All About Puberty

A Handbook for Children and Parents
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Introduction

Puberty is a stage of development marked by many rapid changes. Along with physical changes, the process of sexual maturation also occurs during puberty. It is all part of becoming an adult.

It might sound crass but, really, the only reason we go through puberty is so that we can have babies and perpetuate the human race. Ah, nature… creating imperatives that not even humans can ignore. Which only goes to show that in some ways we’re not much different from cockroaches or crocodiles, are we?

Puberty has its unpleasant moments, but it would be a lot less unpleasant if everyone went through it at the same time and rate. Unfortunately, that's not the way it works – puberty happens when your body is ready for it to happen, and that varies from one person to the next.

The experts don’t all agree but we can safely say that, on average, puberty begins for girls between the ages of 8 and 13. That’s an average – which means that some perfectly normal girls will start puberty before the age of 8 and some perfectly normal girls will start puberty after the age of 13. On average, puberty begins for boys between the ages of 10 and 15. Again, that’s only an average. Some perfectly normal boys will start puberty before the age of 10 and some perfectly normal boys will start puberty after the age of 15.

Puberty doesn't start and end with breast growth and getting a period for girls, or with a voice that has deepened for boys. It usually takes about 3-4 years to get through puberty. But there are some people who complete the process in just 2 years, while others take 5-6 years. Again, this entire range is normal. Again, the experts don’t all agree.

Puberty is starting earlier and earlier – especially for girls. On average, it now begins six years earlier than it did just 200 years ago. There are a lot of theories as to why this may be happening – including changes in the food we eat, the presence of pesticides, hormones, and preservatives in many foods, changes in our eating habits, and environmental degradation – but there are no definite answers yet.

FOR CHILDREN

Congratulations on opening up All About Puberty: A Handbook for Children and Parents. The information we present is all about starting a conversation in your family – we hope you will find it interesting and fun.

As you proceed through the teen years, you will have new feelings and experiences that may seem confusing. Talking with your parents will help with understanding yourself, and help your parents appreciate how much you are growing up and maturing.

We learn more about human sexuality every year, so as your parents help you to sort out your feelings and questions, they will be learning, too.
This handbook explains common changes that happen during puberty, and we encourage you to read through all of it. Yes, girls should also be reading about what happens to boys and boys should also be reading about what happens to girls. Why? Because it builds empathy—the ability to understand what another person is feeling or going through. Let’s face it, you might be embarrassed by some of the changes that will happen to you during puberty, and the last thing you want is to be teased about these changes. So, if you’re a girl who can understand what boys are going through, and if you’re a boy who can understand what girls are going through, then maybe you won’t tease each other so much. Or to put it more bluntly: If you don’t want to be teased, then don’t tease other children.

As you look through this handbook, you may discover that you don’t look exactly like the people in our pictures or diagrams. That doesn’t mean you are not normal—you ARE normal! The pictures and diagrams are only a guide. Your body will change and grow at its own unique pace.

FOR PARENTS AND GUARDIANS

Congratulations on opening up All About Puberty: A Handbook for Children and Parents. Talking about sexuality can make some parents feel uncomfortable, and it is tempting to let the time slide by—hoping that sexuality education will be offered in school. And even if you wish to teach your child differently than you were taught, you may not have a clear notion of how or what to talk about. This handbook is intended to give you a start.

As questions arise, you may feel unprepared to respond. You may not have the necessary information, or you may need time to think about the best way to present your answer. This handbook is intended to be used both by you and your child to provide facts, information, and perhaps a starting place for a conversation. It will also provide you with ideas on how to best present your values and beliefs.

You are the most influential person in your child’s life as they develop a sense of themselves and their relationships to the people and world around them. We applaud and encourage you as you seek to help them grow and mature.
Talk, Talk, Talk

Talking with Your Parents about Sex and Sexuality
Talking with Your Child about Sex and Sexuality
How Well Do You Know…
Talking with Your Parents about Sex and Sexuality

Adolescence is often a time when young people start to have more arguments with their parents. You may be feeling that you deserve to be treated more like an adult. Parents may have a hard time accepting that you are getting older and more mature when you still look and seem quite young. An important thing to remember is that parents will probably grant you more independence if you show them that you are responsible – so look for ways to show your family that you are trustworthy and responsible. Then in turn they are more likely to grant you more independence.

Believe it or not, your parents may be able to give you excellent advice and information about sex and sexuality, and can offer you support for the decisions you make.

It's normal to feel nervous about talking with your parents about sexuality. It is, after all, an embarrassing topic for most people. Keep in mind that a lot of parents say they are relieved when their pre-teens and teens start this conversation.

IS IT A GOOD IDEA TO TALK WITH MY PARENTS?

When it comes to discussing sexuality, parents can react in many different ways. Some can be misleading, angry, defensive, or clueless. Some can be supportive, thoughtful, and informed. And some are too embarrassed to say anything at all. Often, they want to get the whole thing over with in One Big Talk – or they don't want to talk about it at all.

But, in fact, research shows that ongoing dialogue fosters closeness between parents and children, and decreases the risk of problems such as unhealthy relationships, unintended pregnancy, and sexually transmitted infections. Think of your parents as puberty experts – after all, they've been through it, right? They want to answer your questions about puberty and they want to support you as you go through all of these changes.

Most often, ongoing communication feels good – and is good for you, too.

HOW CAN I START A CONVERSATION?

Some pre-teens and teens find it intimidating or embarrassing to talk with their parents about sexuality. When you're ready to bring it up, you could try using a magazine article or TV show as a jumping-off point to start the conversation. It may take more than one conversation about this topic before you feel comfortable disclosing information about your personal feelings and intentions.

Think about giving your parents a heads-up by scheduling your talk in advance. Just say something like, "Can we have a private talk tonight?" If you're nervous, it's okay to say so! Break the ice with something like, "This feels weird for me to talk about, and it may be for you, too, but I want to ask about …".

Here are some additional tips that might make talking with your parents easier:

- You get to decide whom you want to talk with. It may be just one parent, one parent at a time, or both parents together.
- Ask questions if you don't understand what your parents are saying. (This may be a difficult topic for your parents, too. Sometimes it's hard for parents to find the right words.)
• Give your parents time to answer your questions. Let them finish speaking. Then you can make a comment or ask another question.
• Listen carefully. Help your parents to see that you are listening to what they have to say.
• The most important thing for you and your parents to do is TALK! If you have disagreements, talk them out.

SHOULD I INVOLVE MY PARENTS WHEN MAKING DECISIONS?
Often parents want to feel needed and involved in their children's lives. Make sure to tell them what role you want them to play in your decision making. For example, you may want their advice about when it's okay to start dating, or what you should do if you really like someone.

Parents want to make sure that you're informed about the risks involved in romantic relationships. These risks can be both emotional and physical. Educate yourself about these risks – this may help your parents feel better about your decisions.

WHAT IF I REALLY CAN'T TALK WITH MY PARENTS?
Unfortunately, some parents can't get over their discomfort about sexuality. Worse, some threaten or punish their child for raising the topic. If you feel that asking questions will only get you in trouble, then don't ask.

If you think your parents would get upset, you might choose to put off this conversation until you feel that your parents are ready for it. Meanwhile, you could turn to another trusted adult. This could give you the opportunity to rehearse what you want to say to your parents.

Finding just the right adult for you to talk with can sometimes be hard, but if you look closely enough, you might be surprised to see just how many adults care about your well-being. Pre-teens and teenagers tell us that they have been able to talk about sexuality with older siblings, aunts and uncles, parents of friends, school nurses, teachers, school counselors, and many others.
Talking with Your Child about Sex and Sexuality

We want our children to have healthy and rewarding lives. And we know that teaching them about sexuality is very important. But for many of us, it's hard to talk about sexuality – especially with our own children.

Here are some questions parents often ask about how to best talk with their children about sex and sexuality. We hope the answers will help you.

WHY DO CHILDREN NEED TO KNOW?
Understanding sexuality helps children cope with their feelings and with peer pressure. It helps them take charge of their lives and have loving relationships. It also helps protect them from sexual abuse – and from becoming sexual abusers.

Home should be the best place to learn about sexuality. We can help our children feel good about their sexuality from the very beginning. Then they will be more likely to trust us enough to ask questions about sexuality later on in life.

Young people are less likely to take sexual risks if they have

- a positive view of sexuality
- information that they need to take care of their sexual health
- clarity about their own values and an understanding of their families' values
- self-esteem and self-confidence
- interpersonal skills, such as assertiveness and decision-making abilities
- a sense that their actions affect what happens to them and others
- a connection to home, family, and other caring adults in their school or community

WHEN'S THE BEST TIME TO START TALKING WITH MY CHILD?
It's best to start as soon as children begin getting sexual messages. And they start getting them as soon as they're born. Children learn how to think and feel about their bodies and their sexual behavior from things we do and say – from the way we hold them, talk with them, dress them, teach them the words for their body parts, give them feedback on their behavior, and behave in their presence.

But don't worry if you haven't started yet. It's never too late. Just don't try to "catch up" all at once. The most important thing is to be open and available whenever a child wants to talk.

HOW DO I START A CONVERSATION?
Some parents look forward to talking with their children about the wonders of human reproduction and human sexuality. But many find it difficult to talk about important topics like relationships, sex, and sexuality. The good news is that, if we pay attention, we can find many everyday moments in our lives that can prompt conversations about these topics:

- Our favorite TV show may feature a character going through puberty.
- Our neighbor or friend may be pregnant.
- Models in print ads or on billboards may make us think about and question our own bodies and body image.

Some parents call these “teachable moments.” Take time to recognize the teachable moments that give you opportunities to talk about sex and sexuality with your child. Spend a week or so noticing how topics you’d like to discuss come up in your family’s everyday life. Think about
what you might ask your child about them to get conversations going. And think about your own opinions and values about these topics, and how you can express them clearly to your child.

After you’ve thought about what you want to say on a subject, use the next teachable moment that comes up. The first few times you do this, your child may be cautious and ask, “Why do you want to know?” Or they may search for an answer they think will please you. It may take several tries before you can speak comfortably together.

You don’t always need a teachable moment. Sometimes just asking your child a question is a great way to open up a conversation. Here are a few questions you might ask:

- People change a lot during puberty. What have you heard about the changes of puberty? How do you feel about going through puberty?
- At what age do you think a person should start dating? Have any of your friends started dating?
- Do you think girls and boys are treated differently? How?
- How have you changed in the last two years? What do you like and what do you not like about the changes?
- At what age do you think a person is ready to have sex? How should a person decide?
- At what age do you think a person is ready to be a parent?

