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Dear 6th Grade Health Educators:

The following modifications will be made to the FLASH Curriculum to better suit the needs of our student population and grade level progression.

6 th Grade Progression:
Lesson 1: Introduction
Lesson 2: Decision Making
Lesson 5: HIV & AIDS
Lesson 6: Puberty
Lesson 7: Self-Esteem
Lesson 8: Family
Lesson 9: Friendships

Each lesson has modifications and recommendations for MCSD in the front of each section. Please follow the recommended changes, as they support you the teacher in delivering this sensitive content.

Sincerely,

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Introduction

Grade 6, Lesson #1

Time Needed

Class Period

Student Learning Objectives

To be able to ...

- 1. Distinguish between definitions of "sex" and "sexuality."
- 2. List and explain at least four ground rules.
- 3. Identify why ground rules are necessary (to protect people's feelings).
- Sort sexuality questions into logical categories (pregnancy, puberty, etc.) as a step toward having a comprehensive picture or context into which the unit's learning can be placed.

Agenda

- 1. Define "sexuality".
- 2. Explain purpose of the unit.
- 3. Use case study and class input to set ground rules.
- 4. Discuss slang vs. medical/correct terms.
- 5. Introduce "anonymous question" box.
- 6. Use "Introduction Worksheet" to summarize lesson (Optional)

Materials Needed

Classroom Materials:

- Shoe box with a label and a slot in the top for anonymous questions.
- · Optional: Anonymous Question Roots and Introduction Worksheet.

Student Materials: (for each student)

- · Introduction Worksheet
- Several slips of scrap paper and a pencil

Activity

1. Explain that you are beginning a unit on "sexuality."

Say: Sexuality is probably new to you, so I'll define it. Some people think "sex" and "sexuality" are the same, but that they aren't. "Sex" is the smaller word and the narrower concept. It is sometimes used to mean gender (e.g. on forms where it asks your name, birth date and sex) and it is sometimes used to mean particular behaviors..."Sexuality" includes those ideas, but it also includes how a person feels about him or herself, what they feel about being male or female, whether they know how to love, how to trust, how to communicate. A person's sexuality has to do with whether they can make friends, whether they can keep friends. And when people study sexuality they also learn about how people change from children into adults, how babies are made, how they're born, and how they grow.

2. Explain the purpose of the unit.

Say: We are doing this unit so that you will have correct information about things like bodies and growth; so that you will feel good about growing up; so that you'll feel more comfortable asking questions of your parents or doctors; so that you'll understand and appreciate yourselves, your families and one another; and so that you will not be as likely to ever be sexually abused.

3. Tell the class that you want to share a Case Study with them, and get their reactions to it.

Read aloud:

"The class was beginning a unit on 'sexuality' that day. They came in from recess and Mr. Clark asked everybody to calm down and get ready to work. But everybody was a little nervous and excited, and it took a long time before the jokes and laughter let up. When it was quiet, Mr. Clark asked whether anyone knew what kinds of things they'd be studying in this next unit called 'sexuality.' Marco raised his hand and asked, 'What about the reproductive system?' A few people giggled. Then Shawna raised her hand. She asked whether the class would learn about menstrual periods. Four or five people began to roar with laughter and Michelle said 'How dumb!' Shawna started to blush. When the laughter kept up, tears came to her eyes and she finally got up and left the room."

Open a discussion about the Case Study.

Some questions for the class to consider are:

"Why do you think some people laughed?"
"How did Shawna feel?"
"Do you think other people will raise their hands from now on? Why not?
How will they feel about speaking in class?"
"If you were the teacher how would you handle the problem?"
"How could the problem have been avoided in the first place?"
"Do you think this kind of thing could happen in OUR class?" "How can we keep it from happening here?

Why don't we develop a contract for how we'll treat each other during this unit?"

Standard ground rules:

List or post them on the blackboard. Feel free to add to the list.

- "Be respectful." (including one's self)
- "Any question is a good question."
- "Protect people's privacy/confidentiality." (i.e., questions about friends and family members should NOT include their names or identities. It's more considerate to say "Someone I know had an acne problem. What causes that?" rather than "My sister had an acne problem...")
- "Agree to disagree."
- "It's OK NOT to answer a question." (In fact the teacher may choose to "pass" on a question if it is too personal or inappropriate for classroom discussion.)
- · "Be considerate of other people's feelings."

Discuss slang & "baby talk."

Encourage students to ask questions regardless of whether they know the standard/medical words for things. Explain that you will always try to include the MEDICAL word in your answer and to spell it for them on the blackboard.

5. Introduce the Anonymous Question Box

Say: Write at least one question or what you learned today and drop it in the anonymous question box. (If everyone is writing, nobody feels like the Only One). Do NOT write your name on the slip, unless you would prefer to talk with me privately about your question. Only one question on each slip (which makes it easier for you to sort the questions), but it is OK to use as many slips as they like. Spelling doesn't matter at this point. I will answer the questions, so it's OK to add questions whenever you think of them. Allow them time to write questions. (Answer questions the following day to allow yourself time to review the questions from the box.)

6. Wrap up the Lesson.

Hand out the "Introduction Worksheet" and have students work in pairs filling it out. Allow five (5) minutes.

Homework

Students' options:

- Take home today's worksheet and discuss it with an adult in their family.
- Bring in questions for the Question Box.

¹ See "Preparing Parents", page 4-5

ntroduction Lesson Visual

Anonymous Question Roots

"Is it true that ..?"

"How do you know if...?"

"What do they mean by ...?"

"Is it normal to ...?"

"What causes ...?"

"What should you do if ...?"

Introduction Worksheet

NAME_	DATE	
Our grou	ound rules are:	
	mes people use slang or baby talk to ask questions, because that's all the	
	That is better than NOT asking questions, but in this unit we're going towords for things.	learn the
Topics	we will talk about include:	

Ground Rules

- Be respectful." (including one's self)
- "Any question is a good question."
- "Protect people's privacy/confidentiality."
- "Agree to disagree."
- "It's OK NOT to answer a question."
- "Be considerate of other people's feelings."

Decision-Making

Grade 6, lesson #2

Time Needed

Class Period

Student Learning Objectives

To be able to ...

- 1. Identify two ways people can make decisions (actively or passively.)
- 2. List and demonstrate the steps in making a decision actively.
- 3. Recognize that, although feelings affect decisions, people CAN decide not to act on a feeling.

Agenda

- 1. Answer "Anonymous Question Box" questions.
- 2. Explain the importance of decision-making in sexuality.
- 3. Explain ACTIVE vs. PASSIVE decisions.
- 4. Use brainstorm to show that students are already decision-makers.
- Explain the 4 steps in making an ACTIVE decision.
- 6. Use board to walk the class through one ACTIVE decision.
- 7. Use the *Decision-Making Worksheet* or easel paper as individual or small group exercise to help students practice the model on another decision.
- 8. Anonymous Question Box activity (today's lesson).
- 9. Summarize the lesson.

Materials Needed

Classroom Materials:

- 5-10 sheets of easel paper
- 5-10 felt-tip markers
- -- OR --

Student Materials: (for each student)

· Decision-Making Worksheet

Activities

- 1. Answer question(s) from the anonymous question box (previous lesson(s).
- Introduce lesson by discussing what decision-making has to do with sexuality.

Say: "Examples of sexuality decisions we all face at some time in our lives include: Whom to choose as friends, how to act toward friends, whom to choose as a boyfriend or girlfriend and at what age, whether to "go with" anybody, whether and when to marry or have children, whether and when to go to the doctor about our private parts, whether to talk about sexuality with our families or friends, and even how to treat a person who likes us but whom we don't especially like."

- Explain the difference between ACTIVE and PASSIVE decisions.
 - a. Say: "ACTIVE decisions involve conscious thought (sometimes 30 seconds' worth, sometimes 5 year's worth). ACTIVE decisions involve a choice between at least two alternatives, where one can know or guess some of the consequences of each alternative. In making ACTIVE decisions, people consider their feelings (e.g. fear, anger, tenderness), their beliefs and their family's belief e.g. "friendship is important, but honesty is more important."), and the possible consequences, good and bad, of each alternative."
 - b. Say: "Passive decisions are those where the person has a choice, but allows someone else, or time, or chance to decide. Having red hair is NOT a decision, because there is no choice. Having short hair because your hairdresser or barber chooses it is a PASSIVE decision. Having short hair because you prefer it is an ACTIVE decision."
 - c. Say: "There is nothing inherently "good" or "bad" about ACTIVE vs. PASSIVE decision. In fact, if we consciously decided about every step we took, we'd be late getting where we were going!"
 - 3. Use brainstorm to show that students are already decision-makers.
 - a. Help students brainstorm all the decisions they have made so far today. Your list may look something like this:
 - whether to get up
 - what to wear
 - whether to bathe
 - whether to eat breakfast
 - what to have for breakfast
 - whom to sit with on the bus, or whom to walk to school with
 - whether to bring lunch
 - b. Say: Now, based on our brainstorm lets identify which decisions were made ACTIVELY, and which, PASSIVELY. For example, if someone in your family always cooks breakfast and you all eat together, you may not even think of it as a decision; you just do it. For you it's a PASSIVE decision. If, instead, you decide when you wake up each morning whether you're hungry and what to

fix yourself, that's ACTIVE.

