

Catholic District School Board Writing Partnership

Course Profile

Healthy Active Living Education

Grade 11

Open

PPL30

• *for teachers by teachers*

This sample course of study was prepared for teachers to use in meeting local classroom needs, as appropriate. This is not a mandated approach to the teaching of the course. It may be used in its entirety, in part, or adapted.

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Course Overview

Healthy Active Living Education, Grade 11, Open, PPL30

Secondary Policy Document: *The Ontario Curriculum Grades 11, 12:*

Health and Physical Education

Course Description

The focus of this course is on physical activity. Through active participation in a well-balanced enjoyable program (i.e., individual, dual, team, fitness, interactive games), students will explore and continue to improve their movement skills, personal fitness, and personal competence. Students will gain the knowledge, skills, and attitudes needed to maintain a healthy lifestyle through the investigation of personal safety/injury prevention, healthy sexuality, and mental health. Students will develop a commitment to lifelong participation in enjoyable physical activity.

How This Course Supports the Catholic Graduate Expectations

This course provides an opportunity for teachers and students to integrate the body, mind, and spirit in light of Catholic faith development. It provides a forum where students can develop values and moral decision-making skills in situations they will encounter as they grow as young adult Christian believers. Improving the student's quality of life will be addressed through the health curriculum and physical activities. This will ensure growth in body, mind, and spirit. Pressure on students from outside sources in a changing world will require a strong foundation in critically understanding these forces and acting with an informed conscience in light of gospel values regarding human solidarity, compassion, and support. This course will help students to commit to a lifelong physical and spiritual wellness program.

Course Notes

This course is designed to meet the expectations through health and physical activity. The structure of the course is such that it can be taught in a variety of formats. Factors such as facilities, equipment, schedules, and environmental conditions will determine program structure. Some options would include one or two-week long units, (including fitness, individual/dual, health), health and fitness days distributed weekly throughout the course of study, three days per week of health with two days of fitness activities, etc. In the unit overview charts, specific focuses have been given for activities in appropriate units (i.e., mental health, sexuality, and personal safety and injury prevention). However, within the units of individual and team activities, specific sports are not suggested. The focuses of the units are generalized and can be applied to a number of individual and team activities, which the teacher deems appropriate.

Units: Titles and Times

Unit 1	Interactive/Fitness	33 hours
Unit 2	Personal Safety/Injury Prevention	10 hours
Unit 3	Individual and Team Activities	42 hours
Unit 4	Healthy Growth and Sexuality	10 hours
* Unit 5	Mental Health and Stress	15 hours

* This unit is fully developed in this Course Profile.

Unit Descriptions

Unit 1: Interactive/Fitness

Time: 33 hours

Unit Description

Students develop an understanding of the physical fitness capabilities of their bodies. Through active participation in a wide variety of interactive games and fitness activities, students assess their health-related physical fitness in relation to their personal goals. Students create personal health-related fitness programs, using the skills of decision-making, goal setting, and establishing priorities. Students show responsibility for the safety of themselves and others and model appropriate positive social behaviour (demonstrating Christian leadership, encouraging others, striving for personal best, respect and good sportsmanship). Appropriate Canadian leaders will be identified. A culminating activity for this unit could consist of creating a fitness plan for a friend or member of your family.

Unit Overview Chart

Activity	Expectations	Assessment	Focus
1	ALV.01, ALV.03, AL1.01, AL1.05	Application	Games of Low Organization
2	ALV.01, ALV.02, ALV.03, AL1.02, AL1.03, AL1.04, AL2.01, AL2.03, AL2.04, LSV.01, LS1.01, LS1.02, LS1.03, LS1.04, CGE2a, CGE2b, CGE4f, CGE4h, CGE7b	Thinking/Inquiry Communication Application	Fitness: <ul style="list-style-type: none">• Goal Setting• Personal Fitness Plan Development for Specified Population (e.g., siblings, grandparents, physically challenged, etc.) and Implementation• Personal Fitness Plan Evaluation
3	ALV.01, AL1.06, AL1.07, CGE2e, CGE4a, CGE4c, CGE5f	Knowledge/ Understanding Communication Application	Leadership

Unit 2: Personal Safety/Injury Prevention

Time: 10 hours

Unit Description

Throughout this unit students examine issues surrounding their own personal safety. Students focus on relationship violence, demonstrating knowledge of the causes and indicators of violence and the various types (i.e., physical, verbal, sexual, and emotional). Students also acquire knowledge of the skills needed to sustain healthy relationships (i.e., respect for others and for the dignity of the individual). Students analyse leading causes of injury and assess solutions and strategies for preventing and eliminating violence and injuries causing death. Students are responsible for safe participation in all activities and will analyse behaviours that minimize risk of violence and injuries to themselves and others. Community resources will be examined that provide assistance in emergency situations involving physical activities. Students will create a public service announcement concerning personal safety or injury prevention for the culminating activity.

Unit Overview Chart

Activity	Expectations	Assessment	Focus
1	ALV.03, AL3.01, AL3.02, AL3.03 CGE4a, CGE7a	Communication Application	Personal Safety
2	HLV.02, HL2.01, HL2.02, HL2.03 CGE2b	Application	Causes of Relationship Violence
3	HLV.02, HL2.04 CGE1i, CGE3c, CGE3d	Thinking/Inquiry	Solutions to Relationship Violence
4	HLV.02, HL2.05, HL2.06, HL2.07, LS1.05 CGE3d	Thinking/Inquiry Application	Injury Identification and Risk Management

Unit 3: Individual and Team Activities

Time: 42 hours

Unit Description

Through regular participation in a wide variety of individual and team activities, students will demonstrate movement skills (i.e., overhand serve in volleyball) and will apply appropriate movement principles to refine and improve these movement skills. Students will describe and demonstrate the specific rules and guidelines necessary for active participation and development of personal competence in recreation and sport activities. Students will use ethical strategies to enhance their performance. Students will also demonstrate responsibility for their personal safety and the safety of others, will respect the dignity of other participants, and will exhibit positive and responsible personal and social behaviour. The culminating activity will have students complete a video analysis of their own individual or team play.

Unit Overview Chart

Activity	Expectations	Assessment	Focus
1	PAV.01, PA1.01, PA1.02	Application	Movement Skills (e.g., overhead serve in volleyball)
2	PAV.02, PA2.01, PA2.02, PA2.03 CGE2b	Knowledge/ Understanding Thinking/Inquiry Application	Specific Rules and Guidelines for Sports
3	ALV.01, AL1.01, AL1.02, AL1.04, AL1.06	Communication Application	Apply Movement Skills to Participation in Sport
4	ALV.03, AL1.05, AL3.01, AL3.02 CGE4a, CGE5c	Application	Safety Issues in Sport
5	LSV.03, LS3.01, LS3.02, LS3.03 CGE4b, CGE5a, CGE5e, CGE5f	Application	Team Dynamics
6	PAV.02, PA2.04 CGE4c, CGE5c	Communication	Career Opportunities in Sports

Unit 4: Healthy Growth and Sexuality

Time: 10 hours

Unit Description

Throughout this unit, students will examine sexual and reproductive health understanding that sexuality is a gift from God to be used appropriately. Students will further their understanding of sexual and reproductive health matters through examination of the related environmental, hormonal, and nutritional factors. They will further understand reproductive health through exploration of the causes and issues related to infertility in men and women. Students will describe and assess outside sources and services related to reproductive health. This unit will also encourage students to investigate the importance of honesty and respect in responsible, healthy relationships. In the culminating activity students create and present a poster on community resources in relation to healthy growth and sexuality.

Unit Overview Chart

Activity	Expectations	Assessment	Focus
1	HLV.01, HL1.01 CGE6b, CGE6c, CGE7d	Communication	Reproductive Health
2	HLV.01, HL1.02 CGE6c	Application	Infertility
3	HLV.01, HL1.03 LSV.01, LS1.04, LS1.05 CGE2a, CGE3a, CGE3d, CGE4a	Application	Responsible Relationships
4	HLV.01, HL1.04, HL1.05 CGE2b, CGE2c, CGE7b	Thinking/Inquiry Communication	Sexual Health Information and Services Evaluation

Unit 5: Mental Health and Stress

Time: 15 hours

Unit Description

Students will continue to develop an approach to healthy active living through an understanding of mental health and its influence on their overall well-being. Examination of mental health issues will further develop an understanding of the prevalence of these issues in today's society. Suicidal behaviours and strategies for suicide prevention will be identified. Students will develop an understanding of the impact of stress on an individual's health through exploration of physiological responses and the positive and negative effects of stress. Emphasis is placed on the ability to enhance personal mental health through the use of appropriate strategies and stress management techniques. The culminating activity for the unit will be a health fair project which could also be used as a culminating activity for the entire course.

