

Healthy Living 9

Draft

July 14, 2014

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Cataloguing-in-Publication Data

Contents

HEALTHY SELF

9.1 Students will be expected to analyze their health needs in times of change and apply strategies that enhance their capacity to manage change in their lives.

Enduring Understandings

By the end of this outcome, students should understand that

- change affects one's mental and physical health
- being resilient helps with change
- life skills that we foster and learn throughout our life time help us to cope and to manage change

Assessment, Teaching, and Learning

Exit Pass (see Appendix 2): Identify one thing you learned today. Identify one question you have.

Students choose a significant change they have experienced or may be facing. Make a list of pros and cons, and then think of ways to minimize the cons.

Students choose a personal situation and write a response that takes the situation through the problem-solving process.

Students write a "Dear Abby" column offering advice for someone going through a specific change.

Create RAFTs with your students and have them choose one to write about. See Appendix 3 for an explanation and example.

Choose one of the major changes discussed in class and do some research. Prepare a presentation for the class that includes: the type of change, strategies that could be used to cope with the change, where you can go to seek help, what things might make the transition easier.

Keep a stress journal for a week. Keep track of each time you feel stressed and look for common themes and patterns. Write down: what caused your stress, how you felt, how you responded, what you did to make yourself feel better.

Students consider their own lives. Choose a time when they demonstrated resilience. Describe the situation and which qualities of resilience they demonstrated. Write a confidential response to be handed in to the teacher.

Choose a coping strategy that you have never tried before and try it for one week. Keep a daily journal of your progress.

Divide the class into small groups and have them brainstorm a list of life experiences that involve change (death, move, loss of childhood or innocence, loss of trust, accident, illness, breakdown of a relationship, promotion, job loss, etc.) As a group, think of some categories (big changes, little changes, good

changes, scary changes, etc.), and collect ideas on the board under the appropriate heading. Make the point that not all change is bad.

Students create a time line of major events they have experienced in their life (e.g., starting a new school, birth of a sibling, move to a new neighbourhood, special birthday, etc.). Consider feelings connected to these events, and which events created the most change and/or were the most difficult to cope with.

Journal Reflection: Students write about a time they went through a significant change. They might consider their feelings surrounding the event, the hardest part of getting through the experience, how long it took, supports that helped them get through, new skills learned, etc.

Students brainstorm ways in which change can impact their lives, including the impact on physical and mental health (poor academic achievement, increased stress, compromised immune system, headaches, sleep problems, fatigue, anxiety, depression, drug use, relationship problems, etc.)

In small groups, students brainstorm a list of supports and strategies that may help someone cope with change (support of family, friends, counsellor, time, new skills learned, being knowledgeable and prepared, positive attitude, strategies for dealing with stress, etc.). Students may role play situations involving change, and demonstrate a strategy for coping with the change.

Diagram your support system. Draw three concentric circles. In the middle circle students write their own name. In the next circle (the one closest to their own name) they write the names of those they consider most significant in their support system (family, friends, teachers, neighbours, coaches, etc.). In the outside circle write the names of those whom they depend on, but perhaps not as much as those in the first circle. Think about how these people encourage or support you.

Discuss/debate: Should one always accept change?

Collect quotes related to change. In small groups, students choose a quote; discuss what it means, then design a poster using the quote. Students present their poster to the class and then display.

Discuss the range of ways in which one might respond to change and some examples for each:

- Accept the change (cannot change it)
- Compromise (could maybe do what is expected at certain times, or in certain situations)
- Make a request not to comply (for good reason, such as moral or religious reasons)
- Fight the change (through proper channels-perhaps the expected change is unfair)
- Refuse to accept the change (and accept the consequences)

Pros/Cons: Many changes have both good and bad aspects. Choose a significant change that a student would have to accept, such as a family move. In pairs, have students make a list of pros and cons, and then think about ways to minimize the cons.

Discuss the problem solving process with the class. Choose a significant change and take it through the process: understand the situation (what is happening, why, when, how, who?), define the problem, brainstorm solutions, choose a solution to try, evaluate, try a different solution if necessary.

Resilience: Ask students what they think the difference is between “raw egg” and “super ball” people. You may want to demonstrate. Superball people bounce back when they hit an obstacle; the harder they hit, the harder they bounce. Raw egg people splat when they hit an obstacle. Tom Cruise is a good example of a superball person. (See Appendix 1 for background information).

Discuss the strengths of those who are resilient (i.e., has insight, shows independence, builds relationships, shows initiative, is creative, has a sense of humour, has a sense of morality, perseveres, has a sense of self-efficacy). Watch the movie *Pursuit of Happyness* (Conrad 2006) and discuss examples where the main character demonstrates some of these qualities.

Brainstorm the names of anyone in history they know who has shown resilience in the face of great challenges (Gloria Estefan, Oprah Winfrey, Dolly Parton, Lance Armstrong, Helen Keller, Annie Sullivan, President Teddy Roosevelt, Thomas Alva Edison and Harriet Tubman, etc.). Have students choose a name from the list and analyze that person’s life in terms of the qualities of resilience. How did this person demonstrate resilience? Students can present their research to their classmates.

Introduce and try some strategies for dealing with stress: journal writing, exercise, yoga, meditation, music, visualization, affirmations, deep breathing

Resources/Notes

Internet

- *Teens Health*, “Stress” (The Nemours Foundation 2013): http://kidshealth.org/teen/your_mind/emotions/stress.html#
Another good article on dealing with stress.
- *Teens Health*, “Stress and Coping Center” (The Nemours Foundation 2013): http://kidshealth.org/teen/centers/stress_center.html#cat20866
Includes lots of teen friendly info. Also includes a link to a online journal that guides a student through setting a specific and manageable goal for “Making a Change.”
- *Write in Private* (Penzu Inc. 2013): www.penzu.com
A free online diary focused on privacy. Easily keep your personal thoughts, memories, and ideas safe and secure. Includes research about the health benefits of journaling.

Print

- *Beyond the Blues: A Workbook to Help Teens Overcome Depression* (Schab 2008a)
Especially Activities 19–24, 29, 31. This resource has been distributed to schools.
- *Healthy Mind, Healthy Body: A Mental Health Curriculum Supplement* (Lauria-Horner 2008)
Lesson plans linked to outcomes. This resource has been distributed to schools
- *The Anxiety Workbook for Teens* (Schab 2008b) (NSSBB #: 25525)
Relaxation strategies: Activities 18, 21, 23, 24, 25, 28, 29, 30, 31). This resource has been distributed to schools.

- *Who Moved My Cheese? For Teens* (Johnson 2002)
A parable about two mice and two “Littlepeople” who search for cheese in a maze, and react to change in distinctly different ways. The message is about the importance of anticipating, accepting and using change to improve one’s life. Search online for related lessons. (Also available as a children’s picture book.)

Videos

- *Bouncing Back* (Kineticvideo c2003) (DVD/VHS, 30 min.) (LRTS #: 23593)
Video reflects teen’s experiences of common pressures. Addresses signs of depression, support during crisis, resilience, positive coping strategies.
- *The Pursuit of Happyness* (Conrad 2006)
Feature-length movie starring Will Smith, based on the life of Chris Gardner who gets down on his luck and ends up homeless for a time, but overcomes the numerous obstacles he faces in his life to become a successful stock broker. Rated PG-13.

Notes

HEALTHY SELF

9.2 Students will be expected to recognize the warning signs of depressive disorders and the importance of seeking help for these disorders.

Enduring Understandings

By the end of this outcome, students should understand that

- there are signs of major depression, dysthymic depression, seasonal affective disorder, and bipolar disorder of which we can be aware
- there are possible effects of delayed treatment
- resources and supports in the community can be of help

Assessment, Teaching, and Learning

Gather information about students' knowledge and opinions about mental illness. Ask them to respond in writing to questions, such as

- What is mental illness?
- What mental illnesses have you heard about?
- How would a person who has a mental illness look or act?
- How would you act toward a new student at school that you discovered had mental illness? How would you feel about him or her?
- What causes someone to be mentally ill?

Exit Pass (see Appendix 2)

- What is the difference between a passing mood and a more serious situation that requires professional help?
- What was the "big idea" of today's lesson?

Social stigma prevents many people who suffer from mental health problems from seeking help. Develop a project that challenges the stigma attached to mental health problems. It could be a song, rap, play, poster, ad campaign, etc. that will be presented to your classmates. Be creative.

Brainstorm common myths about depression/mental illness. Students choose one myth and do some research to provide the truth behind the myth, then make posters that present the myth and the truth.

Students research and develop a poster to display in the school for one of the following topics:

- Healthy ways to relieve stress
- Ways to help a depressed friend
- Warning signs of teen depression
- Warning signs of suicide

- School and community resources and supports for teen mental health

Students choose one of the four depressive disorders and create a brochure that would appeal to youth. The brochure should include a clear message that is important for youth to know, risk factors, warning signs, effects of delayed treatment, two or three resources for support in the community

Revisit the questions asked at the beginning and have students respond in writing:

- If your answers were different today, why do you think they were different?
- Does learning about mental illness make a difference? Why?
- Do you think you would react differently now to someone who has a mental illness compared with your reaction before?

Begin with a pre-assessment of knowledge and attitudes (see assessment suggestions below).

Graffiti Sheet: Provide small groups with a large sheet of paper. Give them a topic (for example, depression) and have them write the topic in the center of the paper. Ask students to talk about the topic and write down all the relevant words or phrases that come up in their discussion.

Think-Pair-Share (see Appendix 4):

- How do people *feel* when they are sad? (lonely, sad, angry, etc.).
- How do people *behave* when they are sad? (want to be alone, cry, do not participate, etc.).
- What kinds of *thoughts* do people have when they are sad? (why did this happen, life is not fair, etc.).

After each prompt, collect responses on the board. Point out that when we are sad, we feel, act and think differently than we normally do, but it generally passes. People who are depressed may need help for these feelings to pass.

Students write the most negative things in their life on a sheet of paper. They are NOT to put their names on the paper. When everyone is finished, students crumple their papers into a ball and throw them at the teacher. After the toss, discuss how their moods changed from thinking about the most negative thing in their life to how much fun it was to throw something at their teacher. Follow this with a discussion of how each of us has a choice about whether we concentrate on the things that are negative or try to focus on things in our life that are positive. We can change how we feel by changing what we focus our attention on. Respond to this activity in journals.

Discuss what it means to be depressed. Brainstorm experiences that might cause a person to feel depressed (death, loss, relationship problems, etc.). List these on the board. Ask: Who has never felt depressed at one time or another? At what point does it become a concern? What is the difference between a passing mood and a more serious situation requiring professional help? Introduce the symptoms of major depression (five or more of these symptoms must persist for two or more weeks, and cause dysfunction in the person's life):

- irritability and/or depressed mood
- loss of interest in usual activities

- low energy and or restlessness
- poor concentration
- sleeping too much or too little
- weight loss or weight gain
- feeling hopeless and helpless
- feeling worthless and guilty
- thoughts of death or suicide

Draw a straight line on the board. Put “feeling sad” at the left and “major depression” on the right. Explain that all of us will experience some degree of depression at some point in our lives. Give an example of a time when you felt depressed (death, major change or loss, relationship break-up, etc.). Put an “X” on the continuum where you felt it would be. Point out that a person experiencing five or more symptoms lasting for two or more weeks would be located closer to the right side of the continuum. The closer you get to the right end, the more important it is to get help.

Divide the class into eight small groups. One group researches the warning signs of major depression and another group researches the resources and supports available for major depression. Do this for each of the four disorders and present findings to the class.

In small groups, brainstorm short term and long term consequences of delaying and/or not receiving treatment (symptoms become more severe, impaired ability to learn, drop out of school, loss of productivity at work, more susceptible to illness, substance abuse, relationships suffer, risk of suicide, impact on society, etc.). Collect responses from the class on the board.

Define stigma (negative stereotypes about groups of people). In small groups, brainstorm common stigmas. Mentally ill people

- are nuts, crazy, wacko, etc.
- are morally bad
- are dangerous
- should be locked up
- are irresponsible
- cannot make decisions for themselves
- must be taken care of
- should just get over it

Discuss the impact these stereotypes have on a person (feelings of shame, poor self-esteem, discrimination in school and employment, sense of isolation, reluctance to seek help, etc.)

Develop (or have students develop) several scenarios that include warning signs of depression and/or suicide. In small groups, students identify the problem, risk factors for the character, warning signs, and ways to respond and support the individual.

Brainstorm ways to help a suicidal friend. Guide the discussion toward these important points:

- Listen to your friend's feelings.
- Be direct about the situation: "Are you considering suicide? Do you have a plan? Will you talk to someone who will help?"
- Get help from the hospital, a family physician, counsellors, clergy, a teacher, an advisor, a psychiatrist, etc. Take them to the person, if possible.
- Call 911 if danger is immediate. (Never swear to secrecy; your friend might get mad at you, but they will be alive!

Create a fact-and-fiction questionnaire to gather information about the level of understanding about mental illness among the students in your school. Compile and publish your results.

Resources/Notes

Internet

- *Canadian Mental Health Association, "Preventing Suicide":*
www.cmha.ca/bins/content_page.asp?cid=3-101-102
- *Centre for Addiction and Mental Health, "Mental Health and Addiction 101.":*
www.camh.net/education/Online_courses_webinars/mha101/index.html
This tutorial provides a good starting point.
- *Centre for Addiction and Mental Health, "Talking About mental illness: Teacher's resource":*
www.camh.net/education/Resources_teachers_schools/TAMI/tami_teachersresource.html
A practical, ready to use awareness program that has been proven to bring about positive change in students' knowledge and attitudes about mental illness.
- *Centre for Suicide Prevention: www.suicideinfo.ca/csp/go.aspx?tabid=77*
Affiliated with the Canadian Mental Health Association, this website includes a wealth of resources.
- *Guide to Understanding Adolescent Major Depressive Disorder (Kutcher 2009):*
www.teenmentalhealth.org/images/resources/Guide_to_MDD_Booklet_Final.pdf
- *Health and Wellness, "Mental Health Services: Depression Strategy" (Province of Nova Scotia 2013):*
<http://gov.ns.ca/health/mhs/depression/teens.asp>
Includes free printable posters and booklets for teens
- *National Institute of Mental Health, "Depression: What Is Depression?":*
www.nimh.nih.gov/health/topics/depression/index.shtml
Teacher's Guide PDF includes lesson plans for student activities in both web-based and PDF print formats. Excellent background info for teachers as well.
- *Teen Mental Health, "Depression": <http://teenmentalhealth.org/for-families-and-teens/depression>*

- *The Science of Mental Illness: NIH Curriculum Supplement Series—Grades 6–8*. (National Institutes of Health 2013): <http://science.education.nih.gov/supplements/nih5/mental/default.htm>

This should be every educator’s first choice for online information about adolescent mental health issues. Includes a short video clip (4 minutes) explaining depression to students. Sponsored in part by the IWK.

- *Youth Beyond Blue*, “Fact Sheet 14: Suicide – knowing when to get help.”: www.youthbeyondblue.com/factsheets-and-info/fact-sheet-14-suicide-know-when-to-get-help
Fact sheet on suicide.

Print

- *Healthy Mind, Healthy Body: A Mental Health Curriculum Supplement* (Lauria-Horner 2008)
Lesson plans linked to the outcomes. This resource has been distributed to schools.
- *My Health: Talking Openly about Health* (Bartlett 2010; NSSBB #: 2000010)
Chapter 10: Emotional Well-Being and Mental Health. This resource has been distributed to schools.

Notes

HEALTHY SELF

9.3 Students will be expected to recognize the impact that substance use and gambling can have on mental health issues, including depression and anxiety.

Enduring Understandings

By the end of this outcome, students should understand that

- substance use has an impact on mental health
- gambling has an impact on mental health

Assessment, Teaching, and Learning

Students choose one reason why a person might begin to take drugs or gamble, and come up with a scenario. Create a visual representation of the relationship between engaging in this activity, and the effect it may have on a person's mental health. It could be an illustrated cycle, a story board, an illustrated time line, a comic strip, etc.

Students might also write a poem or a short story that shows the relationship between substance use or problem gambling and mental health issues.

Example: A student living in a home where the parents constantly fight may begin to drink alcohol to deal with the stress. He is hung over in the mornings and begins to miss school, and before long he realizes he is failing and this makes him feel like a loser. He begins to feel depressed, so he drinks more alcohol to mask his emotions, etc.

Example: A person having financial problems goes out for a drink and plays the slot machine, he wins some money and his wife is pleased. He plays the machines again, but loses. He plays some more and this time loses his whole pay check. In an effort to re-coup his losses, he "borrows" money from their savings. He loses more and more and begins to drink regularly. He is spending less time at home, lying about whereabouts, stealing from work, becoming anxious and depressed, etc.