- 4. Say: people make ACTIVE DECISIONS in 4 steps (sometimes carefully, other times, quickly):
 - 1. List alternatives (people often forget this step!)
 - 2. Consider the consequences, positive and negative, of each alternative
 - 3. Consider feelings (your own and, if someone else is involved, theirs)
 - 4. Consider beliefs (your own...but sometimes to decide what you believe it helps to find out what other people you trust believe--parents, clergy, a family friend)
- 5. Use board to walk the class through one ACTIVE decision: what to have for breakfast.

Walk students through the four step process introduced in Activity #4, above.

- a. What are my alternatives? List a few on the blackboard under the heading "alternatives": skip breakfast; coffee and donut; eggs, grits, bacon, juice, toast, and milk; leftover tortilla with cheese.
- b. What are possible consequences of these alternatives? Make two columns to the right of "alternatives", entitled "consequences, good" and "consequences, bad". Help the class fill in the chart. You might end up with something like this:

Alternatives

Consequences

	Good	Bad
1. Skip breakfast	On time to school	Feel cranky
	Get to sleep a little longer	Get yelled at for not
		eating
		Do poorly on test
2. Coffee and donut	Quick energy	Even more tired when
	Good taste	sugar/caffeine
		is gone
		Cavities
3. Eggs, grits, bacon, juice,	Do well on test	Late to school
toast milk	Not hungry all morning	Gain weight
4. Tortilla, cheese	Don't waste leftovers	Sick to my stomach
	Good nutrition	

- c. How do you feel this morning? Hungry? Sleepy? (If so, I might prefer to "sleep in" rather than to eat.) Scared about today's test? (If so, I may want to eat to get my brain in gear.)
- d. What do I believe about this issue? That breakfast is the most important meal? That being on time to school is more important than breakfast? That it's wrong to eat sugar? That you should always eat before a test?

6. Use the *Decision-Making Worksheet* or easel paper as individual or small group exercise to help students practice the model on another decision.

Break the class into groups of 3 to 5 students per group. Have them use the DECISION WORKSHEET or easel paper to:

- list alternatives (Make sure a group comes up with at least 4 alternatives before they begin weighing them.)
- consider consequences (they should think of at least one good consequence and one bad one for each alternative.)

Choose one of the following:

- b. You see your friend shoplift; nobody else seems to have noticed.
- c. A guy or girl in your class asks you to "go [steady] with" them. Your parents have said you can't go steady until you're 15.
- d. Your old friend invites you to a party this Friday and you say "yes". Then a really cute boy or girl invites you to watch video movies with their family the SAME night.
- e. A friend invites you and some other kids to spend the night. You know that their bodies have all started to mature. Yours hasn't and you think you'll feel embarrassed changing clothes in front of them.
- f. Your older brother or sister has friends over to your house who are passing a bottle of wine. Someone passes it to you.

Give the groups no more than 15 minutes. Then post or read aloud parts of each group's results, to make the point that the more alternatives a person thinks of, and the more thoughtful s/he is about each one of them, the better the chances of a good decision. Have them consider, aloud, how they might feel in the specific situation and what beliefs might affect the decision.

If your class is unfamiliar with small group work, or is particularly immature or rowdy, you may find it more productive to do this activity (#6) as an individual learning exercise. The "Decision Worksheet" can be filled out by each student and discussed.

7. Anonymous Question Box

Give each student several slips of scrap paper and a pencil.

Say: Write at least one question or what you learned today and drop it in the anonymous question box. (If everyone is writing, nobody feels like the Only One). Do NOT write your name on the slip, unless you would prefer to talk with me privately about your question. Only one question on each slip (which makes it easier for you to sort the questions), but it is OK to use as many slips as they like. Spelling doesn't matter at this point. I will answer the questions, so it's OK to add questions whenever you think of them. Allow them time to write questions. (Answer questions)

8. Summarize by pointing out that your students

- are already decision-makers
- make some decisions ACTIVELY and others, PASSIVELY
- will face some big decisions in life about which they will feel better afterwards, if they make them in an ACTIVE way...maybe even on paper.

Homework:

Students' options:

- Discuss with an adult in the family "the hardest decision you (the adult) has ever had to make." They can ask the adult what his/her feelings and beliefs were. They can ask what the alternatives were and how the adult reached a decision.*
- Watch T.V. for at least an hour, and describe a decision made by any character.

^{*}see "Preparing Parents" page 6-7

DECISION MAKING WORKSHEET

NAME:	DATE: _		
ALTERNATIVES	+(GOOD)	CONSEQUENCES -(BAD)	
1	I	1	

HIV & AIDS

Grade 6, Lesson #5

Time Needed

45-50 minutes

Student Learning Objectives

To be able to...

- 1. Explain that HIV is a blood-borne virus which attacks to the body's immune system.
- 2. Distinguish between:
 - (a) Being infected with HIV
 - (b) Being diagnosed with AIDS
- 3. Explain that the disease is transmitted only via blood, semen, vaginal fluid and breast milk.
- 4. Understand that, under certain circumstances, anyone can contract the disease.
- 5. Explain that the disease is not transmitted through casual contact.
- 6. Understand the concept of risk behavior and know which behaviors are safe and which are not.

Agenda

- Answer question(s) from the anonymous question box.
- Explain the lesson's purpose.
- Explain the characteristics of HIV and AIDS.
- Describe how HIV is transmitted and who can get the infection.
- 5. List ways one cannot contract it.
- 6. Re-emphasize risk behaviors: Injection drug use and sexual intercourse.
- 7. Define the acronym AIDS.
- 8. Question and answer period.
- 9. Use the HIV/AIDS Terminology Worksheet.
- 10. Anonymous Question Box activity.

This lesson was most recently edited December, 2009.

Materials Needed

Student Materials: (for each student)

HIV/AIDS Terminology Worksheet

Activities

1. Explain the lesson's purpose.

Say: The good news about HIV/AIDS is that even though we can't cure people of the infection after they contract it, we can prevent people from getting it in the first place. It is a very hard disease to contract, and people have to do some very specific things in order to get it.

It's important that you have good, factual information about HIV and AIDS. After today, you'll be able to tell facts from rumors and gossip. You'll be smart about HIV/AIDS, and most important, you'll know how to protect yourself and help your friends and families too.

HIV/AIDS as far as we know, has been around for less than fifty years. It was named in America in 1981. That's when doctors started noticing that patients had strange symptoms. They started to investigate. We don't know for certain when HIV started or where it came from.

We don't have a cure for people with HIV. Unfortunately, we don't have a vaccine either.

- Who can tell us what vaccines are? (shots to protect us)
- Good, you've all had some vaccines when you were young to protect you against certain illnesses. What are you protected against? (chickenpox, flu, measles, mumps)

Scientists around the world are working to make a vaccine against HIV, but they tell us that even if they're lucky enough to find one, it's going to be at least five or ten years until we can give it to people, because vaccines must go through long periods of testing to prove they work correctly.

That's why it's very important to listen carefully today. I want you to be safe. Today we will talk about what HIV/AIDS is: how you can get it and how you cannot. Afterwards, we'll have time for questions and discussion.

2. Explain the characteristics of HIV and AIDS.

Say: AIDS is caused by a virus called HIV. HIV is a tiny germ that enters the body through the blood stream. The virus attacks the immune system, the system that normally fights off diseases. You might have noticed when you were sick with a bad cold or flu, that areas in your neck become swollen. These are some of your lymph nodes. Inside, white blood cells were working to fight off infection.

Viruses need to get inside our cells in order to live. When a person gets HIV, the virus invades a white blood cell, which is the leader and organizer of the immune system. Inside the white cell, the virus multiplies and multiplies until the white cell can't hold any more virus. It bursts open and releases more new virus into the bloodstream to travel around looking for more white cells to invade. Over time, there aren't enough white blood cells left to protect the body. The immune system can't work properly; it can't do its job of protecting the body against infection. Patients may have to be hospitalized because they can't fight off illnesses that a healthy body could fight easily. Instead they become sicker.