Unit Overview Chart

Activity	Expectations	Assessment	Focus
1	HLV.03, HL3.01 CGE2e, CGE7d	Knowledge/Understanding Thinking/Inquiry Communication	Personal Mental Health
2	HLV.03, HL3.03, HL3.04 CGE2b, CGE4a	Knowledge/Understanding Thinking/Inquiry Communication	Mental Health Issues
3	HLV.03, HL3.05 CGE2b, CGE3c, CGE4a, CGE7d	Knowledge/Understanding Thinking/Inquiry Communication Application	Suicidal Behaviours and Prevention

4	LSV.02, LS2.01, LS2.02 CGE2b, CGE2c, CGE4b, CGE4d, CGE5e	Knowledge/Understanding Thinking/Inquiry Communication Application	Effects of Stress
5	LSV.02, LS2.03, LS2.04 CGE4d, CGE4h	Knowledge/Understanding Communication Application	Stress Management Techniques
6	HLV.03, HL3.02, HL3.04 CGE2b, CGE2c, CGE2e, CGE5e	Knowledge/Understanding Thinking/Inquiry Communication Application	Health Fair Project

Teaching/Learning Strategies

- Jigsaw/Expert Groups
- Think/Pair/Share
- Conferencing
- Peer Teaching
- Demonstration
- Community Resource Investigation
- Reciprocal Teaching
- Practice
- Goal Setting
- Skill Rubrics
- Discovery
- Media Investigations
- Team-Building Activities
- KWL (Know, Want to Know, Learned)
- Role Playing
- Lecture/Presentation
- Brainstorming
- Observation
- Direct Instruction
- Questioning

Assessment & Evaluation of Student Achievement

Seventy per cent of the grade will be based on assessments and evaluations conducted throughout the course. Thirty per cent of the grade will be based on a final evaluation in the form of an examination, performance, essay, and/or other method of evaluation.

The assessment plan includes:

Conferencing

- student-teacher conferencing
- student-parent-teacher conferencing
- peer conferencing

Paper-and-Pencil Tests

- unit tests and quizzes

Performance Assessment

- skill rubrics and checklists
- peer and group teaching
- formal writing assignments (essays, newspaper articles, research projects)
- projects (poster presentations, fitness assessments, brochures, portfolios, etc.)
- oral presentations
- skill analysis (video/audio/taping)
- developmental profiles

Observation/Reflection

- formal and informal teacher observation
- formal/informal self reflection
- formal/informal peer observation
- journals

Accommodations

Teachers should be aware that only a few of the most appropriate strategies would need to be employed.

Behavioural/Emotional Disorders

- Use visual aids, demonstrations, simulations, manipulations to ensure that students understand concepts presented.
- Provide opportunities to ‘pair-share’ or activity breaks to assist student’s ability to focus on instruction.
- Make use of computer technology where possible.
- Directly teach the skills necessary to manage instructional materials.
- Provide a structured overview of the lesson prior to beginning instruction.
- Break down large tasks into small tasks (large tasks can quickly overwhelm the student; and provide reinforcement as each part is completed).
- Provide instructions visually and verbally.
- Provide models of completed tasks so the students can visualize a completed project.
- Monitor progress often (frequent feedback helps keep the students on track and lets them know what is expected of them while building self-esteem).
- Assist student to set short-term goals and ensure frequent opportunities for monitoring progress towards those goals.

Learning Disability

- Recognize and praise effort and improvement as well as task completion.
- Provide varied opportunities for peer and/or group interactions.
- Present information to as many modalities as possible, including oral presentation, board notes, overheads, diagrams, class discussion, activity-based learning.
- Provide overviews of lessons at the beginning of class where possible.
- Provide instructional materials geared to student’s instructional level.
- Provide extra time to complete assignments that might otherwise be completed in class and/or reduce the quantity of the assignment.
- Allow opportunities for alternatives to writing (graphic representations, drama, media presentations, timelines, collages).

Enrichment

- Teach the student how to take the initiative to ask for the accommodations he or she requires.
- Encourage leadership ability in small group situations.
- Allow students to organize games or change rules to form new game.

Developmental Disability

- Use cooperative learning, peer tutoring, and buddy situations to assist with task completion and social skill development.
- Build in opportunities for the student to achieve success.
- Recognize and praise effort and improvement as well as task completion; provide verbal and nonverbal reinforcement.
- Utilize a task analysis approach to planning and instruction.
- Use drill and repetition when concepts are being taught.

(Reference: Special Education Companion: Introduction – Ministry Curriculum Planner)

Resources

Note Concerning Permissions

Units in this profile make reference to the use of specific texts, magazines, films, and videos. Before reproducing materials for student use from books and magazines, teachers need to ensure that their board has a Cancopy licence and that resources they wish to use are covered by this licence. Before screening videos for their students, teachers need to ensure that their board/school has obtained the appropriate public performance videocassette licence from an authorized distributor (e.g., Audio Cine Films Inc.). Teachers are also reminded that much of the material on the Internet is protected by copyright. That copyright is usually owned by the person or organization that created the work. Reproduction of any work or a substantial part of any work on the Internet is not allowed without the permission of the owner.

Note: The URLs for the websites have been verified by the writers prior to publication. Given the frequency with which these designations change, teachers should always verify the websites prior to assigning them for student use.

Allsen, Harrison, and Vance. *Fitness for Life an Individualized Approach*, 6th ed. New York: McGraw Hill Companies, 1997.

Authentic Assessment for Outcomes Based Learning. Kitchener: Waterloo Catholic District School Board, 1996.

Catechism of the Catholic Church. Ottawa: National Office of the Canadian Conference of Catholic Bishops, 1992.

How to Grade for Learning. Illinois: Skylight Training and Publishing, 1999.

Safety Standards (B.I). Toronto: OPHEA, 1998.

Merki, M. *Teen Health Course 2*. Woodland Hills: Glencoe/McGraw-Hill, 1996. ISBN 0-02-652566-6

O'Connor, K. *The Mindful School: How to Grade for Learning*. Arlington Heights, Illinois: Skylight Professional Development, 1999. ISBN 1-57517-123-6

Randall, L. *The Student Teacher's Handbook for Physical Education*. Champaign Illinois: Human Kinetics Publishers, 1992. ISBN 0-87322-365-9

Teaching and Learning: Strategies for Effective Practice. Kitchener: Waterloo, Catholic District School Board, 1999.

Ontario Physical and Health Education Association – www.OPHEA.net
This site is excellent for physical and health education ideas for all ages.

OSS Policy Considerations

When planning units of study, it is important to reference *Program Planning and Assessment* with respect to: Guidance Education, Career Education, Cooperative Education, Health and Safety, ESL, Technology in the Curriculum, and Exceptional Students. For example, since educating exceptional students requires appropriate modifications to teaching, this document will help you direct your curriculum delivery.

Coded Expectations, Healthy Active Living Education, Grade 11, Open, PPL30

Physical Activity

Overall Expectations

PAV.01 · demonstrate personal competence in applying movement skills and principles;

PAV.02 · apply their knowledge of guidelines and strategies that can enhance their participation in recreational and sports activities.

Specific Expectations

Movement Skills

PA1.01 – demonstrate the development of movement skills in a variety of physical activities (e.g., performing such skills as an overhead serve in volleyball, a parallel turn in downhill skiing, or a j-stroke in canoeing);

PA1.02 – apply movement principles to refine their movement skills (e.g., using all of the joints that can be effectively used to produce maximum force, as in an overhead clear in badminton or a slapshot in hockey).

Sports and Recreation

PA2.01 – apply the specific rules and guidelines for participation in recreational and sports activities, including team, group, dual, and individual activities (e.g., yellow card infractions in soccer, appropriate breathing patterns in weight training, strategies for effective performance in tennis);

PA2.02 – explain factors (e.g., motivation, equipment, preparation such as warm-ups, safety issues) that affect performance and participation in recreational and sports activities;

PA2.03 – use ethical strategies and tactics to enhance their performance in specific situations and conditions (e.g., using a high underhand serve in beach volleyball to take advantage of wind and sun conditions);

PA2.04 – describe career opportunities in the fields of sports, recreation, health, and physical education after doing research using such resources as the Internet and software programs.

Active Living

Overall Expectations

ALV.01 · participate regularly in a balanced instructional program that includes a wide variety of enjoyable physical activities that encourage lifelong participation;

ALV.02 · demonstrate improved physical fitness;

ALV.03 · demonstrate responsibility for their personal safety and the safety of others.

Specific Expectations

Active Participation

AL1.01 – participate regularly in physical activity, using community and school facilities and choosing from a wide variety of activities, including individual, small- and large-group, outdoor, and aquatics activities;

AL1.02 – demonstrate personal improvement in their performance of a variety of physical activities;

AL1.03 – explain the benefits of lifelong participation in different physical activities (e.g., social interaction, enjoyment, relaxation, self-esteem);

AL1.04 – describe strategies that will affect their choice of activities and encourage lifelong participation and enjoyment (e.g., choosing an activity that appeals to them and that promotes personal skills and abilities);

AL1.05 – demonstrate positive, responsible personal and social behaviour in physical activity settings (e.g., encouraging and helping others, striving for personal bests, showing respect for others, demonstrating good sportsmanship);

AL1.06 – demonstrate leadership (e.g., planning and leading in-class activities);

AL1.07 – identify Canadian leaders in physical activities and describe their leadership qualities.