Brainstorm reasons why someone might begin to take drugs or gamble? (to escape from problems, deal with physical or emotional pain, for excitement, to numb feelings of depression, to calm anxiety, deal with stress, get a 'high,' to boost self-esteem or confidence, help with insomnia, etc.)

Think-Pair-Share (see Appendix 4). Which comes first, substance use and/or problem gambling, or mental health issues?

Lead a discussion about which comes first. Mental health problems may put a person at increased risk for substance use and problem gambling, especially if they engage in these behaviours in order to 'self-medicate.' On the other hand, the effects of some drugs can also cause some mental health problems. In addition, the symptoms of withdrawal may affect a person's mental health, as well as the emotions and loss of control that often accompany addiction.

Diagram the Vicious Circle. Sometimes it is difficult to tell which problem came first. Chronic drug use may contribute to the development of mental health concerns, and mental health concerns may lead to chronic drug use. A combination of life issues, mental illness, and substance abuse can have a devastating effect on a person's life, as each may contribute to the occurrence of the others in a vicious cycle. Create a visual representation of this cycle together as a class.

Resources/Notes

Internet

- “Deal Me In” (YouTube 2009):
Part 1: www.youtube.com/watch?v=ta0AIFaW0Z4
Part 2: www.youtube.com/watch?v=ZNCKo-z6jXI
Part 3: www.youtube.com/watch?v=8erkGft5qoY
Part 4: www.youtube.com/watch?v=ggaXDq1bR_g
Part 5: www.youtube.com/watch?v=xd7ybXK6Pxc
A youth-made documentary about gambling and its potential impacts, created out of the Youth Voices Gambling Project, at the Dalla Lana School of Public Health, University of Toronto and the YMCA Youth Gambling Awareness Program. Total viewing time about 46 minutes.
- *Centre for Addiction and Mental Health*, “Mental Health and Addiction 101.”:
www.camh.net/education/Online_courses_webinars/mha101/index.html
This website provide a good starting point. Also, check out tutorials on Concurrent Disorders and Problem Gambling.
- *Mental Illness and Substance Use Disorders: Key Issues* (Canadian Mental Health Association 2005):
www.cmha.bc.ca/files/7-mi_substance_use.pdf
- *Problem Gambling Institute of Ontario*, “Gambling 101: The Effects of Gambling” (Centre for Addiction and Mental Health 2013):
www.problemgambling.ca/EN/AboutGamblingandProblemGambling/Pages/TheEffectsOfGambling.aspx
- *Problem Gambling Institute of Ontario*, “Helping Professionals: Youth Making Choices: A Curriculum-Based Gambling Prevention Program” (Centre for Addiction and Mental Health 2013):
www.problemgambling.ca/EN/ResourcesForProfessionals/Pages/CurriculumYouthMakingChoices.aspx
Lesson plans and activities developed by clinicians and researchers with the Centre for Addiction and Mental Health.
- *Sheet #4: Substance Use and Mental Health Concerns in Youth* (Centre for Addiction and Mental Health 2002):
www.camh.ca/en/education/Documents/www.camh.net/education/Resources_teachers_schools/Youth%20Scoop/youth_scoop_subuse_menthealth.pdf
Fact sheet.

Print

- *A Question of Influence: A Teacher's Drug Education Resource for Healthy Living* (Roberts and Wynn 2008)
Ready-to-use lesson plans organized by grade level. This resource was distributed to schools, and is also available for download at www.druged.ednet.ns.ca. In addition, teacher orientation tutorials, student handouts and slides are available at this site.
- *My Health: Talking Openly about Healthy Living* (Bartlett 2010; NSSBB #: 2000010)
Unit 3: Substance Use and Addiction. This resource has been distributed to schools.

Notes

HEALTHY SELF

9.4 Students will be expected to assess level of physical activity to determine whether they are active enough to achieve health benefits and identify time in the day to increase physical activity in 5- to 10-minute periods.

Enduring Understandings

By the end of this outcome, students should understand that

- there are health benefits of physical activity
- there are challenges and obstacles to maintaining active living
- it can be helpful to create a plan to maintain or increase their daily physical activity level

Assessment, Teaching, and Learning

People provide a variety of reasons for not being physically active. Students choose one reason and write a compelling counterargument in response.

- I am not overweight, so I do not need to exercise.
- I do not have time.
- I am too self-conscious about my body.
- I am too old.
- I never did like working-out.
- I cannot afford a fitness program.
- It is too embarrassing because I am so out of shape.
- When you are young, your body takes care of itself.

Students develop a plan, in keeping with the Canadian guidelines for youth, to maintain or improve their physical activity level. Remind students that making one small change at a time is usually more effective than making large or many changes at once. Keep a log of progress.

Repeat confidential survey (above) to determine if students' attitudes and practices with regard to physical activity have changed.

Exit Pass (see Appendix 2): What did you learn that you didn't know before? How will you apply this information to making healthy choices in your life?

Conduct a confidential survey to determine students' attitudes and practices with regard to physical activity.

Have students brainstorm ways to be physically active. Encourage them to consider any activity where they are moving (walking, going up and down stairs, housecleaning, etc.) Discuss the difference between vigorous activity, moderate activity, and sedentary activity.

Create a pie graph. Divide the graph into 24 slices, one for each hour of the day. Have students record their activity for a 24 hour period. Students colour the graph in the following manner:

- Green: Vigorous activity (running, hockey, basketball, etc.)
- Blue: Moderate activity (brisk walking, light skating or bike riding)
- Red: Sedentary activity (watching TV, playing video games, sitting at a computer, reading, etc.)
- Yellow: Sleeping
- Orange: At school, in class

Keep a log of physical activity for a week. Record information such as the type of activity, duration, intensity and enjoyment level. For a sample Physical Activity Log, see the link below.

In small groups, brainstorm the physical, mental and social benefits of being physically active. Refer to the links below and fill in the gaps if students miss important benefits.

Review *Canada's Physical Activity Guidelines for Youth – 12–17 Years* (CSEP n.d.) (see link below). Have students compare their activity level from their log, to the recommendations in the guide (60 minutes per day, 7 days a week). Are they measuring up?

In small groups, brainstorm obstacles or excuses people may offer as reasons for not being more physically active. Discuss as a large group. Suggest practical solutions to overcome these obstacles.

Brainstorm ideas that might encourage young people to become more physically active.

Have students login to one of the online self-assessment links below and complete an assessment and/or create a fitness plan.

Resources/Notes

Internet

- “Physical Activity” (Public Health Agency of Canada 2011): www.phac-aspc.gc.ca/hp-ps/hl-mvs/pa-ap/index-eng.php
Tip sheets are available for various age groups.
- Canada's Physical Activity Guidelines for Youth - 12–17 Years. (Canadian Society for Exercise Physiology n.d.): www.csep.ca/CMFiles/Guidelines/CSEP-InfoSheets-youth-ENG.pdf
- *Canadian Society for Exercise Physiology*: www.csep.ca/english/view.asp?x=804
Many useful fact sheets about the benefits of exercise, background information, and guidelines for physical activity for various age groups.
- ParticipAction: www.participaction.com/en-us/Home.aspx

Video

- *Fitness for Every Lifestyle* (DVD/VHS, 29 min.) (Dallas County Community College District c2003)
Explains the importance of fitness to one's quality of life and ability to cope with the demands of everyday living. Demonstrates new techniques for encouraging the development of physical fitness early in life and explores the components of fitness and a fitness program.

Notes

HEALTHY SELF

9.5 Students will be expected to create a plan that enhances their healthy eating practices, and reflect on supportive environments and challenges to achieve these healthy eating practices.

Enduring Understandings

By the end of this outcome, students should understand that

- healthy eating practices include behaviours such as knowing what to eat, when to eat, and how much to eat
- the social environment presents challenges to healthy eating on individual, relational, and communal levels

Assessment, Teaching, and Learning

Students choose one of the food groups and create a poster with a healthy eating message to be displayed around the school (e.g., Get back to your roots ... eat your veggies.).

Is it possible to make healthy choices at fast food restaurants? Students choose one fast food restaurant and explore the nutritional information available. Present findings to the class. Include the most healthy and least healthy items available.

Exit Pass (see Appendix 2): What did you learn that you didn't know before? How will you apply this information to making healthy choices in your life?

Ask students what they know about healthy eating. Discuss Canada's Food Guide and the recommendations for teens. Students create their own personalized food guide at the link below.

Students critique a school lunch menu for one week. Assess how well it meets Canada's guidelines and make recommendations for improvements.

Brainstorm some of the obstacles and challenges to healthy eating that people face. Discuss responses and solutions to these obstacles.

Discuss the meaning of food labels and the information found there. Students choose their favourite packaged snack food and present the information in a pie graph to share with the class.

Create a healthy eating survey based on Canada's Food Guide. Poll students at school and graph the results.

Read snippets from Michael Pollan and Maira Kalman's *Food Rules: An Eater's Manual* (2009). Interrogate his ideas on, What should I eat? What kind of food should I eat? and How should I eat?

Have students critically examine marketing strategies of the food and beverage industry.

Resources/Notes

Internet

- Dietitians of Canada: www.dietitians.ca
Many useful links under the “Your Health” tab.
- *Health Canada*, “Food and Nutrition: Canada’s Food Guide”: www.hc-sc.gc.ca/fn-an/food-guide-aliment/index-eng.php
Click on “Create My Food Guide” to create a personalized version.
- *Health Canada*, “Food and Nutrition: Educators and Communicators”: www.hc-sc.gc.ca/fn-an/food-guide-aliment/educ-comm/index-eng.php
Health Canada Food and Nutrition Information for Educators including handouts, power point presentations, and interactive quizzes that cover information on the food guide, how to read food labels, servings, physical activity and more.

Print

- *Food Rules: An Eater’s Manual* (Kalman and Pollan 2009)
- *My Health: Talking Openly about Healthy Living* (Bartlett 2010) (NSSBB #: 2000010)
Unit 1: Nutrition for Everyday Performance. This resource has been distributed to schools.

Videos

- *Teen Nutrition* (DVD, 26 min.) (Visual Education Centre 2007; LRTS #: 23752)
A video that includes two students preparing for a debate, an interview with a nutritionist, and strategies for healthy eating.
- *Eating Well with Canada’s Food Guide* (DVD, 22 min.) (Mythic Productions c2007; LRTS #: 23914)
A Canadian production that gives teens information about what each of the arcs in the rainbow represent, information on healthy eating habits, and food labelling.
- *The Weight of the World: Facing Obesity* (DVD, 51 min.) (National Film Board, 2004; LRTS #: 23810)
A riveting documentary that makes it clear that obesity is not an individual problem, but one that requires changes in public policies and attitudes.
- *Say Know to Diets* (DVD, 20 min.) (Human Relations Media c2007; LRTS #: 23906)
This video will help teens recognize the difference between fad diets and a healthy lifestyle. Viewers will learn about the health risks of being overweight, but they will also learn to reject the unreasonable—and often unhealthy—body types that are commonly presented in the media.

Notes

HEALTHY SELF

9.6 Students will be expected to identify ways of maintaining sexual health.

Enduring Understandings

By the end of this outcome, students should understand that

- it is important to be knowledgeable about the care required to maintain reproductive health
- there are ways to avoid STIs/HIV
- it is important to identify sources of accurate, age-appropriate sexual health information

Assessment, Teaching, and Learning

Develop a pre-test about sexual health and STIs to determine students' prior knowledge and to inform your instruction. Give a post-test at the end of the unit.

Students create a brochure or poster to share information gathered during research.

Write a "Dear Abby" letter giving advice to someone who thinks they might have an STI.

Completion of reflective journal assignment.

Agree or disagree with the following statement, providing support and evidence for your position. "It is okay for teenagers to engage in sexual intercourse, as long as they are careful."

Students make a personal plan for sexual health. This may include values and beliefs that are important to them, what they value in a relationship, plans to prevent STIs or unwanted pregnancies, where they can go for information, who they can turn to for support, what services they can access if necessary, etc.

Discuss ground rules for respectful conversation (no question is a dumb question, no put-downs, be respectful of others, use proper terms, maintain confidentiality, etc.). Acknowledge that some people may find this topic difficult or embarrassing to discuss. Ask students to identify how we sometimes behave when we are embarrassed (giggle, blush, act silly, shy, etc.).

Create a bingo card of sexual health information. Students move about the room and have classmates sign the square if they know the answer. A person can only sign once. First person to fill the whole card wins. This may be a good icebreaker, and may also give the teacher a sense of the students' prior knowledge. (See *Beyond the Basics: A Sourcebook on Sexual and Reproductive Health Education* [The Canadian Federation for Sexual Health 2005], page 395, for an example.)

ABC: Students write as many words as they can think of related to sex, at least one for each letter of the alphabet. This is a good way to activate prior knowledge about the topic.

Telephone Game: Sit in a circle and whisper any short phrase (the sky is blue) to the person next to you. Continue until the phrase has gone all the way around the circle. The last person says the phrase out loud. Compare the original phrase to the final phrase. Play again, but use a phrase related to sexual

health or safer sex practices (i.e., always use condoms). Discuss in what ways this game reflects real life, where students get information about safer sex, how information can get distorted, how to distinguish between accurate information and rumours, how important it is to be critical of hearsay and rumours when it comes to health information, etc.

Brainstorm sources of information where young people might learn about sexual health (Internet, TV, friends, older siblings, etc.). Discuss which might be good sources of accurate information and why.

In small groups, brainstorm reasons for and against teenagers engaging in sexual intercourse. Discuss as a whole group.

Students work in small groups to respond to the following questions:

- What are the names of some STIs?
- How are STIs transmitted?
- How does a person know if they have an STI?
- Can all STIs be treated? Where can you go for help?
- How can you protect yourself?

Reconvene with the whole group to share and discuss responses. (*Beyond the Basics: A Sourcebook on Sexual and Reproductive Health Education* [The Canadian Federation for Sexual Health 2005], page 349)

Question/Answer Match: Develop a list of common questions and answers about sexual health (or use the ones in *Beyond the Basics: A Sourcebook on Sexual and Reproductive Health Education* [The Canadian Federation for Sexual Health 2005], page 129.). If you have 30 students you will need 15 questions and 15 answers on separate cards. Shuffle the cards and give one to each student. Their job is to find the person with the best match to their own card. Once everyone finds a match they read their question and answer aloud. If it is an accurate match they sit down and the group may add information or ask questions. If the accuracy of the match is questioned, this pair will wait until the end. All questionable matches are re-read and the group attempts to pair them correctly.

Ask *all* students to anonymously write down at least one question and place it in the question box on their way out of class. Spend a class answering questions from the box, or answer a few each day.

Create a journal assignment where students compose a series of written responses on a variety of topics related to sexual health. One response per page, half a page minimum. If responses are personal, teacher may agree not to read them. Assessed for completeness.

In small groups, students research one of the following STIs: Chlamydia, gonorrhoea, human papilloma virus (HPV), herpes, syphilis, HIV, hepatitis (B and C), and vaginal infections (yeast, vaginitis, and trichomonas). Groups research information to answer the following questions and prepare a report to present to class.

- What are the symptoms of this STI?
- How is this STI transmitted from person to person?
- What are some of the effects of this STI?

- How can this STI be treated?
- How can this STI be prevented?

(For more information, see *Beyond the Basics: A Sourcebook on Sexual and Reproductive Health Education* [The Canadian Federation for Sexual Health 2005], page 358.)

Invite a pharmacist to speak to students about over the counter contraceptives. Have students brainstorm questions in advance. Use a Q-Chart to help generate questions (see Appendix 5).

Field Assignment: Students either visit or call a clinic, or go on a condom hunt at a local pharmacy. (See *Beyond the Basics: A Sourcebook on Sexual and Reproductive Health Education* [The Canadian Federation for Sexual Health 2005], page 321, for a lesson plan and assignment handouts).

If society decided to issue a sex license before a person was allowed to have sex, how would people qualify for one? What would people need to know? What skills need to be developed? (STI prevention, contraception, pregnancy prevention, communication skills, negotiation skills, etc.)