WHAT IF I’M UNCOMFORTABLE TALKING WITH MY CHILD?
Being open and available about subjects such as sex and sexuality can be challenging. Some common fears that many parents have are:

- **Looking dumb.** Many of us weren’t taught about sex and sexuality, yet we may feel that we should know all of the answers. If your child asks you about something you don’t know, simply say, “I don’t know. Let’s find out together.” Besides, it’s a good thing when you don’t know all of the answers – it shows your child that you’re still learning about this topic too. And what a powerful message that is!
- **Feeling embarrassed.** It’s very common for parents or children to feel embarrassed when talking about sex and sexuality. The best way to handle it is to admit how you’re feeling – simply say, “I might get a little tense or uncomfortable during this conversation, and you might, too. That’s okay for both of us – it’s totally normal.”
- **Telling too much.** Most parents worry that if they tell their children about sex that their children will go out and try sex. The opposite is true. All of the research shows that when parents talk openly and honestly with their children about sex, their children are more likely to postpone sexual activity. When parents don’t talk about it, their children have to find out about it on their own. This leads to early experimentation. Remember, giving information is not giving permission. It may also be helpful to remember that teaching children about sexuality is like teaching children about any other subject. Can you teach a child too much math? No, what they don’t understand will simply go over their heads. It’s the same when you teach them about human sexuality.
- **Feeling as though talking won’t make a difference.** Children look to their parents to teach them about sexuality. In fact, young adolescents place parents at the top of their list of influences when it comes to their sexual attitudes and behaviors.

WHAT SHOULD I TELL MY CHILD – AND WHEN?
Children have different concerns about sexuality at different ages. They also have different abilities to understand concepts – and different attention spans. If your four-year-old asks, “How are babies made?” you might answer, “Babies are made by moms and dads.” If your 10-year-old asks the same question, your answer would have to include more detail, and might begin, “It takes an egg from the mom and a sperm from the dad to make a baby. Let me tell you how they meet.”
Pre-teens and teens often spend a great deal of time wondering if they’re “normal”. Help your child to understand that it is “normal” for everyone to be different. **That may be one the most important things you will ever teach them.**

When deciding how much detail to give, parents can rely on what they already know about their child’s level of understanding. One thing is for certain: If your child has the courage to ask a question – no matter what their age – then you should have the courage to answer it honestly. Children with developmental delays and disabilities also deserve truthful answers in language that they can understand.

Tell your child what you believe in and why. Many studies show that teenagers are affected by their parents’ values – so be sure to share them with your child. When parents share positive feelings about birth control, their teens are more likely to use birth control if they have sex. When parents share negative feelings about teen pregnancy, their teens are less likely to risk an unwanted pregnancy.

Take time to understand your own values, feelings, and beliefs. Find someone who will listen and help you get clear about what you think and feel. Never pretend that your values are facts – for example, “You can’t trust men when it comes to dating,” is not a fact, it is a value. Your child will soon figure out when you’re mixing values with facts, and they will stop listening to your values and stop trusting your information.

You have the right to pass on personal questions – by learning about your privacy standards, your child can then develop standards of their own. It may be helpful to remember that your child may not be really all that interested in your personal life – they may just be trying to figure out how much they can tell you about their own. It’s also possible that your child is simply trying to figure out if they are normal by comparing their experiences to your experiences. One way to answer these kinds of questions is to generalize them. If your child asks, “How many times a week do you and mom have sex?” you can respond by saying, “That’s a personal question that I won’t answer. But if you’re wondering about how often married couples have sex, we can talk about that.”

Respect the importance of your child’s relationships. Friendships and romantic relationships are a big part of a teenager’s life, and judgment and criticism can shut down a conversation. Here’s an example: You may recognize that your teen is experiencing a “puppy love” kind of romance that won’t last long, but your teen may think it’s the real thing. Don’t say, “Oh, don’t worry about it – it’s just “puppy love.” That will end what could have been a really great conversation.

Remember that children learn by observation, so how you express yourself non-verbally is just as important as what you say to them. For example, showing them affection with a warm hug or kiss sends the message that you are open and value the closeness that you share.

Finally, teach your child that there is more to sexuality than just sex. Tell them about affection, trust, respect, responsibility, and intimacy, and practice the behaviors you would like them to adopt. Sure, you can talk with your child about the potential negative aspects of sexuality – like unintended pregnancy or sexually transmitted infections – but don’t forget to also tell them about the thrill of falling in love!
How Well Do You Know…

It's time to find out how much you really know about each other. Children should fill out “How Well Do You Know Your Parent?” on their own. Remember to provide answers for each parent, if appropriate. Parents should fill out “How Well Do You Know Your Child?” on their own.

When you’re all done, get together and take turns going over your answers. Afterward, talk about the activity…

Were there any surprises? Were you right on anything? Everything? What are some of the ways you can learn more about each other?
How Well Do You Know Your Child?

If your child were alone in the house, what music would they choose to listen to?

If they had their choice, what DVD would they choose to watch? You can list a specific title or a category such as romance, humor, horror, drama, suspense, or musical.

With whom would they like to watch the DVD? Alone, family, friend?

Where would they choose to go on a week-long vacation?

What would they most likely choose to do on a day off?

What does your child like most about school?

If your child were given $100, what would they do with it?

What is your child most proud of about her/himself?
How Well Do You Know Your Parent?

If your parent were alone in the house, what music would they choose to listen to?

If they had their choice, what DVD would they choose to watch? You can list a specific title or a category such as romance, humor, horror, drama, suspense, or musical.

With whom would they like to watch the DVD? Alone, family, spouse, partner, friend?

Where would they choose to go on a week-long vacation?

What would they most likely choose to do on a day off?

What does your parent like most about their job?

If your parent were given $100, what would they do with it?

What is your parent most proud of about her/himself?
The Basics

Female Body Parts
Male Body Parts
Stages of Puberty
Am I Normal? What’s Wrong with Me?
Where Did I Come From?
Female Body Parts

A lot of questions about sex and sexuality can be easily answered just by getting to know your body better. And a lot of problems concerning sex and sexuality aren't problems particular to you – they are simply the result of the way we are built.

With that in mind, let's take a look at female body parts. To learn more about male anatomy, read the "Male Body Parts" section of this handbook.

If you're a female, it will help to get out a small mirror. Then make sure you have some real privacy and enough time to get to know your body better. If you're a male, we hope that the diagrams and descriptions that follow will be enough to make things clear for you.

VULVA, NOT VAGINA
The proper name for the sex organs on the outside of a female's body is the vulva. Many people mistakenly call the vulva the vagina, even though the vagina is inside the body.

Starting at the top, under the pubic hair, is a fatty pad of tissue called the mons. The mons helps to protect the pubic bone. The lower part of the mons divides into two folds of skin. These are the outer lips. They are covered with pubic hair after puberty and more or less hide the rest of the vulva. The outer lips may be large or small, short or long, and even two different sizes.

If you pull the outer lips open, you will see the two inner lips. The inner lips are hairless, and they look a little like flower petals or two tiny tongues. The inner lips may be long and thick, or barely visible, and they may look purple, red, pink, blackish, or brown. The two inner lips may not even look the same.

The outer and inner lips are pretty important – not only do they have sensory nerve endings, but they also keep germs away from the two openings found on the vulva – the urethral opening and the vaginal opening.

THE CLITORIS
If you follow the inner lips upward toward the mons, you will see that they come together. Where they meet, a little skin fold called the clitoral hood is created. The clitoral hood connects to the clitoral glans, which is the tip of the clitoris. The clitoral glans is usually about the size of a pea or the eraser on the end of a pencil, though its size can vary considerably from one female to the next. If you pull up the clitoral hood with your fingers, you can get a closer look at the clitoral glans. If you feel it with your fingers, you'll probably feel a tingle or a tickle. If you press down on the skin, you may be able to feel a rubbery cord under the skin. That's the clitoral shaft – the part of the clitoris that connects the clitoral glans to the internal parts of the clitoris.

The clitoris, including both its internal and external parts, is nearly the same size as the penis. It has thousands of nerve endings, and it is one of the most sensitive parts of the female anatomy. It also interacts with nerve endings throughout the whole pelvic area. The clitoris is made of the
same sort of tissue found in the penis. In fact, before we are born, until about our sixth week as an embryo, there is no difference between the sexual organs of females and males.

**HEADING SOUTH**
Let’s continue our tour of the vulva. Moving straight down from the clitoral glans, you may be able to see another hood-like shape. Right below that is a tiny, barely visible little dot or slit, which is the urethral opening – where urine (pee) exits your body. Below that is the next opening – the vaginal opening.

**THE HYMEN**
Just barely inside the vaginal opening, you may see a thin piece of tissue called the hymen. Long ago (and, unfortunately, still sometimes today), people thought that if a hymen didn’t stretch across the entire vaginal opening, it meant the female wasn’t a virgin. What a bunch of nonsense – made worse by the consequences often faced by females who were not considered virgins.

First of all, not all females are even born with an intact or easily identifiable hymen. Hymens come in all different shapes and sizes. Some are just a rim of tissue ringing the vaginal opening. Other hymens stretch all or part way across the opening. A hymen rarely covers the opening completely. All hymens must have holes or openings – otherwise blood could not leave the vagina when there is menstrual flow. A hymen can be stretched or torn during vaginal sex, but they can also be stretched or torn by ballet exercises, tampon use, masturbation, or even a regular gynecological exam. And hymens generally erode over time anyway.

**INSIDE THE VAGINA**
The vagina is a passageway between the vaginal opening and the cervix. In grown females, the vagina is usually about 3 – 4 inches long.

If you’re willing and eager to continue the tour, slide a finger into your vaginal opening. Feel the walls? They normally lay flat against each other, but they are elastic enough to spread apart to accommodate a penis during vaginal sex or a baby as it is being born. Now squeeze your vaginal walls like you were trying to stop the flow of urine. Do you feel a lot of folds of skin and different textures? Do you see how the vagina can hold your fingers? That’s the same way it can hold a tampon or a penis.