Physical Fitness

AL2.01 – maintain or improve personal fitness levels by participating in vigorous physical activities for sustained periods of time (e.g., a minimum of two ten-minute time periods or one twenty-minute time period four times per week);

AL2.02 – explain the physiological benefits of physical activity (e.g., improved strength, endurance, energy);

AL2.03 – assess personal health-related physical fitness in relation to their personal health goals (e.g., monitor their heart rate and breathing with regard to their target zones during a vigorous cross-country skiing session);

AL2.04 – create daily personal health-related physical fitness programs (e.g., apply dietary principles in building healthy body mass) and adopt strategies that promote lifelong participation.

Safety

AL3.01 – apply appropriate guidelines and procedures for safe participation in physical activity (e.g., using appropriate equipment and facilities, wearing appropriate attire, meeting expectations regarding supervision, understanding the importance of proper posture in minimizing injury);

AL3.02 – demonstrate behaviour that minimizes risk to themselves and others (e.g., doing warm-ups, checking slope conditions before downhill skiing);

AL3.03 – describe the resources and community agencies that provide assistance in emergency situations associated with physical activity.

Healthy Living

Overall Expectations

HLV.01 · demonstrate an understanding of sexual and reproductive health;

HLV.02 · demonstrate, in a variety of settings, the knowledge and skills that reduce risk to personal safety;

HLV.03 · describe the influence of mental health on overall well-being.

Specific Expectations

Healthy Growth and Sexuality

HL1.01 – describe factors (e.g., environmental, hormonal, nutritional) affecting reproductive health in males and females;

HL1.02 – demonstrate an understanding of causes and issues related to infertility;

HL1.03 – demonstrate the skills needed to sustain honest, respectful, and responsible relationships;

HL1.04 – describe sources of information on and services related to sexual and reproductive health;

HL1.05 – assess reproductive and sexual health care information and services.

Personal Safety and Injury Prevention

HL2.01 – describe different types of violence (e.g., relationship violence – physical, verbal, sexual, emotional);

HL2.02 – demonstrate an understanding of the causes of relationship violence;

HL2.03 – identify and analyse the indicators of violence in interpersonal relationships, as well as appropriate intervention strategies;

HL2.04 – assess solutions and strategies for preventing and eliminating relationship violence;

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- HL2.05** – analyse the leading causes of injury and injury-associated deaths among adolescents (e.g., unwise risk taking, alcohol and drug abuse, life stresses);
- HL2.06** – demonstrate an ability to minimize the risks of injury for adolescents;
- HL2.07** – assess strategies for reducing injuries and injury-associated deaths among adolescents (e.g., personal and legal action, educational programs designed to reduce the risk of death from motor vehicle accidents).

Mental Health

- HL3.01** – describe the characteristics of an emotionally healthy person (e.g., positive self-concept, ability to manage stress effectively, ability to work productively);
- HL3.02** – demonstrate the skills that enhance personal mental health (e.g., coping strategies for stress management);
- HL3.03** – analyse the factors (e.g., environmental, genetic) that influence the mental health of individuals and lead to the prevalence of mental health problems in the community;
- HL3.04** – describe the impact of mental health disorders (e.g., phobias, anxiety disorder, schizophrenia, affective disorders) on a person’s emotional and physical health;
- HL3.05** – identify and describe suicidal behaviours and strategies for suicide prevention.

Living Skills

Overall Expectations

- LSV.01** · use decision-making and goal-setting skills to promote healthy active living;
- LSV.02** · demonstrate an ability to use stress management techniques;
- LSV.03** · demonstrate the social skills required to work effectively in groups and develop positive relationships with their peers.

Specific Expectations

Decision Making

- LS1.01** – describe their understanding of what constitutes healthy active living (e.g., a lifestyle that stresses the importance of exercise and healthy eating);
- LS1.02** – apply strategies to establish priorities and set goals;
- LS1.03** – identify common obstacles to successful decision making;
- LS1.04** – explain the advantages, disadvantages, and possible consequences of risk-taking behaviour;
- LS1.05** – describe how to determine whether a risk is worth taking or not.

Stress Management

- LS2.01** – describe the positive and negative effects of stresses that are part of daily life;
- LS2.02** – explain physiological responses to stress;
- LS2.03** – use appropriate strategies for coping with stress and anxiety (e.g., relaxation, meditation, exercise, reframing);
- LS2.04** – demonstrate an understanding of change and its impact on an individual’s health.

Social Skills

- LS3.01** – explain aspects of the process of group dynamics (e.g., organizational culture, stages of group development, characteristics of the group, function of the group);
- LS3.02** – evaluate group effectiveness (e.g., ability to complete tasks, group satisfaction, quality of product);
- LS3.03** – use strategies for giving constructive feedback to individuals and groups;
- LS3.04** – explain their contribution to the maintenance of positive peer relationships.

Ontario Catholic School Graduate Expectations

The graduate is expected to be:

A Discerning Believer Formed in the Catholic Faith Community who

- CGE1a** -illustrates a basic understanding of the **saving story** of our Christian faith;
- CGE1b** -participates in the **sacramental life** of the church and demonstrates an understanding of the centrality of the Eucharist to our Catholic story;
- CGE1c** -actively reflects on **God’s Word** as communicated through the Hebrew and Christian scriptures;
- CGE1d** -develops attitudes and values founded on Catholic **social teaching** and acts to promote social responsibility, human solidarity and the common good;
- CGE1e** -speaks the **language of life**... “recognizing that life is an unearned gift and that a person entrusted with life does not own it but that one is called to protect and cherish it.” (Witnesses to Faith)
- CGE1f** -seeks intimacy with God and celebrates **communion** with God, others and creation through prayer and worship;
- CGE1g** -understands that one’s purpose or **call in life** comes from God and strives to discern and live out this call throughout life’s journey;
- CGE1h** -respects the **faith traditions**, world religions and the life-journeys of **all people of good will**;
- CGE1i** -integrates faith with life;
- CGE1j** -recognizes that “sin, human weakness, conflict and forgiveness are part of the human journey” and that the cross, the ultimate sign of forgiveness is at the heart of **redemption**. (Witnesses to Faith)

An Effective Communicator who

- CGE2a** -listens actively and critically to understand and learn in light of gospel values;
- CGE2b** -reads, understands and uses written materials effectively;
- CGE2c** -presents information and ideas clearly and honestly and with sensitivity to others;
- CGE2d** -writes and speaks fluently one or both of Canada’s official languages;
- CGE2e** -uses and integrates the Catholic faith tradition, in the critical analysis of the arts, media, technology and information systems to enhance the quality of life.

A Reflective and Creative Thinker who

- CGE3a** -recognizes there is more grace in our world than sin and that hope is essential in facing all challenges;
- CGE3b** -creates, adapts, evaluates new ideas in light of the common good;
- CGE3c** -thinks reflectively and creatively to evaluate situations and solve problems;
- CGE3d** -makes decisions in light of gospel values with an informed moral conscience;
- CGE3e** -adopts a holistic approach to life by integrating learning from various subject areas and experience;
- CGE3f** -examines, evaluates and applies knowledge of interdependent systems (physical, political, ethical, socio-economic and ecological) for the development of a just and compassionate society.

A Self-Directed, Responsible, Life Long Learner who

- CGE4a** -demonstrates a confident and positive sense of self and respect for the dignity and welfare of others;
- CGE4b** -demonstrates flexibility and adaptability;
- CGE4c** -takes initiative and demonstrates Christian leadership;
- CGE4d** -responds to, manages and constructively influences change in a discerning manner;
- CGE4e** -sets appropriate goals and priorities in school, work and personal life;
- CGE4f** -applies effective communication, decision-making, problem-solving, time and resource management skills;
- CGE4g** -examines and reflects on one's personal values, abilities and aspirations influencing life's choices and opportunities;
- CGE4h** -participates in leisure and fitness activities for a balanced and healthy lifestyle.

A Collaborative Contributor who

- CGE5a** -works effectively as an interdependent team member;
- CGE5b** -thinks critically about the meaning and purpose of work;
- CGE5c** -develops one's God-given potential and makes a meaningful contribution to society;
- CGE5d** -finds meaning, dignity, fulfillment and vocation in work which contributes to the common good;
- CGE5e** -respects the rights, responsibilities and contributions of self and others;
- CGE5f** -exercises Christian leadership in the achievement of individual and group goals;
- CGE5g** -achieves excellence, originality, and integrity in one's own work and supports these qualities in the work of others;
- CGE5h** -applies skills for employability, self-employment and entrepreneurship relative to Christian vocation.

A Caring Family Member who

- CGE6a** -relates to family members in a loving, compassionate and respectful manner;
- CGE6b** -recognizes human intimacy and sexuality as God given gifts, to be used as the creator intended;
- CGE6c** -values and honours the important role of the family in society;
- CGE6d** -values and nurtures opportunities for family prayer;
- CGE6e** -ministers to the family, school, parish, and wider community through service.

A Responsible Citizen who

- CGE7a** -acts morally and legally as a person formed in Catholic traditions;
- CGE7b** -accepts accountability for one's own actions;
- CGE7c** -seeks and grants forgiveness;
- CGE7d** -promotes the sacredness of life;
- CGE7e** -witnesses Catholic social teaching by promoting equality, democracy, and solidarity for a just, peaceful and compassionate society;
- CGE7f** -respects and affirms the diversity and interdependence of the world's peoples and cultures;
- CGE7g** -respects and understands the history, cultural heritage and pluralism of today's contemporary society;
- CGE7h** -exercises the rights and responsibilities of Canadian citizenship;
- CGE7i** -respects the environment and uses resources wisely;
- CGE7j** -contributes to the common good.