Resources/Notes

Internet

- *Teaching Sexual Health Education: A Primer for New Teachers, A Fresher for Experienced Teachers* (McCall n.d.): <http://sexualityandu.ca/uploads/files/TeachingSexEdManual.pdf>
An excellent resource that includes background information and research, best practice strategies, teaching tools and lesson plans.
- teachingsexualhealth.ca (Alberta Health Services 2013): www.teachingsexualhealth.ca
The teachers section includes ready to use lesson plans for each grade level, searchable by topic, as well as handouts, PowerPoints, demonstration videos, etc.
- Sexuality and U (The Society of Obstetricians and Gynaecologists of Canada [SOGC] 2012): www.sexualityandu.ca
Canadian site provides accurate and up-to-date information and education on sexual health. The teachers section offers many free resources.
- teachingsexualhealth.ca, “Teacher Portal: STI Fact Sheets.” (Alberta Health Services 2013): <http://teachers.teachingsexualhealth.ca/resources/print-resources/sti-fact-sheets>
Two-page PDF documents for common STIs, from the Calgary Health Department.
- *Positively Informed: Lesson Plans and Guidance for Sexuality Educators and Advocates* (Irvin 2004): www.iwhc.org/index.php?option=content&task=view&id=2594
Available to download in PDF.
- *Canadian Federation for Sexual Health*, “Your Sexual Health”: www.cfsh.ca/Your_Sexual_Health
Links to lots of information including STIs and HIV.
- *World Vision Canada*, “Get Involved: Advocacy in Action”: www.worldvision.ca/Education-and-Justice/Teacher-Resources/Pages/HIV-and-AIDS.aspx
A variety of free resources to teach about the global HIV/AIDS pandemic.

- *PhotoSensitive*, “Picture Change: Field of Vision”: www.photosensitive.com/drupal/projects/aids:-picture-change
AIDS photo essay to accompany the resource at the above link is found here.
- *Teen Health Source* (Planned Parenthood 2013): teenhealthsource.com
An award-winning website for teens from Planned Parenthood.

Print

- *My Health: Talking Openly about Healthy Living* (Bartlett 2010; NSSBB #: 2000010)
Unit 2: Human Reproduction, Sexuality, and Intimacy. A nicely laid out and informative text book. This resource has been distributed to schools.
- *Beyond the Basics: A Sourcebook on Sexual and Reproductive Health Education* (The Canadian Federation for Sexual Health 2005; NSSBB #: 18447)
This excellent resource includes a wealth of ready to use lesson plans . This resource has been distributed to schools.
- *It’s Perfectly Normal: Changing Bodies, Growing Up, Sex, and Sexual Health* (Harris 2009; NSSBB #: 25453)
An excellent, teen-friendly book about puberty and sexual health. This resource has been distributed to schools.

Notes

HEALTHY SELF

9.7 Students will be expected to synthesize the fundamentals of drug education related to the use of alcohol, tobacco, caffeine, cannabis, and other substances, including the short- and long-term risks and signs of concern along the continuum of use.

Enduring Understandings

By the end of this outcome, students should understand that

- there are reasons some why people use drugs
- drug use occurs in various degrees along a continuum
- there are short- and long-term risks of drug use along that continuum
- prescription drug misuse can be life threatening
- there are signs and symptoms of harmful drug use

Assessment, Teaching, and Learning

K-W-L: Choose a topic (alcohol, for example) and create a three-column organizer with the headings Know, Want to Know, Learned. At the beginning of a unit of study, students complete the first two columns on their own. This helps to activate prior knowledge, and should inform instruction. Have a whole class discussion about these first two columns. Students complete the final column as they learn new information.

In groups, students decide on “the most dangerous” drug available in Canada (legal or illegal). Students should consider things such as dependence, long and short term damage to health, loss of control, poor judgement, cost to society, spread of infection, etc. Each group will present their decision to the class, supported by strong arguments, facts, and statistics.

Students prepare a suitable presentation that would appeal to a Grade 7 class. Presentations could

- identify facts and myths related to the use and abuse of alcohol, tobacco and/or other drugs
- identify the school and community resources involved in the education, prevention and treatment of the use alcohol, tobacco and other drugs.
- Illustrate how alcohol impairs one’s ability to function
- provide tips for resisting peer pressure related to drug use
- state reasons why it is not safe to accept a ride with someone who has been drinking or doing drugs

Students develop a public relations campaign against drug use. Refer them to the print and video ads at <http://abovetheinfluence.com> for examples. They could develop posters, announcements or short videos to be shared with the student body. Students set a time frame that the campaign will run and a goal for its outcome.

Have students brainstorm a list of factors that may cause someone to try drugs and then discuss how that could lead to dependence. Factors may include: experimentation, low self-esteem, family disruption, poor family relationships, strict family rules, exposure to media, poor social skills, poor academic performance, peer pressure, etc. Afterwards, students read and discuss “Sue’s Story” from the Centre for Addiction and Mental Health website (link below).

Discuss the continuum of use: No-use, Experimental Use, Occasional Use, Regular Use, and Dependence, and then play The Continuum Game from the Centre for Addiction and Mental Health website (link below).

Have students do Activity 8.2: The Game Show—Knowing the Risks of Alcohol and Other Drugs from *A Question of Influence: A Teacher’s Drug Education Resource* (Roberts and Wynn 2008). This is a lesson about knowing the risks of drug use.

Have students do Activity 9.2: Are You In Over Your Head?—Encouraging a Friend to Seek Help from *A Question of Influence: A Teacher’s Drug Education Resource* (Roberts and Wynn 2008) and any of the other lessons in this unit. Activity 9.2 helps students consider the degrees of substance use, and to recognize signs that indicate it might be becoming a problem.

Jigsaw: Divide students into groups to work together to investigate one of the following drugs: alcohol, tobacco, cannabis, caffeine, opiates/solvents, crack/cocaine, and steroids. Working together, each student completes their own worksheet with the following headings: drug description, short-term effects, long-term effects and legal status in Canada. Reorganize students so there is one “expert” for each drug in the new groups. Each “expert” takes a turn to present their research findings. Create a graphic organizer for other members of the group to take notes about 3 important health risks for each drug (see example in Appendix 6).

Create a Drug-free Declaration and invite students to sign it (see Appendix 7 for an example).

Marijuana is the most commonly used illegal drug in the world. Divide the class into groups, provide some research time, and debate whether or not marijuana should be legalized.

Resources/Notes

Internet

- *Centre for Addiction and Mental Health (CAMH), “Educating Students about Drug Use and Mental Health - Grade 10: Expectation 1 Teaching Learning Strategy 2”:*
www.camh.net/education/Resources_teachers_schools/Drug_Curriculum/Secondary/curriculum_gr10expect1tls2.html
Sue’s Story: A fictional story written by a grade 10 student about the deadly consequences of a high school student’s occasional alcohol use.

- *Centre for Addiction and Mental Health (CAMH), “Educating Students About Drug Use and Mental Health - Grade 10: Expectation 1 Teaching Learning Strategy 1”*:
www.camh.net/education/Resources_teachers_schools/Drug_Curriculum/Secondary/curriculum_grade10expect1tls1.html
The Continuum Game: Directions for the game, from the Canadian Association for Mental Health.
- *abovetheinfluence.com, “Drug Facts” (National Youth Anti-Drug Media Campaign 2013)*:
www.abovetheinfluence.com/facts/drugfacts
An excellent site with lots of information, including cool ads, art work and videos.
- *Foundation for a Drug-Free World, “What You Need to Know”*: www.drugfreeworld.org/home.html
This excellent website includes a complete educator’s program with lesson plans that is available to order for free or download. Also, many short videos, PSAs, posters, etc., are available on the website.
- *The National Anti-Drug Strategy, “drugs not 4 me” (Government of Canada 2013)*:
www.nationalantidrugstrategy.gc.ca/prevention/youth-jeunes/index.html
National Anti-Drug Strategy website includes facts, games, quizzes, resources, personal stories, etc. Be sure to check out the TV ads.
- *Teens Health, “Drugs & Alcohol” (The Nemours Foundation 2013)*:
http://kidshealth.org/teen/drug_alcohol
Excellent information for teens.

Print

- *My Health: Talking Openly about Healthy Living (Bartlett 2010; NSSBB #: 2000010)*
Unit 3: Substance Use and Addiction. A nicely laid out and informative resource, which was distributed to schools.
- *A Question of Influence: A Teacher’s Drug Education Resource (Roberts and Wynn 2008)*
Ready-to-use lesson plans organized by grade level. This resource was distributed to schools, and is also available for download at www.druged.ednet.ns.ca. In addition, teacher orientation tutorials, student handouts and slides are available at this site.

Videos

- *Alcohol: Teenage Drinking: Drug Education for Teens (DVD/VHS, 23 min.) (Wynnewood, PA : Schlessinger Media, c2004; LRTS #: 23582)*
This video shows how alcohol affects the brain and body, and explains how drinking impairs motor skills and judgment. Teens are encouraged to examine the risks of drinking, and several tragic personal stories are presented with teen interviews and explanations from experts.
- *Marijuana: Drug Education for Teens (DVD/VHS, 23 min.) (Wynnewood, PA : Schlessinger Media, c2004; LRTS #: 23581)*
Marijuana is one of the most widely used illegal drugs today. The program explores the physical consequences of abuse as well as the controversy surrounding medicinal use.

- *Deadly Highs* (Marlin Motion Pictures, c2005; LRTS #: 23612)
Addiction to drugs and alcohol has been made easily accessible to teens. Internet sales, prescription and over the counter medication have led teens to addiction.

Notes

HEALTHY SELF

9.8 Students will be expected to develop a plan to acquire the skills and credentials that will lead to their career goals.

Enduring Understandings

By the end of this outcome, students should understand that

- identifying their strengths and interests can assist with future employment and career goals
- it is helpful to identify many possible occupations/careers of interest to them
- there are skills, credentials, training, and educational paths required for various career paths

Assessment, Teaching, and Learning

Students complete reflective journal responses about their personal self-assessments, etc.

Students present information about an area of occupational interest to their classmates.

Students complete a polished personal resumé.

Students create a personal plan to achieve an occupational goal of interest. The plan should include required high school course selections, admission requirements for a training or educational program located in Nova Scotia or the Maritimes, tuition costs, length of the program, available funding opportunities, housing options, work or volunteer opportunities that would be helpful.

Develop a student self-assessment of participation (respectful listening, positive contributions to discussion, stayed on task, encouraged others, completed work to best of ability, etc.)

Have students look for life/work profiles of people in the newspaper or in magazines. Create a bulletin board to display these and share them with the class.

ABC Brainstorm: Students identify the kinds of skills and qualities that may contribute to success in the world of work, one for each letter of the alphabet. Discuss how one might learn or develop these skills. Make the point that many of the skills necessary for success at school are transferable to the workplace. Discuss.

Students write journal responses (teacher may want to provide prompts) about their self-assessments (above), the importance of thinking about and planning for the future, etc.

Distribute a list of traits desired by employers (link to a sample below). Have students rate themselves. Discuss which traits they already have that are transferrable to the work world.

Debate: Being happy with your work is more important than earning a large salary.

Students develop a personal resumé that includes contact information, education, relevant experiences, training, skills, certificates and awards, interests, community involvement, references, etc.

Based on what was learned from the self-assessments, students identify three areas of occupational interest, and then choose one to research. Include job description, salary, educational requirements, working hours and conditions, employment opportunities.

Jigsaw Puzzle Activity: Divide students into two groups. Ask one group to complete the puzzle but do not show them the front cover. Then have the other group complete the same puzzle, but this time with the cover in front of them. Discuss which group found the task easier. Point out that when you have an “End in Mind,” the goal becomes easier to attain.

Resources/Notes

Internet

- *HumanMetrics*: Jung Typology Test: www.humanmetrics.com/cgi-win/JTypes2.asp
After a short online test, a description of personality type is provided, as well as a link to occupations suited to the personality type.
- *Ioscar.org*: www.ioscar.org/tx/oscar.asp
Includes several online interest surveys that match interests and skills to occupations.
- *Service Canada*, “Training and Careers: Training, Career and Worker Information”:
www.jobsetc.gc.ca/eng
Links from the Government of Canada. There are a variety of quizzes at the Career Navigator link.
- *careers.novascotia.ca*: www.careers.novascotia.ca
A wealth of employment information, including CORI, an interactive career search tool.
- *Maricopa Community Colleges*, “Career Quiz”: www.maricopa.edu/chancellor/pdfs/Quiz.pdf
Based on Holland Codes, this is a brief one-page survey.
- *Virginia Career VIEW*, “Grades 6–8”: www.vaview.org/68
Many activities to help students explore skills, interests, occupations. Includes printable self-assessments and interactive tools.

Notes

HEALTHY SELF

9.9 Students will be expected to select items for and maintain a LifeWork portfolio.

Enduring Understandings

By the end of this outcome, students should understand that

- there are many benefits of and uses of a portfolio
- there are positive reasons to begin the creation of a lifework portfolio

Assessment, Teaching, and Learning

Self-reflection about the process and the product.

Peer assessment of the product.

Students develop a plan to share their portfolio with a family member. Students write a reflection about this process. Family members might also comment on the portfolio and offer feedback.

Assessment of the portfolio should only be based on whether the work has been completed to the best of the student's ability.

Think-Pair-Share: What is the purpose of developing a portfolio? What are the benefits of developing a portfolio? How could the portfolio be used?

Brainstorm items that could be included in a portfolio (table of contents, goals, self-assessments, personality indicators, report cards, attendance record, work samples, photos, awards, certificates, resumé, letter of recommendation, etc.). Group items into categories and create headings (education, employability skills, transferrable skills, work or volunteer experience, accomplishments, hobbies, interests, sports, etc.)

Students identify artefacts that provide evidence of strengths and interests, and then select those to be included.

Reflect on artefacts and articulate how each artefact demonstrates strengths and interests. Organize, group, and sequence artefacts.

Every artefact should be accompanied by a written reflection. Reflection might include why the item was chosen, what it illustrates, and why it is significant, what is it evidence of, what skill it shows, etc.

Resources/Notes

Internet

- *LifeWork Portfolio* (Nova Scotia Department of Education 2013): <http://lifework.ednet.ns.ca/>
The Nova Scotia public schools support site for students developing a portfolio. Includes teacher and student links.

Print

- *Nova Scotia Student LifeWork Portfolio: A Teaching Resource* (Nova Scotia Department of Education 2005)
Includes background info, suggestions of items to include, goal setting sheets, reflections, rubrics, etc. Also available at www.ednet.ns.ca/pdfdocs/curriculum/lifework_portfolio_teaching_resource.pdf.

Notes

HEALTHY RELATIONSHIPS

9.10 Students will be expected to apply communication and interpersonal skills to discuss reproductive and sexual health issues.

Enduring Understandings

By the end of this outcome, students should understand that

- by creating safe and supportive spaces, communication and interpersonal skills among peers and partnerships are enhanced
- good communication and interpersonal skills contribute to healthy relationships and capacity to speak about sexual health topics, issues, and concerns

Assessment, Teaching, and Learning

Observations of how students are able to speak and listen to others, and take turns.

Journal responses, such as

- Respond to a time when you were persuaded against your better judgement to do something against your personal beliefs. How did you feel before that decision? How did you feel after that decision?
- Write about the last time you took a stand on an issue, even if it was unpopular. Did you win anyone over to your side? Why or why not?

Self-assessment of speaking and listening behaviours (see appendix 14 for an example).

Remind students about effective speaking and listening skills by leading a class brainstorm (body language, eye contact, leaning forward, nodding, short words of encouragement, asking open ended questions, clarifying or checking info given, etc.)

Set ground rules for discussion by brainstorming with the students. It is important that everyone feel comfortable, and talking about sexual health may make some people feel uncomfortable or embarrassed. Let students brainstorm, but make sure they touch on the following:

- Respecting each other (no laughing at, making faces, rolling eyes, etc.).
- One person speaks at a time, everyone else listens.
- Contribute.
- Confidentiality: What is discussed in the classroom stays in the classroom.
- Behave in a mature manner.
- No jokes at another's expense.
- No question is a stupid question.

- Only use slang if you do not know the correct word yet.
- Do not use specific names of people you know.

Communication involves two parts, speaking and listening, or in other words, sending and receiving a message. Sometimes we can “send” a message, but the other person does not “receive” it in the same way that it was sent. Discuss why this might be. Demonstrate the importance of two-way communication by doing the drawing activity found in Appendix 8.

Find Someone Who ...: Create a matrix of sexual and reproductive health questions (Find someone who knows how to prevent STIs, can name two methods of birth control, etc.) See *Beyond the Basics: A Sourcebook on Sexual and Reproductive Health Education* (The Canadian Federation for Sexual Health 2005), page 394, for an example.

Take a Stand activity related to sexual and reproductive health (see appendix 9). Also, see *Beyond the Basics: A Sourcebook on Sexual and Reproductive Health Education* (The Canadian Federation for Sexual Health 2005), page 274, for a similar activity.

Rank and Discuss. Provide several scenarios for students to consider on their own and rank from 1–5 (least to most acceptable). Students then form small groups, share how they ranked each scenario and then discuss in an effort to negotiate an agreed group ranking (see Appendix 10 for an example).

