women-self-exam.html>

If you would like to talk to someone use one of the contact numbers listed here:

PEI PAP Screening Clinic 902-368-2010

6.3-Testicular Self Examination (TSE)

Why should I perform a testicular self exam?

- The TSE is a method for boys and men to check their testicles to make sure there aren't any unusual bumps or lumps, which may be the first sign of testicular cancer.
- Sometimes cancer of the testicles will spread, so it is important to detect it early so that the cancer doesn't become more serious.
- Starting at around age 15, males should examine themselves every month.
- Self-examination is particularly important because cancer of the testes may not have symptoms.
- But there are a few warning signs
 - ▶ one testicle may swell, or feel abnormally heavy
 - ▶ a small, painless lump may develop on a testicle
 - ▶ a dull ache in the lower abdomen, or in the groin
 - ▶ pain or discomfort in a testicle or in the scrotum
 - ▶ a sudden collection of fluid in the scrotum
 - ▶ blood in the urine
 - ▶ breasts may enlarge and feel tender

If you have lumps or other symptoms, it does not necessarily mean you have cancer, but you need to go and see your doctor.

You should examine yourself monthly, using this procedure:

- Check yourself right after a hot shower. The skin of the scrotum is then relaxed and soft.
- Become familiar with the normal size, shape and weight of your testicles.
- Stand in front of a mirror to perform the exam.
- Using both hands, gently roll each testicle between your fingers.
- Identify the epididymis. This is a rope-like structure on the top and back of each testicle. This structure is NOT an abnormal lump.
- Be on the alert for a tiny lump under the skin, in front or along the sides of either testicle.
- A lump may remind you of a piece of uncooked rice or a small cooked pea.
- You should not feel any pain when doing the exam
- Report any swelling to your doctor.

If you want further information on testicular self examinations, check out these websites:
<http://students.usask.ca/wellness/info/physical/men/tse/>

<http://www.chebucto.ns.ca/Health/TeenHealth/sexualhealth/boys/selfexam.htm>
<http://www.sexualityandu.ca/eng/adults/CT/testicular.cfm>
<http://www.uottawa.ca/health/information/men-self-exam.html>

If you would like to talk to someone use one of the contact numbers listed here:

Four Neighbourhood's Community Health Centre 902-368-6930

Public Health Nursing 902-368-4530

Section 5

~ Nutrition ~

Chapter 1.....Healthy Diets and Weight Loss

Chapter 2.....Vegetarian Diets

Chapter 3.....Healthy Weight, Body Mass Index, and Obesity

Chapter 4.....Eating Disorders

Chapter 5.....Vitamin and Mineral Deficiencies and
Supplements

Chapter 1

~ Healthy Diets and Weight Loss ~

- ☆ Food provides the energy that keeps your body functioning properly, allowing you to grow and to be physically active.
- ☆ If the foods we eat provide more energy (calories) than we use up, then we will put on weight.
- ☆ Each person needs a different amount of energy, and therefore a different amount of food.
- ☆ You can reach and maintain a healthy weight both by being physically active and by not eating more calories than you use.
- ☆ Diets that are either very restrictive or that reduce or eliminate particular food groups can alter the intake of particular nutrients and can be damaging to your health.
- ☆ Unfortunately, there is no quick fix when it comes to weight loss.
- ☆ The key is to eat a balanced diet using Canada's Food Guide and to engage in regular physical activity.

10 Tips to Healthy Eating:

- 1. Eat a variety of nutrient-rich foods.**
 - ▶ You need more than 40 different nutrients for good health, and no single food supplies them all. Use Canada's Food Guide to figure out how much of each food group you need.
- 2. Enjoy plenty of whole grains, fruits and vegetables.**
 - ▶ Do you eat 6-11 servings from the bread, rice, cereal and pasta group, 3 of which should be whole grains?
 - ▶ Do you eat 2-4 servings of fruit and 3-5 servings of vegetables?
 - ▶ If you don't enjoy some of these at first, give them another chance. Look through cookbooks for tasty ways to prepare unfamiliar foods.
- 3. Maintain a healthy weight.**
 - ▶ The weight that's right for you depends on many factors including your sex, height, age and heredity.
 - ▶ Regular exercise is also important to maintaining a healthy weight.
- 4. Eat moderate portions.**

- ▶ If you keep portion sizes reasonable, it's easier to eat the foods you want and stay healthy.
- ▶ Did you know the recommended serving of cooked meat is 3 ounces, similar in size to a deck of playing cards? A medium piece of fruit is 1 serving and a cup of pasta equals 2 servings.
- ▶ Use Canada's Food Guide to determine the right serving sizes.

5. Eat regular meals.

- ▶ Skipping meals can lead to out-of-control hunger, often resulting in overeating.
- ▶ Snacking between meals can help curb hunger, but don't eat so much that your snack becomes an entire meal.

6. Reduce, don't eliminate certain foods.

- ▶ If your favourite foods are high in fat, salt or sugar, the key is moderating how much of these foods you eat and how often you eat them.
- ▶ Choosing skim or low-fat dairy products and lean cuts of meat such as flank steak and beef round can reduce fat intake significantly.

7. Balance your food choices over time.

- ▶ Not every food has to be "perfect".
- ▶ When eating a food high in fat, salt or sugar, select other foods that are low in these ingredients.
- ▶ If you miss out on any food group one day, make up for it the next day.

8. Know your diet pitfalls.

- ▶ Rather than eliminating these foods, just cut back your portions.

9. Make changes gradually.

- ▶ Just as there are no "superfoods" or easy answers to a healthy diet, don't expect to totally revamp your eating habits overnight.
- ▶ Changing too much, too fast can get in the way of success.

10. Remember, foods are not good or bad.

- ▶ Select foods based on your total eating patterns, not whether any individual food is "good" or "bad."
- ▶ Don't feel guilty if you love foods such as apple pie, potato chips, candy bars or ice cream. Eat them in moderation, and choose other foods to provide the balance and variety that are vital to good health.

If you want further information on healthy eating and weight loss, check out these websites:

<http://www.chebucto.ns.ca/Health/TeenHealth/healthyeating/what.htm>

http://www.hc-sc.gc.ca/fn-an/food-guide-aliment/index_e.html

<http://www.nms.on.ca/Elementary/canada.htm>

<http://www.vicu.utoronto.ca/English/Canadas-Food-Guide.html>

http://www.phac-aspc.gc.ca/pau-uap/paguide/news_re_98.html

If you would like to talk to someone use one of the contact numbers listed here:

Four Neighbourhood's Community Health Centre 902-368-6930

Public Health Nursing 902-368-4530

Healthy Eating Alliance 902-368-6713

Chapter 2 **~ Vegetarian Diets ~**

- ☆ More and more people are becoming aware of the benefits of a vegetarian diet.
- ☆ This type of diet takes planning particularly if you cut out all animal products.

There are many different types of vegetarian diets:

- Semi-vegetarians eat some fish or poultry, eggs, and dairy products in addition to foods from plant sources.
- Lacto-ovo vegetarians eat no meat, seafood or poultry, but eat dairy products and eggs.
- Lacto-vegetarians eat dairy products, but not eggs or any other animal products.
- Pure Vegetarians, or Vegans, exclude all foods of animal origin.

What are the health benefits of a vegetarian diet?

- Vegetarian diets tend to be low in fat, saturated fat, and cholesterol.
- Cashing in on the health benefits requires planning; simply replacing meat with large amounts of dairy products or other substitutes may mean you are actually eating more fat.
- Make sure that you replace the foods that you cut out with others from the same food group.

Vegetarians must be very careful to include foods that provide them with vitamins and nutrients that are often found in meat products:

1. Calcium

- ▶ If you're a Lacto or Lacto-Ovo Vegetarian you can get calcium from any dairy products.
- ▶ If you're a Vegan or Ovo Vegetarian, look for your calcium in fortified soymilk.
- ▶ All vegetarians can find calcium in tofu or dark, green leafy vegetables.
- ▶ Good calcium sources include broccoli, kale, collard and mustard greens, fortified soy milk, and fortified tofu.

2. Iron

- ▶ Iron is an important nutrient to make sure you are getting, especially if you're a girl.
- ▶ Vegetarians must ensure they get enough iron, since iron from plant sources is not as easily absorbed as that found in animal products. Good sources of iron include tofu, legumes (such as lentils, lima beans, chick peas, split peas, and red beans), dark leafy green vegetables (such as asparagus, spinach, chard, and beet greens), whole grains (such as bran, oats, whole wheat, and bulgur), and dried fruits (including prunes).

3. Zinc

- ▶ Zinc tends to be something that a lot of vegetarian diets lack. So where is zinc hiding?
- ▶ Try eating more nuts, legumes, miso, lima beans, pumpkin and sunflower seeds, wheat germ and whole grains.

4. Vitamin B-12

- ▶ Vitamin B-12 is something that you can get from fortified soymilk, fortified breakfast cereals, eggs and dairy products.
- ▶ Vegans need to be especially careful that they are getting enough B-12 because they are not eating any animal products, which is where vitamin B-12 occurs naturally.

5. Other Vitamins

- ▶ Vitamin D is found only in animal products, but is also synthesized by the body during exposure to the sun. It is also found in enriched soya milk and fish oils.
- ▶ Riboflavin, another important vitamin vegetarians may be lacking, is found in eggs, dairy products, broccoli and almonds.

Some Helpful Hints for Vegetarians:

- Take time to plan meals, and ensure variety and balance in the foods you eat. The largest part of your diet should be fruits and vegetables, and breads and cereals.
- Balance this with smaller amounts of dairy products or substitutes, and protein foods. For exact numbers of portions and portion sizes, consult the Canada Food Guide.
- For more information, or for help in planning your own vegetarian diet, consult a nurse/health educator or a dietitian.

If you want further information on healthy eating and weight loss, check out these websites:

<http://www.chebucto.ns.ca/Health/TeenHealth/healthyeating/what.htm>

<http://www.mcgill.ca/studenthealth/information/nutritionalhealth/vegetarian/>

<http://www.kidzworld.com/site/p3003.htm>

http://www.hc-sc.gc.ca/fn-an/food-guide-aliment/index_e.html

If you would like to talk to someone use one of the contact numbers listed here:

Four Neighbourhood's Community Health Centre 902-368-6930

Public Health Nursing 902-368-4530

Healthy Eating Alliance 902-368-6713

Chapter 3

~ Healthy Weight, Body Mass Index, and Obesity ~

- ☆ Obesity is a complex condition that has a number of health-related risks.
- ☆ It can affect both the health and the mental well-being of a person.

- ☆ Being overweight increases your risk of developing cardiovascular disease, high blood pressure, and high LDL cholesterol levels.
- ☆ These conditions can lead to stroke, heart disease or other cardiovascular related health problems with serious consequences, including death.

- ☆ Obesity is also a risk factor for developing type 2 diabetes. Type 2 diabetes is a condition with numerous health risks including heart disease, kidney damage, eye damage, nerve damage and foot problems.

- ☆ Other conditions and complications that are associated with obesity include gallbladder disease, certain types of cancer, fibromyalgia, polycystic ovary syndrome, sleep apnea, and certain types of arthritis.

Body Mass Index (BMI)

- The BMI is a measure that compares your weight and height to determine if you are in a healthy weight range.
- The BMI values are commonly used to assess degrees of body fatness for adults.
- However the BMI does not indicate:
 - ▶ How much of the weight is fat (body composition)
 - ▶ Where the fat is located (fat distribution)
- These two drawbacks make the BMI unsuitable for use with:
 - ▶ Athletes because their increased muscle mass results in a greater BMI
 - ▶ Women that are pregnant or breastfeeding because their increased weight is normal during childbearing
 - ▶ Adults over 65 years because people lose height as they age and the BMI values were based on younger people
 - ▶ Children and adolescents because they are still growing

SO, The BMI should not be used for anyone under 18 years of age!

If you are between 18 and 65 years of age, you can calculate your BMI with this formula:

$$\text{BMI} = \frac{\text{Weight (kg)}}{\text{Height}^2 (\text{m}^2)}$$

BMI Value

- 18.5 or lower - Underweight
- 18.5 - 24.9 - Healthy Weight
- 25 - 29.9 - Overweight
- 30 or higher - Obese

Healthy Body Weight for Teens

- The body mass index is a common method to measure healthy body weight, BUT it is not a good measure for people younger than 18 years of age.
- Healthy weight for teenagers is calculated by using growths charts.
- If you are concerned about your weight you should contact your doctor or a nutritionist and they can perform the right measurements to tell you whether your weight is in a healthy range.

If you want further information on healthy body weight, check out these websites:

<http://www.chebucto.ns.ca/Health/TeenHealth/healthyeating/healthyweight.htm>

http://www.hc-sc.gc.ca/fn-an/food-guide-aliment/index_e.html

http://www.active2010.ca/index.cfm?fa=english_tools.bmi

If you would like to talk to someone use one of the contact numbers listed here:

Four Neighbourhood's Community Health Centre 902-368-6930

Public Health Nursing 902-368-4530

Healthy Eating Alliance 902-368-6713

Chapter 4

~ Eating Disorders ~

- ☆ Eating disorders can be difficult to detect.
- ☆ Knowing how to support someone with an eating disorder is also a challenge.
- ☆ Treatment is available - it can be a long process, but an eating disorder can be overcome.

The three main eating disorders are anorexia nervosa, bulimia nervosa and binge-eating.