Unit 5: Mental Health and Stress

Time: 12 hours

Unit Description

Students will continue to develop an approach to healthy active living through an understanding of mental health and its influence on their overall well being. Examination of mental health issues will further develop an understanding of the prevalence of these issues in today's society. Suicidal behaviours and strategies for suicide prevention will be identified. Students will develop an understanding of the impact of stress on an individual's health through exploration of physiological responses and the positive and negative effects of stress. Emphasis is placed on the ability to enhance personal mental health through the use of appropriate strategies and stress management techniques. The culminating activity for the unit will be a health fair project which could be used as a culminating activity for the entire course.

Unit Synopsis Chart

Activity	Time	Expectations	Assessment	Tasks
1. Introduction to Mental Health	225 min	HLV.03, HL3.01 CGE2e, CGE7d	Knowledge/Understanding Thinking/Inquiry Communication	Mind Mapping
2. Mental Health Issues	75 min	HLV.03, HL3.03, HL3.04 CGE2b, CGE4a	Knowledge/Understanding Thinking/Inquiry Communication	Jigsaw
3. Suicidal Behaviours and Prevention	225 min	HLV.03, HL3.05 CGE2b, CGE3c, CGE4a, CGE7d	Knowledge/Understanding Thinking/Inquiry Communication Application	Case Studies Group Work
4. Stress and the Effects of Stress on a Person	75 min	LSV.02, LS2.01, LS2.02 CGE2b, CGE2c, CGE4b, CGE4d, CGE5e	Knowledge/Understanding Thinking/Inquiry Communication Application	Personal Stress Evaluation
5. Stress Management	120 min	LSV.02, LS2.03, LS2.04 HL3.02 CGE4d, CGE4h	Knowledge/Understanding Thinking/Inquiry Communication Application	Practical Experiences Personal Reflection Paper
6. Health Fair Project	180 min	HLV.03, HL3.02, HL3.04 CGE2b, CGE2c, CGE2e, CGE5e	Knowledge/Understanding Thinking/Inquiry Communication Application	Health Fair Project

Activity 1: Introduction to Mental Health

Time: 225 minutes

Description

Students will begin to understand the meaning of personal mental health versus mental illness. Students will identify the myths and misconceptions and work to overcome related stigmas. The influence of media in relation to mental health issues will be examined and students will identify and explore the community resources available for treatment and prevention.

Strand(s) & Learning Expectations

Ontario Catholic School Graduate Expectations

CGE2e - use and integrate the Catholic faith tradition, in the critical analysis of the arts, media, technology and information systems to enhance the quality of life;

CGE7d - promote the sacredness of life.

Strand(s): Healthy Living

Overall Expectations

HLV.03 - describe the influence of mental health on overall well-being.

Specific Expectations

HL3.01 - describe the characteristics of an emotionally healthy person (e.g., positive self-concept, ability to manage stress effectively, ability to work productively).

Prior Knowledge & Skills

- Collaborative learning/cooperative group skills
- Note taking skills
- Active listening and communication skills
- Mind mapping
- Brainstorming
- Think/Pair/Share
- Self-evaluation

Planning Notes

- Sensitivity to the student's history and experience with mental health issues is imperative.
- Stress gospel values regarding the sacredness of life.
- The culminating activity should be distributed on the first day of the unit (see Activity 6). If the teacher chooses, he/she can use this project as a culminating activity for the entire course.
- Have all materials available: chart paper, markers, TV/VCR, overhead, tape or CD player.
- Locate or create a rubric for group work evaluation.
- Use the Canadian Mental Health Association (CMHA) website to prepare a note on mental health, mental illness, myths and truths of mental illness.
- Familiarize yourself with movies and music that relate to mental health and mental illness (e.g., *Psycho*; *Girl Interrupted*). Selected movies and music should be appropriate for a classroom setting. Contact the closest branch of the Canadian Mental Health Association for videos.
- Review characteristics of an emotionally healthy person.

-
- Obtain copies of and become knowledgeable about community resources relating to mental health (blue book, locator, phone guide, community help paper, newspapers may be needed in class).
 - Strategy 9 may be done as a game: list resources and have students match resource to agency.

Teaching & Learning Strategies

1. Introduce the summative Health Fair Project (see Activity 6).
2. In groups of four or five, students will brainstorm ideas surrounding the question, “When you hear the words ‘mental health’, what comes to mind?” Students will mind map their ideas onto chart paper. Have students circle ideas that relate to mental health issues. Expand the mind map by asking students to write down where these thoughts and ideas come from (i.e., media, movies, and literature). Present and discuss these ideas. Help students understand the true definitions of the words they have chosen. Hang the charts on the wall. They will self-evaluate their group work.
3. Students will complete the survey on mental health and mental health issues. Responses will be taken up and shared with the class (see Appendix 1A). Students will copy the prepared note on mental health, mental health issues and the myths and truths surrounding mental health issues.
4. Video presentation: “Face to Face: Overcoming the stigmas of mental illness” (see Resources)
5. Go back to the mind maps on the wall. Have students eliminate any words or thoughts that do not accurately reflect the experience of a person suffering from a mental health issue or that do not respect the dignity of a person. Only facts should remain.
6. Brainstorm, with a partner, how the media portrays the mentally ill. Share these ideas with the group. Use selected movie, television and music clips to demonstrate and remind students of myths and truths. Does the media portrayal of the mentally ill occasionally run counter to a theme found in the gospels that states that the dignity and worth of all individuals should be valued and protected?
7. With students, create a chart on the emotionally healthy versus emotionally non-healthy person.
8. Discuss the three groups of factors that may contribute to mental health issues (see Appendix 1B)
9. Using the questionnaire (Appendix 1C), students will work in partners to locate all the different types of community resources. Generate a master copy and post in the classroom.

Assessment & Evaluation of Student Achievement

- Formative or summative evaluation of group work
- Formative evaluation of community resource questionnaire

Accommodations

- Implement strategies recommended in student’s IEP.
- Use heterogeneous groupings.
- Make appropriate alterations for ESL students.
- Provide notes for students with special needs.

Resources

Anti-Stigma – Do You Know? – www.mentalhealth.org/stigma/factsheet.htm

This website discusses the stigmas associated with mental health disorders. It further discusses myths and truths and how to reduce the stigma.

Canadian Mental Health Association (CMHA) (These are regionally-based)

Canadian Mental Health Association – www.cmha.ca

The CMHA site discusses education, advocacy, and research with regards to mental health and mental health disorders. The site shows materials (e.g., pamphlets) available for purchase.

“Face to Face: Overcoming the Stigma of Mental Illness.” Etobicoke: Etobicoke Mental Health Services Agency, 1993. 14 min.

Internet Mental Health Association – www.mentalhealth.com

This website is an excellent introduction to mental health disorders. It has many links to different research (e.g., magazines)

“Mental Wellness: Making it Happen.” Kingston: Canadian Learning Company Inc., 1988. 20 min.

Toews, John and Eleanor Loewen. *No Longer Alone; Mental Health and the Church*. Waterloo, ON: Herald Press, 1995. ISBN0-8361-9010-6

Appendix 1A

Survey on Mental Health and Mental Illness

Part A

Using the following scale, circle the number which indicates the degree to which you believe each statement to be true with 1 being **NOT TRUE AT ALL** and 5 being **ALWAYS TRUE**.

	1	2	3	4	5
	Not true at all		Somewhat true		Always true
1. Mental illness can be contagious and spread like a cold or flu.	1	2	3	4	5
2. Most people who have a mental health issue are a danger to others.	1	2	3	4	5
3. The support of family and friends is a critical part of helping people with mental health issues.	1	2	3	4	5
4. People who have mental health issues are not able to work in full-time responsible employment positions.	1	2	3	4	5
5. All cultures view mental health issues in the same fashion.	1	2	3	4	5
6. Mental health issues are a variety of conditions that affect a person's thinking, mood, behaviour, and the ability to handle stress.	1	2	3	4	5
7. People who are dealing with mental health issues usually have to live in group homes.	1	2	3	4	5
8. Mental health issues can only affect older people.	1	2	3	4	5
9. You can usually tell if a person is dealing with a mental health issue by how they look or act.	1	2	3	4	5
10. People suffering from mental health issues are more violent than the general population.	1	2	3	4	5
11. There are always warning signs before a mental health issue strikes.	1	2	3	4	5
12. In the last six-months, one out of every five persons in all walks of life suffered from a mental health issue.	1	2	3	4	5
13. As many as 8 in 10 people suffering from a mental health issue can return to happy and productive lives if they receive the appropriate treatment/support.	1	2	3	4	5
14. It is easy to recognize someone who once had a serious mental health issue.	1	2	3	4	5

Appendix 1A (Continued)

15. Even if they seem OK, people with a chronic mental health issue always have the potential to commit violent acts.
- 1 2 3 4 5
16. Dealing with a mental health issue is far less of a danger than what most people would believe.
- 1 2 3 4 5
17. Mental Health facilities should be kept out of residential neighbourhoods.
- 1 2 3 4 5

Part B.