Create an anticipation guide to go with a reading related to sexual health in order to help students explore their own beliefs and values, and to prompt discussion (see Appendix 11).

Read the article, “Experts Want Sex Education from Age Four to Cut Teen Pregnancies” (see Appendix 12). Engage students in a written conversation (Appendix 13) and then a discussion.

Resources/Notes

Print

- *Beyond the Basics: A Sourcebook on Sexual and Reproductive Health Education* (The Canadian Federation for Sexual Health 2005; NSSBB #: 18447)
This resource includes a wealth of ready to use lesson plans, including suggestions for developing a classroom climate that is safe and conducive to discussion. This resource has been distributed to schools.
- “Experts Want Sex Education from Age Four to Cut Teen Pregnancies” (Lipsett 2008)
www.guardian.co.uk/society/2008/jul/05/children.sexeducation
Newspaper article promoting sex education in primary school.

Notes

HEALTHY RELATIONSHIPS

9.11 Students will be expected to examine the cause and effect of unhealthy relationships and practise communication and assertiveness skills to confront unhealthy relationships.

Enduring Understandings

By the end of this outcome, students should understand that

- it is important to define what healthy and unhealthy relationship look like, sound like, and feel like
- there can be many negative health effects of unhealthy relationships
- we can learn skills to effectively deal with unhealthy relationships

Assessment, Teaching, and Learning

Completed journal responses.

Self-assessment of group participation/contributions to discussion.

Research Project-Choose a topic related to relationships and write a brief research paper. Be sure to keep track of your references. Topics may include the following:

- Self-Esteem: Why is self-esteem so important to a person's mental and physical health? Can a lack of self-esteem lead a person to get involved in unhealthy relationships? Explain.
- Love: What is love? What other emotions are often involved when a person feels love? How does the emotion of love affect the body?
- Anger: Many believe that males and females express their anger differently. Do you believe this is true? How do you explain the differences in how males and females cope with anger?
- Anger Management: Why do people get angry? What techniques can help individuals control their anger?
- Relationships and the Law: Investigate laws that protect the rights of individuals in a romantic relationship. For instance, does Nova Scotia have a law against stalking, verbal abuse, or emotional battery? How are these terms defined?

Present research to the class.

Students analyze the lyrics of a favourite song. Student responses might include the main message of the song, whether the relationship described is healthy or unhealthy, gender stereotyping that may be present, suggestions of violence, etc. The response might also include suggestions for more positive solutions, the effect music has on people, the effect of listening to violent or unhealthy lyrics, etc. (See *Beyond the Basics: A Sourcebook on Sexual and Reproductive Health Education* [The Canadian Federation for Sexual Health 2005], page 258, for a suggested handout.)

Critically examine media culture's portrayal of relationships. Are these true representations of healthy, sustainable relationships?

Clarify the term **relationship**. Point out that relationships begin as soon as we are born and include anyone with whom we have an on-going connection (family, friends, co-workers, student/teacher, romantic interest including same-sex attraction, etc.)

Reflective Journal: Possible prompts include the following:

- Think of a couple you have known, at school or in your neighbourhood, who were involved in what you would consider an unhealthy relationship. What signs made you think it was unhealthy?
- Describe a situation in a relationship (your own or observed) that made you feel uncomfortable. Why did it make you feel that way?
- How do gender role stereotypes affect relationships?
- Describe the effect of jealousy in a relationship.
- What are your personal rights in a relationship?
- What are your responsibilities in a relationship?
- How does technology (Facebook, MySpace, text messages, etc.) affect relationships?
- Why do you think some people stay in unhealthy relationships?
- How well would you have to know someone before you would kiss, make out, have intercourse, etc.?
- What things would be unacceptable on a date?
- What is the role of boundaries in a relationship?

Divide the class into groups and assign them the topic “Healthy relationships” or “Unhealthy relationships.” Groups brainstorm as many characteristics of their topic as possible. Come together as a class to gather student responses (See *Beyond the Basics: A Sourcebook on Sexual and Reproductive Health Education* (The Canadian Federation for Sexual Health 2005), page 254, for a lesson plan).

Ask students to provide lyrics to their favourite songs. Listen to the songs and analyze whether healthy or unhealthy attitudes towards relationships are being portrayed. (See *Beyond the Basics: A Sourcebook on Sexual and Reproductive Health Education* [The Canadian Federation for Sexual Health 2005], page 256).

Carousel Brainstorm. Place large sheets of paper around the room with the headings Physical, Sexual, Verbal, and Emotional. Have students travel around the room and write examples of the kinds of behaviours in each category that would contribute to an unhealthy relationship. Discuss as a class.

Refer to Lesson 2, *Kids in the Know: Grade 9 Personal Safety Program*, Second Edition (Canadian Centre for Child Protection 2011).

Read aloud the short story *Amanda and the Wounded Birds* by Colby Rodowsky (see link below). Stop after the first sentence on the second page and ask students to predict how the story ends. Which characteristics of the relationship between the mother and daughter are healthy? Which are unhealthy? Do a written conversation/discussion.

Roving Reporters: Students observe and record instances of respectful or disrespectful behaviour at school. Students choose a method to present the results of their observations to the class (write a report, create a graph, etc.)

In small groups, brainstorm some of the effects of unhealthy relationships (feeling ashamed, anxious, depressed, having thoughts of suicide, doing poorly in school, losing interest in friends or favourite activities, engaging in self-harm, isolation, discarding or changing friends, etc.) Discuss as a whole group.

Role-play scenarios that allow students opportunities to develop and practise skills that support healthy relationships and that allow them to deal effectively with unhealthy relationships. (See *Beyond the Basics: A Sourcebook on Sexual and Reproductive Health Education* [The Canadian Federation for Sexual Health 2005], pages 279 and 283, for two lessons that provide scenarios that address this topic.)

Create a personal relationship pledge that students complete, sign and date.

You might include the following:

- What behaviours would you pledge never to put up with in a relationship?
- What behaviours would you pledge to include?
- In your opinion, what would an ideal healthy relationship look like?

Resources/Notes

Internet

- “Amanda and the Wounded Birds” (Rodowsky n.d.): www.glencoe.com/sec/health/pdf/amanda.pdf
A short story.
- “Building Healthy Relationships, Lesson 1” (Alberta Health Services 2013):
<http://teachers.teachingsexualhealth.ca/wp-content/uploads/CALM-Relationships-Lesson-11.pdf>
A good introductory lesson plan that includes role-play scenarios.
- “Identifying Unhealthy Relationships, Lesson 4” (Alberta Health Services 2013):
www.teachingsexualhealth.ca/media/lessons/CALM_RelationshipsLess4.pdf
An excellent follow-up to the lesson above, including a case study.
- “Addressing Violence in Relationships, Lesson 5” (Alberta Health Services 2013):
www.teachingsexualhealth.ca/media/lessons/CALM_RelationshipsLess5.pdf
Another excellent lesson plan that includes learning about strategies for dealing with abusive relationships, and ways to support a friend in an abusive relationship.
- *Break the Cycle: Empowering Youth to End Domestic Violence*: www.breakthecycle.org
Includes resources for teenagers about healthy and unhealthy relationships, as well as resources for educators (including useful printable handouts)
- *Teen Relationships* (Community Overcoming Relationship Abuse [CORA] 2013):
www.teenrelationships.org
Information about dating violence, recognizing warning signs, understanding what a healthy relationship is, resources for teens in abusive relationships, etc.

- *The Door That's Not Locked*. (Canadian Centre for Child Protection 2013):
www.thedoorthatsnotlocked.ca/app/en
Many downloadables on healthy relationships and personal boundaries for this age group.

Print

- *Beyond the Basics: A Sourcebook on Sexual and Reproductive Health Education* (The Canadian Federation for Sexual Health 2005; NSSBB #: 18447)
This resource includes a wealth of ready to use lesson plans, including lessons specifically about communication and healthy relationships in Module 6 – distributed to schools
- *Kids in the Know: Grade 9 Personal Safety Program, Second Edition* (Canadian Centre for Child Protection 2011)

Video

- *Developing Healthy Relationships* (DVD/VHS, 30 min.) (Kineticvideo, c2003; LRTS #: 23600)
Identify personal support systems; foster open communication with adults; recognize trust and honesty as a critical for all relationships; qualities of true friendship, etc.

Notes

HEALTHY RELATIONSHIPS

9.12 Students will be expected to identify and practise negotiation, assertiveness, and refusal skills, related to sexual activity, alcohol, tobacco, cannabis, and gambling.

Enduring Understandings

By the end of this outcome, students should understand that

- there is a difference between being assertive and being aggressive
- negotiation and refusal skills are life skills that assist in reducing harmful health behaviours

Assessment, Teaching, and Learning

Completed journal responses.

Participation in discussions and role plays.

In small groups, students write their own scenarios that involve pressure related to sexual activity, alcohol, tobacco, cannabis or gambling, and demonstrate a way to assertively refuse. Students act out their scenarios for the class, or for younger classes.

Self-assessment of discussion contributions/participation (see Appendix 14 for an example).

Reflection

- Choose your favourite refusal skill and explain why.
- Choose a skill that is difficult for you and explain why.
- Choose a refusal skill that you would recommend to a younger sibling and explain why.

Discuss what it means to be assertive, as opposed to aggressive. How is this related to self-esteem? Brainstorm situations in which you may need to be assertive (could be any situation where there is likely to be peer pressure).

Pros/Cons: Individually or in pairs, students list the pros and cons of tobacco use, alcohol use, sexual activity, etc. Discuss as a class. Individually, students consider their own personal limits with regard to each. Students write an “I believe ...” statement in their journal with regard to each topic.

Condom Popping: This activity is a fun way to review reasons for and against having sexual intercourse, as well as discussing the benefits of condom use. See the link below for a description of this activity.

There are many ways to express affection and intimacy that do not involve the risk of pregnancy or STIs. Brainstorm ways to show love and sexual feeling. In small groups, students come up with 5 to 10 ways of showing affection or making love without “doing it.” Examples might include taking that special someone out to dinner, making a phone call just to say “hi,” giving flowers, or taking a walk in the park together. Have students share their ideas with the rest of the class. Students can organize their ideas into a brochure or poster.

In small groups, brainstorm as many reasons as you can that a person might give to persuade you to have sex (smoke, do drugs, gamble, etc.). As a group, brainstorm as many possible responses as you can. Role-play situations where students practice their responses in an assertive manner.

Negotiating Condom Use: See *Beyond the Basics: A Sourcebook on Sexual and Reproductive Health Education* (The Canadian Federation for Sexual Health 2005), pages 325–336, for four lessons that deal with this topic.

Role Play Scenarios

- Safer Sex Role-Playing. See *Beyond the Basics: A Sourcebook on Sexual and Reproductive Health Education* (The Canadian Federation for Sexual Health 2005), page 337, for a complete lesson plan.
- The Party. See *A Question of Influence: A Teacher's Drug Education Resource* (Roberts and Wynn 2008), page 134, for a lesson on ways to avoid the risks of substance abuse at a party

Journal Responses. Prompts might include the following:

- The next time I am faced with someone pressuring me to have any kind of unwanted sexual activity I will ...
- Is it harder to resist friends, or people you do not know?
- Have you ever tried to pressure a friend? Why?
- Would you risk losing a friend over something you felt strongly about?
- If someone pressures you, is he/she really your friend? Explain.
- If a friend encourages you to do the right thing, but you do not want to, is he or she being a good friend? Explain.

Personal Safety Contract: students create a contract with a trusted adult whereby the student agrees to call for help if necessary, and the adult agrees to respond without consequence.

Resources/Notes

Internet

- *Safer Sex*, “Part 2, Variation A: Condom Popping” (girlsactionfoundation.ca 2013): www.girlsactionfoundation.ca/en/book/export/html/2465
Description of the activity .
- *SIECUS*, “Sex Ed Library”: www.sexedlibrary.org/index.cfm?pagelD=725
A variety of lesson plans related to communication, negotiation, assertiveness, and refusal skills.
- *Rutgers University*, “Answer Sex Ed Honestly”: <http://answer.rutgers.edu>
A variety of ready-to-go lesson plans on abstinence and sexual decision making, including several short video scenarios, from Rutgers University.

- *Centre for Addiction and Mental Health*, “Educating Students about Drug Use and Mental Health - Grade 9: Expectation 5 Teaching Learning Strategy 2:
www.camh.net/education/Resources_teachers_schools/Drug_Curriculum/Secondary/curriculum_grade9expect5tls2.html
Assertiveness and Refusal Skills Lesson plan from the Centre for Addiction and Mental Health
- *Only the Strong Survive*, “Develop Your Refusal Skills” (Administrative Office of the Courts 2013):
www2.courtinfo.ca.gov/stopteendui/teens/stop/yourself/develop-refusal-skills.cfm
A site that helps teens learn refusal skills related to drinking and driving.
- *teachingsexualhealth.ca*, “Reducing Sexual Risk, Lesson 1” (Alberta Health Services 2013):
<http://teachers.teachingsexualhealth.ca/wp-content/uploads/Grade-9-Reducing-Sexual-Risk-Lesson-1.pdf>
This lesson identifies factors that can lead to sexual risk as well as strategies teens can use to avoid the risks.

Print

- *Beyond the Basics: A Sourcebook on Sexual and Reproductive Health Education* (The Canadian Federation for Sexual Health 2005; NSSBB #: 18447)
This resource includes a wealth of ready to use lesson plans, including lessons specifically about negotiating safer sex practices in Module 7. This resource has been distributed to schools.
- *A Question of Influence: A Teacher’s Drug Education Resource* (Roberts and Wynn 2008)
Ready-to-use lesson plans organized by grade level. This resource was distributed to schools, and is also available for download at www.druged.ednet.ns.ca. In addition, teacher orientation tutorials, student handouts and slides are available at this site.

Video

- *Sexual Pressure* (DVD/VHS, 24 min.) (Marlin Motion Pictures c 2004; LRTS #: 23616)
Sexual harassment often begins in middle school and escalates through high school. This program focuses on how teens learn to deal with treating the opposite sex.

Notes

HEALTHY RELATIONSHIPS

9.13 Students will be expected to analyze the role of alcohol in the decision-making process related to increased risk of unintended pregnancies, STIs, impaired driving, and injury.

Enduring Understandings

By the end of this outcome, students should understand that

- there are physical, mental, emotional, and social risks associated with alcohol consumption
- there are physical, mental, emotional, and social consequences with alcohol consumption
- there are ways to reduce risks associated with alcohol consumption

Assessment, Teaching, and Learning

Develop a series of questions and answers related to the topic (A class of 30 students will require 15 questions with 15 answers). Cut the questions and answers into slips and pass one to each student as they enter. Explain that someone has a question for their answer and vice versa. They must wander around and find the correct match then sit down. Students read their questions and answers aloud. Discuss as a group.

3-2-1: Students briefly write down 3 things they have learned, 2 things they can do to minimize risk, 1 thing they never plan to do.

Create a poster to educate other students about ways to reduce the risks associated with alcohol.

Have students research real life stories on the Internet about the dangers young people have faced when drinking alcohol. Identify ways the individual might have been able to reduce the risk. Share these stories and suggestions with classmates.

Create a series of interview questions and answers for a radio talk show. The interview is with a person who has caused a serious accident due to impaired driving.

In small groups, brainstorm a list of risks that people might face when drinking (falling down, getting hit while crossing the road, becoming involved in sexual activity, reckless driving, acquiring an STI, alcohol poisoning, etc.) Have each group share with the class and collect the ideas on the board.

Select 8–10 common risks associated with alcohol use, and copy each one on a sheet of paper. Select students to come to the front of the room and hold up the signs. Through class discussion, encourage students to rearrange the risks from least to most harmful, making sure to consider the possible consequences of each risk (injury, death, unintended pregnancy, damage to property, fines, upset parents, poisoning, etc.). Students should justify positioning.

For each risk, brainstorm ways to reduce the risk (carry a condom, eat if you are drinking, watch out for your friends, plan ahead if you will need a drive, carry a fully charged cell phone, know your limits, etc.) Discuss which suggestions might be the most effective.

The Party: See *A Question of Influence: A Teacher's Drug Education Resource for Healthy Living* (Roberts and Wynn 2008), page 134, for a lesson on high-risk behaviours related to drug and alcohol use.

See Lesson 3 in *Kids in the Know: Grade 9 Personal Safety Program*, Second Edition (Canadian Centre for Child Protection 2011).