Most people look and feel perfectly healthy when they first get HIV, and most don't even know it's in their body. We could not tell by looking at them if they were infected. The virus is inside their cells, and for the moment, their immune system continues to work fairly normally. Even though they seem completely healthy, they could still pass the disease on to other people during certain behaviors which we'll talk about in a moment. The virus will be in their body as long as they live. There is absolutely no way that they can get rid of it.

Over time (sometimes a very long time), a person with HIV will start becoming ill. There are lots of possible symptoms. These symptoms can be similar to those we have when we are sick with the flu, but they last much longer and are more severe. So people might have a fever that lasts for weeks or a cough or diarrhea. They may lose a lot of weight or they may have night sweats. (This is when a person wakes up, and even on a freezing cold night, their whole body is soaked with sweat and so are their sheets and blanket.) If a person has these kinds of symptoms for more than a couple of weeks, they would need to see a doctor. Only a blood test can tell if their symptoms are caused by HIV.

A person doesn't have AIDS until they get very sick from HIV. A person must have lost most* of the white blood cells called "T-cells" or get a specific type of illness for a doctor to diagnose them with AIDS. Often there is a particular type of pneumonia or cancer. While there are new medications that have helped people live longer and longer with HIV, no one has been able to fully recover. HIV is still considered a terminal disease. That means that, eventually, the person will die.

Note: * The actual T-cell count has to have dropped below 200 cells per cubic milliliter of blood, but it isn't necessary that your 4-6th grade students know that much detail.

3. Describe how the disease is transmitted and who is vulnerable.

Say: HIV is very hard to get. We can't get it the same way we do other illnesses like colds and flu.

What do you do if you have a friend with a bad cold, and they're sneezing and coughing around you? (That's right! You try to keep away from them.)

How do cold germs travel? (Good! Through the air. Cold viruses are airborne. Luckily for all of us, HIV does not travel through the air).

How does it pass? (Right. HIV is bloodborne. It <u>has</u> to get inside a person's bloodstream.)

HIV can only be passed from one person to another when people exchange certain fluids in their body. There are only four fluids known to have a strong enough concentration of the virus to pass it from an infected person to another person. These fluids are blood, semen from a man, vaginal fluid from a woman, and breast milk. Semen and vaginal fluids are our sexual liquids.

These fluids can be passed only when people are doing very particular, very intimate behaviors. We're going to talk about two behaviors which pass the virus. These are called risk behaviors.

addiction? (Discuss)

What do we mean when we talk about taking a risk? (Right. It means taking a chance. Sometimes people are very lucky when they take a chance, but other times they have no luck at all. Nothing works out the way they planned. So during these risky behaviors people are taking a chance of getting HIV.)

The first risk behavior is shooting up with injection drugs. Injection drugs are drugs people inject (or shoot) into their bodies. When people shoot up drugs, they often do it with a few other people. When a person puts a drug into his/her vein with a needle, she/he also pulls some of their blood up into the syringe. That blood will be in the syringe as long as the needle is used, even if there's such a small amount you cannot see it. As it is passed from one person's body to the next person's body, each person can be putting infected blood directly into their own bloodstream.

Many students have reported finding used drug needles lying around: sometimes at a park, or under bushes, or on the street. If you find any used needles, leave them alone and do not touch them at all. If there's an adult around, tell them about it. Do not handle them ever. Let an adult throw them away.

There are situations in which all of us see exactly the same type of needles. Where?

Yes. In hospitals, and doctors' and dentists' offices. If you need to get a shot from a doctor or nurse, or if you donate blood to help a friend, you will never have to worry about catching HIV. When a doctor or nurse uses a needle and syringe, it is always 100% sterile. There are absolutely no germs. The key is, the needle is used only one time to give your medicine, and then it's disposed of in a safe manner. People can only become ill when needles are shared. You already know that illegal drugs like marijuana, cocaine, and heroin are bad for people. They're bad for kids, for teenagers, for adults. You know that these drugs do terrible things to peoples' bodies and to their minds. Most people who shoot injection drugs probably never really planned to do it. Somehow, they got started, and then they couldn't stop - because they became addicted. What does it mean to have an

People who use alcohol or drugs are at greater risk to try injection drugs. They may start like this: Sometimes a person may be drinking alcohol or using another drug like marijuana at a party. Somebody in the room takes out a needle and asks if they want to shoot up. Since they are drunk or stoned, they can't think very clearly. They say "Sure," and they shoot up for the first time. That's why drugs are dangerous.

When we can't think clearly, we sometimes make choices that make us very unhappy later.

Who can remind us of the four fluids we mentioned that can pass the virus? (Good. Infected blood, infected breast milk, infected semen, and infected vaginal fluids.)

The last two are our sexual fluids. They can only be shared between two people when they are having sexual intercourse. If one person is infected with HIV, the other person can become infected during sex. Sex is especially risky because no one can tell by looking at someone whether that person has the virus and because most people who have it don't realize they have it.

The only 100% safe way to protect yourself from HIV is not to use injection drugs at all ever and to practice sexual abstinence.

Does anyone know that abstinence is? (Yes. Abstinence means a decision to delay sex and other risky behavior.)

Sexual intercourse, when two people are older and love each other very much, is an important part of most people's lives. It's a way to show strong affection, and it's also the way to make babies. It's very private and personal and special. Decisions about sex are very complicated.

They are really adult decisions. When young people try to make sexual decisions, things often don't go right. Sex is worth waiting for until you're an adult.

Many students have reported finding used condoms lying around: sometimes at a park, or under bushes, or on the street. Condoms are something people may use, when they have sex, to cut down the chances of pregnancy or HIV (or other diseases). If you find any used condoms, leave them alone and do not touch them at all. If there's an adult around, tell them about it. Do not handle them ever. Let an adult throw them away.

Another way that the virus is passed is during pregnancy. If a woman is pregnant (and remember, she may not know she is infected), she can give the virus to the baby during the pregnancy or birth. Many babies are born with HIV around the world. Here in the U.S., we have medicine that can protect most of these babies, but in many places there isn't enough money to pay for these medicines. It's a very sad situation. If they don't get medical treatment, most of these babies don't live very long; they are too sick.

In past years, some people became infected during blood transfusions. (They needed other people's blood to keep them healthy.) Before 1985, there was no test to screen blood to make certain it was safe. Some people got the virus during their transfusion. Now, we do have a test to check all blood, so the chance of getting HIV from a transfusion is very, very small.

So, who can get HIV?

It's important to know that anyone who participates in a risky behavior can get HIV. The virus does not discriminate. It can infect males or females, babies, kids, teenagers, or adults. It can infect people from any racial or ethnic group. The virus does not depend on certain kinds of people; it depends on certain kinds of behaviors. It's not who you are but what you do.

4. List ways in which the virus is not transmitted.

HIV is a hard disease to catch. It is passed mainly through risk behaviors.

HIV is not an airborne virus like colds and flu.

- We can't get it through coughs and sneezes.
- We can't get it by touching things like doorknobs, or pencils or kickballs.
- You don't get HIV through any of the regular daily things you do: riding next to someone on a school bus, or shaking hands, or hugging.
- Not by using someone's comb or make-up or wearing their clothes.
- Not by sharing a can of pop or a pizza or playing sports.
- Not by slow dancing.

Not from swimming pools or from mosquitoes.

There have been lots of studies done of people who live with and care for people with HIV and AIDS. Not one single person has ever gotten HIV from living in the same home or going to school with someone with HIV.

As time goes on, many people in this class may know someone with HIV or AIDS. Now you know that you won't have to be afraid; you don't have to keep away from the person. People with HIV/AIDS can still be friends, relatives, and neighbors - just like they've always been.

- Reemphasize risk behaviors, by asking the class to tell you, again, how the virus is
 usually transmitted: sharing injection needles, having sex with someone who has the
 virus.
- 6. Write the acronym "AIDS" on the blackboard like so:

 A
 D
 S

Let's take a look at what the letters stand for?

- Does anyone know what the A stands for?
 ACQUIRED AIDS is a disease a person gets by participating in a particular behavior. (Only babies whose mothers are infected can be born with it.)
- What does the I stand for?
 IMMUNE The virus attacks the person's immune system.
- What about the D?

 DEFICIENCY The white blood cells are too few or too weak, so the immune system can't protect the person against illness.
- What about the S?
 SYNDROME The cycle of the disease is from the time of infection...a group of symptoms.
- 7. Respond to students' written and oral questions.

Please Note: If there are questions for which you don't know the answers, be honest about it. Then you (or a student) can call an expert to find out the answer. Call a toll-free HIV/AIDS Hotline: ianywhere in the United States (1-800-CDC-INFO [800-232-4636], 1-888-232-6348 TTY, 24 Hours/Day or E-mail: cdcinfo@cdc.gov).