18. Which of the following are not mental health issues? (Check any that apply)
- depression bulimia anxiety disorder
- personality disorder schizophrenia epilepsy
- substance abuse (alcohol, drugs)
19. Which of the following may be symptoms of mental health issues? (Check any that apply)
- apparent memory loss erratic behaviour
- moodiness visible weight loss
- social withdrawal irrational speech patterns
20. What is the difference between mental health issues and mental distress?
21. Which of the following are factors that can contribute to a mental health issue?
- stress the genes one inherits emotional distress
- accidental injury lack of discipline personal loss
- chemical imbalance drug and alcohol abuse biological disease
22. What do you think is the most common cause of mental health issues?
23. Are there any ways in which mental health issues can be prevented? If “yes”, name some of these.
24. Where would you advise a friend to go if he/she was in need of information or help with an emotional or mental health issue?
25. Should you know more about mental health issues than you presently do? If yes, what would you like to know?
26. What specific conditions or problems come to mind when you think about mental health issues?
27. What things might you notice in someone that would make you think that they were suffering from some type of mental health issue?

Appendix 1A (Continued)

28. How helpful do you think professionals can be for individuals with emotional problems?
- | | | | |
|--------------------|------------------|------------------|--------------|
| 1 | 2 | 3 | 4 |
| not at all helpful | not very helpful | somewhat helpful | very helpful |
29. What do you think might keep a person of your age from getting help for problems related to mental health issues?
30. In general, I have very accurate knowledge of mental health issues.
- | | | | | |
|-------|----------------|-------------------------------|----------------------|----------|
| 1 | 2 | 3 | 4 | 5 |
| Agree | Agree Somewhat | Neither Agree
Nor Disagree | Disagree
Somewhat | Disagree |

Adapted from: Face to Face with Mental Illness: A School-Based Program
Developed by Canadian Mental Health Association, London-Middlesex Branch & St. Thomas Aquinas Catholic Secondary School, London District Catholic School Board

Appendix 1B

Factors That May Contribute to Mental Health Issues

The exact causes of mental health issues are not known. Even though there has been intense research into a number of possible causes, there still exists a lack of agreement among professionals regarding the origin of the experience of mental health issues. Nevertheless, there seems to be three groups of factors thought to have some role in the development of mental health issues. Mental health issues rarely have a single cause, but rather a combination of causes.

1. **Personal histories/injuries:** Trauma (i.e., head injuries), abuse, stress, severe and extreme experiences of abandonment and fear, etc. may contribute to the development of mental health issues in later life.
2. **Biological factors:** many researchers believe that there is some biological or genetic predisposition toward the onset of mental health issues. These biological factors may be biochemical or neurological.
3. **Social factors:** Experiences of poverty, unemployment, oppression, and other ongoing life stresses are also thought to be possible contributors to the situation.

Source: Canadian Mental Health Association, Waterloo Regional Branch, Autumn, 1996.

Appendix 1C

Community Resource Questionnaire

Exercise On Locating Community Resources

1. Are there support groups for alcoholics?
2. Are there support groups for depressed teens?
3. My rent is due and I have no money.
4. I live in _____ and I need a support group for people with mental health issues.
5. How do people get tested for sexually transmitted diseases?
6. I need a place to sleep tonight.
7. When someone who lives in _____ has an eating disorder, where can that person go to get help dealing with the issues?
8. A family member has recently been diagnosed with schizophrenia. What kinds of resources are there to help the family?
9. Where can I go to find low-income housing?
10. A student is sad all the time and occasionally jokes about killing himself/herself.
11. My boyfriend/girlfriend needs an anger-management group. What is available?
12. My teenage friend is pregnant. Who can she talk to about her options?
13. My 20-year-old acquaintance has been unemployed for two years.
14. I am 14 and I need someone to talk to. I have no money and I don't want anyone to find out.
15. I have a mental health concern. Where can I go for support?
16. My 13-year-old friend has run away from home.
17. An ex-psychiatric patient has just moved to _____ and is looking for housing.

Adapted from Canadian Mental Health Association, Waterloo Regional Branch, Autumn, 1996.

Activity 2: Mental Health Issues

Time: 75 minutes

Description

“Mental health issues” is an all-encompassing term for many disorders that will be researched and presented. Mental health issues such as affective disorders (i.e., depression, bipolar, seasonal affective disorder), anxiety disorders (i.e., phobias, obsessive-compulsive disorder), and psychosis (i.e., schizophrenia) will be explored. Students will understand and identify the nature of these issues and display a compassion for the welfare of others.

Strand(s) & Learning Expectations

Ontario Catholic School Graduate Expectations

CGE2b - read, understand and use written materials effectively;

CGE4a - demonstrate a confident and positive sense of self and respect for the dignity and welfare of others.

Strand(s): Healthy Living

Overall Expectations

HLV.03 - describe the influence of mental health on overall well-being.

Specific Expectations

HL3.03 - analyse the factors (e.g., environmental, genetic) that influence the mental health of individuals and lead to the prevalence of mental health problems in the community;

HL3.04 - describe the impact of mental health disorders (e.g., phobias, anxiety disorder, schizophrenia, affective disorders) on a person’s emotional and physical health.

Prior Knowledge & Skills

- Note-taking
- Communication skills
- Collaborative learning/cooperative group skills
- Jigsaw learning
- Research skills

Planning Notes

- Book the computer lab. Bookmark possible websites for efficient Internet use.
- Order pamphlets or gather information on mental health issues for jigsaw learning. These pamphlets can also be used for the case study exercise in Activity 3. Fill in chart with expected answers.
- Create a note on mental health issues, prevalence rates, and environmental versus genetic factors.
- There are a number of mental health issues to choose from. Depending on the size of your class and time, you may choose different mental health issues.
- Prepare a chart for jigsaw learning. The chart should include a definition, signs and symptoms, causes, treatment, and any other pertinent information and impact on emotional and physical health.
- Choose a form of summative evaluation (i.e., letter to a friend, journal, reflection).

Teaching/Learning Strategies

1. The teacher leads discussion on mental health issues, prevalence rates, and environmental and genetic factors.
2. As a class, brainstorm different mental health issues.
3. Students will be placed in home groups for jigsaw learning. One student from each home group will work on one specific mental health issue. Once students have gathered the necessary information, they will teach the mental health issue to their home group.

Mental Health Issues

- Anxiety Disorders (panic disorder, social phobias, specific phobias, post-traumatic stress disorder, obsessive-compulsive disorder, generalized anxiety disorder)
- Affective Disorders (depression, bipolar affective disorder, seasonal affective disorder)
- Psychosis (schizophrenia)

Assessment & Evaluation of Student Achievement

- Formative evaluation of group work.
- Summative evaluation of the impact of mental health issues. This could take the form of a letter to a friend, journal entry, or short reflection paper.

Accommodations

- Implement strategies recommended in student's IEP.
- Use heterogeneous groupings.
- Make appropriate alterations for ESL students.
- For students with special needs, provide the information from the Jigsaw Learning Activity and allow time for the Jigsaw Activity to be completed. Could follow up with fewer illnesses.
- Provide a modified questionnaire that encompasses all mental health issues for students with special needs.
- Oral evaluation on mental health issues following the jigsaw activity.

Resources

Anxiety Disorders Association of America – www.adaa.org

This ADAA site breaks down the different anxiety disorders and specific phobias. It provides a variety of other resources and links.

Bourne, Edmund J., Ph.D. *The Anxiety and Phobia Workbook*. Oakland: New Harbinger Publications, 1995. ISBN 1-57224-003-2

Canadian Mental Health Association (CMHA)

Internet Mental Health Association – www.mentalhealth.com

This website is an excellent introduction to mental health issues. It has many links to different research (e.g., magazines).

Johnson, Julie Tallard. *Understanding Mental Illness: For Teens Who Care About Someone with Mental Illness*. Minneapolis: Lerner Publications Company, 1989. ISBN 0-8225-0042-6

National Foundation for Depressive Illness – www.depression.org

This website discusses facts, treatment and results of depression. It is an excellent introductory site.

Obsessive Compulsive Foundation – www.ocfoundation.org

This site introduces Obsessive Compulsive Disorder (OCD) and discusses how it is treated. It has many links to articles related to OCD.

The World Psychiatric Program to fight stigma due to Schizophrenia – www.openthedoors.com

The site is dedicated to fighting the stigmas involved with schizophrenia. The facts, myths, and causes are also discussed.

Activity 3: Suicidal Behaviours and Prevention

Time: 225 minutes

Description

Students will develop an understanding of depression and its effect on young people. They will begin to understand the difference between depression and suicide. Students will become aware that depression and suicide do not have a cause-and-effect relationship. In relation to suicide, students will examine the myths versus truths, signs, symptoms and statistics. Students will work through prevention, intervention, and grieving techniques.

Note: Teachers may wish to discuss this activity with the principal and consider gaining the assistance of a well-briefed trained professional from the community as they address these expectations.