**Note:** If you were unable to slide a finger into your vagina, your hymen may be in the way.

Your vagina may be wetter or dryer right now depending upon where you are in your menstrual cycle. Right after you’ve had your period, you’ll generally be dryer. But about two weeks after your period starts, you’ll usually be a bit wetter.

To learn more about the menstrual cycle and periods, read the “Periods” section of this handbook.

The mucus, or "discharge," from your vagina, which you'll sometimes see on your underpants, may vary in texture, scent, and color greatly. Some people are bothered by discharge, but there really is no need to be, and trying to get rid of it by douching or other means is not healthy. Discharge removes bacteria from the
vagina, and it also helps to maintain a healthy acid balance. If you're worried about your discharge, see your healthcare provider. In general, though, unless your discharge is spotted with blood (other than blood from a period), if it makes you itch at all, or if it is greenish in color, then it's probably normal, healthy discharge.

**THE CERVIX**
If you poke your finger deep into your vagina, you may find something that feels like the end of a nose or a dimpled chin. That is your cervix – the lower part of the uterus. A narrow channel through the cervix allows sperm to enter and menstrual flow to exit. Don't worry – the channel is so narrow that you can't "lose" a tampon or anything else in your cervix.

**FINAL STOPS ON THE TOUR**
Take your finger out of your vagina and follow the trail of your vulva a little bit lower. Right under your vaginal opening is a flat length of skin called the perineum. Below the perineum is your anus.

Our tour may have ended here, but this shouldn't be the last time you take a good look at your vulva. Above all else, understand that your genitals are really no different from any other part of your anatomy – parts are parts. They aren't something to be ashamed of or embarrassed about, so treat them with honor and care.

To learn more about your internal reproductive organs, read the “Periods” section of this handbook.
Male Body Parts

A lot of questions about sex and sexuality can be easily answered just by getting to know your body better. And a lot of problems concerning sex and sexuality aren’t problems particular to you – they are simply the result of the way we are built.

With that in mind, let’s take a look at male body parts. To learn more about female anatomy, read the “Female Body Parts” section of this handbook.

If you’re a male, you’ll be able to look between your legs to see a lot of what we’re talking about. Just make sure you have some real privacy and enough time to get to know your body better. If you’re a female, we hope that the diagrams and descriptions that follow will be enough to make things clear for you.

STARTING WITH THE PENIS

The penis seems like a pretty simple body part from the outside, but it’s actually a bit more complicated than many people think.

On the outside, there are at least five major things you can see – the urethral opening, the glans, the corona, the frenum, and the shaft. For those who are uncircumcised, there is also the foreskin.

Let's take it from the top.

At the tip of the penis you will find the urethral opening – where urine (pee) comes out of your body. It’s also where pre-ejaculatory fluid and semen come out. The urethral opening is usually located in the center of the glans – the rounded head of the penis.

The little ridge that runs all of the way around the base of the glans is called the corona, and just below the spot on the underside of the penis where the corona makes a little V shape is a tiny patch of skin called the frenum.

The rest of the penis is the shaft – that’s most of the penis. When the penis is erect (hard), it is common to see veins just under the skin of the shaft. The veins can look kind of bulgy and weird sometimes, but as long as they are not painful in any way, that’s perfectly normal.

The foreskin is a loose tube of skin that grows out from the shaft of the penis just below the glans. The foreskin normally covers the glans when the penis is flaccid (soft). All males are born with a foreskin, but some foreskins are surgically removed in a procedure called circumcision. It was once thought that it was healthier to have a circumcised penis, but we now know that is not true. It is mostly for religious reasons that some boys are still circumcised. Worldwide, most males are not circumcised.

When a penis is erect, it may be difficult to tell if it has been circumcised or not. When it is flaccid, an uncircumcised penis will look a bit like the penis is inside a snug little sleeping bag.
If you do have a foreskin, it should be pretty easy to pull it back away from the glans. If you find this difficult or impossible to do, or if it’s painful when you do it, then see your healthcare provider. You need to be able pull back the foreskin in order to wash the area underneath it.

![uncircumcised penis](image1) ![circumcised penis](image2)

The skin on the penis can sometimes be darker than the skin on the rest of your body – either all of the time or just when the penis is erect. That's totally normal. It's also normal to have the penis change color somewhat when you have an erection. It is common for penises to turn red, brown-red, or even purple. The color should return to normal once the erection goes down.

It’s also common to have some pubic hair growing on the shaft of the penis. And of course, anywhere you have hair follicles and sweat glands, it is possible to get a pimple. If you have a blemish on your penis and it looks like a pimple, that’s probably what it is – especially if it is on the bottom third of your penis, where there is most likely to be some pubic hair. If it doesn't go away in a few days’ time, though, or doesn't seem like a pimple, see your healthcare provider.

**HOW BIG SHOULD MY PENIS BE?**

All right, since you're all dying to know this, here we go – average adult penis size is somewhere between 5¼ – 6¾ inches long when erect. This average is based on several international surveys done by researchers and doctors. Penises that are shorter than average and penises that are longer than average are also perfectly normal, healthy, and desirable penises.

Remember, we said adult penis size. If you’re not an adult, your penis will be smaller.

**INSIDE THE PENIS**

Now that you know your way around the outside of the penis, let's look inside. You may already know that the penis gets erect because it fills with blood, but you may not know where that blood goes. It doesn't just fill up the penis like a balloon! When blood flows into the penis, it fills up three spongy bodies of tissue that run the length of the penis. The two corpus cavernosa run along the top of the penis and the corpus spongiosum surrounds the urethra. All three chambers extend a little way into the body, which is what gives the penis leverage so that it can extend away from the body when it is erect.

Despite what you might have heard, there is no bone inside the penis. Again, it is the penis filling with blood that makes it get hard.

Erections can occur for sexual reasons, but they can also occur for no reason at all. It just happens. It even happens in your sleep, which explains why your penis may be hard when you wake up in the morning. If you ignore an erection, it will go away.

The urethra is the long tube that runs the length of your penis and connects to several organs.
inside your body. Everything that comes out of your penis travels through the urethra — urine, pre-ejaculatory fluid, and semen.

**Urethra troubleshooting:** If it itches or burns when you urinate, or if you see greenish, yellowish, foamy, bloody, or foul-smelling discharge coming out of the urethral opening, see your healthcare provider immediately. These are signs of infections or injuries that need to be treated.

**THE SCROTUM**
The scrotum is the sac that hangs below and behind your penis. It is divided in two by a wall of muscle, and each half contains a testicle and an epididymis. Externally you can see a line, called the raphe, that runs down the center of the underside of the scrotum.

When you are cold (for example, if you jump into a cold swimming pool), your scrotum tightens up so that your testicles are held against your body. When the scrotum relaxes, the testicles hang considerably lower and the scrotum may look longer.

The testicles don't just float around in the scrotum. They are secured at either end by a structure called the spermatic cord.

**THE INSIDE STORY**
Each testicle is about the size and shape of a large olive. They're incredibly sensitive to touch and pressure, as any male who's ever been kicked in the crotch can tell you.

Which raises the question, “Why do the testicles hang away from the body?” After all, there are safer places where they could have been located! There's a simple answer: In order for the testicles to produce sperm, they must be slightly cooler than the rest of the body.

It is typical for one testicle to hang lower than the other, and for one testicle to be slightly larger than the other.

Inside the testicles are tightly coiled thread-like tubes where sperm are produced. Boys do not start producing sperm until they reach puberty. They will then continue to produce sperm until
the day they die. Besides producing sperm, the testicles also produce the hormone testosterone.

After sperm are produced, they move into the epididymis – a small organ that sits atop and behind each testicle. It is also made up of coiled tubes, and that’s where sperm mature for 2-6 weeks. Even after they mature, sperm are still microscopic in size – they cannot be seen with the human eye.

From the epididymis, sperm move into the vas deferens. Actually, there are two vas deferens – one connected to each epididymis. Each vas deferens is 8–24 inches in length. It is in the vas deferens and the epididymis where sperm wait until they are ejaculated. Ejaculation can occur when a guy is having a wet dream, when he is masturbating, or when he is having sex with someone else.

Each testicle produces around 50,000 sperm per minute. With two testicles, that works out to 144,000,000 sperm per day! With so many new sperm always on their way, the old sperm have to go somewhere, don’t they? But if they’re not being ejaculated, there’s nowhere to go. When that happens, the old sperm simply die and get reabsorbed by the body. That’s why it’s impossible – even if you’ve never ejaculated in your whole life – to have "excess" sperm build up in your body.

Where does each vas deferens go from here? It goes up into the body, where it meets up with one of the two seminal vesicles to form one of the two ejaculatory ducts. These ducts are one-inch-long tubes that lie within the prostate and empty into the urethra. Shortly before ejaculation, semen is formed when sperm mix with fluids from the seminal vesicles and prostate in the ejaculatory ducts.

In a typical ejaculation, a male ejaculates 3-5 milliliters of semen containing anywhere from 300-500 million sperm. So many sperm in such a small amount of liquid is almost impossible to imagine! And believe it or not, but sperm make up only about two to five percent of the volume of the semen that is ejaculated. Most of the fluid comes from the seminal vesicles, which produce a sugar-rich fluid (fructose) that provides sperm with a source of energy to help them move. The prostate contributes additional fluid that helps to nourish sperm.

The upper end of the urethra connects to the bladder – the place where urine is stored. As the urethra passes through the prostate, it meets up with the two ejaculatory ducts. From there, the urethra runs the entire length of the penis.

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**Wet Dreams**

A wet dream is an ejaculation that happens during sleep.

Some people believe that a guy is to blame if he has a wet dream. But that’s not fair because they are completely involuntary. Wet dreams are natural and normal, and are part of the body’s way of making room for new sperm.

Even if you know what to expect, a wet dream can be a confusing experience. Some boys think they have “wet” their beds until they see that the milky white fluid is not like urine.

**Wet dreams only happen when you are asleep.** They can occur when you sleep at night or if you nap during the day.

Sometimes, you may awake after a wet dream and remember that you were having a “sexy” dream. But that’s not always the case – you may be dreaming about something else or you may not have been dreaming at all.

Not all guys have wet dreams. They are more common among boys going through puberty, teenagers, and young adults, but they can happen later in life too.

Many boys are embarrassed when they have a wet dream. But wet dreams aren’t anything to be embarrassed about. They’re just another part of growing up.
When a male ejaculates, semen is pumped through the urethra and out the urethral opening. When a male urinates, urine also travels through the urethra and out the urethral opening. But a male can never ejaculate and urinate at the same time. We promise you this. When a male is about to ejaculate, a muscle at the base of the bladder closes off the flow of urine.