Anonymous Question Box activity – (today's lesson)
 Give each student several slips of scrap paper

Say: Write at least one question or what you learned today and drop it in the anonymous question box. (If everyone is writing, nobody feels like the Only One). Do NOT write your name on the slip, unless you would prefer to talk with me privately about your question. Only one question on each slip (which makes it easier for you to sort the questions), but it is OK to use as many slips as they like. Spelling doesn't matter at this point. I will answer the questions, so it's OK to add questions whenever you think of them. Allow them time to write questions. (Answer questions the following day to allow yourself time to review the questions from the box.)

9. Use the HIV/AIDS Terminology Worksheet.

Allow students 5 minutes to fill it in, individually. Review the answers aloud.

HIVAIDS Terminology Worksheet Answer Key

- 1. HIV
- 2. immune
- 3. white blood
- 4. blood semen vaginal fluids breast milk
- 5. shooting injection drugs sexual intercourse
- 6. healthy
- 7. prevented (it is also acceptable if someone answers "treated")
- 8. touching hugging shaking hands sharing food or dishes riding a bus together sharing pens and pencils
- 9. Acquired Immune Deficiency Syndrome
- 10. abstinence
- 11. pregnancy (or birth)

HIV/AIDS Terminology Worksheet

NAMEDATE		DATE
DIF	RECTIONS: Fill in the blanks.	
1.	A virus calledcauses AID	S.
2.	HIV attacks the body's	system.
3.	The virus invades	cells.
4.	AIDS is transmitted through three boo	y fluids:,
	, and	·
5.	Two risk behaviors are	and
6.	People who are infected with HIV, car	still look and feel
7.	HIV can't be cured, but it can be	
8.	Four casual (everyday) behaviors wh	ch do <i>not</i> pass the virus are:
		,
9.	AIDS stands for	
10	. When a person decides not to have	
11	. Most children who have HIV, got the	virus during

Puberty

Grades 6, Lesson #6

Time Needed

45 - 50 minutes

Student Learning Objectives

To be able to ...

- 1. describe the physical, emotional and social changes of puberty.
- 2. explain that puberty is triggered by the endocrine system, specifically the pituitary gland.
- 3. distinguish among definitions of erection, menstruation, nocturnal emission, ovum, puberty, and sperm.
- 4. explain the purposes of bras, athletic supporters and menstrual hygiene products.

Agenda

- Answer question(s) from the anonymous question box.
- 2. Explain reasons for this lesson.
- 3. Use brainstorm to review Activity #2 and to compare and contrast male and female development.
- 4. Use Puberty Worksheet #1 to review terms.
- 5. Anonymous Question Box activity.

This lesson was most recently edited August, 2009.

Materials Needed

Classroom Materials:

· One copy per student of Puberty Worksheet #1

Activities

- 1. Answer question(s) from the anonymous question box.
- 2. Explain reasons for this lesson.

Say: That everyone here either has begun or will soon begin to develop from a child into an adult. This lesson will help them understand the changes that involves.

2. Ask for a volunteer or two to **define puberty**. Thank them and build on what they said, so you end up defining it as a **time when a person's body**, **feelings and relationships change from a child's into an adult's**.

Ask the class when that happens. **Be clear that knowing an average age is kind of useless, since most of us aren't "average." A range is more useful.** It is normal to start noticing changes, for a girl, any time between about age 8 or 9 and age 13.^{1,2,3} Guys, on average, start noticing changes a little later, between about ages 9 or 10 and 14.^{4,5} And puberty isn't an overnight process; it can take several years to complete. Longer in boys, on average, than girls. If someone gets to be 16 and still hasn't noticed any changes in their body, they might want to chat with a doctor. Puberty involves changes in not only your body but also your feelings and relationships. So your friend's body might start maturing first, but you may be maturing emotionally and socially sooner than your friend.

And it isn't a race, anyway. The **pituitary gland**, in a person's brain, will trigger the changes of puberty whenever it is programmed to do so. Younger for one person; older for another.

Have the class **brainstorm puberty changes** as you write them on the blackboard. Then help them distinguish changes that happen (a) to boys only, (b) to girls only, and (c) to both. And finally discuss and answer questions about each item.

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The American Association of Pediatrics. (2005). Puberty Information for Boys and Girls - Public Education Brochure. Retrieved June 15, 2009 from Teen Q & A Web site: http://www.aap.org/family/puberty.htm

Steingraber, S. (2007). The Falling Age of Puberty in U.S. Girls: What We Know, What We Need to Know. Retrieved August 14, 2009 from Breast Cancer Fund Web site: http://www.breastcancerfund.org/site/c.kwKXLdPaE/b.3266509/k.27C1/Falling_Age_of_Puberty_Main_Page.htm

³ Family Practice Notebook. (before May 10, 2008). Female Tanner Stage. Retrieved August 14, 2009 from http://www.fpnotebook.com/Endo/Exam/FmlTnrStg.htm

⁴ The American Association of Pediatrics. *Puberty Information for Boys and Girls - Public Education Brochure*.

Family Practice Notebook. (before May 10, 2008). Male Tanner Stage. Retrieved August 14, 2009 from http://www.fpnotebook.com/Endo/Exam/MITnrStg.htm

Changes to be sure to include: (Be sure to explain each one)

- height growth spurts (both) Explain that you grow most in your sleep.
- **shoulders broaden (boys)** Explain that this is a skeletal change, not something he can speed up through strength-training, although strength-training is certainly OK.
- hips widen (girls) Explain that the idea is for her pelvic bones to form sort of a bowl, in order to support a pregnancy if she ever decides to have a biological child.
- breasts develop (girls and, to some extent, many boys) Explain that many boys do experience some breast development and that it usually disappears within six months or a year. It can be scary if he doesn't realize how common it is. If it doesn't disappear in a year's time, he might chat with his doctor about it. Girls can, of course, also expect that their breasts will develop, too. No matter what size or shape or color they end up (and there's quite a variety) and even if they are different from one another, they will almost always be sensitive to sexual touch and able to nourish a baby.
- acne may begin (both) Explain that acne is caused by a combination of thicker skin than when you were younger and more oils, along with bacteria. Sometimes the new, thicker layer of skin blocks the pores or openings where the oils are supposed to flow, causing a pimple. If it gets infected it can become a blackhead. People should wash gently with mild soap a couple of times a day and after heavy exercise, but it will not prevent acne altogether. Scrubbing hard can actually make acne worse. And thinking that washing will cure acne, makes it sound like people who have it are dirty. That's neither true nor fair.
- stress-related, malodorous perspiration begins (both) Explain that everyone sweats when they are hot, but that at puberty another group of sweat glands starts to produce sweat *also* when you feel stressed or upset. This kind of sweat in teens and adults can have a strong odor. So people often bathe or shower more often after puberty. And many use deodorant or antiperspirant, too.
- pubic and underarm hair develops (both) Explain that pubic hair grows around a person's genitals (around the labia or penis) and that pubic and underarm hair is often coarser and sometimes a different color than the hair on the person's head. You can explain, too, that, like the use of deodorant, shaving one's underarm hair is a personal decision.
- facial hair develops and body hair may thicken (boys and, to some extent, many girls) You can explain that the *amount* of hair a person gets on their face and body is genetic (inherited from a person's biological family). Explain that it isn't unusual for girls to notice new hair on the face or around the nipples and a girl might feel self-conscious if she didn't know it was common.
- voice deepens (both, though more in boys) Explain that the depth of the voice is a matter of air passing the vocal chords. The vocal chords are like the strings of a stringed instrument. If anyone in the class plays a stringed instrument, ask them which strings make the lower notes. They say it is the thicker ones. Well, your vocal chords thicken during puberty, no matter what sex you are. On average a boy's will get thicker than a girl's as he matures, but that's just an average. The reason a guy may notice his voice cracking sometimes, is that the vocal chords don't always get thick evenly. There may be a time when one end of the vocal chord is thicker than another and as air pushes past, the pitch of his voice may change in mid-sentence.