Resources/Notes

Internet

- *teachingsexualhealth.ca*, "Substance Abuse and Sexual Decision-Making, Lesson 1" (Alberta Health Services 2013): <http://teachers.teachingsexualhealth.ca/wp-content/uploads/CALM-Substance-abuse-and-sexual-decision-making-Lesson-1.pdf>
Lesson plan to help students consider the relationship between substance use and sexual decision-making.
- *teachingsexualhealth.ca*, "Substance Abuse and Sexual Decision-Making, Lesson 2" (Alberta Health Services 2013): <http://teachers.teachingsexualhealth.ca/wp-content/uploads/CALM-Substance-abuse-and-sexual-decision-making-Lesson-2.pdf>
A follow-up to the above, this lesson helps students learn how to minimize their sexual health risks if they choose to use alcohol and drugs.
- *Building Effective Strategies for Talking to Your Students about Alcohol and Driving* (changetheconversation.ca 2013):
http://changetheconversation.ca/parent_portal/Teacher_Document_2.pdf
Scenarios for discussion related to alcohol and driving.
- *teachingsexualhealth.ca*, "Reducing Sexual Risk, Lesson 2" (Alberta Health Services 2013):
<http://teachers.teachingsexualhealth.ca/wp-content/uploads/Grade-9-Reducing-Sexual-Risk-Lesson-2.pdf>
This lesson looks at how alcohol affects judgment, how it lowers inhibitions, and other facts about how the use of substances affects everybody.
- *Party Prevent: Alcohol and Risk-Related Trauma in Youth*. (P.A.R.T.Y. Program 2009):
<http://partyprogram.com//home.aspx>
Includes videos about drunk driving that have a powerful emotional impact and some graphic content.
- *Why Drive High?* (Health Canada 2013): www.hbcreative.com/whydrivehigh
An interactive game that show students how smoking up and driving messes with your hand/eye coordination, just like in real life.

Print

- *My Health: Talking Openly about Healthy Living* (Bartlett 2010; NSSBB #: 2000010)
A nicely laid out and informative text book. (Chapters 7 and 8) This resource has been distributed to schools.
- *A Question of Influence: A Teacher's Drug Education Resource for Healthy Living* (Roberts and Wynn 2008)
Ready-to-use lesson plans organized by grade level. This resource was distributed to schools, and is also available for download at www.druged.ednet.ns.ca. In addition, teacher orientation tutorials, student handouts and slides are available at this site.
- *Kids in the Know: Grade 9 Personal Safety Program, Second Edition* (Canadian Centre for Child Protection 2011)

Videos

- *Alcohol Facts: Straight Up* (DVD, 18 min.) (Sunburst Visual Media, c2005; LRTS #: 23872)
Teen hosts present the facts about alcohol, realistic scenarios reveal the physical, emotional and social consequences of drinking.
- *The Party's Over: Sex, Alcohol and Pregnancy* (DVD/VHS, 20 min.) (Kinetic Video c2001; LRTS #: 23587)
A live-action video that tells the story of three teenage couples dealing with contemporary sexual health and relationship issues, presented in the context of a party.
- *Under the Influence* (DVD/VHS, 24 min.) (Marlin Motion Pictures c2005; LRTS #: 23611)
This video focuses on the deadly decisions that alcohol can often lead to.

Notes

HEALTHY RELATIONSHIPS

9.14 Students will be expected to practise speaking about concerns regarding substance use and gambling in self or others.

Enduring Understandings

By the end of this outcome, students should understand that

- it is often hard to seek or to ask for help
- it helps to practice how to offer support or suggestions to someone who is reaching out for help
- help seeking is an important life skill that is health enhancing

Assessment, Teaching, and Learning

Advice Column Letters: After small group discussions, students write a response to the letter they were given.

Write a letter to a friend whom you discover is much deeper into substance use or gambling than you thought. Express your *concern* and the reasons for your concern.

Self-assessment of participation in discussion and role plays.

Exit Pass: Identify one obstacle that might make it difficult for you to speak to someone about substance use or problem gambling. What could you do to get over this obstacle?

Have students anonymously write a question they have about substance use and/or problem gambling. Collect and review students' questions.

Think-Pair-Share: What are some of the reasons why a person might use drugs or gamble (peer pressure, to deal with stress, to deal with emotional or physical pain, for recreation, for the social aspects, etc.)? Call students together and discuss their responses. Point out that some people use drugs and/or gambling in order to cope with problems or stresses, and that these are not helpful strategies because of the many negative consequences. As a class, brainstorm alternative, helpful strategies for dealing with stress. Point out that a strategy may be helpful in one situation and not in another (for example, when might it be helpful to ignore something and when wouldn't it?)

Review the stages of substance abuse and problem gambling. See the following lessons:

- *Are You in over Your Head?*: A lesson that helps students consider the degrees of substance use, and recognize signs that indicate it might be a problem. See *A Question of Influence: A Teacher's Drug Education Resource for Healthy Living* (Roberts and Wynn 2008), Lesson 9.2.

Snowball Brainstorm: Students take out a blank piece of paper. Prompt: You have ten seconds to write down one thing you could do if you suspect someone you know has a problem with substance abuse or gambling (see appendix 15 for suggestions)? Teacher counts down ten seconds. When the time is up, students scrunch up the paper and throw it across the room. When students settle, everyone picks up a

paper, reads what it says, and adds another idea. Repeat this process a few times. To wrap things up, ask students to share ideas from the paper in front of them and collect the ideas on the board.

Practise using “I” statements. For example, “I feel _____ when _____ and I want _____.”

Students write scenarios in which a caring individual (friend, teacher parent, etc.) has to speak to someone about their concerns regarding the individual’s substance use or gambling. Students role-play the scenarios for the class. Classmates respond with regard to the realistic/practical nature of the scenario and offer suggestions.

Students imagine a scenario and write a fictional letter to an advice columnist. Letters should include information about the person’s level of alcohol use, risk-taking behaviours, and major effects on the person’s life. The letter must include a realistic and straightforward request for advice. Collect the letters and redistribute them randomly, making sure that nobody gets the letter they wrote. In small groups, students read through the letters they are given and discuss the advice they would offer.

What are the advantages and disadvantages of seeking assistance (breaking confidentiality, trust, losing friends, reducing harm, preventing injury, etc.)? How difficult would it be to report your friend to their parent? School counsellor or teacher? Police?

Review the questions students submitted at the beginning of the unit and answer any that were not covered in the lessons.

Resources/Notes

Print

- *A Question of Influence: A Teacher’s Drug Education Resource* (Roberts and Wynn 2008)
Ready-to-use lesson plans organized by grade level. This resource was distributed to schools, and is also available for download at www.druged.ednet.ns.ca. In addition, teacher orientation tutorials, student handouts and slides are available at this site.

Notes

HEALTHY RELATIONSHIPS

9.15 Students will be expected to examine the negative impact of stereotyping and stigma upon help-seeking behaviour.

Enduring Understandings

By the end of this outcome, students should understand that

- stereotyping and stigma have a negative effect on help-seeking, particularly on health concerns related to mental illness, sexual minority, sexual health, and substance use and gambling

Assessment, Teaching, and Learning

Make a personal connection. Students write about a situation when they were treated unfairly because of their age, skin colour, clothing, gender, the way they speak, mannerisms, where they live, how much money their family has, etc. Students should describe the situation, how they were treated, what assumptions were made about them, how the experience made them feel, and how they feel they should have been treated.

Personal Reflection: Describe something specific you can do to help reduce the negative effects of stereotyping. Consider any obstacles you might encounter and how you might overcome them.

Exit Pass: Identify three negative effects of stigma related to addiction.

Discuss the fact that categorizing things or people is a natural and sometimes useful tool for organization; however, assumptions, and labels can lead us to pass judgments about people we do not even know. Brainstorm some common categories used to describe groups of students at school (jocks, nerds, etc.) Write the categories on large paper and post around the room. Have students travel around and write adjectives to describe each group.

Review the meaning of the words “stereotyping” and “stigma.” Discuss whether the assumptions (from activity above) apply to everyone in the group. Discuss how assumptions can affect your behaviour toward others (bias and prejudice). In what ways can this be unfair or hurtful?

Brainstorm in small groups. Describe a drug user. What kind of people become drug addicts? What do they look like? How do they behave? Emphasize that students should list stereotypes that they have heard, not ones that they necessarily believe to be true. Collect responses as a whole group.

What might be some of the consequences of these negative stereotypes (discrimination, fear, isolation, shame, denial, loss of hope, self-hatred, etc.)?

Discuss language and how it may contribute to stigma (see article listed below, *The Words We Use Matter: Reducing Stigma through Language* [The National Alliance of Advocates for Buprenorphine Treatment 2008]), especially the fact that calling a person by the name of their illness objectifies the individual. We would never refer to a person with an unhealthy diet who developed plaque build-up in their arteries as an “atherosclerosis,” yet we refer to a person who has a problem with drug use as an “addict.” Discuss ways to talk about problem drug use that honours a person’s dignity.

Society's Attitudes and Laws about Drug Use: A lesson that uses discussion of case studies to consider how attitudes impact laws, services and approaches to treatment. See *A Question of Influence: A Teacher's Drug Education Resource for Healthy Living* (Roberts and Wynn 2008), Lesson 9.5.

Discuss the differences between prohibition and harm reduction as approaches to drug control. Consider the pros and cons of each, the assumptions underlying each approach, and the effect each approach might have on people's attitudes with regard to problem drug use.

Develop and conduct a survey to determine people's attitudes towards drug use. Analyze the results to identify commonly held stereotypes and biased attitudes.

Resources/Notes

Internet

- *Mental Health and High School Curriculum* (Teen Mental Health 2013)
<http://teenmentalhealth.org/for-educators/mental-health-high-school-curriculum>
Provides lessons and resources for educators. This guide is available to purchase from the website for a small fee.
- *The Words We Use Matter: Reducing Stigma through Language* (The National Alliance of Advocates for Buprenorphine Treatment 2013)
www.naabt.org/documents/NAABT_Language.pdf

Print

- *A Question of Influence: A Teacher's Drug Education Resource* (Roberts and Wynn 2008)
Ready-to-use lesson plans organized by grade level. This resource was distributed to schools, and is also available for download at www.druged.ednet.ns.ca. In addition, teacher orientation tutorials, student handouts and slides are available at this site.

Notes

HEALTHY COMMUNITY

9.16 Students will be expected to examine issues around hypersexualization of children and youth and how these phenomena can contribute to violence, affect body image and self-esteem, and impact relationships.

Enduring Understandings

By the end of this outcome, students should understand that

- the males and females are targeted differently by industry
- media culture and media messages are often linked to poor health outcomes for children and youth
- there is a negative effect of sexualization on individuals
- media messages can be overt and hidden

Assessment, Teaching, and Learning

Create an ad that realistically represents people and includes positive images and messages about body image and beauty.

Using the same tools of mass media, create an ad that challenges the sexualisation of people.

Choose one of the topics discussed in class, take a position, and write a persuasive, well-supported Letter to the Editor.

Develop a Code of Ethics that includes guidelines for respectful representations of people in media (television, radio, advertising, movies, etc.)

Write a series of diary entries for a teenage fashion model describing what it is like to be under intense public scrutiny, and the pressure to always look “perfect.”

Choose one of the many lessons related to this topic that are available from the Media Awareness Network.

Brainstorm sources of information about sexuality and sexual health (books, parents, friends, television, advertising, etc.) Rank these in order of where students get the most information to the least.

Review the fact that all media is constructed. Consider the following:

- Who created the media? (Everyone has a bias.)
- What is the purpose or desired response (to sell a product, entertain, inform, convince, etc.)?
- Who is the intended audience?
- What techniques are used to grab the viewer’s attention?
- What messages (lifestyles, cultures, values, points of view, etc.) are presented or omitted?
- How might different people understand the message differently?

Create a Wall of Shame. Collect fashion magazines. Cut out images that objectify women and men, and that use sex to sell products. Paste them on a large poster. What are the hidden messages about gender, sex, sexuality, power, beauty? “Speak back” by writing comments beside the images.

Brainstorm the consequences of sexualizing people in media.

Who is “in control” in these images, men or women? What do the images suggest about sex and relationships? What implications do these messages have for relationships? What are the implications for same-sex relationships? What about violence in relationships?

Watch the *Dove Evolution* video (Piper 2006) (link below) which shows the time, effort, and retouching that goes into creating an advertisement. See accompanying lesson plan at the Media Awareness Network link below. Consider that the makers of Dove also distribute AXE.

Debate: Should advertisements include a warning that says the photos have been retouched and altered? How might images of “perfect” people impact viewers’ sense of body image and self-esteem? How might this contribute to depression, eating disorders, steroid use, cutting, etc.?

Debate: Should the use of sex to sell merchandise be banned, especially if targeted at children?

Define and discuss the word misogyny. Discuss/debate to what extent misogyny exists in media.

Resources/Notes

Internet

- *American Psychological Association, “Sexualization of Girls:* www.apa.org/pi/women/programs/girls/report.aspx
An American Psychological Association summary report that includes a definition of sexualisation, examples of sexualisation in the media, and consequences. Important background reading.
- *Standing Committee on Environment, Communications and the Arts: Sexualisation of Children in the Contemporary Media* (Commonwealth of Australia 2008): www.aph.gov.au/~media/wopapub/senate/committee/eca_ctte/completed_inquiries/2008-10/sexualisation_of_children/report/report.ashx
Good background reading.
- *Campaign for a Commercial-Free Childhood, “Sexualizing Childhood”:* www.commercialfreechildhood.org/issue/sexualizing-childhood
An article summarizing research from the Campaign for a Commercial-Free Childhood.
- *Dove Evolution* (Piper 2006): www.youtube.com/watch?v=iYhCn0jf46U&feature=related
This short video shows the time, effort, and retouching that goes into creating an advertisement. See accompanying lesson plan at the Media Awareness Network link below.
- *Fabricating Beauty – BodyTalk* (beatingED 2007): www.youtube.com/watch?v=UToGBorgDqo&feature=related
- *MediaSmarts* (MediaSmarts 2013): www.media-awareness.ca

Videos

- *Sexy Inc.* (DVD, 35 min.) (National Film Board of Canada c2007; LRTS #: 23712)
A documentary that analyzes the hypersexualization of our environment and its effects on young people. Recommended for 15 years of age and up.
- *Straightlaced* (DVD, 67 min.) (GroundSpark c2009; LRTS #: V2806)
From girls confronting media messages about culture and body image to boys who are sexually active just to prove they are not gay, students discuss the toll that deeply held stereotypes and rigid gender policing have on all our lives.
- *Shredded* (DVD, 22 min.) (National Film Board 2005; LRTS #: 23893, V2659)
Reveals the risks some teenage boys are willing to take to achieve the ideal male shape. This candid film explores body image, supplement use and the temptation of steroids.
- *Picture Perfect* (DVD, 40 min.) (Picture Perfect Productions Services 2002; LRTS #: 23795)
This documentary video explores and challenges stereotypical and distorted media images of girls and women.

Notes

HEALTHY COMMUNITY

9.17 Students will be expected to examine how people support healthy communities locally and globally, and take age-appropriate action to support a community health issue of interest to them.

Enduring Understandings

By the end of this outcome, students should understand that

- there are characteristics of a healthy community
- supportive environments are conducive to healthy communities
- there can be similarities and differences locally and globally in regards to community health issues

Assessment, Teaching, and Learning

Students develop a three-column table, listing neighbourhood features in column one, positive impacts on health in column two, and negative impacts on health in column three. Be sure to include features that protect and promote health, as well as risk factors.

Students present their information about their community health indicators to their classmates.

Present “a day in the life” similarities and differences of a child in a developing country, to the class.

Create a survey to determine the level of health in your community (choose one aspect: economic, social, physical or service). Conduct the survey, tabulate, analyze, and present the results.

Choose a health issue in your community that could be improved and write a Letter to the Editor. Submit it to your school newsletter or local newspaper.

Take photos of factors in your community that promote or threaten health. Create a photo essay or collage and explain the impact of these factors. Publish the photo essay on the school website.

Choose a health indicator that needs improvement. Draft an action plan, including how to publicize the problem, who to contact for help, and a proposed remedy.

Describe the features of a neighbourhood and discuss whether they have positive or negative effects on health. For example, parks and green space could contribute to exercise and social interactions. Busy roads and traffic would add to air and noise pollution, and may be dangerous for children and pets. Organize the information in a table (see suggestions for assessment below).

Brainstorm the characteristics of a healthy community (clean, minimal poverty, minimal unemployment, people are physically active, minimal drug and tobacco use, respect for rules and laws, access to community resources and services, minimal crime, adequate housing, public transportation, etc.) Consider economic, physical, social, and service aspects of the community.

Class brainstorm: If you were mayor, what would be some of the issues you would want to deal with (violence, lack of green space, air pollution, etc.)? Write responses on chart paper. Give each student

three sticky “dots” and have them place one dot beside the three issues they feel are most important. Identify what students feel are the top issues facing their community (those with the most dots).