Anorexia nervosa:

- is characterized by severe weight loss due to extreme food reduction
- refusal to keep body weight at or above the normal weight for one's body type
- dieting to extremes, usually coupled with excessive exercise
- feeling overweight despite dramatic weight loss
- loss of menstrual periods
- extreme preoccupation with body weight and shape

Bulimia nervosa:

- results in frequent fluctuations in weight
- repeated episodes of bingeing and purging, usually by self-induced vomiting, abuse of laxatives, diet pills and/or diuretics - methods which are both ineffective and harmful
- eating beyond the point of fullness

Binge-eating disorder:

- is often triggered by chronic dieting and involves periods of overeating, often in secret and often carried out as a means of deriving comfort
- periods of uncontrolled, impulsive or continuous eating
- sporadic fasts or repetitive diets

Warning signs

- low self-esteem
- social withdrawal
- claims of feeling fat when weight is normal or low
- preoccupation with food, weight, counting calories and with what people think
- denial that there is a problem
- wanting to be perfect
- intolerance of others
- inability to concentrate

What causes an eating disorder?

- When someone has an eating disorder, their weight is the prime focus of their life.
- People with an eating disorder see it as a way of controlling something when they feel as though everything is out of control.
- *Psychological factors* include low self-esteem, feelings of inadequacy or lack of control, depression, anger or loneliness.
- *Interpersonal factors* include troubled family and personal relationships, difficulty expressing emotions and feelings, history of physical or sexual abuse.
- *Media promotion of unrealistic images* and goals, along with its tendency to equate a person's value with their physical appearance is another contributor.

What can I do?

- If you are struggling with an eating disorder, you are not alone.
- If you think someone you know has an eating disorder, learn what you can about these conditions.
- Express your concerns calmly and in a caring way. You can't force someone to change their behaviour, but you can let them know that you care and want to support them.
- Encourage the person to seek professional help.
- Don't lay blame and focus discussions on feelings, not food.
- Examine your own issues around food and weight.
- Be supportive, but do not enable the behaviour.
- Treatment is available - it can be a long process, but an eating disorder can be overcome.

If you want further information on eating disorders, check out these websites:

<http://www.cmha.ca>

<http://www.nedic.ca>

<http://www.cmha.pe.ca>

<http://www.canadian-health-network.ca/servlet/ContentServer?cid=1001945&pagename=CHN-RCS/CHNResource/FAQCHNResourceTemplate&c=CHNResource&lang=En>

http://kidshealth.org/teen/food_fitness/problems/eat_disorder.html

If you would like to talk to someone use one of the contact numbers listed here:

Four Neighbourhood's Community Health Centre 902-368-6930

Public Health Nursing 902-368-4530
Healthy Eating Alliance 902-368-6713
Canadian Mental Health Association 902-566-3034

Chapter 5

~ Vitamin and Mineral Deficiencies and Supplements ~

Do I need supplements?

- Most of us get the vitamins and minerals we need by eating a varied diet, and do not need to take vitamin or mineral supplements.
- If you are concerned that you are not getting enough, you should see your doctor.

Can I get too many vitamins and minerals?

- It is possible to take too much of some vitamin supplements and cause more harm than good.
- Some supplements contain high quantities of certain vitamins and minerals and the body has problems adjusting when you stop taking them.
- Also, too much of one mineral can interfere with the body's ability to absorb another.
- It is important not to take a lot of different vitamin supplements because it's difficult to assess how much of a certain vitamin or mineral you are getting.
- Your body can get rid of some vitamins or minerals if you take too many, but there are others like vitamin A that will be stored in the liver and can become toxic if you take them in large quantities.
- Don't forget that these are powerful substances and are needed by the body in only small amounts and will already be present in foods.

- ☆ The most important thing to remember if you think you might not be getting enough of a certain vitamin or mineral is to change your diet first.
- ☆ You should be able to get all the vitamins and minerals you need if you eat a well balanced diet from Canada's Food Guide.
- ☆ If you make changes in your diet and are still worried, go see your doctor or a nutritionist.

If you want further information on nutrition, check out these websites:

<http://www.chebucto.ns.ca/Health/TeenHealth/healthyeating/what.htm>

http://www.hc-sc.gc.ca/fn-an/food-guide-aliment/index_e.html

<http://www.nms.on.ca/Elementary/canada.htm>

<http://www.vicu.utoronto.ca/English/Canadas-Food-Guide.html>
http://www.phac-aspc.gc.ca/pau-uap/paguide/news_re_98.html
http://www.umanitoba.ca/womens_health/nuteen.htm
<http://www.kidzworld.com/site/p3002.htm>

If you would like to talk to someone use one of the contact numbers listed here:

Four Neighbourhood's Community Health Centre 902-368-6930
Public Health Nursing 902-368-4530
Healthy Eating Alliance 902-368-6713

Section 6
~ Mental Health ~

Chapter 1.....Stress and Anxiety
Chapter 2.....Depression
Chapter 3.....Bipolar Disorder
Chapter 4.....Self-harm
Chapter 5.....Suicide
Chapter 6.....Eating Disorders

Chapter 1

~ Stress and Anxiety ~

What is stress?

- Stress occurs when something causes physical, mental, or emotional strain or tension.
- Stress may result in a feeling of being overwhelmed.
- Stress may be anything that causes a change in your daily routine or in your usual health.
- Stress can be positive or negative.

Psychological Signs of Stress:

- feeling overwhelmed, irritable, upset or unable to control thoughts.
- worrying
- anxiety or panic
- memory lapses, difficulty concentrating, impatience
- anger or hostility
- losing your sense of humour

Physical Signs of Stress:

- fatigue
- health palpitations
- increased heart rate and blood pressure
- indigestion
- constipation and/or diarrhea
- sweating
- sleep disturbances

Stress Management

- Include regular physical activity in your daily routine.
- Develop high self-esteem by engaging in activities that you enjoy and excel at.
- Maintain a positive attitude toward stressors - view them as opportunities for growth.
- Manage your time wisely.
- Take on tasks that are within your limits.

- Practice assertiveness to maintain your limits.
- Monitor your body for early warning signs of stress.
- Release tension by crying, laughing, talking with friends, meditation, yoga, etc.
- When stress does begin to intensify, identify which stressors you can control. Put the others out of your mind.
- Prioritize and take action by focussing your attention on immediate tasks.
- If stress becomes unmanageable, seek outside help.

If you want further information on stress and anxiety, check out these websites:

<http://www.thehealthcenter.info/teen-stress/>

<http://www.cmha.pe.ca>

<http://www.kidzworld.com/site/p2261.htm>

If you would like to talk to someone use one of the contact numbers listed here:

Richmond Centre 902-368-4430

Canadian Mental Health Association 902-566-3034

Health Information Resource Centre 1-800-241-6970

Chapter 2

~ Depression ~

What is depression?

- Depression is an illness, in which feelings of sadness and hopelessness, last longer than a couple of weeks, and no matter how hard a person tries to talk him/herself into feeling better, it just doesn't work.
- Depression is a "total-body" illness that affects a person's thoughts, feelings, behaviour, and physical appearance. It also affects all areas of a person's life such as home, work, school and social life.
- Depression results when the chemicals in the brain, that regulate how a person thinks, feels and acts, get out of balance or get disrupted in some way.
- Depression can result when a person is overwhelmed by stressful factors that do not go away.

Sign of Depression

- downward trend in performance at school or college
- change in personal hygiene and appearance
- destructive and/or defiant behaviour
- Hallucinations or unusual beliefs
- Appetite or weight has changed considerably (has lost or gained a substantial amount of weight)
- May appear restless, agitated (pacing, wringing hands) or has slowed down (e.g., spends hours staring in front, finds it hard to move)
- Has lost a lot of energy, complains of feeling tired all the time
- Complaints of feeling guilty or worthless ('everything is my fault', 'I am bad')
- Belief that life is not worth living
- sudden mood changes (may become physically or verbally aggressive)
- abandoning favourite hobbies or sports
- increased risk-taking and misuse of drugs and alcohol
- finds it harder to stay on task. Loses concentration easily
- cannot remember commitments - doesn't keep appointments
- may start associating with a different peer group
- incidents of self-injury or ideas of killing self
- disrupted sleep, sometimes through upsetting dreams

- feelings or sadness, anxiety, worthlessness, hopelessness
- suicidal thoughts

How is depression treated?

- Depression is the most treatable of mental illnesses.
- Most people who suffer from depression are helped by the treatment they get, which usually includes medication and/or psychological counselling.
- Support from family, friends and self-help groups can also make a big difference.

What can friends and family do?

- It is important that you let them know that it is okay to talk about their feelings and thoughts.
- Listen and offer support rather than trying to contradict them or talk them out of it.
- Let them know you care. Ask them how you can help, and offer to contact their family doctor or a mental health professional.
- Find out about local self-help groups and attend a meeting with them.
- Try to be patient and non-judgmental.
- Most of all, don't do it alone - get other people to provide help and support too.

If you want further information on depression, check out these websites:

<http://www.cmha.pe.ca>

<http://www.cpa.ca/factsheets/depression.htm>

http://www.camh.net/about_addiction_mental_health/depression.html

If you would like to talk to someone use one of the contact numbers listed here:

Richmond Centre 902-368-4430

Canadian Mental Health Association 902-566-3034

Health Information Resource Centre 1-800-241-6970

Island Helpline (1-800-218-2885)

Kids Help Phone (1-800-668-6868)

Mental health agency (1-902-566-3034)

Hospital emergency room (1-902-894-2111)

Chapter 3

~ Bipolar Disorder ~

What is bipolar disorder?

- Bipolar disorder is also called manic depression.
- It is an illness in which there are periods of serious depression, followed by episodes of markedly elevated or irritable moods or “highs” (in the absence of drugs or alcohol).
- These mood swings are not necessarily related to events in the person’s life.
- It typically starts in late adolescence or early adulthood and affects men and women equally.
- The condition can range from mild to severe.

What causes bipolar disorder?

- It is not known what causes bipolar disorder.
- Research suggests that people with the condition have a genetic disposition. It tends to run in families.
- Drug abuse and stressful or traumatic events may contribute to or trigger episodes.

Symptoms of mania include:

- Feelings of euphoria, extreme optimism, exaggerated self-esteem
- Rapid speech, racing thoughts
- Decreased need for sleep
- Extreme irritability
- Impulsive and potentially reckless behaviour

Symptoms of the depression phase are the same as in major depression:

- feeling worthless, helpless or hopeless
- sleeping more or less than usual
- eating more or less than usual
- having difficulty concentrating or making decisions
- loss of interest in taking part in activities
- decreased sex drive
- avoiding other people
- overwhelming feelings of sadness or grief

- feeling unreasonably guilty
- loss of energy, feeling very tired
- thoughts of death or suicide

Treatment is Available

- Bipolar disorder is mainly treated with medication and psychotherapy.
- Medication helps to stabilize moods.
- Therapy helps people detect patterns and triggers and develop strategies for managing stress.

What Can I Do?

- Many people do not seek help for depression or bipolar disorder, sometimes because their symptoms prevent them from recognizing the seriousness of their situation.
- It is important to know that depression and bipolar disorder are treatable.
- Friends and family can be supportive by learning all they can about the condition affecting their loved one.
- You can learn more from support groups and community health associations.

If you want further information on bipolar disorder, check out these websites:

<http://www.cmha.pe.ca>

<http://www.moooddisorderscanada.ca/bipolar/>

http://www.mentalhealthworks.ca/facts/sheets/bipolar_disorder.asp

http://www.camh.net/about_addiction_mental_health/bipolar_disorder_mhfs.html

If you would like to talk to someone use one of the contact numbers listed here:

Richmond Centre 902-368-4430

Canadian Mental Health Association 902-566-3034

Health Information Resource Centre 1-800-241-6970

Island Helpline (1-800-218-2885)

Kids Help Phone (1-800-668-6868)

Mental health agency (1-902-566-3034)

Hospital emergency room (1-902-894-2111)

Chapter 4

~ Self-Harm ~

What is self-harm?

- Self harm is defined as a person deliberately hurting or mutilating their own body.
- These actions are not directly intended to result in death but death might still occur.

What to look for:

- self-cutting (eg cutting of upper arms/wrists)
- overdoses - ingesting excessive amounts of prescribed or illicit drugs
- self-burning - using cigarettes or lighters to burn the skin
- train surfing
- driving cars at high speeds
- illicit drug use
- repetitive unsafe sexual practices in spite of knowledge and availability of safe sex practices

What causes people to self-harm?

- many people who self-harm suffer from depression or a personality disorder
- may have experienced emotional, physical or sexual abuse or invalidating family environments
- self harm behaviours are an attempt to contain or control these distressing feelings
- have difficulty forming stable, trusting relationships with others and are therefore difficult to engage in treatment

If you want further information on self-harm, check out these websites:

<http://www.cmha.pe.ca>

<http://www.betterhealth.vic.gov.au>

<http://www.sane.org.au>

<http://www.healthinsite.gov.au>

<http://www.mooodisorderscanada.ca/bipolar/>

http://www.mentalhealthworks.ca/facts/sheets/bipolar_disorder.asp

http://www.camh.net/about_addiction_mental_health/bipolar_disorder_mhfs.html

If you would like to talk to someone use one of the contact numbers listed here:

Richmond Centre 902-368-4430
Canadian Mental Health Association 902-566-3034
Health Information Resource Centre 1-800-241-6970
Island Helpline (1-800-218-2885)
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Mental health agency (1-902-566-3034)
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Chapter 5

~ Suicide ~

- ☆ Suicide is the second leading cause of death for youth aged 10-24 years.
- ☆ 294 youth commit suicide each year in Canada
- ☆ Most suicidal young people don't really want to die; they just want their pain to end.
- ☆ About 80% of the time, people who kill themselves have given definite warning signs or talked about suicide.