**FINAL STOP ON THE TOUR**

All in all, it’s a pretty amazing system, isn’t it? And we haven’t even mentioned the Cowper’s glands yet – they provide the final touch to the process. The Cowper’s glands are pea-sized structures located on the sides of the urethra just below the prostate. These glands produce a clear, slippery fluid called pre-ejaculatory fluid that empties directly into the urethra. This fluid serves to lubricate the urethra and to neutralize any acid (which can damage sperm) that may be present due to residual drops of urine in the urethra.

Our tour may have ended here, but this shouldn’t be the last time you take a good look at your genitals. Above all else, understand that your genitals are really no different from any other part of your anatomy – parts are parts. They aren't something to be ashamed of or embarrassed about, so treat them with honor and care.
Stages of Puberty

We almost hesitate to say anything about the stages of puberty because not everyone follows these stages in the same exact order. To find out if you’re normal, read the “Am I Normal? What’s Wrong with Me?” section of this handbook.

STAGES OF PUBERTY IN GIRLS AND YOUNG WOMEN

Breasts: The first sign that puberty has begun in girls is often initial breast growth – called breast budding. Small nodules or lumps form just under the nipples. These “buds” may or may not occur simultaneously under each nipple. Over the course of puberty, as the breasts grow and develop further, it’s normal for breast buds or breasts to feel tender, or to even hurt a little bit. Breast development continues throughout puberty – this includes changes in the size and shape of the areola, or nipple area. Breasts may not develop at the same rate, but by the time they’re done growing, they’re usually about the same size (though some females do have breasts that are noticeably different in size). By the end of puberty, breasts will be the basic size and shape they’ll have through most of your life, though some changes may occur over time – due to age, hormonal changes, levels of body fat, and pregnancy and childbirth. Wearing a bra will not make a difference in how your breasts age or change over time.

Body hair: About six months after breasts begin to develop, pubic hair and other body hair usually begin to appear. The characteristics of pubic hair change as you go through puberty, but by the end of puberty, your pubic hair will probably be wiry and curly. It usually grows in an upside-down triangle pattern, though it may also grow up toward the belly button or out onto the thighs.

Menarche: The menstrual cycle begins during puberty, usually about two years after breast budding. It will start when you ovulate the first time (which you probably won’t notice) and then show itself when you have your first period. There’s even a word for your very first period – menarche. If a young woman is seriously underweight or malnourished, or if she is dieting or exercising excessively, menarche may be delayed. That’s because a certain amount of body fat is needed in order for menstruation to occur. For more information on menstruation, read the “Periods” section of this handbook.

Changes in the vulva: During puberty, the vulva grows larger and looks more pronounced than it did in childhood. Parts of the vulva often change in color or become darker, and the inner lips may become more obvious.

Body size and shape changes: Through the course of puberty, the body will grow taller and change shape. Generally, by the time a young woman has her first period, her major height spurt will be over.

As body shape and size develops, it’s typical to look a little weird, or to feel like you’re wearing someone else’s skin for a while. For example, you may notice that your extremities – arms and
legs, feet and hands – grow faster than the rest of your body. As your hips are widening and you’re building up body fat, you may also feel like your body has decided to put fat in some really strange places. But by the time you’re through with your teenage years, it’ll all even out.

What causes all of these changes? Hormones. The pituitary gland at the base of the brain produces a hormone that tells the ovaries to produce another hormone, estrogen. Estrogen tells the body to make these changes.

STAGES OF PUBERTY IN BOYS AND YOUNG MEN
For most boys, the first outward sign of puberty comes when their testicles and scrotum begin to develop. Many boys may not notice the change because the testicles are still pretty small at first.

Height and weight growth spurts: What boys (and everyone else around them) will notice is a massive growth spurt. It’s normal for the extremities – arms and legs, feet and hands – to grow faster than other parts of the body, so you might feel a bit gangly while that’s going on. Because puberty usually starts later in boys than in girls, it’s typical for pre-teen males to be shorter than their female friends of the same age. Don’t worry – you’ll catch up. Muscle mass often increases rapidly (even if you don’t notice the changes), and you’ll also gain a lot of weight during puberty.

Penis and testicles: The penis and testicles grow during puberty, and by the time you’re done with puberty, they will be done growing. It’s typical for testicle growth to begin before penis growth. Penis growth usually starts after you get taller, and your penis will probably grow longer before it grows wider.

Males of all ages, even babies, have erections. But you won’t start to ejaculate until after you reach puberty. Some boys ejaculate very early in puberty, while others don’t ejaculate until they reach the end of puberty. Most boys have their first ejaculation when they masturbate or have a wet dream. During puberty, erections can occur frequently, without warning, and for no apparent reason. This can, of course, be a source of great embarrassment for many young males, but it’s completely normal and it happens to all guys. If you ignore an erection, it will go away.

Body and facial hair: Boys may notice pubic hair growth before they notice a growth in their testicles and scrotum. The characteristics of pubic hair change as you go through puberty, but by the end of puberty, your pubic hair will probably be dark, curly, and coarse. It usually grows in an upside-down triangle pattern, though it will probably also grow up toward the belly button or out onto the thighs. Growth of other body hair usually follows – starting with underarm hair. Chest hair and facial hair often develop last or even after the end of puberty. How much body
and facial hair you’ll have and where it will be located depends on genetics. So, while some
grown men will be very hairy all over – including areas like the back and upper arms – others
may have little or no chest or facial hair. The entire range is normal.

**Voice changes:** During puberty, the male voice deepens (well, so does the female voice, but
just not as much). This happens because your vocal chords grow thicker and longer. The
change in your voice may be gradual or you may experience cracking – when your normal
voice suddenly gets high and squeaky.

**What causes all of these changes?** Hormones. The pituitary gland at the base of the brain
produces a hormone that tells the testicles to produce another hormone, testosterone.
Testosterone tells the body to make these changes.

**FOR BOTH FEMALES AND MALES**

**Skin changes:** Pimples first appear during puberty, and they can continue into adulthood. For
more information on pimples, see the “Pimples and Body Odor” section of this handbook.

**Sweat changes:** Hormonal changes also affect how you sweat and the smell of your body odor.
For more information on body odor, see the “Pimples and Body Odor” section of this handbook.

**Emotional changes:** Blame the hormones once again – until your body can adjust to them
properly, you may experience uncontrollable mood swings. You might feel happy and silly one
minute, then sad or annoyed the next. You might cry or feel like crying more often. This is
completely normal during puberty. However, if you find that you are sad or feel bad most of the
time, talk about these feelings with a parent or trusted adult.

And, of course, romantic feelings also begin during puberty – again a result of hormonal
changes.

**Body image issues:** Even if you could tame your hormones, you still might find puberty to be a
stressful time. It can be hard to have your body changing so much and so uncontrollably. And
accepting the final outcome – especially if it falls short of what you were expecting – may not be
easy.

It’s normal and common to have body image issues during puberty. Pimples, body odor, little
breasts, big breasts, being too short, being too tall – all of these things can create body image
issues. And adults and peers may make matters worse by calling attention to your changing or
unchanging body. Imagine the girl who desperately wants to get her first bra, only to have her
parents laugh at the request.

It may be helpful to remember that bodies come in all shapes and sizes, and each of us has a
basic shape that can’t be changed – no matter how much or how little we eat or exercise. And
we certainly don’t have to accept society’s current notion of the “perfect” body.

**Friendship changes:** Lots of changes in friendships take place during puberty, and rejection
by old friends can be very painful. Children tend to choose friends who are going through
puberty at the same time and rate as themselves. This often ends up being harder on boys than
girls because boys generally begin puberty later than girls.

In striving for an individual identity and independence, boys and girls begin to regard
the opinions of their friends with increasing importance during puberty. It’s okay to “fit in” with your
peers, but think for yourself and don’t get carried away by the crowd.

**Sleeping changes:** The need for more sleep is pretty common during puberty. You may find
that you sleep a lot more than you used to, and that’s perfectly normal.

**Appetite changes:** A lot is happening to your body! All of these body changes use up a lot of energy, and for your body to keep going, you’ll probably have more of an appetite. It’s important to talk with your parents about healthy food choices and snacks that you can eat to keep your energy up.

**FINAL THOUGHTS**
Our bodies feel pretty simple during childhood. We don't have to worry about things like body odor, pimples, menstruation, or erections. Sexual feelings and maturation, and the attention from others that comes with those things, can be very uncomfortable. Plenty of people going through puberty have times when they truly hate their bodies, or feel that certain parts — like breasts or pubic hair — are gross or shameful. The ideas that other people have about our bodies can also be hard to deal with sometimes. For example, some parents want to celebrate the advent of “womanhood” when their daughters have their first periods — without even bothering to see if their daughters feel the same way.

For the pre-teens who develop long before their peers do, and for the teens who are the last among their peers to develop, there are often additional stresses. Those who develop early may find themselves the center of a lot of unwanted or inappropriate sexual attention or teasing. Those who develop late may feel like children — and be treated like them.

Puberty — and how our individual bodies go through puberty — is unavoidable. Our bodies are designed to mature into adult bodies, and trying to stop certain aspects of puberty from happening is unhealthy and impossible. Excessive dieting, for example, in an attempt to prevent normal weight gain, will only make you sick — it won’t stop development. And trying to speed up puberty also won’t work — no amount of supplements, synthetic hormones, or weight training will get you through puberty any quicker.

Puberty is temporary — it does end, and you only have to go through it once. Try to remember that the next time you get a pimple just before the big date.
Am I Normal? What’s Wrong with Me?

You may start to hate us (but you may also thank us) for all of the times we tell you that you are normal. Why do we keep bringing this up? Because most pre-teens and teens going through puberty are convinced that there is something wrong with them – that their bodies are not following the rules of puberty. Consider the boy who develops little breasts. This happens to more than half of all boys during puberty – it’s normal and the breasts go away in a year to 18 months. But if nobody told the boy about this, he might think he got the wrong hormones and he was turning into a girl.