Divide students into four groups. Each group is assigned an aspect of the community (economic, social, physical or service), and must identify relevant health indicators. For example, indicators of the economic health of a community might include the average household income, unemployment rates, variety and type of job opportunities, whether people own or rent, etc. In light of this information, students think about their own community and decide if it has more protective or more risk factors for health.

Students keep a detailed diary for one day (what they ate, how they got to school, what they studied at school, what they did for fun, etc.). Research what a day in the life of a child in another country could be like. Compare and contrast information in a table or Venn diagram.

Choose from the many excellent lesson plans related to this outcome in the Unicef Canada resource guide for educators *A Building Block toward Child-Friendly Cities* (see the link below).

Resources/Notes

Internet

- *eNotes.com*, “Healthy Communities”: www.enotes.com/public-health-encyclopedia/healthy-communities
A good background article from the Encyclopaedia of Public Health
- *Healthy People, Healthy Communities: Using the Population Health Approach in Nova Scotia* (Nova Scotia Department of Health Protection and Promotion n.d.): www.gov.ns.ca/hpp/publications/PopulationHealthApproach.pdf
Background reading.
- *Robert Wood Johnson Foundation*, “Neighborhoods and Health”: www.rwjf.org/en/research-publications/find-rwjf-research/2011/05/neighborhoods-and-health-.html
Background reading about neighbourhood health.
- *Healthy Communities* (Government of Alberta 2013): www.healthyalberta.com/communities.htm
Includes suggestions about how to make communities more active, healthier places to live.
- *A Building Block toward Child Friendly Cities: A Resource Guide for Educators* (UNICEF Canada n.d.) www.unicef.ca/sites/default/files/imce_uploads/UTILITY%20NAV/TEACHERS/DOCS/GC/child_friendly_cities.pdf
This collection of lesson plans addresses children’s rights, both locally and globally and the impact on health for the individual and the community. An excellent resource.
- *UNICEF Canada*: www.unicef.ca/portal/SmartDefault.aspx
A wealth of information for teens and teachers about the state of the world’s children.

- *World Vision Canada*: www.worldvision.ca/Education-and-Justice/Educational-Resources/Pages/Educational-Resources.aspx
Education resources include some for purchase and many that are free. Excellent lesson plans and activities that deal with global health.
- *Foreign Affairs, Trade and Development Canada, "Youth Zone"* (Government of Canada 2013): www.acdi-cida.gc.ca/acdi-cida/ACDI-CIDA.nsf/eng/JUD-12882713-HSK
The Youth Zone includes activities and lesson plans related global health and development issues

Videos

- *Ryan's Well* (DVD, 50 min.) (McNabb & Connolly c2001; LRTS #: V2580)
This film shares the story of one young boy's determination to make a difference in the world. With perseverance and determination, Ryan Hreljac has raised over \$500,000 to build a well to improve the lives of villagers in Angola, Uganda - to provide clean, safe drinking water.
- *Seven Steps to Social Involvement* (DVD, 64 min.) (CHUM TV c2005; LRTS #: 23907)
Craig and Marc Kielburger empower students to get involved and make a positive difference at a local, national and international level.

Notes

HEALTHY COMMUNITY

9.18 Students will be expected to examine the social, legal, and financial impacts of alcohol, other substances, and gambling along a continuum of use.

Enduring Understandings

By the end of this outcome, students should understand that

- there are various impacts of substance use at the community level
- there are various impacts of gambling at the community level

Assessment, Teaching, and Learning

Participation in class discussion/debate.

Completion of speaking and listening self-assessment (see Appendix 14 for a sample).

Choose a newspaper article to summarize and present to the class.

Choose one of the debate topics and write a reflection, Letter to the Editor, persuasive essay, etc.

Write a series of diary entries from a teenager who is watching the harm that is done to his or her family as a result of a parent who is abusing a substance.

Write a letter from a parent who is watching his or her teenager slip further and further into substance abuse. The letter should be addressed to the teenager.

In small groups, brainstorm the consequences of substance abuse. After all suggestions are exhausted, attempt to categorize the consequences based on how substance abuse impacts the individual, family, work, school, neighbourhoods, society, etc. See Appendix 16 for suggested impacts and categories.

Invite a police officer in to the class to lead a discussion about the negative impacts that drug use has on the health of the community. Use a Q-Chart (Appendix 5) to generate questions in advance.

Collect newspaper clippings that document the social costs and negative impact of substance use.

Read some of the news articles listed below and discuss/debate.

Choose one of the following topics and discuss/debate its pros and cons:

- Legalizing the drug trade
- Providing supervised injection sites
- Forcing a woman into treatment to protect her unborn child
- Making drugs available by prescription to people who are addicted
- Harm reduction versus prohibition

In light of these discussions, consider the implications for the impacts of substance abuse. Would some of these measures decrease the negative impacts? (See *A Question of Influence* [Roberts and Wynn 2008], Lesson 9.5, for an activity that addresses some of the above questions.)

Resources/Notes

Internet

- *Vancouver Coastal Health*, “Insight Supervised Injection Site: A Health-Focused Place for People to Connect with Health Care Services” (Government of British Columbia 2013): <http://supervisedinjection.vch.ca>
Insight is North America’s first legal supervised injection site. It operates on a harm-reduction model, striving to decrease the adverse health, social and economic consequences of drug use without requiring abstinence from drug use.
- *The Globe and Mail*, “The arguments for and against Vancouver’s supervised injection site” (Stueck 2011): www.theglobeandmail.com/news/national/british-columbia/bc-politics/the-arguments-for-and-against-vancouvers-supervised-injection-site/article2019113
An article from the *Globe and Mail*, May 11, 2011.
- *Why the Supreme Court Should Rule Against Mandatory Treatment: FIVE GOOD REASONS* (Canadian Women’s Health Network 2012): www.rcsf.ca/fr/node/39765
Article adapted by the Canadian Women’s Health Network from “*Considering the ‘G’ Case: Second Thoughts on Compulsory Treatment Orders for Women, their Families and Society*,” which appeared in the Spring 1997 issue of *Womanly Times*, the newsletter of Women’s Health Clinic in Winnipeg.
- *Prescription Heroin Might Dent the Illegal Drug Trade* (Vancouver Sun 2007): www.canada.com/vancouver/news/editorial/story.html?id=84d4a637-45f1-4907-aaec-8c2552fd5a98
News article in the *Vancouver Sun*, March 29, 2007.
- *CBS News*, “Heroin By Prescription” (Bermingham 2009): www.cbsnews.com/stories/2005/03/14/world/main680057.shtml
A report from *CBS News*, March 14, 2005
- *Reuters*, “Prescription Heroin Helps Addicts off Street Drugs,” May 28, 2010. (Joelving 2010): www.reuters.com/article/2010/05/28/us-prescription-drugs-idUSTRE64R1OZ20100528
News article in *The Lancet*, May 28, 2010.

Print

- *A Question of Influence: A Teacher’s Drug Education Resource* (Roberts and Wynn 2008)
Ready-to-use lesson plans organized by grade level. This resource was distributed to schools, and is also available for download at www.druged.ednet.ns.ca. In addition, teacher orientation tutorials, student handouts and slides are available at this site.

Notes

HEALTHY COMMUNITY

9.19 Students will be expected to recognize and respond to physical health dangers and emergency situations related to alcohol and other substance use among their peers.

Enduring Understandings

By the end of this outcome, students should understand that

- it can be lifesaving to recognize signs and symptoms of overdose
- recognizing potentially serious and/or dangerous situations and environment can be lifesaving
- it is important to know how to respond with emergency first aid or call for assistance in situations involving their peers or others

Assessment, Teaching, and Learning

Ability to recall and explain the meaning and steps of DR ABCD and COWS.

Participation in discussions and role plays.

Reflective Journal Prompts:

- Describe the qualities a person needs in order to effectively handle an emergency situation. How are these qualities affected by alcohol or other drug use?
- Explain how people put themselves at greater risk of injury when using alcohol or other drugs.
- Many people do not want to get involved. Why do you think this is? How do *you* feel about getting involved?

Brainstorm warning signs that may indicate someone has overdosed (unresponsive; unable to stand; raspy, shallow or laboured breathing; vomiting; bluish skin colour; clammy skin; rapid pulse rate). Discuss how to respond if you see someone with these symptoms (stay calm, call 911, provide as much information as possible, roll the person into the recovery position, stay with the person until medical help arrives, monitor breathing, provide rescue breathing and/or CPR if necessary).

Invite a paramedic to talk to students about dealing with alcohol and other drug related emergencies.

In small groups, develop a scenario where injury or harm is a likely result of drug or alcohol use (swimming after drinking, going four-wheeling after smoking marijuana, a friend at a party is boasting about being invincible and acting aggressively, etc.). Each group role-plays their scenario for the class, stopping before the injury occurs. Ask classmates to identify what harm is likely to happen and to suggest how they might respond as a concerned friend. After some discussion, the group finishes the role play as they imagined the ending.

When a Friend Needs Emergency Treatment: A lesson to enhance students' ability to recognize and respond to emergency situations related to alcohol and drug use among their peers. See *A Question of Influence: A Teacher's Drug Education Resource for Healthy Living* (Roberts and Wynn 2008), Lesson 9.3.

Resources/Notes

Print

- *A Question of Influence: A Teacher's Drug Education Resource* (Roberts and Wynn 2008)
Ready-to-use lesson plans organized by grade level. This resource was distributed to schools, and is also available for download at www.druged.ednet.ns.ca. In addition, teacher orientation tutorials, student handouts and slides are available at this site.

HEALTHY COMMUNITY

9.20 Students will be expected to identify school and community-based resources and health services available to assist themselves or a friend if help or information in the area of sexual health, mental health, alcohol, and other substance use or gambling is needed, and practise how to make initial contact with such a service/resource.

Enduring Understandings

By the end of this outcome, students should understand that

- there are services, supports, and resources in their communities
- many people find difficulty in accessing supports and services
- accessing help is an important first step for a variety of health issues

Assessment, Teaching, and Learning

Collect written role-play scenarios. Role-play scenarios should be realistic, provide enough background to explain the situation and make a reasonable and clear request.

Presentation of community service research to classmates.

Write a thank you letter from a person who is recovering. The letter should be addressed to someone who has provided necessary support, should include a reflection of the individual's recovery process, the positives and negatives, and what the individual will do to deal with potential relapses.

Brainstorm places in the community where students might go to get accurate information or assistance for themselves or others. Suggestions might include the school public health nurse, school counsellor, local pharmacy, Kids Help Phone, The Youth Project, AA, etc. (See resources below for suggestions).

Students each write a realistic scenario for a person who might need assistance from one of these services. Students are paired up and each role-plays their scenario, practicing making that initial contact. Some students might like to share their role-plays for the class.

Research a local service that provides support for people and/or their families in need of assistance around sexual health, mental health, substance abuse, or gambling problems. Include the name of the facility or organization, a contact person, the address, phone number, description of the services offered, cost of service if any, confidentiality of service, etc.

Bring in a guest speaker from one of the local organizations.

Resources/Notes

Internet

- *Kids Help Phone* : www.kidshelpphone.ca/Teens/Home.aspx
Provides anonymous and confidential phone and web counselling for youth aged 20 and under. Useful info on the website as well.
- *Halifax Sexual Health Centre* : www.hshc.ca
Promotes sexual and reproductive health. Offers clinical services, testing, counselling, education, etc.
- *Family Service Association*: www.fshalifax.com
Offers professional, confidential counselling and education services covering issues such as relationships, depression, anxiety, stress, and more.
- *Youth Project* : www.youthproject.ns.ca
Provides support and services to youth aged 18-25 around issues of sexual orientation, including support groups, referrals, supportive counselling, a resource library, educational workshops, social activities, and a food bank.
- *Phoenix: Helping Youth Rise Above*: www.phoenixyouth.ca
Provides a variety of services for youth between the ages of 12-24, including emergency and long term shelter, employment assistance, counselling, food, and parent support.
- *Laing House*: www.lainghouse.org
A peer support organization for youth aged 16-30 with mental illness. Programs help youth with employment, healthy living, education, outreach, and peer and family support.
- *Capital Health, "Mental Health Program: Mental Health Mobile Crisis Team"*:
www.cdha.nshealth.ca/mental-health-program/programs-services/mental-health-mobile-crisis-team
Provides crisis support for children, youth and adults experiencing a mental health crisis. Telephone crisis support and mobile response is offered for work, home, school, and community agencies.
- *Alcoholics Anonymous – Halifax Regional Municipality*: www.aahalifax.org
A 12-step self-help program for those who have problems with alcohol.
- *Alanon Maritimes*: www.freewebs.com/alanonmaritimes
Support groups for people whose lives have been affected by the alcoholism of a family member or friend.
- *Alcare Place: Your Link to Discovery*: www.alcareplace.ca
A long-term recovery home for men dealing with addictions.
- *Addictions Program (Capital Health 2013)*: www.cdha.nshealth.ca/addiction-prevention-treatment-services
Helps individuals who are struggling with addiction to think about change and support them in making healthy choices.
- *Freedom Foundation of NS*: www.freedomfoundation.ca/index.htm
A transition home for adult men who are recovering alcoholics, drug users, or gamblers.

- *Addictions Services*, “Gambling: Problem Gambling HelpLine (Province of Nova Scotia 2011): www.gov.ns.ca/hpp/addictions/gambling/gamblinghelpline.asp
Offers support, advice, information, assessment, and professional telephone counseling
- *Gamblers Anonymous*: www.gamblersanonymous.org
A support group for people who have a problem with gambling.

Notes

HEALTHY COMMUNITY

9.21 Students will be expected to identify and practise strategies for staying healthy and safe in the workplace.

Note: This outcome is covered in depth in *Healthy Living 9, Workplace and Health Safety: A Curriculum Supplement* (forthcoming).

Enduring Understandings

By the end of this outcome, students should understand that

- through recognition of hazards and controls in the workplace, one reduces the causes of injury to young workers
- there are standard guidelines and procedures for reducing risk and injury in the workplace, as well as rights and responsibilities associated with the workplace
- there are benefits to safe workplaces for self and others
- there are factors that contribute to making workplaces physically and emotionally safe (e.g., attitudes, policies, team building, training programs)

HEALTHY COMMUNITY

9.22 Students will be expected to examine how design and infrastructure of the school community and surrounding community enhances or creates barriers for physical activity among youth.

Enduring Understandings

By the end of this outcome, students should understand that

- there are benefits of physical activity and consequence of inactivity at the individual and community level
- design and infrastructure of school and surrounding neighbourhood can enhance safe physical activity experiences

Assessment, Teaching, and Learning

Journal Reflection: What did you learn from your walkability assessment? What were you surprised to discover? What did you learn that you were not aware of before?

Journal Reflection: If you were the community planner for your neighbourhood, what things would you change to improve the health of the citizens and why?

Write a letter to your MLA and/or local newspaper. Include the physical and mental benefits of walking, the results of your checklist observations, and suggestions to improve the “walkability” of the area around your school community.

Written response to the article, “One of a Kind Walking, Biking School Opens in Canada” (Gray 2010) in Appendix 17, which includes a clearly stated and well-supported position.

Students create a poster with a message about one of the benefits of being physically active. Posters are displayed around the school.

Infrastructure: roads, schools, playgrounds, and other services to meet the needs of the people in the community.

Carousel Brainstorm: Post chart paper around the room and have students move around and record their thoughts under the following headings:

- Benefits of physical activity (see links below)
- Ways in which people are physically active
- Consequences of physical inactivity (see links below)
- Reasons why people might be inactive (lack of time, lack of motivation, time spent on computers, video games, television, bullies, parental worries about safety, immature judgment of children, early start times and morning darkness, hectic mornings, inconvenient, etc.)
- Obstacles to being physically active (distance from home to school, high traffic, crime, unsafe streets, inadequate sidewalks, no crosswalks or crossing guards, parent work schedules, lack of bike storage at school, weather, load carried in backpacks, instruments, etc.)

Develop and conduct a “walkability” checklist for your school community (use the one below or create your own). Based on your observations, assess how well your local community encourages and supports physical activity?

Read the article, “One of a Kind Walking, Biking School Opens in Canada” (Gray 2010) in Appendix 17. Take a position for or against this type of program and write a response that supports your position.

Think-Pair-Share: In what ways could a community be designed to encourage more physical activity?

(Schools located within walking distance of the residential community, well connected streets and pathways, not too busy with traffic, sidewalks, nature trails, green spaces and parks, recreation facilities in the community, bike lanes, crosswalks and crossing guards, police officers on bikes, better lighting, interesting visual appeal, etc.)