- **genitals enlarge (both)** This is more obvious for a boy, since he looks at his penis and scrotum every time he uses the bathroom. A girl is less likely to notice, but her vulva (labia and clitoris) gets bigger at puberty, too.
- erections happen more frequently (more noticeable in boys) -- Explain that an erection is what you call it when the penis or the clitoris fills up with blood and gets harder and bigger. Erection is perfectly healthy and it happens sometimes when you are thinking of something sexual or of someone you like, but it also can happen, especially at puberty, for no apparent reason. A guy may find it embarrassing when he has one in public, but he can just carry something in front of him if it does. And it may help to know that it happens at some point to almost all guys.
- sperm production and ejaculation begin (boys) Explain that sperm are the microscopic cells from a man's body that can start a pregnancy, when they combine with a woman's egg cell. And ejaculation is what you call it when the sperm come out of his penis (in a fluid called "semen"). A man may ejaculate during sleep, masturbation, or sexual touch with a partner. Once he's able to ejaculate, he's able to help start a pregnancy. That's not to say he's ready to be a good dad yet, but it is biologically possible to make a baby.
- nocturnal emissions begin (many boys) The slang term for nocturnal emission is "wet dream" (but it isn't offensive slang). Some boys not all will ejaculate during their sleep. They may or may not have been dreaming at all. The wet dream can be their body's response to the higher level of hormones in their bloodstream during a growth spurt. But guys should know that not everyone has nocturnal emissions and there's nothing to worry about whether they do or don't. Some guys find them very personal and will prefer to wash their own bedding when they have a wet dream.
- ovulation and menstruation begin (girls) -- The slang term for ovulating is "releasing an egg;" the slang term for menstruating is "having a period" (neither of these are offensive slang). Explain that about once a month, starting at puberty, one or the other of a girl's ovaries will allow an egg or, in Latin, an "ovum" to mature and pop out. That's called ovulating. It usually travels into the nearest fallopian tube. If she has had sexual intercourse and there is sperm in that fallopian tube, it may fertilize the egg. The fertilized egg will travel the rest of the way down the tube and, in a week or so, it will nest, or "implant," in the uterus to begin growing into a baby. In the meantime, the uterus has developed a thick, blood-rich lining to be a good nest in case she did get pregnant. If that egg doesn't get fertilized, though, it will live for only about 24 hours and then dissolve and be reabsorbed by her body. The uterus will wait a couple of weeks, in case the egg did get fertilized, with support from her body's hormones. Then, after a couple of weeks, if no egg has implanted, the hormone level will drop and her uterus will, basically, give up on her being pregnant that month. The lining will come out in the form of blood and little pieces of tissue, through her vagina ... so that she can build up a fresh new lining the next month in case she gets pregnant. The shedding of the lining is called menstruating. A woman doesn't have muscles to control when her period comes out, the way you can control when urine comes out. It will just dribble out for 2 to 10 days. That's why she'd need a pad or a tampon to soak it up. If she doesn't have one handy when she happens to get her first period, a bunch of toilet paper will do briefly, until she can get one. But many girls start carrying supplies in their backpacks or purses as they reach the age of 9 or 10, just in case.

- crushes and attractions may begin (both) Explain that, although kindergartners can get crushes, too, they may feel more intense at puberty. It is the feeling of really wanting someone to like you. Of having your tummy feel funny when they walk in the room or when you hear their voice. Everybody will feel this eventually, but some people notice it at this age and others may not notice those kinds of feelings until middle school, high school or even later. A person may have crushes on people of their own sex, the other sex or both. It may or may not predict how they will feel when they're grown. That is, really liking someone of a different sex doesn't necessarily mean you will eventually figure out that you are heterosexual (straight). And, likewise, really liking someone of your own sex doesn't necessarily mean you will eventually figure out that you are gay or lesbian. It often takes time to figure out. There's no rush.
- self-consciousness may increase (both) Explain that everybody goes through a time of worrying what other people think of them. Students with older brothers and sisters may have noticed that they may be spending longer in front of the mirror getting ready for school and that they may be getting really picky about their clothes. It's OK. Adults worry about what other people think, too. But it gets less painful as you mature. It may help to realize that other people may be so worried about how they look and what you think that they aren't noticing how you look as much as you think they are.
- concern for others may grow (both) As you start focusing more on other people's feelings and needs, you may, in fact notice that you are less self-conscious.
- sudden mood changes may begin (both) Explain that feeling happy one minute and in tears the next, sometimes for no apparent reason, isn't at all unusual at puberty. The hormones in your blood stream influence how you feel.
- When might you want to see a doctor or counselor about it? MedLine Plus says, "Being a teenager [and we'd add, "or a preteen"] is hard. You're under stress to be liked, do well in school, get along with your family and make big decisions. You can't avoid most of these pressures, and worrying about them is normal. But feeling very sad, hopeless or worthless could be warning signs of a mental health problem.

"Mental health problems are real, painful and sometimes severe. You might need help if you have the signs mentioned above, or if you

- Often feel very angry or very worried
- Feel grief for a long time after a loss or death
- o Think your mind is controlled or out of control
- Use alcohol or drugs
- Exercise, diet and/or binge-eat obsessively
- Hurt other people or destroy property
- Do reckless things that could harm you or others
- "Mental health problems can be treated. To find help, talk to your parents, school counselor or health care provider."

⁶ MedLine, a service of the U.S. National Library of Medicine, and the National Institutes of Health. (2009). *Teen Mental Health*, retrieved August 14, 2009 from Teen Mental Health Web site: http://www.nlm.nih.gov/medlineplus/teenmentalhealth.html

- friction with parents or guardians may grow (both) Explain that a preteen or teen and a parent or guardian probably both want the same thing in the long run ... for the teen to grow up and become more independent. But sometimes you feel like a little kid and want to get taken care of and other times you prefer to think for yourself. The adults in your life go through similar changes as you're going through puberty, sometimes wanting to make decisions for you because they're afraid you'll get hurt and other times ready to let you try your wings. If you aren't on the same page at the same time, there can be and often are some times of struggle. That doesn't mean you don't love each other. Most families get through it eventually.
- **freedom to make decisions grows (both)** People's parents and guardians often trust them with more of their own choices, especially as they take on more responsibilities.
- understanding of self may grow (both) Explain that means beginning to gain more
 of a sense of who you are and that, as this happens, a person gets more self-confident.

3. Discuss the varying "products" for newly adolescent bodies.

Examples of products newly adolescent bodies may use are:

- athletic supporter
- bra
- several kinds of menstrual hygiene products (a tampon with applicator, a tampon without, a maxi-pad, a mini-pad).

Discuss:

- A) What is each one for?
- B) How does a person decide when to use these?

Be sure to mention that:

- deodorant and a daily bath or shower is sufficient for cleanliness.
- which menstrual hygiene products are "best" is a personal decision and sometimes a girl's family and culture may have strong opinions about it, but that medically, they are all OK

4. Hand out "Puberty Worksheet #1" and use it as a discussion tool.

Answers:

- 1. b having a period = menstruation
- 2. a the penis or clitoris filling with blood and getting larger = erection
- 3. f the cell from a man that can start a pregnancy = sperm
- 4. c sperm coming out of the penis during sleep = nocturnal emission
- 5. d the "egg" cell from a woman that can start a pregnancy = ovum (plural = ova)
- 6. e a child's body beginning to change into an adult's body = puberty
- 7. g the gland in the brain that triggers the beginning of puberty = pituitary

5. Anonymous Question Box activity – (today's lesson)

Give each student several slips of scrap paper

Say: Write at least one question or what you learned today and drop it in the anonymous question box. (If everyone is writing, nobody feels like the Only One). Do NOT write your name on the slip, unless you would prefer to talk with me privately about your question. Only one question on each slip (which makes it easier for you to sort the questions), but it is OK to use as many slips as they like. Spelling doesn't matter at this point. I will answer the questions, so it's OK to add questions whenever you think of them. Allow them time to write questions. (Answer questions the following day to allow yourself time to review the questions from the box.)

Puberty Worksheet 1

NAME			DATE	
DIRE	CTION	S: Put the letter of ea	nch word next to the correct definition of the word.	
	a)	erection	1. having a period	
	b)	menstruation	2. the penis or clitoris filling with blood and getting larger	
	c)	nocturnal emission	3. the cell from a man that can start a	
	d)	ovum	pregnancy	
	e)	puberty	4. sperm coming out of the penis during sleep	
	f)	sperm	5. the "egg" cell from a woman that can start a pregnancy	
	g)	pituitary	6. a child's body beginning to change into an adult's body	
			7. the gland in the brain that triggers the beginning of puberty	

Puberty Worksheet 2

NAME	DATE
DIRECTIONS: Write "T" for "true" nex	t to each statement you believe is correct.
Write "F" for "false" next to the wrong	statements.
1. Girls may start puberty any	time between the ages of 8 and 13.
2. Usually, boys start puberty	a little younger than girls.
3. The pituitary gland, in the b	orain, tells the body when to begin puberty.
4. Boys only get erections wh	en they think about something sexual.
5. A person's feelings may ch	ange from moment to moment, especially during puberty
6. If your parents started pub	erty early, you might too.
7. You can tell whether a girl	
8. Boys often have some bre-	ast growth during puberty.
	ave nocturnal emissions at puberty, but it is also healthy
not to.	
10. The main reason teenage	ers get acne is they eat the wrong foods.
11. Girls should not use tamp	oons until they are grown.
12. The vagina is always wet	, just like the mouth and eyes.
13. There is something wrong	g with a boy if he ejaculates in his sleep.
14. If a boy has not started p	uberty by age 13, he should see a doctor, because there
might be something wron	ng with his endocrine system.
15. It is OK for a girl to show	er or play sports during her menstrual period.
16. A boy should start wearing	ng an athletic supporter ("jock strap") during puberty when
he plays sports, to protect	ct and support his genitals.
17. A girl may start wearing a	a bra for support when her breasts start to develop,
	nfortable being active and playing sports.
18. It is necessary to wash n	nore often once you begin puberty.