Watch for these signs:

- A previous suicide attempt
- Sudden change in behaviour or mood swings (positive or negative)
- Sudden change in personality
- Social withdrawal
- Changes in eating patterns
- Loss of interest in things that were once enjoyable
- Current talk of suicide or making a plan
- Having secrets
- Strong wish to die or a preoccupation with death
- Giving away prized possessions
- Signs of depression, such as moodiness, hopelessness, withdrawal
- Fear of separation
- Acting out, aggression, hostility
- Impulsiveness and reckless behaviour
- Increased alcohol and/or other drug use
- Hinting at not being around in the future or saying good-bye

These warning signs are especially important when there has also been:

- a recent death or suicide of a friend or family member
- a recent break-up with a boyfriend or girlfriend
- a new or ongoing conflict with parents
- a news reports of other suicides by young people in the same school or community

Other key risk factors include:

- Readily accessible firearms or other dangerous weapons
- Impulsiveness and taking unnecessary risks

- Lack of connection to family and friends (no one to talk to)

Three Important Steps to Preventing Suicide

1. Show you Care
 - Let the person know you really care.
 - Talk about your feelings and ask about his or hers.
 - Listen carefully to what they have to say.

 - Use phrases such as:
 - ▶ “I’m worried about you and about how you feel.”
 - ▶ ”You mean a lot to me. I want to help.”
 - ▶ ”I’m here, if you need someone to talk to.”
2. Ask the Question
 - Don't hesitate to raise the subject.
 - Talking with people about suicide won't put the idea in their heads.
 - Chances are, if you've observed any of the warning signs, they're already thinking about it.
 - Be direct in a caring, non-confrontational way.
 - Start the conversation by using phrases such as:
 - ▶ “Do you want your problems to go away?”
 - ▶ “Are you thinking about suicide?”
 - ▶ “Do you really want to die?”
3. Get Help
 - Never keep talk of suicide a secret, even if asked you to.
 - It’s better to risk a friendship than a life.
 - Do not try to handle the situation on your own.
 - You can be the most help by referring your friend to someone with professional skills to provide
 - The help that he or she needs, while you continue to offer support.
 - Use phrases such as:
 - ▶ “I know where we can get some help.”
 - ▶ ”Let's talk to someone who can help...let's call the crisis line, now.”
 - ▶ “I can go with you to get some help.”

During a crisis: take the threat seriously, don’t leave the person alone, and get help immediately.

If you want further information on suicide, check out these websites:

<http://www.cmha.pe.ca>

<http://www.siec.ca>

<http://www.canadian-health-network.ca>

If you would like to talk to someone use one of the contact numbers listed here:

Richmond Centre 902-368-4430

Canadian Mental Health Association 902-566-3034

Health Information Resource Centre 1-800-241-6970

Island Helpline 1-800-218-2885

Kids Help Phone 1-800-668-6868

Mental health agency 1-902-566-3034

Hospital emergency room 1-902-894-2111

Chapter 6

~ Eating Disorders ~

- ☆ Eating disorders can be difficult to detect.
- ☆ Knowing how to support someone with an eating disorder is also a challenge.
- ☆ Treatment is available - it can be a long process, but an eating disorder can be overcome.

The three main eating disorders are anorexia nervosa, bulimia nervosa and binge-eating.

Anorexia nervosa:

- is characterized by severe weight loss due to extreme food reduction
- refusal to keep body weight at or above the normal weight for one's body type
- dieting to extremes, usually coupled with excessive exercise
- feeling overweight despite dramatic weight loss
- loss of menstrual periods
- extreme preoccupation with body weight and shape

Bulimia nervosa:

- results in frequent fluctuations in weight
- repeated episodes of bingeing and purging, usually by self-induced vomiting, abuse of laxatives, diet pills and/or diuretics - methods which are both ineffective and harmful
- eating beyond the point of fullness

Binge-eating disorder:

- is often triggered by chronic dieting and involves periods of overeating, often in secret and often carried out as a means of deriving comfort
- periods of uncontrolled, impulsive or continuous eating
- sporadic fasts or repetitive diets

Warning signs

- low self-esteem
- social withdrawal
- claims of feeling fat when weight is normal or low
- preoccupation with food, weight, counting calories and with what people think
- denial that there is a problem
- wanting to be perfect
- intolerance of others
- inability to concentrate

What causes an eating disorder?

- When someone has an eating disorder, their weight is the prime focus of their life.
- People with an eating disorder see it as a way of controlling something when they feel as though everything is out of control.
- *Psychological factors* include low self-esteem, feelings of inadequacy or lack of control, depression, anger or loneliness.
- *Interpersonal factors* include troubled family and personal relationships, difficulty expressing emotions and feelings, history of physical or sexual abuse.
- *Media promotion of unrealistic images* and goals, along with its tendency to equate a person's value with their physical appearance is another contributor.

What can I do?

- If you are struggling with an eating disorder, you are not alone.
- If you think someone you know has an eating disorder, learn what you can about these conditions.
- Express your concerns calmly and in a caring way. You can't force someone to change their behaviour, but you can let them know that you care and want to support them.
- Encourage the person to seek professional help.
- Don't lay blame and focus discussions on feelings, not food.
- Examine your own issues around food and weight.
- Be supportive, but do not enable the behaviour.
- Treatment is available - it can be a long process, but an eating disorder can be overcome.

If you want further information on eating disorders, check out these websites:

<http://www.cmha.ca>

<http://www.nedic.ca>

<http://www.cmha.pe.ca>

<http://www.canadian-health-network.ca/servlet/ContentServer?cid=1001945&pagename=CHN-RCS/CHNResource/FAQCHNResourceTemplate&c=CHNResource&lang=En>

http://kidshealth.org/teen/food_fitness/problems/eat_disorder.html

If you would like to talk to someone use one of the contact numbers listed here:

Four Neighbourhood's Community Health Centre 902-368-6930

Public Health Nursing 902-368-4530
Healthy Eating Alliance 902-368-6713
Canadian Mental Health Association 902-566-3034

Section 7
~ Relationships ~

Chapter 1.....Healthy Relationships
Chapter 2.....Friendships and Peer Pressure
Chapter 3.....Abusive Relationships
Chapter 4.....Bullying

Chapter 1

~ Healthy Relationships ~

A healthy relationship:

- is supportive and respectful
- involves good communication and trust
- is a learning and growth opportunity
- is a partnership where both partners feel physically and emotionally safe
- is a chance to enjoy each other and have fun
- makes you feel good about yourself and your partner
- allows you have fun together and you and your partner can be yourselves

All relationships are different, but healthy relationships share at least five things in common - the S.H.A.R.E. qualities:

- *Safety:* In a healthy relationship, you feel safe. You don't have to worry that your partner will harm you physically or emotionally, and you aren't tempted to harm them. You can change your mind about something - like having sex - without being afraid of how your partner will respond.
- *Honesty:* You don't hide anything important from your partner, and can say what you think without fear of being ridiculed. You can admit to being wrong, and you resolve disagreements by talking honestly.
- *Acceptance:* You accept each other as you are. You appreciate your partner's unique qualities, such as shyness or spaceyness, and don't try to "fix" them. If you don't like your partner's qualities, you shouldn't be with that person.
- *Respect:* You think highly of each other. You do not feel superior or inferior to your partner in important ways. You respect each other's right to have separate opinions and ideas.
- *Enjoyment:* A good relationship is not just about how two people treat each other - it also has to be enjoyable. (If it's not enjoyable, why bother?) In a healthy relationship, you feel energized and alive in your partner's presence. You can play and laugh together. You have fun.

How do I know if I am not in a healthy relationship?

- The opposite of a healthy relationship is an abusive relationship.
- Abusive relationships revolve around control, fear, and lack of respect.
- Usually, one partner has control while the other person is afraid.
- Abusive relationships can involve threats, name-calling, blaming, guilt-tripping, jealous questioning, and outright violence.
- If you suspect you're in an abusive relationship, there's a good chance you are.
- Perhaps you know deep down that you'd be better off without the relationship but are afraid to leave it.

Being in an abusive relationship hurts your self-esteem. You owe it to yourself to get out.

- Get help from:
 - ▶ a parent
 - ▶ school counsellor
 - ▶ doctor
 - ▶ psychologist
 - ▶ social worker
 - ▶ or anyone else you trust
 - ▶ Your doctor or local/regional sexual clinic can steer you toward appropriate counselling services.

If you want further information on healthy relationships, check out these websites:

<http://www.cmha.ca>

<http://www.sexualityandu.ca/eng/teens/WIS/healthyrelationships.cfm>

<http://www.sexualityandu.ca/eng/adults/SX/healthyrelationships.cfm>

<http://iis.mczcr.boldinternet.com/owd/english/>

If you would like to talk to someone use one of the contact numbers listed here:

Island Helpline 1800-218-2885

Kids Help Phone 1800-668-6868

Anderson House 1-800-240-9894

PEI Rape and Sexual Assault Crisis Centre 1-800-289-5656

Chapter 2

~ Friendships and Peer Pressure ~

Peer Pressure:

- occurs when people that are the same age as you, are in the same class, or in your group of friends, influence you to do something
- This can be positive, but often times we are influenced to do things we do not want to do.

Here are some tips for dealing with uncomfortable situations:

- Remember, there isn't one answer that works for everyone. Do what is right for you!
1. Just Say No!
 - ▶ This good old standby still works in certain situations. Say it clearly, say it once, and stick to it.
 2. Change the Subject
 - ▶ If the subject starts to turn to something that you find threatening or uncomfortable, try changing the subject.
 3. Walk Away
 - ▶ If you find yourself in a situation that is uncomfortable and it is safe for you to leave, get up and go. Don't stop. Keep walking until you are far enough away to feel unthreatened.
 4. Make Up an Excuse.
 - ▶ In some situations, try making an excuse for not trying something that you feel might harm you.
 - ▶ Some favourites are 'Sorry. I'm allergic!', 'Are you kidding! My arents would kill me!' and 'I can't – I have to baby-sit in five minutes'.
 5. Tell it Like it Is!
 - ▶ When you feel strongly about something and you are being pressured to go against what you know to be right, try simply telling them that you will not participate because... Be specific about the reasons why you don't want to do it. Then walk away.
 6. Find an Ally
 - ▶ If you find yourself being the target of peer pressure, seek out someone who shares your thoughts and feelings.
 - ▶ Make a pact to stand up for each other and leave together when either of you is uncomfortable.

7. Tell Someone
- ▶ Peer pressure is plain and simple harassment.
 - ▶ If you feel that someone is constantly trying to get you to do something against your will, tell a trusted adult: your parent, your teacher, your youth group leader, your coach.
 - ▶ Don't stop until someone listens and makes a move to help you.

In addition to dealing with peer pressure it is important that we know what a true friendship is.

- Friendship is more than just hanging out together at lunch and gossiping about other people.
- True friendship is when two people have mutual respect for one another, and really care about the each other's feelings and dreams.
- You need to be able to be honest with your friends. If there is ever a time where you feel that you can't tell them the truth, for fear that they will be mad or won't understand, then they aren't true friends
- Friends share with each other important things that they wouldn't share with others.
- Friends also care about each other, stick up for one another and enjoy.

☆ **A Real Friend (Friendship) is one who walks in when the rest of the world walks away.**

If you want further information on friendships and peer pressure, check out these websites:

<http://www.cmha.ca>

<http://www.sexualityandu.ca/eng/includes/teens/searchresults.cfm>

<http://www.kidzworld.com/site/me.htm>

http://www.stayingalive.ca/peer_pressure.html

<http://www.healthunit.com/index.asp?mode=article&lang=english&articleID=10697>

If you would like to talk to someone use one of the contact numbers listed here:

Island Helpline 1800-218-2885

Kids Help Phone 1800-668-6868

Anderson House 1-800-240-9894

PEI Rape and Sexual Assault Crisis Centre 1-800-289-5656

Chapter 3

~ Abusive Relationships ~

- ☆ *Physical abuse* may include pushing, slapping, kicking, biting, punching, pinching, hair pulling, burning, striking with an object, twisting limbs, choking, beating or using a weapon.
- ☆ *Psychological abuse* may include frightening, pressuring, threatening, manipulating, name-calling, humiliating, isolating from friends and family as well as other forms of extreme possessiveness.
- ☆ *Sexual abuse* may include unwanted sexual touching, sexual relations without voluntary consent or the forcing or coercing of degrading, humiliating or painful sexual acts.

You are in an abusive relationship if your partner:

- is violent.
- gets too serious about the relationship too fast.
- believes that they should be in control and powerful and that you should be passive and submissive.
- is someone your family has warned you about and they are worried about your safety.
- is very jealous.
- puts down what you wear, do and say.
- controls you by being very bossy, giving orders, making all the decisions, and does not take your opinion seriously.
- is scary and you worry about how they will react to things you say or do.
- abuses drugs or alcohol and pressures you to take them.
- tells people things you did or said that embarrass you and make you feel stupid.
- says it's your fault when things go wrong.
- calls you names.
- blames you they mistreats.
- threatens you and/or uses or owns weapons.
- threatens to hit you, hurt your friends, pets or family if you do not do what he wants.
- says they will leave you or commit suicide if you do not obey.

- gets very angry about small, unimportant things.
- pressures you for sex, or is forceful or scary around sex.
- hits you - they may be sorry afterward, but they hit you.

If you are abused:

- You are not alone and you are not to blame.
- You cannot control the violence.
- You can make yourself safer by:
 - ▶ Calling the police if you have been assaulted.
 - ▶ Telling someone and keeping a record of all incidents of violence.
 - ▶ Talking to a trusted adult such as a parent, teacher, guidance counsellor or school psychologist, and/or calling a community agency for advice.
 - ▶ Considering ending the relationship as soon as possible. The violence may get worse.