And so the question “Am I normal?” becomes almost an obsession with many pre-teens and teens during puberty. Or to word it differently, the question “What’s wrong with me?” becomes almost an obsession. And no wonder. If you’re the first girl in your class to develop breasts, that’s a bad thing. If you’re the last girl in your class to develop breasts, that’s a bad thing. If you’re a boy who gets an erection in front of the class, that’s a bad thing. If you’re a boy whose voice cracks when you’re trying to impress a girl, that’s a bad thing. Getting your period when you’re not prepared – bad. If you’re a boy, and all the girls are taller than you – bad. Uncontrollable mood swings for both girls and boys – bad. The variations are almost endless. Throw in pimples and body odor and you can begin to understand why we keep stressing that you are perfectly normal.

We almost hesitate to say anything about the stages of puberty because not everyone follows these stages in the same exact order. Yes, even if you seem to be following an order all your own, you are – you guessed it – normal. For example, if we say the first sign of puberty for girls is often breast growth, but your first sign was pubic hair or underarm hair, there is nothing wrong with you. For some girls, those three things start at the same time.

Still, if you have any concerns, talk with your parents or healthcare provider. That’s a lot better than suffering in silence.

So, here’s the list of things you need to remember:

- You are normal. There’s nothing wrong with you.
- It is normal for everyone to be different.
- Everyone eventually gets through puberty.
- The anxiety and confusion caused by puberty are not permanent conditions.
- You are not alone in your self-doubts and fears – most other pre-teens and teens going through puberty feel the same way too.
Where Did I Come From?

You probably already know that for someone to get pregnant, sperm has to meet an egg. Such basic information may work well when you are six years old, but it’s a bit too simple when you’re actually capable of becoming pregnant or getting someone pregnant. So, let’s take a new look at reproduction by giving you the information that you really need.

THE BASICS

Human reproduction may revolve mostly around a sperm meeting an egg, but it’s not like those two things are floating around in space. Reproduction also involves body fluids and our reproductive organs. If you don’t know about these things, then we suggest you first read the “Female Body Parts,” “Periods,” and “Male Body Parts” sections of this handbook before proceeding any further.

In a typical ejaculation, a male ejaculates anywhere from 300-500 million sperm. Some will seep out of the female’s body, but most will begin the onward journey in search of an egg – from the vagina, through the cervix and uterus, and into the fallopian tubes. Out of that vast number of sperm, only several hundred will reach an egg in one of the fallopian tubes, and one of those sperm can enter the egg – in a process we call fertilization. All the other sperm die – at which point they may seep out of the vagina or be absorbed by the female’s body.

Now you know why the male body produces so many sperm!

The fertilized egg moves down the fallopian tube and divides into more and more cells, forming a ball of cells. The ball reaches the uterus about 3–6 days after fertilization.

The ball floats in the uterus for another 2–3 days.

Pregnancy begins if the ball of cells attaches itself to the lining of the uterus. This is called implantation, and the process takes about 3–4 days to be completed. The embryo will develop into a fetus from cells on the inside of the ball. The placenta will develop from cells on the outside of the ball. The placenta is the organ that will eventually connect the fetus, via the umbilical cord, to the lining of the uterus. The placenta supplies food and oxygen from the mother, and passes back waste from the fetus.

Up to half of all fertilized eggs never implant. When a fertilized egg doesn’t implant, it passes out of the body during menstruation.

The fetus is affected by the mother’s health during the pregnancy. To have a healthy baby, a female should get medical care, eat nutritious foods, and avoid cigarettes, alcohol, and other drugs during her pregnancy.

HOW DO FEMALES GET PREGNANT?

This is not a trick question... females can get pregnant in a variety of ways.

The most common way for a female to get pregnant is when a male ejaculates during vaginal sex. It is also possible – but less likely – for females to become pregnant through any kind of
sexual activity in which ejaculate comes in contact with the vulva. The sperm can travel through the moisture on the vulva into the vagina.

Another way for a female to get pregnant is through artificial insemination. During artificial insemination, sperm are inserted into a female’s vagina or uterus using a syringe or other device. The sperm may come from a female’s partner or from a donor.

A female may also get pregnant through treatments like in vitro fertilization. To do this, a female’s eggs are taken out of her body and combined with sperm. Then, one or more of the fertilized eggs are implanted back into the uterus.

**GESTATIONAL AGE**
Pregnancy is measured using "gestational age." Gestational age starts on the first day of a female’s last period.

Gestational age can be confusing. Most people think of pregnancy as lasting nine months, and it is true that a female is pregnant for about nine months. But because pregnancy is measured from a female’s last period – about 3-4 weeks before she is actually pregnant – a full-term pregnancy usually totals about 10 months.

**GIRL OR BOY?**
The sex of a baby is determined by the two sex chromosomes inherited from the parents. The mother provides the X chromosome and the father provides either the X chromosome or the Y chromosome. If the embryo gets the X chromosome from the father, the XX pairing will result in a baby girl. If the embryo gets the Y chromosome from the father, the XY pairing will result in a baby boy. About half of the sperm in a typical ejaculation contains the X chromosome – the other half contains the Y chromosome.

There are chromosomal combinations other than XX and XY, but they are rarer.

**TWINS AND MORE**
There are two types of twins. Fraternal twins happen when there are two eggs, each fertilized by a different sperm. Usually, a female’s ovary releases only one ripe egg during ovulation, but once in a while the ovary may release two ripe eggs. Each of these eggs could then be fertilized by a different sperm. If both fertilized eggs implant themselves in the lining of the uterus, the female will be pregnant with fraternal twins. These twins may not look alike. They may not even be the same sex.

Identical twins are the other type of twins. They develop from a single fertilized egg that splits in two shortly after fertilization. Nobody knows why this happens. Because identical twins come from the same egg and sperm, they look alike. They are always the same sex.

Siamese twins are identical twins who are born with their bodies attached to each other in some way. For some unknown reason, the fertilized egg doesn’t split completely, so the babies develop with parts of their bodies joined together. Siamese twins may be joined in a number of ways. If they are joined at the feet, shoulders, or arms, an operation can separate the babies. In other cases, it’s more difficult to separate them – they may be joined in such a way that cutting them apart would kill one or both of them (for example, if the bodies are joined at the chest and they share
one heart). Some parents decide to have the operation done even if one baby must die. Other parents decide against the operation. If they aren’t separated, the twins spend their lives attached.

Okay, there’s actually a third type of twins, semi identical twins, but they are so rare – there are only a few known cases in the world – that we almost didn’t want to mention them. Normally, it’s only possible for one sperm to enter an egg and fertilize it. That’s because the instant a sperm begins to enter, the egg goes through chemical changes – these changes make it practically impossible for another sperm to enter. But in the case of semi identical twins, two sperm manage to enter and fertilize one egg. The egg then splits, and the twins are identical on the mother’s side but share only half the genes on the father’s side.

**Triplets** (three babies), **quadruplets** (four babies), **quintuplets** (five babies), **sextuplets** (six babies), **septuplets** (seven babies), and **octuplets** (eight babies) are pretty rare. Females who give birth to more than two babies have usually had trouble getting pregnant in the past, so their healthcare providers have put them on drugs that stimulate the ovaries. But such drugs often overstimulate the ovaries, and several ripe eggs may be released at the same time.

**FINAL THOUGHTS**

Whether or not to become a parent is probably one of the most important decisions you will ever make. Think seriously before engaging in any sexual activity that might cause a pregnancy.
Sexual Health

As you go through puberty and mature into an adult, it is important to be aware and proactive about your sexual health. Here are some of the things you need to think about. If you have any concerns, talk with your parents or your healthcare provider.

TESTICULAR EXAM (FOR MALES)
Cancer of the testicles is one of the most common cancers in males 15-34 years of age. It accounts for 12% of all cancer deaths in this group.

What Can I Do?
Your best hope for early detection of testicular cancer is a simple three-minute monthly self-examination. The best time is after a warm bath or shower, when the scrotal skin is most relaxed.

Check one testicle at a time. Hold the testicle between the thumbs and fingers of both hands and roll it gently between your fingers. Look and feel for any hard lumps or smooth rounded bumps or any change in the size, shape, or consistency of the testicles. If you find any of these things, see your healthcare provider immediately. You may not have cancer, but only your provider or a specialist can make that determination.

If discovered in the early stages, testicular cancer can be treated quickly and effectively. By checking your testicles on a monthly basis, you will learn what is normal for you and be able to tell when something is different.

PELVIC EXAM (FOR FEMALES)
A pelvic exam is done by a healthcare provider. The purpose of the exam is to check the size, location, and health of the vagina, uterus, fallopian tubes, and ovaries. Included is a Pap smear, which is a check for abnormal growths that could lead to cancer of the cervix. All females should start having regular pelvic exams three years after they become sexually active or when they turn 21, whichever happens first. Other reasons to have a pelvic exam include problems with menstruation or unusual discharge from the vagina.

BREAST EXAM (FOR FEMALES)
Breast exams are used to check a woman’s breasts for changes and lumps.

There are two different types of breast exams: clinical breast exams performed by a healthcare provider – often as part of a routine gynecological exam – and breast exams that you do by yourself. You do not need to worry about either of these exams until you are in your 20s.

HPV VACCINE
HPV stands for human papilloma virus. It can infect the throat, vulva, vagina, cervix, rectum, anus, penis, or scrotum.

Some types of HPV may cause genital warts. Other types may cause cell changes that can lead to cervical and other cancers. Most types seem to have no harmful effect at all.
It is recommended that all girls ages 11-12 get the HPV vaccine. Girls as young as nine and women as old as 26 can also get the vaccine. The vaccine provides protection against the two types of HPV that cause about 70% of cervical cancer and the two types of HPV that cause about 90% of genital warts. Boys and men ages 9-26 can get the vaccine to prevent genital warts.

The HPV vaccine works best in people who have not yet had sex or been exposed to HPV. But even those who have had sex can benefit from the vaccine.
Pimples and Body Odor

PIMPLES
Pimples appear during and after puberty, so it’s important to know why they happen. They begin because of a swelling around the oil glands that are a part of the hair system of your body. Everybody’s skin is covered with little hairs, and every hair has a small oil gland. As you start to grow up, the body hair grows and the oil glands start to produce more oil. The problem with pimples is not that you’re making too much oil, but that the lining of the hair channel tends to plug up and trap the oil that you do make.

The normal bacteria that live on the skin find the oil trapped under the surface of the skin, and the body reacts as it is supposed to when finding bacteria in an unusual spot – it tries to kill that bacteria. Then you see the redness, pus, and everything you don’t want to see.