Strand(s) & Learning Expectations

Ontario Catholic School Graduate Expectations

CGE2b - read, understand and use written material effectively;

CGE3c - think reflectively and creatively to evaluate situations and solve problems;

CGE4a - demonstrate a confident and positive sense of self and respect for the dignity and welfare of others;

CGE7d - promote sacredness of life.

Strand(s): Healthy Living

Overall Expectation

HLV.03 - describe the influence of mental health on well-being.

Specific Expectation

HL3.05 - identify and describe suicidal behaviours and strategies for suicide prevention.

Prior Knowledge & Skills

- Collaborative learning/cooperative group skills
- Brainstorming skills
- Active listening and communication skills
- Note-taking skills
- Decision making skills

Planning Notes

- Teachers will need to set and maintain climate in class. Suicide is a very emotional issue. Teachers need to be aware that students may have been exposed to suicide at one point and boundaries for individual students need to be respected re: talking about these experiences. A trusting and compassionate atmosphere must exist if discussion is to happen. Teachers need to discuss gospel values regarding the sacredness of life and the importance to society of a compassionate, understanding, and empathetic outlook by the public to those individuals suffering from suicidal tendencies.
- Students need to review work done in Activities 1 and 2.
- Reserve appropriate videos from community, board office.
- Reserve television and VCR if using supporting media.
- Photocopy appendices to be used as handouts.
- For Appendix 3B, an option would be to put a space beneath each question for alternate statements or to put in correct information from class discussion.
- Prepare chart paper and signs for Activity 3.

- For each case study, prepare possible answers and risk factors. These can be found in pamphlets from CMHA.
- The intent of the case studies is to review material for suicide prevention. Teachers need to make students aware that this activity is dealing with suicide and mental illnesses. Remind students that not all depressed people or those experiencing mental illness are suicidal, nor are all people who attempt or complete suicide depressed.
- Alternate to Teaching/Learning Strategy 7 would be to review different lyrics of songs and their influence on the mental health of youth (e.g., “Adam’s Song” Blink 182, “Last Resort” Papa Roach, “Dying-Hole, In The End” Tenix TX). Possible evaluation of this would be an expository essay analysing a particular song.

Teaching/Learning Strategies

1. In a large group, students will brainstorm the leading cause of death in adolescents. Student responses can be written on the chalkboard or on an overhead. Many students will answer suicide, but motor vehicle accidents are the number one cause of death. Suicide is the second leading cause of death in teens (see Appendix 3A).
2. Ask class why youth **attempt/complete** suicide?
Sample responses could include:
 - life is unbearable
 - experience sense of hopelessness, helplessness and desperation
 - overwhelming lack of hope about future
 - no one to turn to
 - depression
 - stress
 - sexual orientation
 - changes to community, society, world
 - physical and psychological changes
 - shifts in family unit
 - exposure to suicide
 - suicide clusters or copycat suicides
3. Distribute Appendix 3B on the Facts and Myths about Suicide. They can work alone or with a partner to answer the given statements. Have the students volunteer answers from Appendix B. Teachers should be prepared for questions, discussion and personal experiences that may arise from this handout. Teachers can supply students with responses to Facts and Myths about suicide (see Appendix B). Give the students time to review responses to Facts and Myths. As a class discuss how students agree with the supplied answers.
4. Divide the class into four groups. Assign each group one of the following statements.
 - a) What would a depressed/suicidal person be experiencing (i.e., thoughts and feelings)?
 - b) How would a depressed/suicidal person behave? What are the behavioural signs of suicide?
 - c) What are the physical signs of someone who is considering suicide?
 - d) What are the emotional signs of someone who is considering suicide?
 Each group needs to appoint a recorder and a spokesperson. Allow time for groups to brainstorm responses. Spokesperson will then expand on groups’ ideas and share with class. The teacher can copy a class set of Appendix 3C – Sample Responses for Activity 3 Group Work or use as an overhead for note-taking purposes.

-
5. Prior to class, teachers should create the following signs on bristol board: talk/listen, express feelings, question, awareness of community resources, make a plan together, and stay in touch. Distribute signs in random order to seven volunteers. Volunteers are to come to the front of class with their sign. Task for remaining students is to put students holding signs in correct order of steps you would take in dealing with a potential suicide.
 6. The teacher may wish to use Appendix 3D as a basis for discussion. The point here is discussion. Teachers should caution students that this is not as appropriate intervention to “practise” on friends. Rather it is a useful guide for the work of professionals. The teacher can also create overhead for note-taking purposes. Emphasize to students that the goal is to prevent someone from inflicting harm on himself or herself and to seek additional professional help. Students can speak to teachers, counsellors, clergy, etc., if they or someone they know is contemplating suicide. Gospel values discussion is critical here particularly as it pertains to reverence for the sacredness of life.
 7. Groups will be assigned one case study from Appendix 3E. They are to answer the following questions on chart paper and present their findings to the class.

Case Study Questions

- What mental health issue is being referred to in the case study?
- What are the signs and symptoms of the problem?
- What predetermined factors may be contributing to this mental health issue?
- What intervention will you attempt?
- What treatment is available?
- What other community resources are available?
- What message/action do our gospel values call forth in this situation?
- What barriers might exist that could prevent an individual from seeking and/or receiving help (i.e., stigma, denial, lack of community resources, money, transportation, fear)?

Assessment & Evaluation of Student Achievement

- Summative evaluation of student group work for case study
- Formative evaluation of communication
- Formative evaluation of facts and myths about suicide

Accommodations

- Implement strategies recommended in student’s IEP.
- Use heterogeneous groupings.
- Make appropriate accommodations for ESL students.
- Provide alternative assessment tools for students with special needs.

Resources

Canadian Health Network – <http://www.canadian-health-network.ca>

This website will provide additional information on suicide.

CMHA Suicide Information and Education Centre – <http://www.siec.ca>

This website will provide information on suicide prevention.

Canadian Mental Health Association

Cobain, B. *When Nothing Matters Anymore: a Survival Guide for Depressed Teens*. Minneapolis, MN: Free Spirit Publishing Inc, 1998.

Gottman, M.E. *When a Friend Dies: A Book for Teens About Grieving and Healing*. Minneapolis, MN: Free Spirit Publishing, 1994.

Ramasay, R., Tanney, R., Tierney, R., and Lang, W. *Suicide Intervention Handbook*, Second Edition. Calgary: Living Works Education Inc., 1997. ISBN 0-9698448-0-8

Reach Out With Hope, Suicide Information and Education Centre Suicide Prevention Training Programs, 1999.

Understanding Depression and Suicide Student Booklet. Alberta Education, Special Education Services, 1987.

Waterloo District Catholic School Board – www.wcdsb.edu.on.ca/familylife

This website provides information regarding sexual orientation and affects on mental health

Appendix 3A

Leading Cause of Youth Deaths in Canada – Ages 10 – 24 – 1995

Leading Cause of Youth Deaths in Canada in 1995.

Cause	Age						Totals
	10-14M	10-14F	15-19M	15-19F	20-24M	20-24F	
MVA	52	36	266	137	328	82	901
Suicide	22	21	217	47	290	49	646
Cancer	21	34	56	28	51	38	228
All Causes	221	184	815	320	1 088	328	2 956

Leading cause of death for Canadians ages 10-24 in 1995 was Motor Vehicle Accidents at 30.5%, a decrease from 34.2% in 1993.

The second leading cause of death was Suicide at 21.9%, an increase from 20.7% in 1993.

Leading Causes of Death for All Ages in Canada in 1995.

Rank	Cause	Total Deaths	% of Deaths	Rate per 100 000
1	Heart/Stroke	M 40 085	36.0	273.1
		F 39 023	39.3	261.2
2	Cancer	M 31 329	28.1	213.5
		F 26 475	26.7	177.2
3	Respiratory	M 10 209	9.2	69.6
		F 8 677	8.7	58.1
4	Digestive	M 3 933	3.5	26.8
		F 3 683	3.7	24.7
5	Endocrine	M 3 420	3.1	23.3
		F 3 622	3.6	24.2
6	Suicide	M 3 152	2.8	21.5
		F 812	<1.0	5.4
9	Motor Vehicle	M 2 239	2.0	15.3
		F 1 018	1.0	6.8
Unranked	HIV	M 1 637 F not identified as a separate cause	1.5	11.2

Leading Cause of Death – Canada – 1995. Prepared by SIEC, Feb. 1999.

Appendix 3B

Facts and Myths about Suicide

Instructions: State whether you agree or disagree with the following statements. If you disagree, provide a suitable alternative statement.

1. AGREE DISAGREE Young people rarely think about suicide.
2. AGREE DISAGREE Talking about suicide will give a young person the idea, or permission, to consider suicide as a solution to their problems.
3. AGREE DISAGREE Suicide is sudden and unpredictable.
4. AGREE DISAGREE Suicidal youth are only seeking attention or trying to manipulate others.
5. AGREE DISAGREE Suicidal people are determined to die.
6. AGREE DISAGREE A suicidal person will always be at risk.