If you are abusive:

- Recognize you have a problem.
- Take responsibility for your behaviour.
- Talk to a trusted adult such as a teacher, guidance counsellor or school psychologist, and/or call a community agency for advice.
- Abuse is a crime. You could face fines or imprisonment if convicted.
- Realize that nobody deserves to be abused. If you come from an abusive home, you may be re-enacting the abusive behaviour you experienced or witnessed. You can get help to stop the violence and have healthy, caring relationships.

How teens can help prevent violence:

- Become more aware of verbal and physical abuse in your own relationships.
- Help students "break the silence".
- Promote other ways to deal with anger and resolve conflict, for instance through talking through feelings and creative problem solving.
- Beware of jokes, movies, television programs, advertising, and rock videos that are demeaning to women and may promote violence against women.

If you want further information on abusive relationships, check out these websites:

<http://www.cmha.ca>

<http://www.sexualityandu.ca/eng/teens/WIS/sexualassault.cfm>

<http://www.kidzworld.com/site/me.htm>

http://www.stayingalive.ca/peer_pressure.html

<http://www.healthunit.com/index.asp?mode=article&lang=english&articleID=10697>

http://www.womanabuseprevention.com/html/for_teens_to_think_about.html

If you would like to talk to someone use one of the contact numbers listed here:

Island Helpline 1800-218-2885

Kids Help Phone 1800-668-6868

Anderson House 1-800-240-9894

PEI Rape and Sexual Assault Crisis Centre 1-800-289-5656

Canadian Mental Health Association 902-566-3034

Chapter 4

~ Bullying ~

What is Bullying?

- Bullying is a form of aggression used by high school students.
- When asked about bullying others in the last five days, approximately 11% of high school students reported bullying others.

Victimization

- Bullying and victimization go hand in hand for many youths.
- Victimized students suffer physical and psychological abuse at the hands of their peers.
- Victimized students are often rejected by their peers and can feel anxious and/or depressed.
- In some extreme cases, suicides and violent deaths have been linked to experiences of severe bullying.

Bullying is a relationship problem.

- People who bully are in a position of power relative to their victims. Their power may come from many aspects of the relationship. They may be larger, stronger, older, more popular, or they may know something sensitive or vulnerable about the victim (e.g., a learning, family, or personal problem).
- Bullying can take many forms. It can be physical hits, kicks, and damage to property. Bullying can be verbal: insults, putdowns, sexist or racist comments. Bullying can also be indirect and hurt another's social relationships when it involves exclusion or spreading rumours.
- Bullying causes distress to the victims even though bullies may say they are "just having fun".
- As bullying continues over time, the power differential and dynamics in the relationship become increasingly consolidated.

Do bullies just grow out of it?

- Children do not “just grow out of bullying”.
- As bullies get older, their form of bullying changes into the following:
 - ▶ Sexual harassment and dating violence
 - ▶ Gang attacks
 - ▶ Assault
 - ▶ Marital violence
 - ▶ Child abuse
 - ▶ Workplace harassment
 - ▶ Elder abuse

How do bullies exert power over their victims?

- By physical size and strength
- By status within the peer group
- By knowing another person’s weakness
- By recruiting support from other children

What about witnesses and bystanders to bullying?

- Bullying is not just a problem between the bully & the victim — it is a problem that unfolds in the theatre of a peer group.
- Students who witness bullying may feel uncomfortable but not know what to do.
- They may be drawn into the event and into bullying themselves.
- Students who “aren’t doing anything” — just watching; may be letting the bully think that they approve, when they don’t.

Many times, when bystanders let the bully know that their behaviour is inappropriate, they will decrease their bullying behaviour because they aren’t getting the attention they wanted.

If you want further information on abusive relationships, check out these websites:

<http://www.cmha.ca>

<http://www.arts.yorku.ca/lamarsh/projects/trp/index.html>

<http://www.child.gov.ab.ca/whatwedo/familyviolence/pdf/NCN0888.PDF>

<http://www.child.gov.ab.ca/whatwedo/familyviolence/page.cfm?pg=Who%20is%20being%20abused%3F>

<http://www.sexualityandu.ca/eng/teens/CT/sites.cfm>

http://www.arts.yorku.ca/lamarsh/projects/trp/trp_wwl02.html

<http://www.listenuptv.com/programs/031106teens.htm>

<http://www.cmha.ca/bins/index.asp>

http://www.kidshavestresstoo.org/khst_docs/index.php

If you would like to talk to someone use one of the contact numbers listed here:

Island Helpline 1800-218-2885
Kids Help Phone 1800-668-6868
Anderson House 1-800-240-9894
PEI Rape and Sexual Assault Crisis Centre 1-800-289-5656
Canadian Mental Health Association 902-566-3034

Section 8

~ Pregnancy ~

Chapter 1.....	Birth Control Options
1.1.....	Abstinence
1.2.....	The Pill
1.3.....	The Shot - Depo-Provera
1.4.....	The Patch - Othro Evra
1.5.....	Male Condoms
1.6.....	Female Condoms
1.7.....	Diaphragm
1.8.....	Spermicides
1.9.....	Withdrawal
1.10.....	Emergency Contraception
Chapter 2.....	Signs of Pregnancy
Chapter 3.....	Prenatal Care
Chapter 4.....	Smoking, Alcohol Use and Pregnancy
Chapter 5.....	Nutrition and Pregnancy
Chapter 6.....	Parenting Issues

Chapter 1
~ Birth Control Options ~

- ☆ There are many different options for birth control and each method has positive and negative things about it.
- ☆ Before you choose a form of birth control you should research all of the options and contact your doctor.
- ☆ In the following sections you will find some general information about the following birth control options:

1.1.....	Abstinence
1.2.....	The Pill
1.3.....	The Shot - Depo-Provera
1.4.....	The Patch - Othro Evra
1.5.....	Male Condoms
1.6.....	Female Condoms
1.7.....	Diaphragm
1.8.....	Spermicides
1.9.....	Withdrawal
1.10.....	Emergency Contraception

1.1-Abstinence

- ☆ There is no “best” method of birth control
- ☆ Each method has its own pros and cons
- ☆ Some methods work better than others do at preventing pregnancy
- ☆ NO birth control method prevents pregnancy 100% of the time (except abstinence)

The birth control method you choose should take into account:

- your overall health
- how often you have sex
- the number of sexual partners you have
- if you want to have children
- how well each method works (or is effective) in preventing pregnancy
- any potential side effects
- your comfort level with using the method

Abstinence

- not having sexual intercourse with any sexual partners.

Effectiveness

- 100% - it is the only 100% effective method to prevent pregnancy and sexually transmitted infections

Advantages

- no medical or hormonal side effects

Disadvantages

- People may find it difficult to abstain for long periods of time.

- Women and men often end their abstinence without being prepared to protect themselves against pregnancy or sexually transmitted infections.

Advantages for teens

- Sexual relationships present physical and emotional risks. Abstinence is a very good way to postpone taking those risks until you are able to handle them.
- Women who abstain until their 20s — and who have fewer partners in their lifetimes — may have certain health advantages over women who do not.
- They are less likely to:
 - ▶ get sexually transmitted infections
 - ▶ become infertile
 - ▶ develop cancer of the cervix

If you want further information on birth control options, check out these websites:

<http://www.sexualityandu.ca/eng/teens/CN/methods.cfm>

http://www.kidshealth.org/teen/sexual_health/contraception/bc_chart.html

<http://www.chebucto.ns.ca/Health/TeenHealth/index.htm>

<http://www.plannedparenthood.org/pp2/portal/medicalinfo/birthcontrol/pub-bc-choices-teens.xml>

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<http://www.4woman.gov/faq/birthcont.htm>

If you would like to talk to someone use one of the contact numbers listed here:

Island Helpline 1-800-218-2885

Kid Help Phone 1-800-668-6868

Survival Centre for Youth 902-894-5884

Public Health Nursing 902-368-4530

CHANCES 902-892-8744

1.2-The Pill

- ☆ There is no “best” method of birth control
- ☆ Each method has its own pros and cons
- ☆ Some methods work better than others do at preventing pregnancy
- ☆ NO birth control method prevents pregnancy 100% of the time (except abstinence)

The birth control method you choose should take into account:

- your overall health
- how often you have sex
- the number of sexual partners you have
- if you want to have children
- how well each method works (or is effective) in preventing pregnancy
- any potential side effects
- your comfort level with using the method

For the pill:

- You need to have an appointment with your doctor so they can prescribe the right pill for you.
- You must take one pill once every day. Complete one pill pack every month.
- Combination pills contain estrogen and progestin. Others are progestin-only.

What does the pill do?

- It prevents the release of an egg.
- It thickens cervical mucus to keep sperm from joining the egg.
- It thins the lining of the uterus, which may prevent implantation of a fertilized egg

Effectiveness

- 92–99.7%
- not effective against sexually transmitted infections
- latex or female condoms can reduce risk of infection

Advantages

- nothing to put in place before vaginal intercourse
- less menstrual cramping and menstrual flow
- reduces the risk of pelvic inflammatory disease
- less acne, iron deficiency anemia, and premenstrual tension
- periods become more regular
- reduces risk of ovarian and endometrial cancers, noncancerous growths of the breast, and ovarian cysts
- can be used to control timing and frequency of periods
- fewer tubal pregnancies
- may protect against osteoporosis (thinning of the bones)

Disadvantages

- must be taken daily
- temporary side effects that usually clear up after a few months include irregular bleeding, loss of monthly period, weight gain or loss, nausea, breast tenderness, changes in mood, headaches, and other discomforts
- rare but serious health risks, including blood clots, heart attack, and stroke
- women who are 35 and older and smoke are at greater risk of serious side effects
- should be taken at the same time of day, every day

Caution

- Don't smoke while you take the pill. Doing so will increase your risk of heart attack, blood clots, and stroke.
- Don't forget to take your pill.
- If you choose the pill, schedule taking it with something else you do every day — like brushing your teeth.
- If you forget ONE pill, take it as soon as you remember. This means you may take two pills in one day. If you forget TWO or more pills, call your clinician immediately.
- Remember to take your pill whether or not you're having sex.
- Don't share your pills. Prescription methods like the pill are personalized for each woman's use. They should not be shared.

If you want further information on birth control options, check out these websites:

<http://www.sexualityandu.ca/eng/teens/CN/methods.cfm>

http://www.kidshealth.org/teen/sexual_health/contraception/bc_chart.html

<http://www.chebucto.ns.ca/Health/TeenHealth/index.htm>

<http://www.plannedparenthood.org/pp2/portal/medicalinfo/birthcontrol/pub-bc-choices-teens.xml>

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CHANCES 902-892-8744

1.3-The Shot-Depo-Provera

- ☆ There is no “best” method of birth control
- ☆ Each method has its own pros and cons
- ☆ Some methods work better than others do at preventing pregnancy
- ☆ NO birth control method prevents pregnancy 100% of the time (except abstinence)

The birth control method you choose should take into account:

- your overall health
- how often you have sex
- the number of sexual partners you have
- if you want to have children
- how well each method works (or is effective) in preventing pregnancy
- any potential side effects
- your comfort level with using the method

If You Choose Depo-Provera

- You will have to go to the doctor for a shot of the hormone progestin in the buttocks or arm every 3 months.
- The hormone will usually prevent release of an egg.
- Depo-Provera may also thicken cervical mucus to keep sperm from joining an egg.
- Depo-Provera may also thin the lining of the uterus, which may prevent implantation of a fertilized egg.

Effectiveness

- 97–99.7%
- It does not protect against STIs or HIV
- Latex or female condom can reduce risk of infection

Advantages

- prevents pregnancy for 12 weeks
- doesn't need to be taken daily or put in place before vaginal intercourse
- can be used by women who cannot take estrogen
- may reduce menstrual cramps
- reduces anemia
- helps prevent cancer of the endometrium (lining of the uterus)
- can be used while breastfeeding

Disadvantages

- You should not use the shot continuously for more than two years unless no other method is right for you.
- Women who use Depo-Provera may have temporary bone thinning. It increases the longer they use it, but bone growth begins again when women stop using the shot.
- Whether or not temporary bone thinning leads to greater risk of bone fracture from osteoporosis much later in life is also unknown.
- To protect your bones, get regular exercise and get extra calcium and vitamin D — either through your diet or by using supplements.
- Side effects include irregular or late periods as well as weight gain, headaches, depression, abdominal pain, hair loss, increased hair on the face or body, nervousness, skin rash, or spotty darkening of the skin.
- Side effects cannot be reversed until medication wears off (up to 12 weeks).
- May cause delay in getting pregnant after shots are stopped.

If you want further information on birth control options, check out these websites:

<http://www.sexualityandu.ca/eng/teens/CN/methods.cfm>

http://www.kidshealth.org/teen/sexual_health/contraception/bc_chart.html

<http://www.chebucto.ns.ca/Health/TeenHealth/index.htm>

<http://www.plannedparenthood.org/pp2/portal/medicalinfo/birthcontrol/pub-bc-choices-teens.xml>

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Survival Centre for Youth 902-894-5884

Public Health Nursing 902-368-4530

CHANCES 902-892-8744

1.4-The Patch - Ortho-Evra

- ☆ There is no “best” method of birth control
- ☆ Each method has its own pros and cons
- ☆ Some methods work better than others do at preventing pregnancy
- ☆ NO birth control method prevents pregnancy 100% of the time (except abstinence)

The birth control method you choose should take into account:

- your overall health
- how often you have sex
- the number of sexual partners you have
- if you want to have children
- how well each method works (or is effective) in preventing pregnancy
- any potential side effects
- your comfort level with using the method

If you choose the patch:

- Ortho Evra is a skin skin patch worn on the lower abdomen, buttocks, or upper body.
- It releases the hormones progestin and estrogen into the bloodstream.
- You put on a new patch once a week for three weeks, and then do not wear a patch during the fourth week in order to have a menstrual period.
- You will need to visit your doctor for a prescription and to make sure you are not having problems.
- The hormones released by the patch prevent release of egg, thicken cervical mucus to keep sperm from joining egg, and thin the lining of the uterus.