Puberty Worksheet 2 - Answer Key

NAM	E DATE
DIRE	CTIONS: Write "T" for "true" next to each statement you believe is correct.
Write	"F" for "false" next to the wrong statements.
_ T	_ 1. Girls may start puberty any time between the ages of 8 and 13.
_F	_ 2. Usually, boys start puberty a little younger than girls.
_ T	_ 3. The pituitary gland, in the brain, tells the body when to begin puberty.
_ F	_ 4. Boys only get erections when they think about something sexual.
_ <i>T</i>	_ 5. A person's feelings may change from moment to moment, especially during puberty.
_ <i>T</i>	_ 6. If your parents started puberty early, you might too.
_ F	_ 7. You can tell whether a girl is menstruating by looking at her.
_ T	_ 8. Boys often have some breast growth during puberty.
_ T	9. It is common for boys to have nocturnal emissions at puberty, but it is also healthy
	not to.
_F	_ 10. The main reason teenagers get acne is they eat the wrong foods.
_F	_ 11. Girls should not use tampons until they are grown.
_ T	_ 12. The vagina is always wet, just like the mouth and eyes.
_F	_ 13. There is something wrong with a boy if he ejaculates in his sleep.
_F	_ 14. If a boy has not started puberty by age 13, he should see a doctor, because there
	might be something wrong with his endocrine system.
	_ 15. It is OK for a girl to shower or play sports during her menstrual period.
_T	_ 16. A boy should start wearing an athletic supporter ("jock strap") during puberty when
	he plays sports, to protect and support his genitals.
_ <i>T</i>	17. A girl may start wearing a bra for support when her breasts start to develop,
	especially if she is uncomfortable being active and playing sports.
T	18. It is necessary to wash more often once you begin puberty.

Self-Esteem

Grade 6, Lesson #7

Time Needed

25-35 minutes

Student Learning Objectives

To be able to...

- 1. Explain that everyone needs to feel:
 - "I belong"
 - "I can do things"
 - "People appreciate me."
- 2. Describe the feelings he or she has when he or she is left out of a group, fails at something, or does something that goes unnoticed.
- 3. Explain the value of differences and the difficulty of differences.
- 4. Make an affirming statement to him/herself.
- 5. Make an affirming statement to a classmate and to a family member.

Agenda

- Answer question(s) from the anonymous question box.
- 2. Explain the purpose of the lesson.
- 3. Define self-esteem and describe the origin.
- 4. Use riddles (Visual #1) to unscramble 3 key elements of self-esteem.
- 5. Identify situations that damage self-esteem.
- 6. Identify situations that build self-esteem.
- 7. Use an esteem-building small group exercise.
- 9. Discuss the exercise to summarize the lesson.
- 10. Anonymous Question Box activity.

This lesson was most recently edited June 29, 2012.

Materials Needed

Classroom Materials: (1 per class)

Self-Esteem Visuals #1 and #2

Student Materials: (for each student)

- Self-Esteem Worksheet (same as Visual #2)
- pencils

Activity:

1. Answer question(s) from the anonymous question box.

Explain that self-esteem means liking yourself.

Say: People with lots of self-esteem (i.e., who like themselves) tend to make healthier decisions than people with only a little. They tend to make friends, and keep friends, more easily, etc. This lesson will give everybody some tips on how to boost their own--and others'--self esteem.

2. Describe the origin of self-esteem:

Say: We're all born with an imaginary empty treasure chest. As people love, cuddle, brag about and play with us, it puts treasure in. As they criticize us, it takes treasure away. Sometimes when a lot of put-downs accumulate, the treasure chest locks. Locking protects us from hurts, but also prevents us from feeling the good feelings inside the treasure chest. Three keys can unlock those feelings.

3. Use riddles (Visual #1) to unscramble 3 key elements of self-esteem. Show the class the first (scrambled) key on Visual #1, but keep the others covered.

a. Read the class your CLUE FOR KEY NUMBER ONE:

"Everybody needs to feel this way. You feel this way when someone chooses you to be on their team. You feel this way when your whole family gets together for Thanksgiving. You feel this way when everybody's going somewhere and they ask 'Aren't you coming?' You feel this way when you're home sick and somebody calls just to see if you're OK. You feel this way when somebody invites you to be in their club."

Ask if anyone knows what the first key to feeling good about yourself is...

ANSWER: "I belong."

Have the person who thinks he/she knows come up and write the answer on Visual #2.

b. Repeat the process for KEY NUMBER TWO:

"Everyone needs to feel this way, too. Jimmy is only three years old; he feels this way when he puts his clothes on all by himself. Kathie is seven; she feels this way when she rides her two-wheeler for the first time. Mick is eleven; he gets this feeling by building model airplanes. Denise is sixteen; she feels this way when she drives the car with her new driver's license. Damien is in a wheelchair; he feels this way with his new electric wheelchair that allows him to go places without being pushed. Grandpa Walt feels this way when he takes care of his great-grandbaby for the evening."

ANSWER: "I can do things."

C. CLUE FOR KEY NUMBER THREE:

"Everybody needs to feel this way, also. Mary is doing her chores when the phone rings. She asks her little brother, Jack, to answer the phone. He answers it and takes a message for Mary. She says, "Thanks, kid," and Jack feels this way. When her mother comes home she sees that Mary straightened up and she says, "The house looks great, honey." Mary feels this way. Mary's Mom opens a shopping bag and shows Mary the safety pins Mary's been asking for. Mary grins. "You remembered," she says, hugging her. Mom feels this way.

ANSWER: "People appreciate me."

d. You will end up with Visual #2 looking like this:



4. Identify situations that damage self-esteem.

Say: "Think of examples of when a person might feel, "I DON'T belong." How about examples of when they might feel, "I CAN'T do things?"

Now think of examples of times when a person might feel, "Nobody appreciates me."

5. Identify situations that build self-esteem.

Ask the class for examples of when a person might feel "I <u>DO</u> belong." Remembering those occasions can unlock your treasure chest when you feel like there's something wrong with <u>you</u>, because you're lonely. Have them list times they've felt "I <u>CAN</u> do things." Again, remembering is helpful when you feel like giving up. Have them list times they've felt "People <u>DO</u> appreciate me." And finally have them consider how to give other people self-esteem treasure.

6. Answer "Anonymous Question Box" questions about self-esteem.

Give each student several slips of scrap paper and a pencil. Ask them to write at least one question or what they learned today and drop it in the anonymous question box. (If everyone is writing, nobody feels like the Only One). Explain that they should NOT write their name on the slip, unless they would prefer to talk with you privately about their question. Only one question on each slip (which makes it easier for you to sort the questions), but it is OK to use as many slips as they like. Explain that spelling doesn't matter at this point. Explain that you will answer the questions, so it's OK to add questions whenever they think of them. Allow them five or ten minutes to write questions. (Answer questions the following day to allow yourself time to review the questions from the box.)

7. Use an esteem-building small group exercise.

As a class, have each person go around the group saying one thing they like about each other person. Remind them of the ground rule, "No put-downs."

- 8. Reiterate that a person's feelings about him/herself are influenced by three things:
 - whether he/she feels belonging to a family or other group
 - whether s/he feels competent (able to do something well)
 - whether s/he feels as if other people notice and are gladdened by his or her presence.
- 9. Anonymous Question Box activity (today's lesson)

Give each student several slips of scrap paper

Say: Write at least one question or what you learned today and drop it in the anonymous question box. (If everyone is writing, nobody feels like the Only One). Do NOT write your name on the slip, unless you would prefer to talk with me privately about your question. Only one question on each slip (which makes it easier for you to sort the questions), but it is OK to use as many slips as they like. Spelling doesn't matter at this point. I will answer the questions, so it's OK to add questions whenever you think of them. Allow them time to write questions. (Answer questions the following day to allow yourself time to review the questions from the box.)