Brainstorm: what can we do to encourage and support physical activity in our school community? (broader choice of activities, activities based on participation rather than competition, longer lunch periods for intramurals, late busses for those who want to participate after school, daily PE class, outdoor equipment, innovative spaces like porches, overhangs, covered courts, pagodas, nature trails, school garden, skateboard park on school property, etc.)

Create and conduct a survey of school population to assess the kinds of activities students would like to have available at the school, if they would participate, when, what would be the obstacles to participation, etc.

Decide on a realistic improvement that you would like to see made to your school community. Create a proposal and present it to your principal. Be sure to include the benefits of the proposed improvement.

Make the school stairwells attractive with art work. Post messages and posters in the stairwells about the benefits of taking stairs.

Organize an Active Transportation day/week at your school. Encourage students and staff to use their own personal power to get to school (walk, bike, roller blade, etc.)

Contact a local bike shop and see about hosting a bicycle mechanics workshop at your school.

Resources/Notes

Internet

- **ParticipACTION** : www.participaction.com
Information from ParticipACTION.
- *Active Healthy Kids Canada*: www.activehealthykids.ca
A wealth of current information about the status of Canadian kids and strategies to help them be more active.
- *Heart and Stroke Foundation*, “Heart and Stroke Foundation of Canada Position Statement: Community Design, Physical Activity, Heart Disease and Stroke”:
www.heartandstroke.com/site/c.iKlQLcMWJtE/b.3820627/k.5C75/Position_Statements__The_built_environment_physical_activiy_heart_disease_and_stroke.htm
A position statement from the Heart and Stroke Foundation of Canada.
- *Heart and Stroke Foundation*, “Heart and Stroke Foundation of Canada Position Statement: Schools and Physical Activity”:
www.heartandstroke.com/site/c.iKlQLcMWJtE/b.3799209/k.B435/Position_Statements__Schools_and_Physical_Activity_Position_Statement.htm
A position statement from the Heart and Stroke Foundation of Canada
- *Path Ways for People* : www.pathwaysforpeople.ca
A website dedicated to Active Transportation that includes a wealth of local information and more.
- *Increasing Physical Activity through Community Design: A Guide for Public Health Practitioners*, May 2002 (National Center for Bicycling & Walking 2002): www.bikewalk.org/pdfs/IPA_full.pdf
A guide that offers suggestions for creating an active community environment that is friendly to cyclists and pedestrians.
- *Shaping Active, Healthy Communities: A Built Environment Toolkit for Change* (Heart and Stroke Foundation n.d.): www.heartandstroke.com/atf/cf/%7B99452D8B-E7F1-4BD6-A57D-B136CE6C95BF%7D/BETK_HSF_Built_Environments_ENG.pdf
A toolkit that provides information and practical tools to help make the local community more supportive of physical activity.
- *Nova Scotia Pathways for People: Framework for Action*, November 2006 (Nova Scotia Department of Health Promotion and Protection 2006): www.gov.ns.ca/hpp/publications/P4PFramework.pdf
Background reading. This paper showcases our province’s success stories in the arena of Active Transportation (person powered). Here you’ll find ways we can join together and meet the growing needs of our communities.

Notes

HEALTHY COMMUNITY

9.23 Students will be expected to investigate principles of and beliefs around financial health and demonstrate an awareness of the capacity for financial health to positively or negatively affect ones' state of health.

Enduring Understandings

By the end of this outcome, students should understand that

- financial health contributes to personal health

Assessment, Teaching, and Learning

Students represent their monthly spending (from personal budget above) on a pie graph.

Journal reflections are complete and thoughtful.

Research has shown that poor kids are often unhealthy, and that they stay that way their whole lives. Social inequalities create a life-long health gap between the rich and the poor that is pretty much set by the age of 20 and doesn't change. Take a position and write a well supported response.

Read the poem "Smart" by Shel Silverstein (*Where the Sidewalk Ends*, 1974). How did the dad really feel about his son at the end of the poem? Why do you think the poem is called "Smart"? Humour aside, why is it important to be smart about money?

Brainstorm: What are your beliefs about money and financial security? (i.e., more is better, money can buy happiness, money equals status, money makes you important, money makes people greedy, money corrupts)

Journal reflection/discussion: How much money do we need? How much is enough? What makes somebody financially independent (having enough to live by and some extra)? At what point is somebody poor (below poverty line, compared to others, feeling deprived)?

Keep a money diary. Where does your money go? Keep track of everything you spend money on for two weeks. Include the following:

- All the money that you receive and where it comes from.
- What you spend your money on and the cost.

Journal reflection: What did you discover? What type of expenditures did you make (wants, needs)? Were you surprised by anything?

Brainstorm: the difference between wants and needs. (i.e. want a car, need insurance; need to eat, want to eat at a restaurant).

Basic Principles of Personal Financial Health

- Spend less than you earn

- Make the money you have work for you
- Prepare for the unexpected
- Keep debt to a minimum

Discussion:

- What is money management? Why is it important? What does it help you do? (pay bills on time, save, get through difficult times, plan for short and long term goals, etc.)
- What is a budget (a financial plan for saving and spending, a tool used for managing money)? How can budgeting help with money management?
- What role does media culture play in the promotion of financial health? Critically examine consumerism/materialism.

Learn how to create a budget. Discuss the difference between fixed, flexible and discretionary expenses. (See interactive budgeting activities for teens in *Hands on Banking: Money Skills You Need for Life* [Wells Fargo Bank 2013] link below.)

Students create their own personal budget for a four week period. Brainstorm ideas about things a student might include in a budget for income (mowing the lawn, babysitting, job, chores, allowance, birthday gifts, etc.) and expenses (savings for post-secondary, savings for a big purchase, cell phone, entertainment, clothing, etc.) Identify expenses as fixed, flexible or discretionary.

Brainstorm the consequences of poverty: poor diet leading to inadequate nutrition, hunger, susceptibility to infection and illness, chronic disease, inadequate housing, homelessness, sanitary conditions, inadequate dental and medical care, social exclusion, poor self-esteem, feelings of helplessness, lack of control and shame, chronic stress, increased anger, exposure to violence, increased negative health behaviours such as smoking, drinking, substance abuse, increased mental health issues such as depression and anxiety, etc.

Note: The health impacts of poverty are complex, and they accumulate and reinforce each other over time.

Watch a short clip of the feature documentary “Income Inequality & Child Poverty in Canada” from *Poor No More* (YouTube 2009) (see link below). How did the grocery store treat this woman unfairly? How is this family affected by the lack of money?

Students write their own definition of what it means to be poor.

Resources/Notes

Internet

- *Hands on Banking: Money Skills You Need for Life, "Take Charge of Your Future."* (Wells Fargo Bank 2013): www.handsonbanking.org/en
This interactive site includes talking lessons that also include closed captioning. Topics for *teens* include understanding where money comes from and the value of money, budgeting, banking, savings, understanding credit, investments, and problems. Includes an instructor's guide.
- *Poor No More, "Income Inequality & Child Poverty in Canada"* (YouTube 2009): www.youtube.com/watch?v=GIWrol1wymg
A short clip from a feature documentary by the same name.
- *Poor No More (Poor No More: A Feature Documentary 2008)*: www.poornomore.ca
Web page for the feature documentary.
- *Your Life, Your Money, "Real People. Real Issues. Get Your Financial Life on Track"*: www.pbs.org/your-life-your-money/index.php
An excellent website from PBS that includes short videos, lesson plans, interactive games and more to help young people learn about managing their money.
- *The Mint: It Makes Perfect Cents, "Financial Security for Tomorrow Starts Today"* (Northwestern Mutual 2013): www.themint.org/index.html
An excellent website that teaches children to manage money wisely and develop good financial habits. Includes a link for educators.
- *Social Determinants of Health: The Canadian Facts* (Mikkoen and Raphael 2010): www.thecanadianfacts.org/The_Canadian_Facts.pdf
Brief summaries of each social determinant and how they either promote health or cause disease. Important background reading.
- *Canada without Poverty, "Poverty"*: www.cwp-csp.ca/Blog/poverty
A good description of what it means to be poor in Canada.
- *Campaign 2000, "National Report Cards"*: www.campaign2000.ca/reportcards.html
Good background reading about the impact of poverty on the health of people in Canada, also broken down by province.
- *The Impact of Poverty on the Health of Children and Youth* (Singer 2003): www.campaign2000.ca/resources/letters/Poverty_healthbackgrounder.pdf
A good background paper that clearly identifies the consequences of poverty on physical, mental and emotional health.
- *Millennium Project, "Fast Facts: The Faces of Poverty"* (United Nations n.d.): www.unmillenniumproject.org/documents/MP-PovertyFacts-E.pdf
A good fact sheet about the impact of poverty on the health of people in developing countries.
- *Homelessness in a Growth Economy: Canada's 21st Century Paradox* (Laird 2007): www.chumirethicsfoundation.ca/files/pdf/SHELTER.pdf
A very readable report about poverty and homelessness, full of stories and photos. Good background reading.

Video

- *Aruba* (DVD, 11 min.) (National Film Board 2005; LRTS #: 23873)
This discussion starter will help students understand the struggle of inner-city children and the effects of poverty, drug abuse and domestic violence. Teacher preview strongly recommended.

Notes

HEALTHY COMMUNITY

9.24 Students will be expected to demonstrate understanding of how easy it is to lose control of information online.

Enduring Understandings

[To be written.]

Appendices

Appendix 1: Tom Cruise

His [Tom Cruises'] accomplishments are pretty incredible. At 37 years of age (in year 2000), he has starred in blockbuster after blockbuster, is one of the highest paid actors in Hollywood, has been recognized for his achievements in acting by a Golden Globe award and an Oscar nomination, and has the physical agility (and guts) to perform 95% of the stunts in Mission Impossible II, including dangling off that cliff at the beginning of the movie. It is easy to look at Cruise and assume that he probably always had everything going for him. He must have been very successful in high school and popular with the girls. Think again. His life is actually the story of a survivor who learned to turn his shortcomings into assets.

Do any of you struggle with family problems? Tom's dad was consumed with his work and finally abandoned the family when Tom was 12. Some of you know the gut-wrenching feelings he must have suffered through in middle school.

Do you ever struggle with financial problems? Tom couldn't afford some of the things other kids had because his dad refused to pay child support for his four children. He and his sisters had to work to contribute to the family income. They sometimes survived on food stamps.

Do you ever struggle with social problems? His social life was disrupted regularly by moves that forced him to change schools an average of once a year (8 elementary and three high schools). Lots of kids made fun of him. He was always the new geek, never the cool guy that girls flocked to. Lots of kids made fun of him.

Do any of you ever feel dumb? As if Tom didn't have enough problems to deal with, he was always in remedial classes for slow learners. He was later found to have a learning disorder called Dyslexia, which makes it incredibly difficult to learn skills like reading. Not knowing what was wrong, he just thought he was dumb and would often come home crying. With dyslexics, their brains often tell them that things are backwards. He couldn't even distinguish his right hand from his left.

Do you often fail at sports? Concluding that academics weren't his forte, he plunged into athletics. He played football but was too small to excel. Wrestling, however, is divided into weight classes, giving him the opportunity to compete. But when running some stairs (trying to lose a pound to compete in his weight class) he slipped on some papers his sister had left and tore a tendon on his leg. So much for athletics. Unable to wrestle on the team, he tried out for a part in their high school play. He landed a starring role and fell in love with acting. A theater agent just happened to be in the audience the night of the performance and encouraged him to go into acting. The rest is history.

I'd like for you to reflect for a moment on Tom's life. It would have been so easy for him to grow bitter, conclude that life sucks and hate all the people around him. But instead, he learned from his shortcomings. He draws from the heartache he experienced as a child to express emotion when he acts. He learned to work harder than others by having to learn with a disability. He says that his school

IDEA! Show a clip from *Mission Impossible II* on video. The wild rock climb at the beginning might be a great attention-getter! The point is to show Tom Cruise as cool, which lets other troubled kids realize that even though they feel geeky now, there's hope for them if they can endure.

difficulties were a character course that made him a better person. As a result, he goes the extra mile for his producers and has the people skills that make people love to work with him.

(Sources: 1 – “Cruise Control” (excerpt from ‘Cruise’)(Cosmopolitan) Frank Sanello; 12-01-1995; 2 – “Man With a Mission,” (The Calgary Sun) Lisa Wilton, Calgary Sun, 05-21-2000; 3 - “Conversations With Cruise,” Vanity Fair, June, 2000; Tom Cruise, by Phelan Powell, Chelsea House Publishers, 1999)

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Appendix 2: Exit Pass

EXIT PASS

One thing you learned today: _____

One question you have: _____

EXIT PASS

What is the difference between a passing mood and a more serious situation that requires professional help?

Appendix 3: RAFT

RAFT is an acronym for the important variables of writing. Using the RAFT strategy is a good way to differentiate assignments and assessment, and helps make writing decisions simpler and clearer. It also provides a fresh and creative way for students to approach their writing.

Role of the Writer—Who are you as the writer? Yourself, a character in a book, friend, scientist, homeless person, reporter, a bacterium, ...?

Audience—To whom are you writing? A friend, yourself, newspaper readers, other bacteria, parents, ...?

Format—What format will the writing take? Is it a letter, diary entry, obituary, speech, poem, ...?

Topic + strong verb—What is the subject or point of the writing? Is it to plead for another chance, to provide a warning, offer advice, argue for stricter regulations on the sale of tobacco, ...?

Discuss these variables with the students. Provide an example for each of the variables related to your topic of study. Brainstorm additional topics as a group, listing suggestions under each of the four variables.

Students choose one of the RAFTs to write about. There are five examples below.

	Role	Audience	Format	Topic
1	Teenager	Self	Diary	Write a series of diary entries for a teenager who has to move to a new city (or some other significant change).
2	Body	Owner	Letter	Write a letter from the body explaining the effect that change and stress has on the body and how the owner could improve the situation.
3	Graphic artist	Teenagers	Brochure	Create a brochure that would appeal to teenagers and include self-help strategies for coping with change.
4	Teenager	Advice Columnist	Letter	Write a letter describing a specific situation that you are having trouble coping with.
5	Dear Abby	Teenagers	Advice Column	Write a column giving advice to people going through a specific change.

Appendix 4: Think-Pair-Share

Think-Pair-Share is a co-operative discussion strategy that encourages the participation of all students.

1. **Think.** The teacher encourages students to think by providing a question or prompt. The students take a few moments (maybe 30 seconds) just to *think* about the question. This is silent time. They may or may not jot some notes.
2. **Pair.** After thinking, students *pair* up with a partner to talk about the answer that each came up with. Students compare their thoughts and identify the answers they think are best, most convincing, or most unique.
3. **Share.** After students discuss in pairs for a few moments (again, keep it short), the teacher calls for pairs to *share* their thinking with the rest of the class. Ideally, every pair should report.

Students learn, in part, by being able to talk about the content. Think-Pair-Share structures the discussion so that everyone is involved, but in an organized way; it isn't a free-for-all. The process moves quickly and limits off-task behaviour and talking. Accountability is built in because each student must report to a partner, and then partners must report to the class.

In the first stage, students have time to think about their answers. Because it is silent think time, you eliminate the problem of eager students who always shout out the answer, making it unnecessary for other students to think.

Also, the teacher poses a question and asks everyone to think about the answer. This is very different from asking a question and then calling on an individual student to answer, which leads some students to gamble that they won't be the one who gets called on and therefore they do not think much about the question.

Students get to try out their answers with one other person before they "go public" in front of the whole class. Students who would never speak up in class are at least discussing and giving an answer to one other person. Students often rethink their answers in order to express it to someone else, and may elaborate and think of new ideas in the process of sharing and as they listen to their partner.

Appendix 5: Q-Chart

A Q-Chart is a strategy to help students develop their questioning skills, deepen comprehension, and generate questions for sharing and discussion. Begin by selecting one word from the left column and one word from the top row to create a question. The farther down and to the right you go, the more complex and high-level the questions.