Effectiveness

- Up to 99.7%
- not effective against sexually transmitted infections

- latex or female condoms can reduce risk of infection

Advantages

- protects against pregnancy for one month
- nothing to put in place before vaginal intercourse
- no pill to take daily
- periods become more regular
- less menstrual cramping, acne, iron deficiency anemia, premenstrual tension, and menstrual flow
- reduces risk of ovarian and endometrial cancers, pelvic inflammatory disease, noncancerous growths of the breast, ovarian cysts, and may protect against osteoporosis (thinning of the bones)
- fewer tubal pregnancies

Disadvantages

- skin reaction at the site of application
- may not be as effective for women who weigh more than 198 pounds
- temporary side effects that usually clear up after a few months include irregular bleeding, loss of monthly period, weight gain or loss, nausea, breast tenderness, changes in mood, headaches, and other discomforts
- rare but serious health risks, including blood clots, heart attack, and stroke
- women who are 35 and older and smoke are at greater risk for serious side effects

Caution

- Don't smoke while you use the patch. Doing so may increase your risk of heart attack, blood clots, and stroke.
- The patch works best when it is changed on the same day of the week for three weeks in a row.
- Pregnancy can happen if an error is made in using the patch — especially if it becomes loose or falls off for more than 24 hours
- the same patch is left on the skin for more than one week

If you want further information on birth control options, check out these websites:

<http://www.sexualityandu.ca/eng/teens/CN/methods.cfm>

http://www.kidshealth.org/teen/sexual_health/contraception/bc_chart.html

<http://www.chebucto.ns.ca/Health/TeenHealth/index.htm>

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CHANCES 902-892-8744

1.5-Male Condoms

- ☆ There is no “best” method of birth control
- ☆ Each method has its own pros and cons
- ☆ Some methods work better than others do at preventing pregnancy
- ☆ NO birth control method prevents pregnancy 100% of the time (except abstinence)

The birth control method you choose should take into account:

- your overall health
- how often you have sex
- the number of sexual partners you have
- if you want to have children
- how well each method works (or is effective) in preventing pregnancy
- any potential side effects
- your comfort level with using the method

If you choose condoms:

- Condoms are barrier methods of birth control because they put up a block, or barrier, which keeps the sperm from reaching the egg.
- Condoms come lubricated (which can make sexual intercourse more comfortable and pleasurable) and non-lubricated (which can also be used for oral sex).
- You can use KY jelly or water-based lubricants.
- DO NOT use oil base lubricants. Oil-based lubricants like massage oils, baby oil, lotions, or petroleum jelly will weaken the condom, causing it to tear or break.

Effectiveness

- 85–98%
- Latex condoms offer very good protection against HIV — the virus that can cause AIDS.
- Latex condoms reduce the risk of other sexually transmitted infections, including gonorrhea, syphilis, chlamydia, trichomoniasis, HPV, and herpes.

Increase your protection:

- Do not use oil-based lubricants, like Vaseline on latex condoms.
- Use correctly: Place rolled condom on tip of hard penis. Squeeze air out of half-inch space at tip. Pull back foreskin and roll condom down over penis. Smooth out any air bubbles. Lubricate with water-based lubricant, like K-Y jelly. Hold condom against penis to withdraw.
- Also use spermicides for increased contraceptive effectiveness.

Advantages

- inexpensive and easy to buy in drugstores, supermarkets, etc.
- can help relieve premature ejaculation
- can be put on as part of sex play
- can be used with other methods to reduce risk of infection

Disadvantages

- uncooperative partners
- latex allergies
- loss of sensation
- breakage

Caution

- No matter how old you are, it is very important to use condoms with your other method of birth control — whenever you are at risk for getting a sexually transmitted infection.

If you want further information on birth control options, check out these websites:

<http://www.sexualityandu.ca/eng/teens/CN/methods.cfm>

http://www.kidshealth.org/teen/sexual_health/contraception/bc_chart.html

<http://www.chebucto.ns.ca/Health/TeenHealth/index.htm>

<http://www.plannedparenthood.org/pp2/portal/medicalinfo/birthcontrol/pub-bc-choices-teens.xml>

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CHANCES 902-892-8744

1.6-Female Condoms

- ☆ There is no “best” method of birth control
- ☆ Each method has its own pros and cons
- ☆ Some methods work better than others do at preventing pregnancy
- ☆ NO birth control method prevents pregnancy 100% of the time (except abstinence)

The birth control method you choose should take into account:

- your overall health
- how often you have sex
- the number of sexual partners you have
- if you want to have children
- how well each method works (or is effective) in preventing pregnancy
- any potential side effects
- your comfort level with using the method

If you choose the female condom:

- Worn by the woman, this barrier method keeps sperm from getting into her body.
- It is made of polyurethane, is packaged with a lubricant, and may protect against STDs, including HIV.
- It can be inserted up to 24 hours prior to sexual intercourse.

Effectiveness

- 79–95% — female condom
- The female condom reduces the risk of sexually transmitted infections, including HIV

Advantages

- easy to buy in drugstores, supermarkets, etc.
- insertion may be part of sex play
- erection unnecessary to keep female condom in place
- female condoms can be used by people allergic to latex or spermicide
- external ring of female condom may stimulate clitoris

Disadvantages

- may be noisy
- may irritate vagina or penis
- may slip into vagina during intercourse
- may be difficult to insert

If you want further information on birth control options, check out these websites:

<http://www.sexualityandu.ca/eng/teens/CN/methods.cfm>

http://www.kidshealth.org/teen/sexual_health/contraception/bc_chart.html

<http://www.chebucto.ns.ca/Health/TeenHealth/index.htm>

<http://www.plannedparenthood.org/pp2/portal/medicalinfo/birthcontrol/pub-bc-choices-teens.xml>

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CHANCES 902-892-8744

1.7-Diaphragm

- ☆ There is no “best” method of birth control
- ☆ Each method has its own pros and cons
- ☆ Some methods work better than others do at preventing pregnancy
- ☆ NO birth control method prevents pregnancy 100% of the time (except abstinence)

The birth control method you choose should take into account:

- your overall health
- how often you have sex
- the number of sexual partners you have
- if you want to have children
- how well each method works (or is effective) in preventing pregnancy
- any potential side effects
- your comfort level with using the method

If you choose the Diaphragm:

- it is a barrier method that blocks sperm from entering the cervix and reaching the egg
- the diaphragm is shaped like a shallow latex cup
- the diaphragm comes in different sizes and you need a doctor to “fit” you for one
- before sexual intercourse, you use a diaphragm with spermicide (to block or kill sperm) and place them up inside your vagina to cover your cervix (the opening to your womb)
- barrier methods must be left in place for 6 to 8 hours after intercourse to prevent

pregnancy

Effectiveness

- 84–94% — Diaphragm when used appropriately
- not effective against sexually transmitted infections
- latex or female condoms can reduce risk of infection

Advantages

- no major health concerns
- can last from six months up to several years

Disadvantages

- can be messy
- allergies to latex, silicone, or spermicide
- should not be used during vaginal bleeding or infection
- increased risk of bladder infection
- can only be left in place for up to 24 hours

Caution

- Do not share them with friends.
- The diaphragm should be checked to see if it's the right size after a change of 20 percent of your weight, childbirth, or abortion.
- Check for weak spots or holes by holding diaphragm up to a light or filled with water and check for leaks.

If you want further information on birth control options, check out these websites:

<http://www.sexualityandu.ca/eng/teens/CN/methods.cfm>

http://www.kidshealth.org/teen/sexual_health/contraception/bc_chart.html

<http://www.chebucto.ns.ca/Health/TeenHealth/index.htm>

<http://www.plannedparenthood.org/pp2/portal/medicalinfo/birthcontrol/pub-bc-choices-teens.xml>

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CHANCES 902-892-8744

1.8-Spermicides

- ☆ There is no “best” method of birth control
- ☆ Each method has its own pros and cons
- ☆ Some methods work better than others do at preventing pregnancy
- ☆ NO birth control method prevents pregnancy 100% of the time (except abstinence)

The birth control method you choose should take into account:

- your overall health
- how often you have sex
- the number of sexual partners you have
- if you want to have children
- how well each method works (or is effective) in preventing pregnancy
- any potential side effects
- your comfort level with using the method

Spermicides are:

- foams, gels, or creams, that work by killing sperm
- inserted or placed in the vagina no more than one hour before intercourse
- Do not douche or rinse out your vagina for at least six to eight hours after intercourse.

Remember:

- You will need to use more spermicide before each act of intercourse.
- You may protect yourself more against getting pregnant if you use a spermicide with a male condom, female condom, or diaphragm.

Disadvantages

- not particularly effective when used alone
- effectiveness increases when used with condoms or a diaphragm
- can be messy
- may irritate vagina or penis — which may increase risk of infection
- may set off allergies

If you want further information on birth control options, check out these websites:

<http://www.sexualityandu.ca/eng/teens/CN/methods.cfm>

http://www.kidshealth.org/teen/sexual_health/contraception/bc_chart.html

<http://www.chebucto.ns.ca/Health/TeenHealth/index.htm>

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CHANCES 902-892-8744

1.9-Withdrawal

- ☆ There is no “best” method of birth control
- ☆ Each method has its own pros and cons
- ☆ Some methods work better than others do at preventing pregnancy
- ☆ NO birth control method prevents pregnancy 100% of the time (except abstinence)

The birth control method you choose should take into account:

- your overall health
- how often you have sex
- the number of sexual partners you have
- if you want to have children
- how well each method works (or is effective) in preventing pregnancy
- any potential side effects
- your comfort level with using the method

If you choose the withdrawal method:

- The man takes his penis out of the woman’s vagina (or “pulls out”) before he ejaculates, or has an orgasm.
- This works better when the man also wears a condom.

- This stops the sperm from going to the egg.

Effectiveness:

- 73–96%
- Not effective against sexually transmitted infections.

Disadvantages

- Many young men lack the experience and self-control to pull out in time.
- Some men have been known to say they will pull out, and then they get so excited and carried away that they don't.
- Some men cannot tell when they are going to ejaculate.
- Some men ejaculate very quickly, before they realize it.
- Before ejaculation, almost all penises leak fluid — pre-ejaculate — that may contain sperm and cause pregnancy.

If you want further information on birth control options, check out these websites:

<http://www.sexualityandu.ca/eng/teens/CN/methods.cfm>

http://www.kidshealth.org/teen/sexual_health/contraception/bc_chart.html

<http://www.chebucto.ns.ca/Health/TeenHealth/index.htm>

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CHANCES 902-892-8744

1.10-Emergency Birth Contraception

- ☆ **This is NOT a regular form of birth control and should not be used as one!**
- ☆ Emergency birth control, is used to keep a woman from getting pregnant when she has had unprotected vaginal intercourse.

“Unprotected” can mean:

- no method of birth control was used
- a birth control method was used but did not work (the condom broke)
- forgot to take birth control pills
- a woman was abused or forced to have sex
- he didn't pull out in time

Emergency Contraception (EC)

- is designed to prevent pregnancy after unprotected vaginal intercourse
- can reduce the risk of pregnancy if started within 120 hours of unprotected sex
- they work best when taken within 72 hours (during this time they can reduce the risk of pregnancy from 75 to 89%)

- the sooner a woman starts EC, the more effective it may be
- nausea, vomiting, and cramping are common side effects when combined hormones (estrogen and progestin) are used.
- is for use only if a woman is sure she is not already pregnant from a previous act of intercourse
- it delays release of egg or keeps sperm from joining with egg
- it will not cause an abortion.

☆ **Emergency Contraception does not protect against sexually transmitted infections.**

Don't use emergency hormonal contraception if you:

- are pregnant
- are allergic to the medication

If you want further information on birth control options, check out these websites:

<http://www.sexualityandu.ca/eng/teens/CN/methods.cfm>

http://www.kidshealth.org/teen/sexual_health/contraception/bc_chart.html

<http://www.chebucto.ns.ca/Health/TeenHealth/index.htm>

<http://www.plannedparenthood.org/pp2/portal/medicalinfo/birthcontrol/pub-bc-choices-teens.xml>

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CHANCES 902-892-8744

Chapter 2

~ Signs of Pregnancy ~

- ☆ Here is a list of the early signs of pregnancy.
- ☆ **If you think you are pregnant you should see your doctor for a pregnancy test as soon as possible.**

1. Missed Menstrual Period

- Absence of your monthly period.
- Other possible causes: weight gain or loss, hormonal problems, tension, stress, breast-feeding, discontinuing birth control pills or birth control injections.

2. Morning sickness

- Nausea and queasiness, usually experienced in the morning, but sometimes during the entire day. Morning sickness usually starts two to eight weeks after conception.
- Other possible causes: food poisoning, tension, infection, gall bladder disease, other diseases.

- 3. Tender, swollen breasts**
 - Breast tenderness usually begins a few days after conception.
 - Other possible causes: birth control pills, beginning of period, fibrocystic breast condition.

- 4. Darkening of the areolas, the skin around the nipples**
 - The bumps on areolas may look more prominent.
 - These changes happen gradually during the first few weeks of pregnancy, as your breasts prepare to produce milk.
 - Other possible causes: hormonal imbalance, prior pregnancy, tanning, the physical changes of puberty.

- 5. Food cravings**
 - Caused by hormonal changes in the body.
 - Food cravings are usually experienced during the first trimester.
 - Other possible causes: poor diet, stress, beginning of period (PMS).