Facts and Myths

1. Teens and suicide are more closely linked than adults might expect. In a survey of 15 000 grade 7 to 12 students in British Columbia, 34% knew of someone who had attempted or died by suicide; 16% had seriously considered suicide; 14% had made a suicide plan, 7% had made an attempt, and 2% had required medical attention due to an attempt.
2. Talking calmly about suicide, without showing fear or making judgments, can bring relief to someone who is feeling terribly isolated. A willingness to listen shows sincere concern; encouraging someone to speak about his or her suicidal feelings can reduce the risk of an attempt.
3. Suicide is often a process, not an event. Eight out of ten people who have completed suicide gave some, or even many indications of their intentions.
4. Efforts to manipulate or grab attention are always a cause for concern. It is difficult to determine if a youth is at risk of suicide. All suicide threats must be taken seriously.
5. Suicidal youth are in pain. They don't necessarily want to die; they want their pain to end. If their ability to cope is stretched to the limit, or if problems occur together with a mental illness, it can seem that death is the only way to make the pain stop.
6. Most people feel suicidal at some time in their lives. The overwhelming desire to escape from pain can be relieved when the problem or pressure is relieved. Learning effective coping techniques to deal with stressful situations can help.

Adapted From: *Reflections on Youth Suicide*, Canadian Mental Health Association, National Office 2000.

Appendix 3C

Sample Responses for Activity 3 Group Work

1. What would depressed/suicidal people experience?
 - negative feelings about self
 - sadness or apathy
 - a tendency to blame themselves
 - loss or increase in appetite
 - change in sleep patterns
 - constant fatigue
 - loss of interest in life
 - inability to make decisions/analyse and solve problems
2. How would depressed/suicidal people act out? What are behavioural signs of suicide?
 - increasing alcohol/drug use
 - changing patterns of school attendance; truancy
 - major changes in school performance
 - becoming sexually promiscuous
 - taking risks
 - fighting with friends, family, teachers
 - dangerous driving
 - running away from home
 - making of will, writing poetry or stories about death
 - quietly putting affairs in order, “taking care of business”
 - threatening suicide
 - hoarding pills, hiding weapons, describing methods of committing suicide
 - unexplained use of alcohol and drugs
 - loss of interest in hobbies, sport, work
 - withdrawal from friends, family
 - truancy
 - accident proneness and increase in risk-taking activities (careless driving, bike accidents, dangerous use of firearms)
 - sexual promiscuity
 - giving away prize possessions
 - preoccupation with death
3. What are physical signs of suicide?
 - neglect of appearance
 - sudden change in manner of dress
 - chronic or unexplained illnesses, aches and pains
 - sudden weight gain/loss
 - change in appetite
4. What are emotional signs of suicide?
 - sense of hopelessness/helplessness
 - inability to enjoy friendships
 - wide mood changes
 - anxiousness, extreme tension or agitation
 - lethargy or tiredness
 - loss of enjoyment from activities formerly enjoyed
 - changes in personality
 - depression, sadness
 - feelings of guilt or failure
 - self-destructive thoughts
 - exaggerated fears of cancer, HIV/AIDS, or physical impairment

Appendix 3D

Prevention, Intervention, and Grieving

Note: The point here is discussion. Teachers should caution students that this is not as appropriate intervention to “practise” on friends. Rather it is a useful guide for the work of professionals.

Prevention – There are many circumstances that can contribute to suicide. A person’s feelings about those circumstances are more important than the circumstances themselves. Certain factors are known to be correlated with suicidal behaviour and supply ideas for suicide.

Prevention:

- Awareness of signs and symptoms of suicidal behaviour
- Treatment of mental illnesses
- Drug and alcohol abuse counselling
- Reduced access to firearms
- Education on coping skills, problem solving skills
- Educating community to discuss suicide openly
- Educating community to actively listen to people seeking help

Dealing with a Potential Suicide (Intervention)

1. Talk/Listen
 - listen without judgement
 - find a quiet place to talk
 - talking can only decrease likelihood of suicide
2. Express Feelings
 - ask about recent events
 - encourage them to express feelings
 - do not minimize feelings
3. Question
 - ask if they have a plan/how they intend to kill themselves
 - share your concern
 - respect how they are feeling
 - indicate that for their benefit you cannot keep this a secret
 - inquire about any previous suicide attempts
4. Make a Plan Together
 - make plan for next few hours/days
 - make contact with him/her
 - let them know when you are available
 - reassure them that you will help them to get professional help, if they want it
5. Awareness of Community Resources
 - share knowledge of available assistance (guidance counsellor, family, friends, crisis centres)
 - intervenor should seek professional help
6. Stay in Touch
 - praise person for their courage
 - reaffirm your belief that they can overcome this with help

Grieving

To assist people affected by suicidal behaviour:

- accept feelings of anger, grief; do not deny them
- identify close friends and offer assistance; help them realize they were not the cause
- be aware of “copycat” suicides
- monitor friends if concern exists for “copycat suicide” (watch for signs of suicide)
- encourage counselling

Appendix 3E

Case Studies

Case 1

17-year-old female, pregnant; wants baby, but boyfriend does not. No job. Depressed; cries easily; school marks have dropped. Mother is single, works and supports four children.

Case 2

18-year-old male, will not graduate with his class. Heavy alcohol and drug abuse; aggressive behaviour resulting in three fistfights last two weeks. He has a gun, his brother committed suicide six years ago. Parents are divorced; he lives with mother; no contact with father and siblings; isolated from friends.

Case 3

15-year-old female, complains of sleeplessness and is beginning to shut out her friends. She lacks motivation and schoolwork is suffering. Recent lack of effort in maintaining physical appearance. She is concerned that someone is spying on her; that her telephone is being monitored. Normal conversation with her is difficult because topics constantly change.

Case 4

16-year-old male, friends have noticed bouts of sadness and withdrawal from social groups. Recently he has been extremely sociable, confident, and very high energy. Along with these “positive signs,” he has been irritable; has shown poor judgment; and looks like he never sleeps.

Case 5

17-year-old female, is constantly concerned about being judged by others. She constantly fears being asked to respond in class. Always seems physically uncomfortable; is short of breath and sweats profusely.

Activity 4: Stress and the Effects of Stress on a Person

Time: 75 minutes

Description

Students will develop an understanding of what stress is. They will learn to differentiate between positive and negative stress. Students will begin to understand that stress is caused by an internal and personal interpretation of an event and not necessarily by the event itself. Students will recognize symptoms of stress and understand how their body responds to stressors in their life. They will learn about the factors that influence their perception of stress. Learning will be achieved through an examination of the students' own situations and how they relate to them.

Ontario Catholic School Graduate Expectations

CGE2b - read, understand and use written materials effectively;

CGE2c - present ideas and information clearly, honestly and with sensitivity to others;

CGE4b - demonstrate flexibility and adaptability;

CGE4d - respond to, manage and constructively influence change in a discerning manner;

CGE5e - respects the rights, responsibilities and contributions of self and others.

Strand(s): Living Skills

Overall Expectations

LSV.02 - demonstrate an ability to use stress management techniques.

Specific Expectations

LS2.01 - describe the positive and negative effects of stresses that are part of daily life;

LS2.02 - explain physiological responses to stress.

Prior Knowledge & Skills

- Communication Skills
- Group work skills
- Self-assessment using a rubric

Planning Notes

- Help students respect the choices of others and their right to express their opinion openly and without hesitation.
- Be sensitive to the individual circumstances of students and their parents/guardians.
- Review background information on stress and distress.
- Gather and prepare inventories on common stressors and stress symptoms in teenagers.
- Gather and prepare suitable and appropriate quizzes or inventories on diagnosing teen stress levels (found on the various websites listed).
- Prepare diagram on how the body responds to stress.

Teaching/Learning Strategies

1. Individually, have the students list the major stressors in their lives. After ample opportunity for students to come up with responses, lead a discussion to reveal the students' responses. Possible answers could include school, family, friends, appearances, world issues, and personal safety. From these responses, have students come up with ideas as to what stress is. Emphasize that stress is the general feeling one gets as a result of many different kinds of problems. The teacher will explain how good stress can turn into distress. Students will review stressors in their life and determine which stressors they can control and which stressors they cannot.