You’ll find that different parts of your skin will outgrow pimples at different times. When you’re 13, you might have pimples on your nose. By 14, the pimples are on your cheeks, but your nose is clear. At 16 and 17, you may have trouble on the outer parts of your cheeks, and the central part of your face may be oily but clear. Then you may get pimples on your back and shoulders.

When you see a blackhead or pimple, the process is about two months underway. The key is to treat every normal oil gland as if it were going to plug up today – if you treat your skin well today, it is more likely to be clear two months from now!

Eight out of every ten teenagers have at least mild skin problems. A serious case of pimples is called acne.

Here are some tips for keeping pimples under control:

- Keep your hands away from your face. Squeezing blackheads and pimples can make them worse. You can even wind up with permanent scars or pits.
- Hair has lots of bacteria, so keep your hair off your face. Cut, tie or comb it as you please, but don’t let it add to your problems by spreading oil and bacteria. Frequent shampooing will keep oily, greasy hair from adding to the oil on your skin.
- Wash oily areas twice a day with a mild soap. These areas include the face, neck, shoulders, upper back, and upper chest.
- Avoid oily soaps, creams, oily hair preparations, and heavy makeup. If you use makeup, be sure it is water-based.
- Eat a healthy diet and avoid foods that give you pimples.
- Washing may not be enough if you have acne. If that’s the case, special lotions or creams may clear up the problem. Look for the following products:
  
  **Benzoyl peroxide.** Benzoyl peroxide is the main ingredient in many acne treatments. It attacks bacteria that cause pimples and acne. It also helps break up the blockage in the pores. If you use one of these products, test it on a small area of skin to make sure you’re not allergic.
  
  **Salicylic acid.** Salicylic acid is also effective for treating acne. It comes in various products. It clears up pimples and helps prevent their return.

Remember: Any medications for acne may irritate the skin, so carefully follow the directions. Expect to wait six to eight weeks before seeing results.
• Some people have more serious problems that will not go away even if they follow these tips. If you feel you are one of those people, you may need to see a dermatologist. New treatments now available really help clear complexions and prevent scarring.
• Look on the bright side… if you have oily skin now, you’ll have fewer wrinkles later!

BODY ODOR
During puberty, the output from your sweat glands increases, and special sweat glands in your underarms and genital area become active for the first time.

Your body odor also changes during puberty. Sweat, by itself, doesn’t cause an unpleasant odor – in fact, it is nearly odorless. But bacteria that live on human skin break the sweat down, and this causes the odor. Most of what we call body odor comes from the armpits.

Sweating is good for you. It keeps you from getting too hot, and it’s also one way your body gets rid of waste products.

Here are some tips for smelling clean and fresh:

• Bathe or shower regularly. Daily washing rinses away the bacteria that cause odor. It’s especially important to wash your underarms and genital area.
• Wear freshly laundered clothing. The bacteria that cause odor can hang around in your clothes. Keep them clean.
• Wear clothes that “breathe.” If you sweat a lot, try wearing 100 percent cotton undershirts and underwear. Cotton absorbs more than other materials and allows air to circulate – keeping you drier.

If you are still bothered by your body odor or sweat, you may want to use a deodorant and/or antiperspirant. Deodorants cover up your body odor, while antiperspirants keep you drier by cutting down on the amount of sweat your body produces. Be sure to read the directions – different products work best when applied at different times.

Remember: Body smells are natural and normal, and unless you are really bothered by your odor or how much you sweat, it’s not really necessary to use anything. If you see one of these products advertised on television, don’t believe what the company says – they want to make you feel so nervous and embarrassed about body odor that you’ll buy their products.
Periods

Despite what you might think, your period doesn’t just affect you when you’re bleeding. In fact, your period is only one part of a complex cycle that, on different levels, affects you every day. Understanding how your menstrual cycle works is a tool you can use to understand your sexuality and your body for the rest of your life.

The menstrual cycle has held people in awe for thousands of years. Follow us through a tour of how it all works, how to best manage it, and how to use it to empower yourself and stay healthy.

THE THREE PHASES
Females of reproductive age experience cycles of hormonal activity that repeat at about one-month intervals. With every cycle, a female’s body prepares for a potential pregnancy. The term “having your period” or menstruation refers to the periodic shedding of the lining of the uterus.

There are three phases during each menstrual cycle: the follicular phase, the ovulatory phase (ovulation), and the luteal phase.

Follicular Phase
This phase starts on the first day of a female’s period. During the follicular phase of the menstrual cycle, the following events occur:

- Two hormones stimulate the growth of about 15-20 eggs in the ovaries. Each egg is in its own “shell,” called a follicle.
- As the follicular phase progresses, one follicle in one ovary becomes dominant and continues to mature. This dominant follicle suppresses all of the other follicles in the group. As a result, they stop growing and die.
- After the female’s period ends, the lining of the uterus starts to grow thick and rich in nutrients so it can support an embryo if the female becomes pregnant.

How can I tell if I’m in the follicular phase?
If you’re bleeding as usual, then you’re at the beginning of the follicular phase. In addition, when your menstrual flow decreases or stops, you may notice that your vagina is “dry” or that your vaginal secretions (often found on your underpants) are a little thick. It is not abnormal for secretions to be brownish in color during the latter part of this phase – even though your period may have ended, the vagina may still be discarding some old blood.

Ovulatory Phase
The ovulatory phase, or ovulation, starts about 14 days after the follicular phase started. The ovulatory phase is the midpoint of the menstrual cycle, with the next period starting about two weeks later. During this phase, the following events occur:

- The dominant follicle releases its egg from the ovary (a process called ovulation). The egg can only be fertilized in the first 24 hours after it is released from the ovary.
- As the egg is released, it is captured by finger-like projections on the end of the fallopian tubes called fimbriae. The fimbriae sweep the egg into the tube.
How can I tell if I'm in the ovulatory phase?
Most females don't feel a thing when the ovary releases an egg. But there are some females who do experience pain. It's usually felt as a mild cramping pain on one side of the abdomen that usually lasts, at most, a few hours. For some females, though, the pain may last a day or two.

Luteal Phase
The luteal phase begins right after ovulation and involves the following processes:

- Once it releases its egg, the empty follicle develops into a new structure called the corpus luteum.
- The corpus luteum secretes the hormone progesterone. Progesterone continues the process of preparing the uterus for a fertilized egg.
- If a sperm has fertilized the egg, the fertilized egg (embryo) will travel through the fallopian tube and into the uterus – where it may attach itself to the lining of the uterus (a process called implantation). Up to half of all fertilized eggs never implant.
- If the egg is not fertilized or if the embryo does not implant, the lining of the uterus is no longer needed to support a pregnancy and so it breaks down and sheds, and the next period begins. An unfertilized egg dissolves as it passes through the uterus; an embryo that does not implant passes out of the body during menstruation.

How can I tell if I'm in the luteal phase?
Your vaginal secretions will get a little thinner, and have the consistency of an egg white. This provides the best environment for sperm to reach the egg.

To learn more about the process of reproduction, read the “Where Did I Come From?” section of this handbook.

CAN YOU TELL WHEN YOUR PERIOD IS COMING?
There may be signs. There may not be. For some females, the signs that their periods are going to start are tender breasts, feeling tense, and/or swelling of the abdomen or other parts of the body. Sometimes there's a crampy feeling in the back, legs, or abdomen. Some females get pimples a few days before.

EGGS, EGGS, EGGS
You are born with all of the eggs you will ever have. The vast majority of the eggs within the ovaries steadily die, until they are depleted at menopause.

When you were still a fetus, your ovaries contained about 6-7 million eggs. At the time of your birth, there were approximately 1 million eggs left, and by the time you reached puberty, only about 300,000 remained. Of these, 300 to 400 will be ovulated during your reproductive lifetime.

YOUR FIRST PERIOD
There may be some signs that will clue you in as to when your first period will arrive. Your first period, also called menarche, usually begins about two years after your breasts begin to develop. Pubic hair and other body hair may also begin to grow first – perhaps a year and a half before your first period. But don’t count on these signs – every girl is different, and it’s completely normal not to follow the usual stages in order. If you haven’t had your first period yet, just remember
this: One day, you will begin to bleed from your vagina. It will be your period – the first of many you will have in the course of your life. It’s a sign that you’re growing up, and it means that your body is healthy and normal.

About half of all girls get their first periods by the age of 12.

Don’t be surprised if your periods are very irregular at first. You might even go a few months between periods. **Most young teens are not regular at first – it often takes 2-3 years after menarche before you develop a regular pattern.**

To learn more about other changes that will happen during puberty, read the “Stages of Puberty” section of this handbook.

**DURATION**

Periods usually last from three to seven days. The average is five days. The number of days may vary from one month to the next.

**FREQUENCY**

In adult females, the menstrual cycle is usually somewhere between 21 to 35 days. The average is about 28 days, but there are very few females who actually have their periods every 28 days, year in and year out. Changes from month to month are also normal. The frequency of your periods can also be influenced by the following factors:

- **Excessive weight loss or gain.** Although low body weight is a common cause of missed or irregular periods, obesity can also cause menstrual problems.
- **Exercise.** No, we’re not saying that exercise is bad for you – in fact, it’s essential for good health. But if you suddenly start exercising more strenuously or more often, this can disrupt your menstrual cycle. Serious athletes often stop menstruating.
- **Stress**
- **Illness or other medical reasons**
- **Eating disorders, such as anorexia nervosa or bulimia**
- **Travel**

Periods stop temporarily while females are pregnant. They stop for good when females reach menopause – that usually happens when a female is between 45 and 55 years old.

Many females mark the days of their periods on a calendar. That helps them predict when they will have their next period. It also helps them know when they are going to need sanitary pads or tampons. If you decide to use a calendar to mark your periods, you’ll also know if your period is late or early. Changes in your periods may also alert you to other problems – if that’s the case, then your records may prove useful to your healthcare provider.

**LOSING BLOOD**

It may seem like you’re losing a whole lot of blood, but you’re only losing about one-quarter to one-third of a cup of blood during a typical period. This is a small amount of blood. Add in the tissue and other fluids that you’re also losing, and the total flow will be between half a cup and a cup.

Females who have a heavier flow should see their healthcare provider. A simple blood test can tell if a heavy period is causing anemia – feeling tired because of a loss of red blood cells. Usually, a healthy diet can replace lost red blood cells.