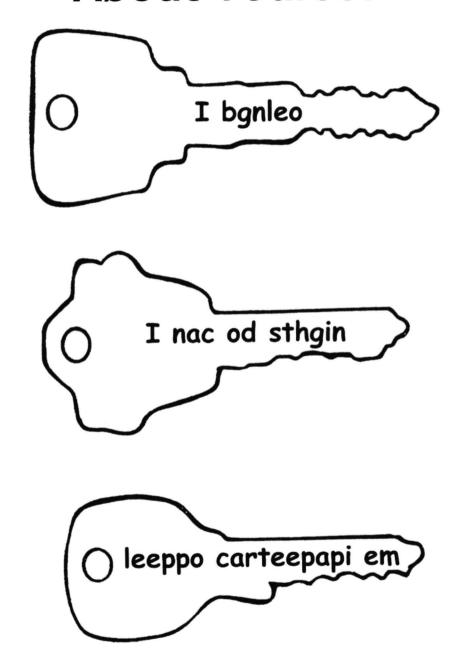
Homework

Students' options:

- Ask an adult in their family whether they felt popular when they were the student's age and whether that has ever changed.*
- Give someone (a friend, family member, teacher, or even a stranger) a gift of a piece of selfesteem treasure in one of three ways, through:
 - including that person (to give them a sense of belonging), or
 - complimenting the person on some skill (to give them a sense of being able to do things, or
 - thanking them for something (so they'll feel appreciated).

Self-Esteem Visual 1

Keys To Feeling Good About Yourself

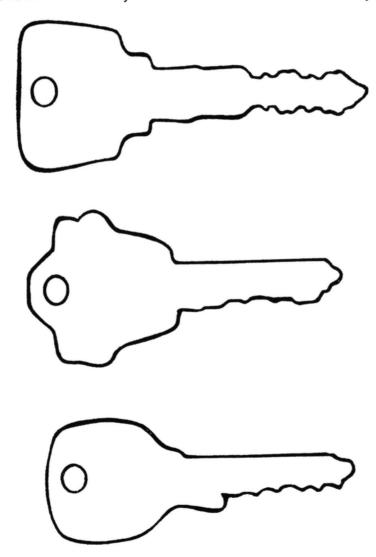


Self-Esteem Visual 2/Worksheet

	•		
NAME		DATE	
VAIVIE		DATE	

Keys To Feeling Good About Yourself

DIRECTIONS: Unscramble the keys. Write the answer inside each key.





Time Needed

45 - 50 minutes

Student Learning Objectives

To be able to...

- 1. Recognize that there are different kinds of families.
- 2. Give examples of two purposes of families.
- 3. Recognize that all members of a family (including parents) have needs.
- 4. Name something he or she values about each member of his or her family.
- 5. List at least three behaviors that contribute to good listening.
- 6. Describe the feeling he or she has when someone listens to him or her or talks to him or her in a serious, personal way.
- 7. Identify characteristics of a "good" friend and assess self.
- 8. List at least three opening statements to initiate conversations.
- 9. List at least 3 ways to maintain a friendship.

Agenda

- 1. Answer question(s) from the anonymous question box.
- 2. Explain purpose of the lesson.
- 3. Define "family."
- 4. Diagram families.
- 5. Use brainstorm to identify purpose and importance of families.
- 6. Use contrasting role-plays to identify "good listening behaviors" and to highlight their importance.
- 7. Examine WHO BENEFITS from good communication.
- 7. "Anonymous Question Box" activity.
- 8. Summarize the lesson.

This lesson was most recently edited June 6, 2013.

Alternate formats available upon request.

Materials Needed

Student Materials: (for each student)

- One sheet of white or manila construction paper per student
- · Several crayons or colored pencils per student

Activity

1. Say: "This lesson will help you understand what families are for, and how they (your students) contribute to their own families."

2. Define family.

Say: "A family is two or more people who love and take care of each other. Usually they are related and/or live together. Families come in all shapes, sizes and descriptions."

3. Diagram families.

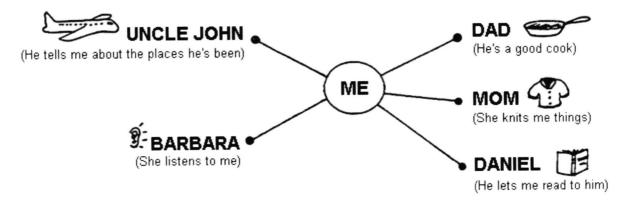
Have each student draw a small circle in the center of a sheet of construction paper. They should write the word "me" inside the circle. You can do the same on the blackboard, diagramming your own family. From the circle, draw one spoke for each member of your family. At the outside end of the spoke, write the person's name or nickname and draw a little picture of something special about that person. (It might be a soccer ball for the sister who is a "soccer-nut", or a smiling mouth for the brother with the wonderful laugh, or a hairbrush for the grandmother who lets you brush her hair and style it.)

Point out that each person will define "family" differently, in deciding who to include. Some will draw their parents and brothers and sisters. Some will draw all their blood relatives. Some will draw a single parent or two parents of the same or different genders. Some will include step-parents or grandparents or others who live with them. Some may draw two households if their parents live apart and some will draw foster families. Some may count a loved one serving in the military overseas or in a nursing home or a correctional facility.

They should include whomever THEY think of when they think of their family. Some will count pets as family. They get to decide who counts.

Allow fifteen (15) minutes.

Here's an example:



a. Invite 3 or 4 volunteers to describe their diagrams to the class. Help each volunteer to articulate the characteristic he or she values about each family member.

4. Examine the purposes of families.

Say: "Families meet two kinds of needs we have: physical needs and emotional needs."

Make two columns on the blackboard and ask the students to brainstorm all the needs a family can meet. You may end up with something like this:

PHYSICAL NEEDS

EMOTIONAL NEEDS

shelter	to feel you belong	to feel understood
food	to feel appreciated	to laugh, cry, etc.
clothes	to feel useful	to feel listened to
medical care	affection	to feel needed and
		special

Say: "ALL family members have needs and that all help MEET one another's needs. Even the adults have needs. Even the elderly person and the infant help meet other people's needs. Even your students help meet some of the needs their families have."

5. Examine communication within families.

Say: "If one of the needs a family can meet is the need to feel listened to, how can a person listen well? How do you know if somebody's really listening to you? How do you feel? How do you know when they're not?"

Choose your most dramatic student to role-play with you a conversation between a brother and sister. You play the older sibling. The younger sibling is upset over something that happened at school.

Play the scene twice. The first time you exhibit poor listening skills (allow yourself to be distracted/interrupted by the phone of the T.V., don't make eye contact, cross your arms and lean backwards, tell the other person they don't really feel upset, and change the subject). The second time, you exhibit good listening skills (allow no distractions, look the person in the eyes, uncross your arms and lean forward, check out whether you understand the person's feelings by asking, and nod). EACH time, ask your fellow role-player how they FELT in the scene.

After the second scene, ask the class to tell you exactly what they saw you do differently in the two scenes. Write the class's observations on the blackboard, entitling the list "Behaviors That Contribute to Good Listening."

6. Examine WHO BENEFITS from good communication.

Say: "I want to share a Case Study with them and get their reactions to it." Read aloud:

"Leo and Kristen were both in sixth grade and they were best friends. One day Leo came to school grouchy. He wouldn't take his coat off. He hit

someone who tripped over his foot by mistake. He didn't even sing during music, and he was usually the best singer in the class. Mrs. Smith, his teacher asked him what was wrong and he wouldn't tell her. The music teacher, Mr. Bailey, came out to talk with him during recess and he just pulled away. Finally, at lunch he told Kristen that his dog had been hit by a car and killed. He told her he couldn't tell anybody but Kristen because he was embarrassed that he might cry. As he said this, one tear slid down his cheek and Kristen offered him her sleeve to wipe it."

Ask the class how they think Leo felt. Ask them also how they think Kristen felt. The point is that both persons feel good: Leo, because she didn't laugh at his feelings, and Kristen, because Leo trusts her so much that he will talk to her when something is too personal and private to share with anyone else. He feels listened to and she feels needed and special.

7. Anonymous Question Box activity - (today's lesson)

Give each student several slips of scrap paper

Say: Write at least one question or what you learned today and drop it in the anonymous question box. (If everyone is writing, nobody feels like the Only One). Do NOT write your name on the slip, unless you would prefer to talk with me privately about your question. Only one question on each slip (which makes it easier for you to sort the questions), but it is OK to use as many slips as they like. Spelling doesn't matter at this point. I will answer the questions, so it's OK to add questions whenever you think of them. Allow them time to write questions.

(Answer questions the following day to allow yourself time to review the questions from the box. Remember that your role is not to judge any one family's lifestyle but to help students appreciate similarities and differences and PURPOSES of families.)

8. Summarize the lesson by asking the class to tell you what a family is and its purpose.

Homework

Students' options:

- Take home their family diagrams to discuss with an adult member of the family*
- Diagram a family from a television show or a book they have already read, as if they were one of the characters.

Friendship

Grade 6, Lesson #9

Time Needed

35-45 minutes

Student Learning Objectives

To be able to ...

- 1. Identify characteristics of a "good" friend and assess self.
- 2. List at least three opening statements to initiate conversations.
- 3. List at least 3 ways to maintain a friendship.