- 6. Frequent urination**
 - Caused by an increased volume of body fluids and pressure from the growing uterus.
 - This usually starts six to eight weeks after conception.
 - Other possible causes: urinary tract infection, diuretics, tension, diabetes, drinking excess fluid.

- 7. Fatigue**
 - Caused by high levels of the hormone progesterone and the body's increased use of energy as the fetus develops.
 - This usually appears during the first trimester.
 - Other possible causes: tension, stress, depression, poor diet, flu, lack of exercise, poor sleep or lack of sleep.

- 8. Bleeding**
 - Spotting of blood that's pink or brown in color, sometimes accompanied by stomach cramps. Caused by the egg implanting itself in the endometrial lining.
 - Usually occurs about a week after ovulation.
 - Other possible causes: beginning of period, breakthrough bleeding from the pill.

If you want further information on signs of pregnancy, check out these websites:

<http://www.chebucto.ns.ca/Health/TeenHealth/index.htm>

<http://www.chebucto.ns.ca/Health/TeenHealth/sexualhealth/pregnancy/pregnant.htm>

<http://www.child.net/teenhelp.htm>

<http://www.isn.net/~chances/>

<http://www.cbctrust.com/faq.php>

http://www.sexualityandu.ca/eng/teens/faq/faq_contraception.cfm#women14

If you would like to talk to someone use one of the contact numbers listed here:

Island Helpline 1-800-218-2885

Kid Help Phone 1-800-668-6868

Survival Centre for Youth 902-894-5884

Public Health Nursing 902-368-4530

CHANCES 902-892-8744

Birthright PEI 1-800-550-4900

Chapter 3

~ Prenatal Care ~

☆ The word 'prenatal' means before birth.

Guidelines for Prenatal Checkups

- First prenatal checkup should be after you have missed your second period (during week 12-13 of pregnancy)
- Month 2-7 of pregnancy - once a month
- Month 8 of pregnancy - once every 2 weeks
- Month 9 of pregnancy - once a week

Your first prenatal check up:

- The first appointment is often one of the longest. You'll be asked about your health history and have some tests done. This information is needed for future assessments of you and your growing baby. A complete physical exam may be done including:
 - ▶ a pelvic exam (internal exam) - to check your cervix and uterus
 - ▶ a pap smear - to check for problems in your cervix (the opening of the uterus)

- ▶ blood pressure - to check for high blood pressure which can cause difficulties during pregnancy
- ▶ routine blood tests - to check for conditions such as anemia (low iron), diabetes, RH factor, syphilis, HIV and hepatitis B. Also to show if you have protection against rubella (German measles)
- ▶ urine test - to check for infection and problems with your kidneys or blood pressure
- ▶ breast exam - to check for changes in your breasts
- ▶ weight - to assess your health and your baby's growth
- ▶ a general assessment of your health (for example, lifestyle, nutrition, smoking, alcohol)

During your followup prenatal checkups:

- ▶ Weight, blood pressure and urine sample checks at each visit
- ▶ At 16 to 18 weeks, your caregiver may listen for your baby's heartbeat
- ▶ Opportunities to ask questions about diet, activity during pregnancy and any of your concerns
- ▶ At about 28 weeks, a blood test may be done to measure the sugar level in your blood
- ▶ Between 32 to 36 weeks, a vaginal exam may be done to test for bacteria
- ▶ When you're close to your due date, a vaginal exam may be done to check for changes in your cervix that may indicate that labour is getting closer.

In addition to early prenatal care, especially if this is your first pregnancy, it is recommended that you attend childbirth education classes.

If you want further information on prenatal care, check out these websites:

<http://www.chebucto.ns.ca/Health/TeenHealth/index.htm>

<http://www.chebucto.ns.ca/Health/TeenHealth/sexualhealth/pregnancy/pregnant.htm>

<http://www.child.net/teenhelp.htm>

<http://www.isn.net/~chances/>

<http://www.cbctrust.com/faq.php>

http://www.sexualityandu.ca/eng/teens/faq/faq_contraception.cfm#women14

<http://www.child.gov.ab.ca/acyi/parenting/become/pregnant/page.cfm?pg=index>

If you would like to talk to someone use one of the contact numbers listed here:

Island Helpline 1-800-218-2885

Kid Help Phone 1-800-668-6868

Survival Centre for Youth 902-894-5884

Public Health Nursing 902-368-4530

CHANCES 902-892-8744

Birthright PEI 1-800-550-4900

Chapter 4

~ Smoking, Alcohol Use and Pregnancy ~

The facts about smoking and pregnancy:

- Cigarette smoking during pregnancy can cause serious health problems to an unborn child.
- Smoking during pregnancy has been linked to premature labor, breathing problems and fatal illness among infants.
- The odds of developing asthma are twice as high among children whose mothers smoke more than 10 cigarettes a day.
- Maternal smoking during and after pregnancy has been linked to asthma among infants and young children.
- Smokers inhale nicotine and carbon monoxide, which reach the baby through the placenta and prevent the fetus from getting the nutrients and oxygen needed to grow.
- Secondhand smoke also adds a risk to pregnancy.
- Breast milk often contains whatever is in the woman's body. If the woman smokes, the baby ingests the nicotine in her breast milk.
- Other reproduction related effects of smoking include lower estrogen levels leading to early menopause and links to infertility.

What should I do?

- The most effective way to protect the fetus is to quit smoking.
- If a woman plans to conceive a child in the near future, quitting is essential.
- A woman who quits within the first three or four months of pregnancy can lower the chances of her baby being born premature or with health problems related to smoking.
- Pregnancy is a great time for a woman to quit.
- No matter how long she has been smoking, her body benefits from her quitting because it lessens her chances of developing future tobacco-related health problems, such as lung and heart disease, and cancer.

Quitting smoking during pregnancy has considerable positive health impact for both women and fetuses, and reduces health problems for children born of mothers who smoke.

How does alcohol affect my baby?

- When a pregnant woman drinks alcohol, it rapidly crosses the barrier of the placenta, and enters the baby's blood stream.
- The brain and central nervous system of the unborn child are especially sensitive to alcohol.
- Babies exposed to alcohol before birth have developmental disabilities. There is no safe quantity of alcohol, so it is best to abstain from alcohol during pregnancy.

What is Fetal Alcohol Syndrome?

- Fetal Alcohol Syndrome, FAS, refers to a set of alcohol-related disabilities associated with the use of alcohol during pregnancy.
- FAS is one of the leading causes of PREVENTABLE birth defects and developmental delay in children.
- Babies with FAS often have:
 - ▶ Elongated and flattened faces: a long upper lip, flattened philtrum (the dip that extends from under the nose to the lip), and flat midface
 - ▶ Retarded growth: low birth weight, decreasing weight gain over time not due to nutrition, disproportional weight to height
 - ▶ Central nervous system abnormalities: decreased skull size at birth, structural brain abnormalities, impaired fine motor skills, neurosensory hearing loss (nerves connecting the ears to the brain), and poor eye-hand coordination
 - ▶ In addition, children with FAS may have abnormalities in cognition, language and behaviour.

What is Fetal Alcohol Effect?

- Fetal Alcohol Effect is a term used to describe children who were exposed to alcohol before birth, but have only some FAS characteristics.

- These may include reduced or delayed growth of the baby, single birth defects, or developmental learning and behavioural disorders that may not be noticed until months or years after the child's birth.

If you want further information on smoking and its negative effects, check out these websites:

http://www.hc-sc.gc.ca/hl-vs/tobac-tabac/body-corps/preg-gros/index_e.html

<http://www.on.lung.ca/nosmoking/pregnancy.html>

<http://www.ccsa.ca/fasgen.htm>.

If you would like to talk to someone use one of the contact numbers listed here:

Addiction Services 1-888-299-8399

Island Helpline 1-800-218-2885

Kid Help Phone 1-800-668-6868

Survival Centre for Youth 902-894-5884

Public Health Nursing 902-368-4530

CHANCES 902-892-8744

Chapter 5 ~ Nutrition and Pregnancy ~

- ☆ Eating nutritiously during pregnancy is as easy as following the Canada's Food Guide.
- ☆ Enjoy a variety of foods from each group every day. Choose lower fat foods more often.
- ☆ Making changes to your eating habits can be a challenge! Start by setting small goals.
- ☆ Reward yourself often with non-food treats for meeting even your smallest goals.

Grain Products:

- Have 5-12 servings per day
- Ways to eat more grain products:
 - ▶ Try bread pudding or rice pudding for breakfast.
 - ▶ Homemade muffins are great for breakfast, snack or dessert.
 - ▶ Try toast, bannock, whole grain crackers or a sandwich at snack time.
 - ▶ Make your own oatmeal cookies.

Milk Products:

- Have 3-4 servings per day

- Ways to Eat More Milk Products:
 - ▶ Use milk or skim milk powder in hot chocolate, puddings and soups.
 - ▶ Make a fruit shake. Mix fruit and milk in a blender. Sweeten to taste.
 - ▶ Add skim milk powder to soups, hot cereal, meat loaf, mashed potato and casseroles.
 - ▶ Add fruit to plain yogurt.
 - ▶ Use yogurt in place of sour cream or mayonnaise in dips or sandwich fillings.
 - ▶ Substitute lower-fat yogurt for dessert.
 - ▶ Add grated cheese to soups, chili, casseroles, sandwiches or salads.

Vegetables and Fruit:

- Have 5-10 servings each day
- Ways to eat more vegetables and fruit:
 - ▶ Have raw vegetables cleaned and ready in the fridge. Store in a plastic bag with a few drops of water. Serve with a yogurt dip.
 - ▶ Try tomato or vegetable juice.
 - ▶ Add fresh or frozen vegetables, canned tomato soup or tomato paste to soup, casseroles or meat loaf.
 - ▶ Use cabbage instead of lettuce for salads
 - ▶ Top a baked potato with chopped broccoli, grated cheese or creamy yogurt dressing.
 - ▶ Add dried fruit like raisins, dates or apricots to your favourite recipe.
 - ▶ Try wild berries as a snack or in your favourite recipes.

Meat and Alternatives:

- Have 2-3 servings per day

There are certain nutrients that you need to be especially sure to get when you are pregnant:

- *Calcium:* for building strong bones and teeth for baby.
- *Protein:* for the growth of all cells, including bones, muscles and blood vessels.
- *Iron:* helps build healthy blood for you and your baby.
- *Folic Acid:* works with iron to make healthy blood for you and your baby

Weight Gain

- The recommended weight gain for most mothers is between 11.5 and 16 kg (25-35lbs.).
- This may seem like a lot of weight to gain when a healthy baby usually weighs only 3-4kg (7-9lbs.).
- Only 20 per cent of your weight gain is stored as body fat which will be used when breastfeeding.
- About 40 per cent of weight gained is for the baby, the placenta and the amniotic fluid.
- Increases in your blood, extra body fluids, breast tissue and uterus size make up the other 40 per cent.
- The rate at which you gain weight during your pregnancy is very important.
- You should gain weight slowly during the first three months of pregnancy.

- After the first three months, your rate of weight gain should be more rapid but steady - about 1/s kg (3/4-1 lb.) per week.

If you want further information on nutrition during pregnancy, check out these websites:

http://www.healthunit.org/pregnancy/teens/teen_pregnancy_nutrition.htm

http://www.health.gov.sk.ca/rr_nutrition_in_pregnancy.html

http://chealth.canoe.ca/channel_health_features.asp?health_feature_id=97&channel_id=39&relation_id=2114

http://www.phac-aspc.gc.ca/hp-gs/know-savoir/nutrition_e.html

If you would like to talk to someone use one of the contact numbers listed here:

Island Helpline 1-800-218-2885

Kid Help Phone 1-800-668-6868

Survival Centre for Youth 902-894-5884

Public Health Nursing 902-368-4530

CHANCES 902-892-8744

Chapter 6

~ Parenting Issues ~

- ☆ Parenting can be very challenging, especially when you are trying to juggle it with school.

Here is a list of various parenting programs offered by CHANCES Family Resource Center:

1. Special Delivery

- ▶ For pregnant parents. Learn what to expect while you are pregnant, how to care for your developing baby, and get support from other parents.

2. Building Incredible Babies

- ▶ For parents and children birth 12 months. Your baby can meet and play with other children and you can learn ways to enjoy giving your child a good start in life.

3. The Wonder Years

- ▶ For parents of children 1 and 2 years. Learn tips on how to encourage your child's

healthy development as well as effective strategies for guiding positive behaviour.

4. **Active Parenting Now**
 - ▶ For parents of children age 3 - 12 years. Win your child's cooperation and encourage positive behaviour and build a living bond in the process. Proven methods that work!
5. **Mad About You**
 - ▶ For parents with children birth to 6 years. Parenting is one of the most challenging jobs you will ever do. Learn ways to cope with frustration and anger and find more joy and less stress in your family life.
6. **The Eagles WorkShop**
 - ▶ Discover your true potential and find the courage to reach your goals and dreams. An inspiring program about living a more fulfilling life.
7. **Dad Days**
 - ▶ For fathers with children birth to 6 years. Explore your special role in your child's life and get practical tips on parenting.
8. **Teachable Moments**
 - ▶ One Session events for parents and children from 2 - 6 years to attend together for fun and learning!
9. **Puppet Play**
10. **Sensory Experience**
11. **Experimental Art**
12. **Healthy Bodies Healthy Fun**
 - ▶ One session events for parents and children from 2 - 6 years to attend together for activities and fun. Be active and healthy!
13. **The Importance of Play**
 - ▶ Children spell work p-l-a-y. Make the most of playtime by learning tips to teach skills, build cooperation and strengthen the bond with your child.
14. **Handling Tantrums**
 - ▶ Learn how to handle your child's frustration and anger and get tips on preventing tantrums
15. **The Toddler/Preschool Eater**
 - ▶ Learn and share creative mealtime and nutrition ideas. Also, tips for handling the fussy eater.
16. **Along Comes Baby!**
 - ▶ Life is definitely different when a baby joins your family. Talk about the changes a baby makes in your life and ways to approach each step with confident anticipation.
17. **Encourage Positive Behaviour**
 - ▶ Help your child develop self-discipline and problem solving skills through effective communication.
18. **Mind Over Money**
 - ▶ Learn ways to stretch your family dollar while living a richer life.
19. **Assertiveness For Parents**
 - ▶ Learn how to assertively communicate your thoughts and feelings to become a more effective parent... and person!