	Is	Did	Can	Would	Will	Might
Who						
What						
Where						
When						
How						
Why						

Appendix 6: Health Risks of Using Drugs

Tobacco

1. _____

2. _____

3. _____

Alcohol

1. _____

2. _____

3. _____

Caffeine

1. _____

2. _____

3. _____



Cannabis

1. _____

2. _____

3. _____

Steroids

1. _____

2. _____

3. _____

Crack/Cocaine

1. _____

2. _____

3. _____

Opiates/Solvents

1. _____

2. _____

3. _____

Appendix 7: Drug-Free Declaration

Drug-Free Declaration

I, _____ (name), will stay DRUG AND SMOKE FREE for the following reasons:

1. _____

2. _____

3. _____

Signed: _____ Date: _____

Friends Who Support My Decision:

Signed: _____ Signed: _____

Family Who Support My Decision:

Signed: _____ Signed: _____

Teacher's Signature: _____ Date: _____

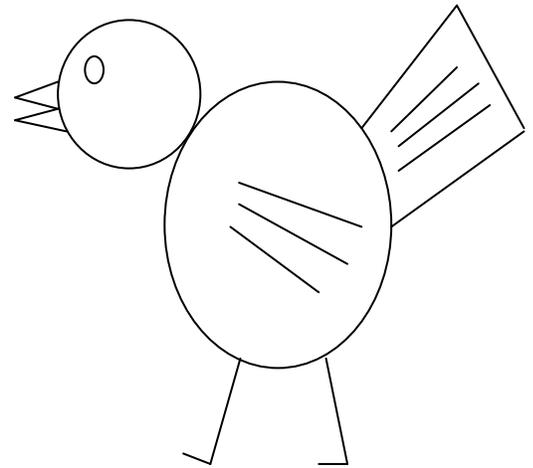
Appendix 8: Listening and Drawing

The purpose of this exercise is to demonstrate that communication is a two way process.

Students are going to draw a picture. They must listen carefully to the instructions but may not ask any questions during the exercise. Students must work on their own to draw what they hear.

Part 1

- Draw an egg shape
- Draw a circle touching the egg shape
- Draw a small circle inside the circle you have just drawn
- Draw three straight lines inside the egg shape
- Draw two small lines coming out of the circle that touch at one end
- Repeat just below
- Draw two longer lines coming out of the egg shape
- Draw a line to join up these two lines
- Draw three straight lines inside the shape you have just created
- Draw two lines coming out of the bottom of the egg shape
- Draw two short lines coming out of the lines you have just drawn.



Have students share their drawings. What made the task difficult?

Part 2

Repeat the exercise, but allow students to ask questions during the exercise. Only after both drawings are completed, show students the original drawing.

Ask students which part they found easier, and discuss why. Discuss what they learned about the need for effective communication. Consider both speaking and listening.

Students should conclude in their discussions that effective communication requires cooperation, honest listening, clear instructions, respect for one another, clarifying questions, and effective feedback.

Adapted with permission from www.samaritans.org/PDF/A2Communication.pdf.

Copyright 2010 by Samaritans, a part of their Developing Emotional Health and Learning (DEAL) program at www.samaritans.org/our_services/work_in_schools/deal_lesson_plans.aspx.

Appendix 9: Take a Stand

This activity is a good way to get a discussion started and can be used with any topic where students may have differences of opinion. It encourages students to consider and value others' opinions, to practice persuasive speaking by supporting their opinions with evidence and reasons, and to take turns speaking and listening.

- Post large Agree and Disagree signs on either side of the room.
- The teacher reads a statement out loud and students walk to the side of the room that corresponds to what they believe.
- Once students have settled they may explain why they agreed or disagreed. Only the person with the prop (microphone, talking stick, etc.) is allowed to speak.
- Encourage students to try and persuade others to change their minds and walk across the room to join the other side. Remind students that they will not always be able to change their peers' minds and that is okay. They may have to agree to disagree.
- Begin with a couple of simple statements to warm up and make sure everyone understands the rules ("Eating breakfast will improve your success in school"; Dogs make better pets than cats.")
- Next move on to more serious statements related to your topic (see examples below).
- Afterwards, discuss how students felt about "taking a stand" and about having others try to persuade them to change their minds. Did they find it hard to disagree with others? Were there times they felt uncomfortable or unsafe? Did they feel pressured to change their minds? How does peer pressure affect the decisions they make in other situations?
- What did students learn about effective ways of changing someone's mind?

Possible prompts:

- The best relationship is with someone you can talk to.
- Jealousy is a sign of love.
- It is OK to send sexy pictures to someone as long as you are in a committed relationship.
- It is OK for a teenager to date someone significantly older (junior or senior).
- It is OK to read your partner's text messages or emails without their permission.
- People who are in love should hang out with each other more than with their friends.
- The best kind of dating relationship is with someone who has similar qualities of a close friend.
- It is OK to refuse to participate in sexual behaviours in a committed relationship.
- People should not have sex until they are married.
- Sexual health education should not happen at school.
- Students should have access to birth control and safer sex information at school.
- High schools should provide daycare for teenagers who have babies.
- Honesty and respect are essential to a good relationship.

Appendix 10: Rank and Discuss

On a scale of 1–5 (least to most acceptable), rank each scenario.

Scenario	Personal Ranking	Group Ranking
1. Sally and Ron have been dating for a year and are monogamous. They have been using condoms and Sally is on the pill. Ron would like to stop using the condoms.		
2. Joe and Kevin are in high school and have been best friends since elementary. Joe recently disclosed to Kevin that he is gay and now Kevin is avoiding Joe and will not take his phone calls.		
3. Jean and Mark have been dating for several months. Jean has been pressuring Mark to have sex. Mark loves Jean, but is not ready to have sex. Jean tells him that if he was a real man, he would.		
4. Karen and Jim have been dating for about a year. They started having sex a few months ago, and always use condoms to protect against pregnancy. However, Karen is worried that she might be pregnant as she has missed a period and nauseous and tired all the time. She has decided not to tell anyone and to deal with the situation on her own.		
5. Paul’s friends have been bragging about their sexual relationships. Paul and his girlfriend have not had sex, but Paul decides to tell his friends that they have.		
6.		

In small groups, discuss your ranking of each character’s behaviour then negotiate an agreed upon group ranking.

Appendix 11: Anticipation Guide

The teacher provides a series of statements to which students respond with agree or disagree prior to a reading. Effective anticipation guides present students with relevant issues that are worth discussing but that do not have clear cut answers. They encourage careful reading of a text, activate prior knowledge, help students make predictions, and help students make connections.

Make sure that students understand that they are not guessing the correct answer, but exploring their own thoughts and beliefs.

For example, a reading that included information about sexual and reproductive health education might include statements such as the following:

Before Reading Agree/Disagree	Sexual and Reproductive Health	After Reading Agree/Disagree
	Sexual health education should begin before puberty.	
	Birth control should be available to teenagers without parental consent.	
	Sexual health education should happen at home, not at school.	
	Birth control should be available free of charge at every junior and senior high.	
	Teenagers should not be sexually active.	
	Abortion is one method of birth control.	
	Sex education at an early age will encourage young people to have sex sooner.	

Appendix 12: Article

Experts want sex education from age four to cut teen pregnancies

By Anthea Lipsett

The Guardian, Saturday 5 July 2008

Two leading sexual health charities are calling for children as young as four to be given compulsory sex education.

Brook and the Family Planning Association argue that teaching children about sex from a young age would help cut abortion rates and sexually transmitted infections when adolescents. The charities said children should be taught the names of body parts and about sex and relationships.

The Brook chief executive, Simon Blake, said: "If we get high-quality sex and relationships education in every primary and secondary school across the UK all the evidence shows teenage pregnancy rates will continue to fall and will improve young people's sexual health.

"While sex and relationships education continues to be patchy, another generation of children and young people do not get the education they need to form healthy relationships and protect their sexual health." He wants every primary and secondary school to be legally required to provide sex and relationships education and secondary schools to ensure young people have access to free confidential contraceptive and sexual health services.

He told the BBC: "Many young people are having sex because they want to find out what it is, because they were drunk or because their mates were." He added: "All the evidence shows that if you start sex and relationships education early - before children start puberty, before they feel sexual attraction - they start having sex later. They are much more likely to use contraception and practise safe sex."

The Department for Children, Schools and Families issued new draft guidance on wellbeing for schools yesterday.

The Sex Education Forum, the national authority on sex and relationships teaching, called for personal, social, health and economic education, which includes sex and relationships, to be made statutory.

Julie Bentley, the Family Planning Association chief executive, said: "This is not about teaching four-year-olds how to have sex ... It is like maths - at primary school children learn the basics so that they can understand more and more complex concepts at a later stage."

She added: "Parents are concerned that if they are told about sex they will go straight out and have it but the research shows the complete opposite. They have sex later and when they do, they have safer sex."

At present all children have to learn about the biology of reproduction but parents can opt to remove children from personal, social, health and economic education lessons, where they learn about the emotional and relationships side of sex.

Guardian News & Media Ltd (2008). Used with permission.

Retrieved from www.guardian.co.uk/society/2008/jul/05/children.sexeducation.

Appendix 13: Written Conversation

A written conversation is a variation of dialogue journaling that capitalizes on students' desire to pass notes in class. After a reading (video, presentation, experiment, etc.) students write short notes back and forth to each other about the experience. In this manner, every student in the class is engaged in thinking about and "discussing" the topic.

After the reading, students are paired up. Explain that partners will be writing notes to each other about the reading, and swapping them every few minutes for a total of three (or two or four) exchanges.

This writing is like a quick write. Students are to write for the entire time in complete silence until they are told to "pass" their note. The writing is informal; students should not be concerned about spelling, grammar or punctuation, although it must be readable, and related to the topic. There is no talking during the transition times, either. This process takes place in complete silence and until students become familiar with the process, they will need reminders to keep the conversation in writing.

The teacher may provide prompts such as,

- What struck you about this article?
- What questions do you have?
- What do you understand or not understand?
- What are the most important ideas?
- Do you agree or disagree with the author? Why?

All students begin writing when the teacher says go. After two or three minutes, the teacher tells students to exchange notes with their partner. Students read their partner's note and then write a response. Responses could include feelings, stories, connections, questions, or anything you might say in a face-to-face conversation.

After this exchange process has occurred a few times, students are invited to talk out loud about the topic with their partner for a few minutes.

A whole-class discussion might follow since everyone will have ideas about the topic. Pairs could be invited to share a highlight of their conversation as a way to get the discussion started.

Appendix 14: Speaking and Listening Self-Evaluation

Student's Name: _____ Date: _____

Check the statement that best describes your behavior during class discussions.

Term:				
1	2	3	4	
				I seldom create distractions or interrupt during discussion.
				I occasionally talk, fidget, make distracting noises, or interrupt while others are talking.
				I frequently talk, fidget, make distracting noises or interrupt while others are talking.
				I seriously disrupt discussion with inappropriate comments and/or behavior.

				I frequently initiate meaningful contributions to class discussions.
				I occasionally initiate meaningful contributions to class discussions.
				I seldom initiate meaningful contributions to class discussions.
				I never initiate contributions to class discussions.

				I am very attentive and always know what is going on; I make good eye contact, sit up, etc.
				I am usually attentive and know what is going on, but occasionally my attention strays.
				I am occasionally attentive and I may or may not know what is going on; may be daydreaming.
				I am usually inattentive and I seldom know what is going on in class

				I always try hard to express my opinions carefully and respectfully so as not to offend others.
				I am generally respectful of others. Any insensitive comments I make are unintended.
				I do not think about speaking carefully. I have made several insensitive or disrespectful comments.
				I am not concerned about being thoughtful or respectful of others. I do not care if I am offensive.

Term:				
1	2	3	4	
				I am open-minded and willing to carefully consider views that are different from my own.
				I recognize bias and stereotyping. I am willing to stand up for equality.
				I am willing to listen to others and I try to understand different points of view.
				I go along with the crowd without carefully considering whether I really agree or not.

				I present thoughtful opinions that are well supported with examples, reasons and facts.
				I present thoughtful opinions with some support. I sometimes mix up fact and opinion.
				My opinions are based on my feelings and do not always include supporting evidence.
				I am opinionated and make many unsupported statements. I argue for the sake of arguing.

Appendix 15: Addictions

If you suspect someone you know has a problem with substance abuse or gambling, you can ...

- Become informed about the topic.
- Seek support for yourself.
- Talk to your friend's older sibling.
- Send an anonymous letter to your friend's parents.
- Tell your friend's parents.
- Talk to a school counsellor.
- Talk to a student support worker or social worker.
- Talk to a school nurse.
- Talk to a local doctor.
- Talk to your friend and let him or her know that you are worried.
- Be a good listener.
- Offer a hug.
- Talk to your parents.
- Call a help line for some advice.
- Go to a drug counsellor.
- Get a teacher who your friend respects to talk to him or her.
- Talk to your friend and tell him or her that you are worried.
- Call 911 in an emergency.

Appendix 16: Potential Impacts of Substance Use

Personal impacts

- Tears apart relationships with family, friends, and colleagues.
- Family separation and divorce.
- Withdrawal and social isolation.
- Instability, increased mental health problems.
- Compromised health, poor nutrition, disease, STIs.
- Possibility of overdose.
- Unintended pregnancy.
- Economic insecurity.
- Accident, injury, death.
- Loss of social status/reputation.

School Impacts

- Discipline problems, disruption to others.
- Apathy, disengagement.
- Impaired cognitive function.
- Poor academic performance.
- Lateness, truancy.
- Course failure.
- Increased likelihood of dropping out.

Work Impacts

- Impaired performance at work.
- Loss of productivity.
- Increased vandalism, theft at work.
- Safety concerns when performing duties.
- Lateness, absenteeism.
- Discipline problems.
- Loss of job/income.

Legal Impacts

- Child abuse and neglect .
- Possession of illegal drugs.
- Impaired driving and liability.
- Criminal convictions, fines, jail time.
- Criminal record may affect future employability.

Social Impacts

- Cost of prevention programs.
- Treatment/rehabilitation programs.
- Social welfare programs.
- Emergency medical treatment.
- Criminal activity including violence, theft, assault.
- Increased safety and security measures.
- Costs of justice system, prisons.
- Law enforcement.

Appendix 17: News Article 2

A One of a Kind Walking, Biking School Opens in Canada

Written by Ryan Gray

School Transportation News

Tuesday, 12 January, 2010 16:05



With the dawn of the new year, a newly opened elementary school in Ontario is heralded as the nation's first school that requires nearly all of its students to get to and from school using their own two feet.

In an effort to battle rising child obesity rates, traffic congestion, environmental concerns and injuries from motor vehicle crashes, P.L. Robertson elementary school in Milton, Ontario, opened its doors last week as the first of its kind that forbids parents from driving their kids to school.

According to Jennifer Jenkins, a registered nurse and the project manager for Halton Public School Board's Active and Safe Routes to School Program, about 98 percent of the school's 700 students bike, walk, skateboard or ride scooters to and from school. The \$125,000 pilot program is funded for one year with school board funds generated from local taxpayer money.

Jenkins was loaned to the school board by the Halton public health department to implement the innovative program that has turned up eyebrows from British Columbia to Manitoba to other Ontario school boards to districts in the United States. In fact, in August she presented a case study at the second National Safe Routes to School conference held in Portland, Ore.

The program comes on the heels of a pilot run last year at eight other schools to encourage more physical activity for the students and to alleviate hundreds of parents converging on schools in their personal vehicles. Jenkins said a check at another school last year turned up about 150 parents dropping off their children at the same time, which resulted in snarled traffic. The school's principal said the normal number of cars at school in the morning and afternoon is actually at least twice that number, alleviated that one day only by school construction and rain.

Jenkins said the pilot saw 100 percent student compliance during good weather at many of the participating schools. And even during the snowy or rainy winter, the program saw up to 90 percent of the students continue their pedestrian ways.

"Even kids who were bused decided to join in," she added. "When there are more kids [walking], more kids are apt to do it because they want to be with their friends."

P.L. Robertson, located about 20 miles southwest of Toronto, requires students who live 1.6 km from

campus, or about 1 mile, to get to school on their own, often via the school's walking school bus or bike train. That equates to nearly all students except for a handful who are eligible for the yellow school bus because they live farther than 1.6 km or who attend a French immersion dual track school that is located outside of the school district's boundaries.

The program is run in collaboration with a local school transportation consortium that also administers school busing in the province and with local traffic engineers and law enforcement. Karen LaCroix, the general manager of Halton Student Transportation provided by contractor First Student, said approximately 16,000 students who attend the area's two English and French speaking public school boards and two Catholic English and French speaking school boards ride the school bus each day. The active safe routes and transportation programs also work together to develop the actual active safe routes taken to and from school by both walkers and bikers.

Jenkins added there are plans to expand it to 18 to 20 additional schools within the next year, but first she is concentrating on making the program a success at P.L. Robertson.

"If you start a certain lifestyle behavior earlier, the momentum will naturally bring [the safe routes program] to the high school level eventually," she said.

If the project at P.L. Robertson is a success, she added that the school board will need to decide how to evolve student active transportation programs. That could include sitting down with provincial government officials. Already, the local Catholic school board has signed on to participate.

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www.stnonline.com/home/top-stories/1969-a-one-of-a-kind-walking-biking-school-opens-in-canada

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