Menstrual flow changes in both color and amount at different points in your period.
CRAMPS
Some females have cramps with their periods, but regular exercise may reduce or prevent their occurrence. Getting plenty of rest and drinking lots of water may also help.

You can use a heating pad on your back or abdomen if you do get cramps. There are also many kinds of pain relievers (including ibuprofen) for menstrual cramps – ask your healthcare provider or pharmacist for information. If heating pads and pain relievers don’t help, talk with your healthcare provider again – you do not need to suffer from cramps.

SANITARY PADS AND TAMpons
Most females use either sanitary pads or tampons to absorb menstrual flow – you can buy both in pharmacies or supermarkets. Every package comes with instructions, and it’s probably worth reading them the first time you use a new product. Pads and tampons come in different sizes and varieties – some are for lighter flows and some are for heavier flows. You need to decide which type of pad or tampon is most comfortable for you.

If you are sensitive to chemicals, stay away from scented or deodorant pads and tampons.

Sanitary pads: Pads are usually the best choice at the start of each new period, if you have a heavy flow, and at night when you’re sleeping. Most have a sticky adhesive backing that allows you to attach the pad to your underpants.

Change your pads every three to four hours to prevent odor and stains on your clothes. Don’t flush pads down the toilet – they’ll clog it up. Wrap them in toilet paper and put them in the trash.

Tampons: A tampon fits inside your vagina, and the strong walls of your vagina hold it in place until you remove it. Tampons do not get lost in the vagina and they can’t get past the cervix – so they won’t move to other parts of your body. Each tampon has a string that hangs out of the vagina – slowly pulling the string removes the tampon easily.

Tampons are good for when you’re swimming, if you’re active, if you have a special occasion, or if you just don’t like pads. They are best for lighter flows, since the larger, more absorbent tampons can cause problems. If you have an unbroken hymen, it might be difficult for you to use tampons – speak with your healthcare provider if that’s the case. To insert a tampon, it’s easiest if you sit on the toilet or squat. If you’re using one without an applicator, press your finger into the bottom of the tampon (where the string is), and push the tampon deep into your vagina. If you’re using a tampon with an applicator, press the curved top of the applicator into your vagina, and then push the bottom of the applicator up – until the tampon is
released. If you are at all unsure about how to use a tampon, then seek help from a woman who uses them.

Putting a tampon in your vagina shouldn't be painful, but it may hurt if you are not relaxed. Using tampons with soft, tube-shaped applicators may make it easier. You can also put a little bit of Vaseline on the applicator to help it slide in.

You can flush tampons down the toilet. Throw applicators away in the trash.

It is critically important that you change tampons often. If you don’t change them every 3-4 hours, you may fall victim to toxic shock syndrome, a rare illness caused by a bacterial toxin. Toxic shock syndrome can cause severe medical problems, including shock, kidney failure, heart and lung disease, and even death. That’s why you should never use tampons at night.

IS IT ALL RIGHT IF...
There are a lot of rumors about what you should and should not do during your periods. People want to know if it’s okay to take a bath or shower, go swimming, have cold drinks, etc., etc. The answer to all of these questions is “yes.” If you can do it when you’re not having your period, you can also do it during your period.

SERIOUS PROBLEMS WITH PERIODS
Most females don't have serious problems with periods. But be sure to tell your healthcare provider if you have really bad cramps or if the flow seems very heavy. It’s not unusual for girls and young teens to have irregular periods for the first 2-3 years after menarche, but if you’re still having highly irregular periods after that, see you healthcare provider.

FINAL THOUGHTS
There’s no need to be shy, embarrassed, or ashamed about your periods. After all, they happen to all females! If you’ve got any concerns about your periods or menstrual cycle, ask another female. Start with your mom or another relative – chances are, they’ve either already experienced your problem or they know someone else who has. You may find that some females are very uncomfortable talking about periods – that alone may be worth a discussion, or you may just have to find someone else to talk with.

You may also discover that family members and friends know a whole lot less about periods than you do. That’s okay too – just as long as you tell them everything you know!
Activities for Children and Parents to Do Together

Analogy Game
Interviews
Analogy Game

Take a look at this list:

- Eyeglasses
- Xbox
- ATM (cash machine)
- New car
- Bird
- Bowling ball
- Salad bar
- Soft drink
- Crossword puzzle
- Bicycle
- Cell phone
- Bowl of cherries
- Being stuck in a traffic jam
- Peanut butter and jelly sandwich

You’re probably wondering why all of these different items are on the same list. Well, it’s pretty obvious, isn’t it? They all tell us something about puberty. For example, why is puberty like a new car? Because when you get a new car, it has that new car smell. And when you go through puberty, your body odor changes and you have a new smell too. Right?

Take a few minutes to figure out how these other things may be like puberty. Your answers can be funny, serious, or both.

When you’re all done, ask yourself if you learned anything new about puberty.
Interviews

Take turns asking each other the questions listed below. The questions do not have to be asked in order.

Afterward, talk about the interview process…

Was it easier to ask questions or answer them?
Did you learn anything new?
Did anything surprise you?
How can you use what you learned in the future?

QUESTIONS FOR PARENTS TO ASK THEIR CHILDREN

1. Who is your best friend? Why?

2. What do I do around your friends that embarrasses you or makes you uncomfortable?

3. What is it about me or the things I do that makes you proud in front of your friends?

4. Do you like your name? Why or why not? Is there a name you would have preferred? What is it?

5. What three things do you like best about your looks?

6. Is there anything you don't like about your looks? If so, what?

7. What do you think are the advantages of being a girl? Of being a boy?

8. Do you feel as if you are popular? Does it matter to you?

9. Who are your favorite adults? What do you like about each one?

10. Who do you talk with when you are scared or upset? Why?

11. What, if anything, do you feel is exciting about growing up?

12. What, if anything, do you feel is scary about growing up?

13. Describe a day in your life five years from now, as you hope it will be.

14. Describe three things you would enjoy doing with a group of friends – both boys and girls.

15. Do you think you will want to live by yourself when you're an adult? If not, what kind of family do you imagine having?
QUESTIONS FOR CHILDREN TO ASK THEIR PARENTS

1. Do you think you were popular when you were my age? Did it matter to you?

2. Did you have crushes when you were my age? Tell me about one of them – how you felt and acted.

3. What do you think are some of the good things and bad things about being a female? A male?

4. What three things do you like best about your body and your looks?

5. Is there anything you don’t like about your looks? If so, what?

6. What do you think is the best thing about growing up?

7. What do you think is the hardest part of growing up?

8. When did you get your first period or wet dream? What do you remember about it? How did it feel?


10. Who do you talk with when you are scared or upset? Why?

11. How do you know when somebody likes you?

12. When did you start to feel grown up?

13. Describe a day in your life five years from now, as you hope it will be.

14. What is it about me or the things I do that makes you proud in front of your friends?

15. What wishes or dreams do you have for me?
When Puberty’s Got You Down...

This is an activity for children. You do not have to share it with your parents.

Puberty is a time of change, and many of these changes are amazing, wonderful things. However, there are also changes that may cause nothing but embarrassment. Fill out this sheet now, and the next time you’re embarrassed by something your body has decided to do, reread what you have written here as a reminder that these embarrassments may be temporary, but your good points are forever.

1. Circle the words that describe yourself.
   honest  smart  admired  loving  certain  curious
   wanted  neat  care-free  persistent  patient  fair
   shy  musical  reliable  creative  athletic  graceful
   a leader  funny  artistic  thinker  talented  determined
   a planner  peppy  mannerly  talkative  kind  energetic
   gentle  go-getter  helpful  dependable  important
   courageous  hardworking  fast-worker  loyal  concerned
   careful  adventurous  nice  good listener  considerate

2. List three things you like best about yourself.
   A. ____________________________________________
   B. ____________________________________________
   C. ____________________________________________

3. Name one quality you would like to develop in the future.
   ______________________________________________

4. By filling out this sheet, this is what I learned about myself.
   ______________________________________________
   ______________________________________________
   ______________________________________________
Ever Heard of It?

CRUSH
A crush is when you have special romantic feelings towards another person. You may want to be closer to them and spend time with them. You may feel shy when they are around or want to impress them. You may want to hold hands, kiss, or hug. Sometimes you may want to tell them how you feel, or you may want to keep your feelings private. You might get crushes on boys, girls, people you know, celebrities, or no one at all.

GENDER IDENTITY
This is how you feel on the inside about being female or male. Most people feel the same on the inside (their gender identity) as their body looks on the outside. In other words, most people with vaginas feel like girls; most people with penises feel like boys. Puberty is a common time to think about how you feel about being a girl or a boy and what kind of woman or man you want to be when you grow up.

Sometimes, though, how a person feels about being a girl or a boy on the inside doesn’t match what their body looks like on the outside. During puberty, people whose gender identity feelings don’t match their bodies sometimes feel very confused. It’s important to talk with a parent or trusted adult about these feelings.

MASTURBATION
Masturbation is when a person touches their body, usually their genitals, in ways that feel sexually pleasurable. While people have different beliefs about whether it is okay to masturbate or not, it is important to know that masturbation is perfectly healthy and can be a good way to learn how your body works.

ORGASM
An orgasm is a series of muscle contractions in the genital area that feels very pleasurable. Orgasms can happen during sex or sexual touching with another person, during masturbation, while you are sleeping, and sometimes if you are just having sexy thoughts.

SEX
Sex refers to someone engaging in sexual behavior with another person, or “having sex.” Sex or having sex with another person can include a lot of different ways of touching, holding, kissing, or caressing each other’s bodies and genitals. Vaginal sex is when the penis is inserted into the vagina.

SEXUAL ORIENTATION
Sexual orientation is about your feelings of physical and emotional attraction toward other people based on their sex. Most people are heterosexual or straight, meaning that they are physically and emotionally attracted to members of the other sex (females being attracted to males, males being attracted to females). Some people are gay or lesbian, and are physically and emotionally attracted to members of the same sex (males being attracted to males, females being attracted to females). Some people are bisexual (physically and emotionally attracted to members of either sex), and other people might not be interested in anyone at all.

Sexual orientation is not a choice, and the only difference between heterosexuals, bisexuals, and homosexuals is the gender of the persons to whom they are attracted. During puberty, it’s normal to have questions or be unsure about your sexual orientation.