Agenda

- 1. Explain the reason for the lesson.
- 2. Read a case study about friendship (aloud or silently).
- 3. Use the case study to tie this lesson to decision-making.
- 4. Use a focused-writing exercise to help students identify what they value in a friend.
- 5. Discuss focused-writing exercise.
- 6. Discuss feelings of alone-ness and loneliness.
- 7. Discuss the risks and benefits involved in "initiating" a friendship.
- 8. (Optional) Use a bulletin board exercise to identify skills in building and maintaining friendships.
- 9. "Anonymous Question Box" activity.
- 10. Summarize the lesson.

Materials Needed

Classroom Materials:

- Friendship Visual #1
- Overhead projector/Document Camera

Student Materials: (for each student)

- 1. Construction paper
- 2. Markers
- 3. Tape
- 4. OPTIONAL: one copy per student of "Terry's Story" (to be printed)

Activity

- Answer question(s) from the anonymous question box.
- Explain the reason for the lesson.

Say: "As people grow up, not only their bodies change. Their understanding of themselves changes and so do their friendships. That is what this lesson is about-understanding yourself and friendship."

Read a case study about friendship (aloud or silently).

Read "Terry's Story" aloud to them (or copy it and have them read it silently or follow as someone reads aloud). If you read it aloud, show Terry's list of friends (Visual #3) on the overhead/document camera.

Use the case study to tie this lesson to decision-making.

Ask the class what they think of Terry's decision to help Gabriel. To tie this lesson in with decision-making, you can have the class brainstorm Terry's alternatives (choices) as you write them on the board. Then have them consider and discuss the possible positive and negative consequences ("good and bad things that could have happened") of each.

Use a focused-writing exercise to help students identify what they value in a friend.

Have the class number a paper 1 to 15 and list all their friends, similar to how Terry did.

- · List at least eight.
- They may be people you don't see any more, but who used to be your friend (when you lived somewhere else).
- They don't have to be your age; some may be adults and some may be little kids you babysit for.
- They may be male or female (same sex as you or other sex).
- Some may be members of your family, but only if they really feel like friends.

Have them write, next to each name, what they like about that person...why the person is their "good friend". They may not have time to finish this in class. Some may have to finish as homework.

Discuss focused-writing exercise.

Remind them of the ground rules, especially their right to "pass" and their agreement not to put one another down. Explain that everybody's definition of friendship is different; that one person, for example, might choose a friend because that person had a good sense of humor, whereas another might not care at all about humor, but might really care that the person be someone they can talk seriously with. Explain that the point of the exercise is not for everyone to agree, but for each person to have a chance to think about what is important to him or her. Ask for volunteers to each share one reason they put one person on their list. Compare and contrast. Reflect back to the group characteristics many people list as important in a friend: trust, honesty, listening skill, sense of humor, helpfulness, etc. Point out that the things they value now in friends may be very different from things they looked for in friends as a kindergartener.

Discuss feelings of alone-ness and loneliness.

Discuss how it feels to be in a new school where you don't know anybody. Point out that, while a person may feel as if she or he is the only one with those feelings, it's not true.

Discuss the risks and benefits involved in "initiating" a friendship.

Discuss how it feels to initiate conversation or to phone someone you think you might like to become friends with. Discuss, too, how it feels to be on the receiving end--when someone else initiates.

- Optional: Use a bulletin board exercise to identify skills in building and maintaining friendships.
- a. Have half the class write ideas and tape them on a bulletin board, re: "What you could say after you say hi!" or "How to start a conversation to make a friend." This can be done aloud as class discussion, instead.
- b. Have the other half of the class write ideas and tape them on a second bulletin board re: "If you want to keep a friend, it helps to ..." This one also can be done in discussion format.
 - Anonymous Question Box activity (today's lesson)

Give each student several slips of scrap paper

Say: Write at least one question or what you learned today and drop it in the anonymous question box. (If everyone is writing, nobody feels like the Only One). Do NOT write your name on the slip, unless you would prefer to talk with me privately about your question. Only one question on each slip (which makes it easier for you to sort the questions), but it is OK to use as many slips as they like. Spelling doesn't matter at this point. I will answer the questions, so it's OK to add questions whenever you think of them. Allow them time to write questions. (Answer questions the following day to allow yourself time to review the questions from the box.)

Summarize these points:

- People value different things in friends.
- Each of us is valuable as a friend for one reason or another.
- As we grow up we change in terms of what we want in our friendships.
- It is difficult to be the "new kid on the block".
- It can be scary to initiate a new friendship, but it's just as scary to other people as
 it is to ourselves.
- There are many ways to go about starting or keeping a friendship.
- People need friends.

Homework

Students' options:

- Take home their "friend list" to discuss with an adult in their families. Ask the adult who is the adult's good friend and why.*
- Write a poem about friends.

^{*}see "Preparing Parents" page 4-5

"Terry's Story"

I know a lot of different kids. In fact, for my 11th birthday party, I had 15 on my list to invite. When I showed it to my mom, she said, "Terry, I'm afraid you're going to have to cut that list in half."

"C'mon, Mom. You know you can't divide an uneven number by two. Besides," I told her, "this is no laughing matter. How am I supposed to choose who comes and who doesn't?"

She suggested that I write the main reason I picked each person beside his or her name.

Then, I could decide which reasons seemed to be most important. That's what I ended up doing.

PEOPLE TO INVITE TO MY BIRTHDAY

- 1. Michael -- Lives next door.
- 2. Jennifer -- Michael's sister.
- 3. Heather -- She's new; I think I might like her.
- 4. Rocky -- Sits by me in school.
- 5. Terry -- We laugh at the same kinds of things.
- 6. Kevin -- Everyone thinks he's neat.
- 7. Troy -- Kevin's best friend.
- 8. David -- Hasn't ever called me a name.
- 9. Stefanie -- Been to her house.
- 10. James -- Kids treat him bad; I don't know why.
- 11. Kerry -- Acts like I'd like to act.
- 12. Lisa -- Made a science project together; took a month.
- 13. Shelly -- Asked me to her birthday party.
- 14. Jay -- Super sports star.
- 15. Gabriel -- My friend.

My mom just happened to be standing near me when I finished writing. She pointed to number 15. "Here, you've put down 'My friend.' Aren't they all your friends?" she asked.

"Kind of, but not like Gabriel," I told her. Then, so she'd see the difference, I had to remind her of the time when the principal called to discuss "a problem we're having with Terry at school."

It happened during the month that Gabriel was playground supervisor. The 7th and 8th graders take turns at this job. Well, Gabe had just moved here from Mexico and sometimes kids couldn't understand the way he talked. When it came to sports, though, that didn't seem to matter much. The job seemed to mean a lot to him.

Well, anyhow, I'm not a terrific athlete. Lots of times I'm one of the last to be picked for a team; and once in a while I end up "leftover." When that happened, I'd help Gabriel keep score and sort of be his assistant. Sometimes we'd stay a couple of minutes after the bell rang and he'd give me some pointers

to improve my game. Then, I'd help him bring in the equipment that was left on the field and we'd get to talking about other things.

That's why I got back to my room late some days during the month that Gabriel was on duty. After so many times, Mrs. Sykes said that if it happened again she'd have to report me to the principal. I didn't plan to let that take place. But, a few days later, things got complicated.

It was one of those times that I wasn't in the game, so Gabe kept me busy. I was used to taking a few remarks when certain people saw us helping each other out. Things like, "Hey, Terry! You gettin' paid overtime for that?" when I was carrying equipment back to the storeroom, or stuff about my "private coach" since Gabriel had been working with me after the bell.

But that day kids were teasing even more than usual, and they left a lot of equipment lying around. I even saw a few kids throwing balls and gloves over the fence where they'd be hard to find in all those shrubs.

I thought of what a time Gabriel was going to have trying to explain why all those things were missing. See, even though everyone is supposed to bring back equipment, the supervisor is still responsible.

I didn't like any of my choices. I didn't want to be late again. But I couldn't walk off and leave Gabe. So that's why there was a phone call from Mr. Savage telling Mother I'd be home late. I had to pick up litter for a punishment after school.

But it wasn't so bad, 'cause see, real soon after I started picking up the trash Gabriel showed up and together we found spelling papers dated 1974 and wrappers from candy they don't even make anymore. Well, that's why he had to come to my party.

My mom said, "Aha! Maybe you're trying to say that you and Gabriel speak the same language." She was right. He's my friend because we help each other out.

Adapted from *The Person I Am: Self-Concept, Decision Making, Values and Career Options*, Marcia J. Smith and Judith M. Uriostengui, San Diego City Schools.

Friendship Visual 1

PEOPLE TO INVITE TO MY BIRTHDAY

- Michael -- Lives next door.
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