

Student Name: _____

MY PERSONAL SEXUAL HEALTH SAFETY PLAN

Some trusted people I can contact:



Ways I can stay safer:



- 1.
- 2.
- 3.
- 4.
- 5.

Places I can go for medical care
(e.g., contraception, STI treatment):



Other resources I can use to get care
(e.g., websites, apps, emergency numbers):



For more information on other resources: <https://decyde.ca/sexual-health-resources/>