SEXUALITY
You may know what sex is, but do you know what sexuality is? For starters, it’s a whole lot bigger than just sex. Sexuality has everything to do with who we are, what we believe, what we
feel, and how we respond to others. Here are some of the things that are included when we talk about sexuality:

- Our sexual body parts
- How we feel about the changes that occur during puberty
- How we feel about our bodies (our body image)
- How we feel about being female or male (our gender identity)
- How we behave because we are female or male
- Our sexual orientation (heterosexual, homosexual, or bisexual)
- Romantic and sexual feelings
- Sexual activities – such as holding hands, kissing, vaginal sex, and masturbation
- How the media, family, friends, and others shape our ideas about sex and what it means to be sexual

You may be too young for sex, but you’re not too young to appreciate the effect that sexuality has on our lives.
Glossary of Terms Used in This Handbook

**anorexia nervosa**
An eating disorder characterized by extremely low body weight and an obsessive fear of gaining weight.

**anus**
The opening at the end of the digestive tract where feces leave the body.

**body image**
Body image is how you feel and what you think when you look at yourself. It’s also how you imagine other people to see you.

**breasts**
Two soft, rounded organs on the chest of a woman. The breasts contain mammary glands, which produce milk.

**bulimia**
An eating disorder characterized by binging (eating large amounts of food) and purging (getting rid of the food by vomiting or using laxatives).

**cervix**
The lower part of the uterus that protrudes into the vagina. A narrow channel through the cervix allows sperm to enter and menstrual flow to exit.

**clitoris**
A female genital organ with both internal and external parts. The clitoris has thousands of nerve endings, and it is one of the most sensitive parts of the female anatomy.

**discharge**
Fluids that come out of the urethral opening (for males) and the vagina (for females). Discharge does not include urine, pre-ejaculatory fluid, or semen in males – so any discharge may be a sign of an infection or injury that needs to be treated. Discharge does not include menstrual flow in females. Unless discharge is spotted with blood (other than blood from a period), if it causes itching, or if it is greenish in color, then it’s probably normal, healthy discharge.

**douching**
Rinsing out the vagina with water or other fluids. Douching is unnecessary and unhealthy.

**egg**
The reproductive cell provided by a female.

**ejaculate** (verb)
To pump semen through the urethra and out the urethral opening at the tip of the penis.

**ejaculate** (noun)
The semen that comes out the urethral opening at the tip of the penis.

**ejaculation** (noun)
A process in which semen is pumped through the urethra and out the urethral opening at the tip of the penis. Shortly before ejaculation, semen is formed when sperm mix with fluids from the seminal vesicles and prostate in the ejaculatory ducts.
embryo
Early in a pregnancy, this is the term for the developing cells that resulted from the fertilization of an egg by a sperm. By the end of the tenth week of pregnancy, this organism will be called a fetus.

erectio
When the penis or clitoris fills with blood and becomes larger and more firm.

fallopian tubes
Two tubes, each one connecting one of the ovaries to the uterus. The fallopian tubes are 3-4 inches long, and they are about as thick as a strand of spaghetti. Fertilization of an egg by a sperm typically takes place in one of the fallopian tubes.

fertilization
The joining of an egg and a sperm.

fertilized (adjective)
Refers to an egg that has joined with a sperm.

fetus
Later in a pregnancy, this is the term for the organism growing inside the uterus. Prior to the end of the tenth week of pregnancy, this organism was called an embryo.

foreskin
A loose tube of skin that grows out from the shaft of the penis just below the glans (the rounded head of the penis). The foreskin normally covers the glans when the penis is soft. All males are born with a foreskin, but some foreskins are surgically removed in a procedure called circumcision.

genitals
Body parts associated with sex, but not always associated with reproduction. The genitals generally include the external portions of the clitoris (the clitoral glans and the clitoral shaft), the vaginal opening, the vagina, the penis, and the scrotum.

glans
For males, the glans is the rounded head of the penis. For females, the clitoral glans is the tip of the clitoris. The clitoral glans is usually about the size of a pea or the eraser on the end of a pencil, though its size can vary considerably from one female to the next.

hymen
A thin tissue just inside the vaginal opening. Hymens come in all different shapes and sizes – some are just a rim of tissue ringing the vaginal opening, while others stretch all or part way across the opening. A hymen rarely covers the opening completely. All hymens must have holes or openings – otherwise blood could not leave the vagina when a female is having her period.

labia
Four folds of tissue in the vulva – the two outer labia (labia majora) and the two inner labia (labia minora). The labia keep germs away from the two openings found on the vulva – the urethral opening and the vaginal opening. Labia are also called lips.

lips
Four folds of tissue in the vulva – the two outer lips and the two inner lips. The lips keep germs away from the two openings found on the vulva – the urethral opening and the vaginal opening. Lips are also called labia.
**masturbate** (verb) To touch, stroke, or rub your own genitals or other sensitive body parts for sexual pleasure.

**masturbation** (noun)
Sexual activity in which you touch, stroke, or rub yourself for sexual pleasure. Masturbation usually involves stimulating your genitals, though it may involve other sensitive body parts as well.

**menarche**
The first time that a girl or young woman menstruates (has her period).

**menopause**
The time in a woman's life when her menstrual cycle ends.

**menstrual cycle**
A regularly recurring cycle (beginning at menarche and ending at menopause) in which the lining of the uterus prepares for a potential pregnancy. If pregnancy does not occur, the lining is shed in a process called menstruation. In adult females, the menstrual cycle is usually somewhere between 21 to 35 days. The average is about 28 days.

**menstrual flow**
Uterine lining (tissue, blood, and other fluids) that leaves the body through the vagina when a female is menstruating (having her period).

**menstruation**
The shedding of the uterine lining that occurs as part of the menstrual cycle. Menstruation is also called “having your period.”

**ovaries**
Two small glands (each about the size and shape of an unshelled almond) that are located on either side of the uterus. The ovaries store and release eggs, and they also produce hormones.

**ovulate** (verb)
To release an egg from an ovary. A female usually ovulates at the midpoint in the menstrual cycle (approximately two weeks after the start of a period).

**ovulation** (noun)
The release of an egg from an ovary. Ovulation usually occurs at the midpoint in the menstrual cycle (approximately two weeks after the start of a period).

**penis**
The male reproductive organ that is used to introduce sperm into the vagina. The penis has other purposes too – to provide sexual pleasure and to allow for the elimination of urine.

**period**
The shedding of the uterine lining that occurs as part of the menstrual cycle. Having your period is also called menstruation.

**pre-ejaculatory fluid**
Pre-ejaculatory fluid (or pre-ejaculate) is a clear, slippery liquid that lubricates the male urethra and neutralizes any acid (which can damage sperm) that may be present due to residual drops of urine in the urethra. It is secreted by the Cowper’s glands (two pea-sized structures located on the sides of the urethra) prior to ejaculation.
**puberty**
A stage of development marked by many rapid changes. Along with physical changes, the process of sexual maturation also occurs during puberty. When puberty starts, how long it lasts, and the order in which changes occur can vary greatly from one person to the next.

**rectum**
The last part of the digestive tract before the anus. It is where feces is stored before it leaves the body.

**sanitary pad**
Absorbent material that is placed outside the vagina to catch menstrual flow. Most sanitary pads have a sticky adhesive backing that attaches to underpants.

**scrotum**
The sac that hangs below and behind the penis. It is divided in two by a wall of muscle, and each half contains a testicle and an epididymis.

**semen**
The mixture of sperm and fluids that come out of the penis during ejaculation. Sperm make up only about two to five percent of the volume of the semen that is ejaculated. Most of the fluid comes from the seminal vesicles, which produce a sugar-rich fluid (fructose) that provides sperm with a source of energy to help them move. The prostate contributes additional fluid that helps to nourish sperm.

**shaft**
For males, the shaft is the part of the penis between the glans (the rounded head of the penis) and where the penis is attached to the body. The shaft makes up most of the penis. For females, the clitoral shaft is the part of the clitoris that connects the clitoral glans (the tip of the clitoris) to the internal parts of the clitoris. It is located just under the skin, and it feels like a rubbery cord.

**sperm**
The reproductive cell provided by a male.

**tampon**
A tube-shaped wad of absorbent material (usually cotton) that is inserted into the vagina to absorb menstrual flow.

**testicles**
Two small glands (each about the size and shape of a large olive) contained within the scrotum. The testicles produce sperm and the hormone testosterone.

**uncircumcised** (adjective)
Refers a male who still has his foreskin or a penis that still has its foreskin.

**urethra**
In males, the urethra is the long tube that runs the length of the penis and connects to several internal organs, including the bladder. Everything that comes out of the penis travels through the urethra — urine, pre-ejaculatory fluid, and semen. In females, the urethra is relatively shorter, it only connects to the bladder, and only urine travels through it.

**urethral opening**
The external opening of the urethra. In females, urine leaves the body through the urethral opening. It is located above the vaginal opening on the vulva. In males, urine, pre-ejaculatory fluid, and semen leave the body through the urethral opening. It is located at the tip of the penis.
uterus
The hollow reproductive organ in which a fertilized egg is implanted and a fetus develops. In a
grown female, the uterus is about the size and shape of an upside-down pear, though it gets
considerably larger as a pregnancy progresses.

vagina
The vagina is a passageway between the vaginal opening and the cervix (the lower part of
uterus). The walls of the vagina normally lay flat against each other, but they are elastic enough
to spread apart to accommodate a penis during vaginal sex or a baby as it is being born.
Menstrual flow leaves the body through the vagina.

vaginal sex
Sexual activity in which the penis is inserted into the vagina.

vaginal opening
The external opening of the vagina. It is located below the urethral opening on the vulva.

virgin
A person who has never had vaginal sex.

vulva
The proper name for the sex organs on the outside of a female’s body. Many people mistakenly
call the vulva the vagina, even though the vagina is inside the body. The vulva includes the
clitoral glans, the clitoral shaft, the inner and outer lips, the urethral opening, and the vaginal
opening.

wet dream
Ejaculation that occurs involuntarily while a male is sleeping. A dream with sexual content may
have been occurring at the time of the wet dream, but that is not always the case.
Sources

We are deeply indebted to Planned Parenthood of the Great Northwest for enthusiastically granting us permission to adapt their booklet, *Growing Up: All about Puberty*, to our needs.

**OTHER SOURCES**

- Planned Parenthood Federation of America (www.plannedparenthood.org).
- WebMD (www.webmd.com).