- 20. **The Only Two Things You'll Ever Need To Know About Parenting**
 - ▶ Master these two key skills and be prepared for any parenting situation.
- 21. **Speech, Language and Your Child**
 - ▶ Help your child develop their speech and language through everyday activities and have your general questions answered by a speech- language pathologist.
- 22. **Sibling Rivalry**
 - ▶ Learn how to help children resolve their own conflicts and play and live together more peacefully.
- 23. **The Relationship Workshop**
 - ▶ Gain insights and skills to help you build more effective relationships.
- 24. **Understand Your Child's Temperament**
 - ▶ Every child has their own unique personality. Get tips on working with your child's temperament to improve your relationship and make parenting easier.
- 25. **Stop Struggling With Your Child**
 - ▶ Encourage your child to cooperate and help them become more independent and responsible. Practical tips to overcome those day to day struggles.
- 26. **Building Your Child's Self Esteem**
 - ▶ Based on the work of Dr. Ben Bissell, learn the ten keys for giving your child this most important gift.
- 27. **Parenting Checklist**
 - ▶ Review the top ten guidance/discipline essentials as well as the top ten common parenting mistakes.
- 28. **Power Struggles**
 - ▶ Learn how to sidestep power struggles to create peace and win cooperation.

For more information on any of these programs contact CHANCES Family Resource Center at CHANCES 902-892-8744

Section 9

~ General Health Topics ~

- Chapter 1.....Sleep Deprivation and Fatigue
- Chapter 2.....Skin Care
- Chapter 3.....Sports Injuries
- Chapter 4.....Safe Tattoos and Piercings

Chapter 1

~ Sleep Deprivation and Fatigue ~

When you get enough sleep you will feel:

- more cheerful
- more alert
- less susceptible to colds and flu
- less accident-prone
- poor concentration and judgment

How much sleep do I need?

- individual sleep needs vary
- you should awaken refreshed
- many teenagers need between 9 and 11 hours of sleep
- the reality of a typical teen life -- early morning soccer or swim practice, homework and perhaps a part-time job after school -- means that most are lucky to get 7-1/2 hours

What if I don't get enough sleep?

- Long term sleep deprivation can affect mood and make it difficult for a teen to perform or even react appropriately.
- However, catching up on sleep on the weekend, while perfectly normal for most teens, may not help learning.
- Sleep is a complex process with many stages including drowsiness, moderate sleep, deep restorative sleep, and dream sleep. Dream sleep, when we work through problems from our waking life, is better known as rapid eye movement or REM sleep.
- **If you don't have enough REM sleep you may have trouble concentrating during the school day.**
- **Sleep deprivation leads to a temporary loss in IQ levels, reasoning and memory, and even makes kids a little hyper.**

I you are having trouble sleeping or if you want more information, here are some helpful contact numbers:

After hours clinic 902-894-2111

Public Health Nursing 902-368-4530

Kids Help Phone 1-800-668-6868

Canadian Mental Health Association 902-566-3034

Chapter 2 **~ Skin Care ~**

What causes acne?

- Most people who get acne start having it in their early teens.
- This is when the oil glands in the body start making more sebum (oil).
- Some people also have too many "sticky" skin cells. In people with acne, these cells mix with the oil and plug up the hair follicles in the skin.
- These plugs trap bacteria (germs) in the follicles, which can cause the follicles to swell.
- Tender red bumps are the result. In acne, what start as small red bumps can turn into pimples and even cysts.

Things that can make acne worse

- Oil-based makeup, suntan oil, hair gels and sprays, and oils from machinery or cooking
- Stress and strong feelings like guilt, fear, and being nervous
- Periods in women

- Squeezing or picking at pimples
- Scrubbing the skin hard

What kinds of changes are there in the skin?

- A whitehead results when the follicle is plugged with sebum and skin cells.
- If this plug reaches the surface of the skin and the air touches it, it turns black and is called a blackhead.
- If the wall of the plugged follicle breaks, the area swells and turns into a red bump.
- If the follicle wall breaks near the skin surface, the bump usually becomes a pimple.
- If the wall breaks deeper under the skin, acne nodules or cysts can form.
- This is called cystic acne. It is the type most likely to lead to scars.

How can acne be treated?

- Acne can be treated in different ways.
- The main thing to remember is that it will take about two months of any treatment before your skin starts to look better.
- You should see a doctor to determine which treatment is best for you.

Will I have scars?

- You can help reduce scarring by not squeezing or picking at blemishes.
- Also avoid scrubbing your skin hard.
- Gentle washing is better.

☆ It is very important to have good skin care to help prevent acne

Three steps to healthy skin care

1. Use a cleanser, which will remove any dirt and bacteria from your pores.
 - Bacteria, dirt, as well as hormonal changes cause blemishes.
 - Cleanse your face twice a day - once in the morning and once before bed.
2. After you have washed with cleanser, apply toner.
 - The toner will remove any excess cleanser or soap and balance your skin.
 - Use a cotton pad with your toner and concentrate on the "T" area of your face which is the forehead, nose and chin.
 - This area is most affected by extra oil. You are never too young to begin moisturizing your face.
3. Moisturize once in the morning or as a final step before applying your make-up.
 - At night, use blemish products if you are prone to breakouts.
 - However, moisturizers are not necessary at night, as your skin will cleanse itself while you sleep and it needs time to breathe.

For more information of acne and healthy skin care, check out these websites:

<http://www.acne.ca>

<http://www.cfpc.ca/English/cfpc/programs/patient%20education/acne/default.asp?s=1>

<http://www.mcgill.ca/studenthealth/information/skinhealth/acne/>

If you would like to talk to someone about this topic, you can use these contact numbers:

After Hours Clinics 902-894-2111

Public Health Nursing 902-368-4530

Chapter 3

~ Sports Injuries ~

Sprains and Strains

- A sprain or strain is evidenced by pain, and swelling and you are unable to bear weight on that joint.
- During the first 48 hours you should follow the following tips:
 - ▶ *Rest* - Resting the injured area is important; continued activity can sometimes worsen pain or prolong the injury.
 - ▶ *Ice* - Ice will help reduce the swelling and pain
 - ▶ *Compression* (wrapping the area in an elastic bandage) - Compression will help reduce the swelling and pain
 - ▶ *Elevation* (raising the injured area if possible) - Elevation will help reduce the swelling and pain
 - ▶ *Take it easy.*

How long do I put the ice on?

- Wrap an ice pack (you can go to the freezer and grab a pack of frozen peas) in a towel and apply it to the injured area.
- Leave it on for 20 minutes.
- Try to do this at least 3 times a day for 2 days.
- You should see a doctor if you really hurt, can't walk or can't use that part of your body.

Concussions

- A concussion is defined as any trauma that induces an alteration in one's mental state, whether or not there was loss of consciousness.
- Confusion and amnesia, occurring either immediately or shortly after the impact, are considered hallmarks of the syndrome.
- Recognizing when a concussion has taken place is essential because one such injury leaves the brain more vulnerable to subsequent blows.
- It is the cumulative effects of several concussions that doctors are especially worried about. Some long term, and even permanent, effects include memory loss, frequent headaches, ringing in the ears, poor concentration, increased irritability and other personality changes.
- Among other things, the guidelines strongly recommend that the athlete be completely symptom free before returning to any form of rigorous training.

These are only two of the most common injuries that athletes can encounter but it is important to seek medical attention for any injury. DO NOT assume that you know what is wrong because the injury may be more serious than you thought.

For more information use these contact numbers:

After Hours Clinics 902-894-2111

Chapter 4 ~ Safe Tattoos and Piercings ~

Is Ear and Body Piercing Safe?

- Ear and body piercing can be safe when done by a body artist who is careful to protect you from infections.

Know the Risks

- Re-using needles for piercing is like sharing injectable drug needles.
- Make sure you watch your body artist open the package of your new sterile needle.
- Piercing guns should be used for earlobes only (or not at all).
- Only use new, sterile jewellery for your piercing. Surgical steel is best. Old jewellery can hold viruses.

Choosing a Body Artist

- Take the time to find a professional before you get a piercing.

- The body artist should not be smoking, drinking alcohol or taking drugs while working on you and neither should you.
- A good body artist will answer all of your questions - just ask them!

Look Around and Ask Questions

- Is the shop clean? A dirty shop increases your risk of infection, which could ruin your piercing.
- Do they sterilize equipment and disinfect work surfaces to remove blood and body fluids?
- Do they have a sink to wash their hands?
- After the area to be pierced is marked with a pen, do they then clean the area with an antiseptic swab?
- Do they use new gloves for each piercing?
- Do they clean the area to be pierced with soap and water and then a skin antiseptic, such as alcohol?
- Are new, disposable needles used for piercing?

Care for Your Piercing

- If you have a mouth piercing, you must rinse your mouth many times a day to prevent infection.
- When the swelling in your tongue goes down, you need to replace the long barbell with a shorter one.
- If any piercing becomes sore, red, swollen, or oozes pus, you may have an infection. See your Doctor or Dentist immediately.

Here are some things to consider:

- *Taking care of your piercing:* Keep the pierced area clean by using antiseptic lotion and rinse well after washing the area with soap. Apply ice to help reduce swelling and sensitivity.
- *Healing times for piercings vary:*
 - ▶ Lips: 6-8 weeks
 - ▶ Earlobe or eyebrow: 6-8 weeks
 - ▶ Belly Button: 2-6 months
 - ▶ Cheek: 2-3 months
 - ▶ Tongue: 4-6 weeks
 - ▶ Nipple: 2-6 months
 - ▶ Genitals: 4 weeks to 8 months, depending on location of piercing.

What about tattoos?

- Tattoos are designs made on your body by injecting ink under your skin with a needle.
- Here are some things to consider:
 - ▶ Consider a tattoo permanent. Laser treatment can remove tattoos sometimes, but it is very expensive and can cause scarring.
 - ▶ Getting a tattoo hurts.

Taking care of your tattoo:

- Usually tattoos take about 2-3 weeks to heal.
- Your tattoo artist should provide you with specific instruction for treatment.
- Don't pick at the skin or at the scabs that form, even if it itches. This may increase your chances of infection and prolong healing.
- Moisturize your skin, but not too much.
- Stay out of the sun and use sunscreen. Sunlight will fade a tattoo over time.

When to See Your Doctor

- Since body art involves cutting, burning or puncturing the skin, there is always a chance of infection.
- Some swelling, redness and soreness is usually normal as your body art heals, but if you have any of the following signs of infection, you should see your doctor.
- Thick green or yellow discharge or pus from the body art.
- Continuous oozing or bleeding.
- Heat or red streaks originating from and moving away from the art.
- Pain doesn't go away or increases.
- Unusual pain or swelling.

If you are interested in more information on safe body art, check out these websites:

<http://www.aidspei.com/>

<http://www.mcgill.ca/studenthealth/information/generalhealth/bodyart/>

<http://www.region.halton.on.ca/health/programs/infectionctrl/piercing.htm>

If you would like to talk to someone about safe body art try one of these contact numbers:

AIDS PEI 1-800-314-2437

Clinics 902-894-2111

Public Health Nursing 902-368-4530

Section 10

~ Long Term Illnesses ~

Chapter 1.....Attention Deficit Hyperactivity Disorder and Tourettes Syndrome

Chapter 2.....Cancer

Chapter 3.....Diabetes

Chapter 4.....Arthritis

Chapter 5.....Cystic Fibrosis

Chapter 6.....ALS/Lou Gehrig's Disease

Chapter 7.....Multiple Sclerosis

Chapter 1

~ Attention Deficit Hyperactivity Disorder and Tourette's Syndrome ~

What is attention deficit hyperactivity disorder?

- Attention deficit hyperactivity disorder, also known as ADHD, is a behavioural problem in which people:
 - ▶ have problems paying attention.
 - ▶ have problems finishing their work.
 - ▶ are impulsive so they may act without thinking.
 - ▶ are easily distracted
 - ▶ These symptoms usually lead to other problems in school, with relationships (friends, family members) and with self-esteem.

Treating ADHD can involve:

- training for parents
- strategies to change behaviour
- educational programs to help in school
- medication (drugs)

☆ There is no cure, but medication can help improve the symptoms of ADHD.

Tourette's Syndrome

- Tourette's syndrome patients have involuntary jerks and twitches of the face, head, shoulders and other areas of the body and also make involuntary sounds, such as sniffing, grunting, squealing or swearing.
- The symptoms change in their frequency and move from one part of the body to another; this disorder usually starts at age five to seven, though it can begin anytime before age 18.

Some of the signs and symptoms of Tourette's syndrome include:

- *Motor tics:* You may experience sudden, involuntary movements, like frequent eye blinking, eye movements, facial twitches and involuntary muscle jerks affecting your head, shoulders, stomach, arms or legs. Other movements may include repeating certain actions, jumping, touching and twirling.
- *Phonic tics:* These are sudden, involuntary sounds like humming, squealing and throat clearing, or more complex sounds including words or sentences.
- *Echophenomena:* This is a tendency to repeat actions or sounds that you see or hear.
- *Premonitory urge:* This is a certain uncomfortable feeling that is temporarily relieved by performing tics.
- *Fluctuating nature:* Your tics tend to change over weeks and months, depending on which areas of the body are affected and how serious your condition is.

Some of the signs and symptoms of Tourette's syndrome include (cont'd):

- *Environmental effects:* Your tics will probably get worse and more frequent during periods of stress or excitement, and will get better during exercise or while focusing on an absorbing activity.
- *Partial voluntary control:* Most people with Tourette's syndrome can suppress at least some of their tics from a few minutes up to a few hours. This, however, requires effort and is usually uncomfortable.

If you would like more information on ADHD or Tourette's Syndrome, check out these websites:

<http://www.cmha.pe.ca>

<http://www.chadd.org/index.cfm>

<http://www.drkoop.com>

<http://www.nimh.nih.gov/publicat/adhd.cfm>

<http://www.uhn.ca/programs/tourettes/index.asp>

If you would like to talk to someone, here are some very useful contact numbers:

Public Health Nursing 902-368-4530

Kids Help Phone 1-800-668-6868

Health Information Resource Centre 1-800-241-6970

Canadian Mental Health Association 902-566-3034

After Hours Clinics 902-894-2111

Chapter 2

~ Cancer ~

What is cancer?

- Cancer is a disease that starts in our cells.
- Our bodies are made up of millions of cells, grouped together to form tissues or organs such as muscles and bones, the lungs, or the liver.
- Genes inside each cell order it to grow, work, reproduce and die.
- Normally, our cells obey these orders and we remain healthy.
- Sometimes a cell's instructions get mixed up and it behaves abnormally.
- After a while, groups of abnormal cells can circulate in the blood or immune system, or they can form lumps or tumours.

Tumours can be either benign (non-cancerous) or malignant (cancerous).

- Benign tumour cells stay in one place in the body and are not usually life-threatening.
- Malignant tumour cells are able to invade the tissues around them and spread to other parts of the body.
 - ▶ Cancerous cells that spread to other parts of the body are called metastases.
 - ▶ The first sign that a malignant tumour has spread is often swelling of nearby lymph nodes, but cancer can metastasize to almost any part of the body.
 - ▶ It is important to find malignant tumours early and treat them. from spreading.

☆ **There are many different types of cancer but there are some general things you can do to prevent cancer.**

Prevention

- Risk reduction is taking action to reduce or “cut down” your individual risk of developing cancer.
- Risk can be increased or decreased by the lifestyle choices you make or the kind of environment you live and work in.
- Low risk does not mean that you won’t get cancer, it means that the chances of getting it are small. High risk means that your chances may be higher, but it does not mean that you will develop cancer.
- There is no single cause of cancer but some factors appear to increase the risk of developing it. These are known as risk factors.

What can I do to reduce my risk?

- Be a non-smoker and avoid tobacco smoke.
- Eat a healthy diet.
- Be physically active every day.
- Stay at a healthy weight.
- Limit alcohol use.
- Reduce your exposure to UV (ultraviolet) rays from the sun or artificial tanning equipment, like tanning beds.
- Know your body and report any changes to your doctor or dentist.
- Follow health and safety instructions when using hazardous materials at home and at work.

This should provide you with a general idea of cancer and ways to reduce your risk.

If you would like more information on a specific type of cancer you can contact The Cancer

Society at 1-888-939-3333 or check out their website at <http://www.cancer.ca>

Chapter 3

~ Diabetes ~

What is diabetes?

- Diabetes is a disease in which your body cannot properly store and use fuel for energy.
- The fuel that your body needs is called glucose. Glucose comes from foods such as breads, cereals, pasta, rice, potatoes, fruits and some vegetables.
- To use glucose, your body needs insulin. Insulin is made by a gland in your body called the pancreas.

You have diabetes because either:

1. Your body makes too little or no insulin. (Type 1 diabetes)
2. Your body can't use the insulin it makes. (Type 2 diabetes)

- ☆ With little or no insulin, glucose builds up in your blood instead of being used for energy. This causes high blood glucose levels.

High blood glucose may make you:

- feel tired
- be thirsty
- urinate often
- be hungry
- be moody
- lose weight
- have blurry vision
- get infections

Repeatedly high blood glucose levels can lead to:

- kidney failure
- heart disease
- impotence
- blindness
- amputation

- ☆ Low blood sugar (hypoglycemia) occurs when your blood glucose drops too low .

This is usually caused by:

- Not eating enough food
- Missing or delaying a meal
- Exercising without taking the necessary precautions
- Taking too much insulin
- Drinking alcohol

Low blood glucose may make you feel:

- hungry
- shaky or light-headed
- nervous or irritable

- sweaty
- weak
- nauseous
- your heart beats at a faster rate
- confused
- a numbness or tingling in your tongue or lips.

You may also:

- Have difficulty concentrating, seeing or speaking
- Feel confused, weak, or unusually sleepy
- Have a headache
- Feel dizzy
- Experience mood changes

☆ Make note of your symptoms to help you to identify low blood glucose in the future.

How do I find out which type of diabetes I have?

- Your doctor will tell you what type of diabetes you have and what you need to do.
- You can also ask your doctor to refer you to a Diabetes Education Centre.
- There, trained health professionals can teach you about diabetes and insulin.

This should provide you with some general information about diabetes, but you need to have further education from a health care professional to be able to safely manage your diabetes.

If you would like more information on a specific type of cancer you can contact The Canadian Diabetes Cancer Association at 894-3005 or check out their website at <http://www.diabetes.ca>

Chapter 4

~ Arthritis ~

What is Arthritis?

- There are over 100 different kinds of arthritis!
- Arthritis is the inflammation of a joint.
- There can be anything from relatively mild forms of tendinitis (as in 'tennis elbow') and bursitis to crippling systemic forms, such as rheumatoid arthritis.
- There are pain syndromes like fibromyalgia and arthritis-related disorders, such as systemic lupus erythematosus, that involve every part of the body.
- There are forms of the disease, such as gout, that almost nobody connects with arthritis.
- There are other conditions - like osteoarthritis, the misnamed 'wear and tear' arthritis -

that a good many people think is the only form of the disease.

Who can get arthritis?

- Anyone can get arthritis!
- It is common in older people.
- Some forms of arthritis affect children still in diapers
- Thousands of people are stricken in the prime of their lives

What are the symptoms of arthritis?

- Inflammation is involved in many forms of arthritis.
- It is the body's natural response to injury.
- The warning signs that inflammation presents are:
 - ▶ redness
 - ▶ swelling
 - ▶ heat
 - ▶ pain
- When a joint becomes inflamed, it may get any or all of these symptoms.
- This can prevent the normal use of the joint and therefore it can cause the loss of function of that joint.

How can I manage arthritis?

- No one knows what causes arthritis.
- Most types of arthritis can be managed by following these general guidelines:
 - ▶ managing pain
 - ▶ understanding their medications
 - ▶ managing daily activities
 - ▶ exercising regularly
 - ▶ eating healthy

There is much more to learn about arthritis and if you would like to know more, contact the Arthritis Society as 628-2288 or check out their website at www.arthritis.ca

Chapter 5 ~ Cystic Fibrosis ~

What is cystic fibrosis?

- Cystic fibrosis (CF) is the most common, fatal genetic disease affecting young Canadians.
- CF affects mainly the lungs and the digestive system. In the lungs.
- CF causes severe breathing problems due to a build-up of thick mucus.
- This mucus makes it difficult to clear bacteria and leads to cycles of infection and inflammation, which damage the delicate lung tissues.
- In the digestive tract, CF makes it extremely difficult to digest and absorb adequate nutrients from food.

- Thick mucus also blocks the ducts of the pancreas, preventing enzymes from reaching the intestines to digest food.
- Therefore, persons with CF must consume a large number of artificial enzymes (on average 20 pills a day) with every meal and snack, to help them absorb adequate nutrition from their food.
- They must also follow a demanding daily routine of physical therapy to keep the lungs free of congestion and infection.

What Are the Signs and Symptoms of Cystic Fibrosis?

- difficulty breathing
- constant cough which expels thick mucus
- excessive appetite, with weight loss
- bowel disturbances
- skin which tastes salty
- repeated or prolonged bouts of pneumonia
- failure to thrive

What Causes Cystic Fibrosis?

- People are born with cystic fibrosis; it is a genetic disorder.
- Approximately one in every 25 Canadians carries a defective version of the gene responsible for CF.

How is CF treated?

- Treatment programs are tailored to individual needs and depend upon the stage of the disease and which organs are affected.
- Treatments followed at home generally include:
 - ▶ tapping or "clapping" the chest and the back vigorously (percussion)
 - ▶ PEP (positive expiratory pressure) Mask Therapy to help loosen the mucus which clogs the lungs
 - ▶ taking pancreatic enzymes with all meals, to aid digestion
 - ▶ taking nutritional supplements and vitamins to promote good nutrition
 - ▶ taking antibiotics in pill, intravenous (IV), and or inhaled forms, to ease congestion and protect against and fight lung infection
 - ▶ exercise

How does cystic fibrosis affect daily life?

- For persons with CF, life includes a daily routine of therapy and periodic visits to a CF clinic.
- Otherwise, most individuals with cystic fibrosis lead normal lives, for many years, in terms of education, physical activity, and social relationships.
- Eventually, however, lung disease places increasing limits on daily life.

Is There a Cure for Cystic Fibrosis?

- There is no known cure for CF, but there is real hope.

This is provided some general information about Cystic Fibrosis. If you would like to get more information, contact the Canadian Cystic Fibrosis Foundation at 1-800-378-2233 or check out their website at www.ccff.ca

Chapter 6**~ ALS/Lou Gehrig's Disease ~****Amyotrophic Lateral Sclerosis (ALS)**

- ALS known as Lou Gehrig's Disease (Amyotrophic Lateral Sclerosis), is the most common form of motor neuron disease.
- It is a progressive and ultimately fatal neuromuscular disease.
- ALS causes nerve cells to degenerate or die.
- The loss of motor neurons leads to the slow paralysis of the voluntary muscles.
- The heart is not a voluntary muscle, and therefore, remains unaffected by the disease.
- However, since breathing is controlled voluntarily by the chest muscles, death usually

occurs when the chest muscles are no longer able to help the lungs achieve adequate oxygenation.

- For some people the muscles for speaking, swallowing or breathing are the first to be affected.
- Generally, there is little impairment of the brain or the senses.
- ALS is not contagious, but it is fatal.

What can be done about ALS?

- There is no known cure at this time and very little in the way of treatment that will have an effect on the disease itself.
- However, there is much that the health care community does to ensure quality of life care for the person with ALS.

Is there hope for people with ALS?

- At the moment, there is a drug trial being conducted that may prolong life minimally.
- Research is looking to find not only the cause of the disease so that a cure can be developed but also other medications or treatments that can help until a cure is found.
- With improved knowledge about ALS, healthcare providers and families can help people living with ALS live life more fully.

This has provided some general information about ALS, but if you would like more information, contact the ALS Society at 1-800-267-4257 or check out their website at www.als.ca

Chapter 7

~ Multiple Sclerosis ~

What is multiple sclerosis?

- Multiple sclerosis (MS) is an unpredictable, at times disabling disease of the central nervous system - the brain and spinal cord.
- The disease attacks the protective covering of the central nervous system, causing inflammation.

What causes MS?

- We do not know as yet what causes MS.
- It is an autoimmune disease, which means the body's immune system malfunctions and starts attacking the covering that protects the central nervous system.

Is MS contagious?

- No, MS is not contagious, nor is it directly inherited.

Who gets multiple sclerosis?

- Multiple sclerosis most often strikes young adults - women and men between the ages of 20 to 40
- Women develop MS almost twice as often as men.

What are some common MS symptoms?

- Not all people with MS will experience all symptoms and often the symptoms will improve during periods of remission.
- *Visual disturbances* - These may include blurring of vision, double vision, inflammation of the optic nerve, involuntary rapid eye movement and very rarely, total loss of sight.
- *Extreme fatigue* - This is a debilitating kind of fatigue that comes on suddenly or is out of proportion to the activity. It is one of the most common and troubling MS symptoms.
- *Balance and coordination problems* - These may include loss of balance, tremor, unstable walking, dizziness, clumsiness of a limb and lack of coordination.
- *Stiffness of muscles* - Altered muscle tone can produce muscle stiffness, which can affect mobility. Sometimes the muscles go into spasm which can be painful.
- *Weakness* - The muscles of the legs can feel weak, which in turn affects walking.

What are some common MS symptoms (cont'd)?

- *Altered sensation* - These may include tingling, numbness or a burning feeling in one particular area of the body. Facial pain may occur because of a malfunction of one of the major facial nerves.
- *Sensitivity to heat* - Many people with MS find they become sensitive to heat and their symptoms worsen while in a hot environment.
- *Speech and swallowing problems* - These may include slowing of speech, slurring of words, changes in rhythm of speech and difficulty in swallowing.

- *Bladder and bowel problems* - Bladder problems may include the need to urinate frequently or urgently, incomplete emptying of the bladder or emptying at inappropriate times. Bowel problems may include constipation and, infrequently, loss of bowel control.
- *Sexuality and intimacy* - These can include from time to time impotence, diminished arousal and loss of sensation.
- *Short-term memory and cognitive problems* -These may include problems with short-term memory, concentration, judgment or reasoning.

Are there treatments for MS?

- There are some medications that help to manage the symptoms of MS and slow down its progression, but there is no cure.
- Therapies that are available as well to help MS symptoms such as muscle spasms, bladder problems, pain and fatigue.

This has provided some general information about MS, but if you would like to know more contact the Multiple Sclerosis Society at 1 800 268-7582 or check out their website at www.mssociety.ca