2. In their notebooks, students will list three things they have accomplished in the past semester that they probably would not have managed without some good pressure. Next, students will list three things they wish to accomplish in the next year where a bit of good pressure might come in handy. The teacher will lead a discussion on the differences between positive and negative stress. The teacher should emphasize that stress is the way one interprets events and that stress does not come from around an individual, but comes from what is inside that person. A suitable analogy to help the student understand is that of a snowstorm. A snowstorm is not stressful to a skier who has plans to ski that day, but it is to someone who has to drive before the street is ploughed.
3. Divide students into groups of three or four. Have students brainstorm how we know we are stressed. Have them list all the different ways they are affected by stress. Emphasize that there are not just physical symptoms, but various feelings, thoughts and behaviours that occur. Bring the class back together as a whole and have students present their findings to the rest of the class. As a class, divide the various symptoms into the four categories, forming an organized chart. The following is an example of what can be expected:

Feelings	Thoughts	Behaviours	Physiological
<ul style="list-style-type: none"> • Anxious • Worried • Moody • Irritable • Feeling “wired” • Depression • Frustrated • Feeling like everything is out of control • Frazzled/ disorganized • Lethargic 	<ul style="list-style-type: none"> • Fear of failure • Inability to concentrate • Worry about future • Preoccupation • Pessimism • Fail to see humour in situations others find funny • Difficulty making decisions • Loss of joy in life • Boredom • General sense of dread • Cynical 	<ul style="list-style-type: none"> • Grinding teeth • Increased use of drugs, alcohol, cigarettes • Increased arguments, blow up easily • Crying spells • Eating too much or too little • Sleep problems- too much or too little • Change in activity level- fidgeting, listlessness • Lack of patience • Keep everything inside • Procrastinate • Can’t slow down –fail to build in relaxation time • Nervous laughter • Avoidance of others and commitments 	<ul style="list-style-type: none"> • Appetite change and weight gain or loss • Susceptibility to colds and viruses • Pain, headache, muscle tension, stiffness • High pulse rate, change in breathing, heart pounding • Tiredness • Dry mouth • Grinding teeth • Nausea, cramps, diarrhea • Excessive perspiration • Tearful

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4. Give students a prepared handout dealing with an inventory of common stressors. Ask students to draw from their personal experience to add stressors to the list and discuss their findings. (i.e., most popular stressors present, things that surprised them, etc.) Be mindful of the fact that some students may be uncomfortable discussing personal information and let them know that they do not have to share everything.
 5. The teacher will lead a discussion on how the body responds to stress from a physiological perspective. This discussion will further develop the knowledge gained in Strategy 3, particularly as it pertains to the physiological effects of stress. It would be helpful to have a diagram of the body, with specific areas highlighted and their responses (see Resources). Effects of other physiological (and scientific) responses include those related to epinephrine involvement, for example decreased digestive activity, increased metabolic rate, increased sweating, decreased salivation, increased muscular tension, increased cardiac and pulmonary function, and altered immune system response.
 6. As a class, students will brainstorm the factors that influence their perceptions of stress and why certain people respond the way they do. Responses should include genetic predisposition, past experiences, expectations, setting and time (time of day, time in life), number and frequency and the amount of support.
 7. Students will use a stress level index to evaluate their current level of stress (see Resources).
 8. The teacher will assign an assignment for students to complete for the following class. Students will complete a three-to-five day stress journal (see Appendix 4A). They will record all the events that have caused them stress in the prescribed amount of time. They will also record how they feel at the time and how their body responds to the stress. The students should include both positive and negative stress. Their findings will be discussed at the start of the next class. Depending on the length of time between classes, students will either record their findings in the next five consecutive classes or if the class is the next day, students will have to reflect back upon the previous couple of days. This is up to the teacher's discretion.

Assessment & Evaluation of Student Achievement

- A formative assessment of stress journal

Accommodations

- Implement strategies recommended in the student's IEP.
- Use heterogeneous groupings.
- Make appropriate alterations for ESL students.
- Students with special needs should be given extra time to complete questionnaires and indexes.
- Students with reading difficulties can be paired with suitable partners for help in completion of questionnaires and indexes.
- During teacher-led discussions, the teacher should allow ample time for comprehension of questions before asking for answers.

Resources

Conscious Living Foundation – www.cliving.org/biblobiof.htm

This site includes a variety of resources and links for other stress information.

Conscious Living Foundation – www.cliving.org/lifstrstst.htm

This site includes a life stress test that can be used during Activity 6.

Payne, Wayne A. and Dale B. Hahn. *Understanding Your Health*, 3rd ed. St. Louis: Mosby-Year Book, Inc., 1992. (p. 54 has a diagram of the body)

Rizzo Toner, Patricia. *Stress Management and Self-Esteem Activities*. Unit 5. New York: Simon and Schuster, 1993. ISBN 0-87628-874-3

Reservoir – www.coolware.com/health/medicalreporter/stress.html

This site provides further links to all aspects of stress and stress management.

Canadian Mental Health Association – www.cmha.ca

The CMHA site discusses education, advocacy and research with regards to mental health and mental health disorders. The site shows materials (e.g., pamphlets) available for purchase.

The Web's Stress Management and Emotional Wellness Page – <http://imt.net/~randolfi/StressPage.html>

This site provides links to other sites relating to stress and stress management

Appendix 4A

Stress Journal

Directions: Fill in a stress journal entry each time you feel stressed in the span of the next five days. Be sure to record the date, time and state the situation that has occurred. Describe the signs and symptoms that you feel and state how you dealt with the situation. (Use as many sheets as necessary to complete the task.)

Date	Time	Situation (Where? With whom? Doing what? Thoughts and feelings)	Signs (heart racing, headache, etc.)	Solutions (What did you do to combat the problem?)	Alternative Solutions
Jan 17	9:10 am	Gave presentation in front of entire English class	Sweaty palms Rapid speech Shuffling feet	Took deep breaths Drank water Positive self talk	

(Adapted from Stress Management and Self-Esteem Activities. Patricia Rizzo Toner. The Centre for Applied Research in Education, 1993)

Activity 5: Stress Management

Time: 120 minutes

Description

Students will reflect upon stress in their own life and will develop coping strategies for handling stress. Coping strategies and stress management techniques will be explored through the use of a variety of learning activities. Students will be introduced to some of the various strategies used to manage stress and will evaluate the ones that are most suitable to them.

Ontario Catholic Graduate School Expectations

CGE4d - respond to, manage and constructively influence change in a discerning manner;

CGE4h - participate in leisure and fitness activities for a balanced and healthy lifestyle.

Strand(s): Living Skills

Overall Expectations

LSV.02 - demonstrate an ability to use stress management techniques.

Specific Expectations

LS2.03 - use appropriate strategies for coping with stress and anxiety (e.g., relaxation, meditation, exercise, reforming);

LS2.04 - demonstrate an understanding of change and its impact on an individual's health;

HL3.02 - demonstrate the factors (e.g., environmental, genetic) that influence the mental health of individuals and lead to the prevalence of mental health problems in the community.

Prior Knowledge & Skills

- Active listening and communication skills
- Collaborative learning/cooperative group skills
- Group work skills

Planning Notes

- As this class will have a hands-on component, an alternate location may be conducive to a better experience. If this is the case, secure a more suitable location. Examples include the chapel, an empty classroom where desks could be rearranged, the gym, or an exercise/aerobic room.
- Obtain and organize pertinent equipment. These could be exercise mats, stereo, exercise tapes, relaxation CDs/tapes, VCR.
- Research and gather information on a variety of stress reducers.
- Choose one or two types of stress reducers that would be suitable for the individual class. Teachers will have inside knowledge about what will work for their class.
- Prepare rubric for reflection paper.

Teaching/Learning Strategies

This activity can be broken down into two components. This first half of the class will involve student reflection, group work, and some teacher-facilitated discussion. The second half of the class will allow for some teacher choice. There will be some options listed, but ultimately it will be the teachers, who decide which activity to choose as they have the best knowledge of the dynamics of the class.

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1. Students are expected to come to class with their completed homework assignment. Their task was to complete a stress journal for a period of five days, making note of the activities that caused them stress, how the stress affected them, and what they did to combat the problem. In groups of four, the students will discuss the ways they dealt with the stress in their lives and complete the final column (alternative solutions) of the stress journal. They will look for common findings amongst the group and make a list of the positive and negative ways in which they dealt with stress.
 2. The teacher will gather the group together and through discussion generate a list of the ways the students dealt with stress. The teacher should start with the negative ways of dealing with stress and emphasize that these are only short-term solutions and often create new problems. Students should come to understand that these short-term solutions can be divided into three categories and include the following examples:
 - **Avoidance** – constantly wearing headphones, even during class or mealtimes, excessive sleep, procrastination, and even illness
 - **Escapist behaviours** – skipping school, running away from home, abusing drugs, alcohol, and nicotine
 - **Distraction** – excessive preoccupation with the Internet, peer group, boyfriend/girlfriend
 3. The teacher will elaborate on positive ways of coping with stress. There are two alternative models offered here that suggest coping strategies.
 - a) **Three Steps For Managing Stress**

Step 1: Identify the source of stress. In order to manage stress better, we must identify where it is coming from. Identifying the source of stress can be trickier than it might seem at first.

Step 2: Eliminate the source of stress, if possible. Sometimes it's possible to get rid of the source of stress. For example, a student who has too much to do can eliminate an extracurricular activity, or work fewer hours at a part-time job.

Step 3: Change the way we handle stress. We can learn to handle stress differently. Instead of engaging in negative thinking, we can learn to think positively. Instead of ignoring a stress we can deal with it head-on, or discuss it with a supportive person.

(Reference: Teenagers, Stress & How to Cope. 1992 SUNBURST Communications, Inc.)
 - b) **The CHILL Factor**

(Reference: Chill: Straight talk About Stress. 1995, Meridian Education Corporation)
 4. Pick one or two of the following ways of reducing stress in life and have the students participate in the activity. Options include relaxation techniques, massage, meditation, yoga, exercise, tai chi, Tae Bo, biofeedback, music therapy, and laughter therapy. The activities can take the form of a videotape, audiotape, guest speaker, or a teacher-led activity.
 5. Students will complete a follow-up assessment of their experience. The following questions will be used to write a reflection paper:
 - a) Which negative activities do I currently engage in to manage my stress?
 - b) Which positive activities do I currently engage in to manage my stress?
 - c) How did I feel during the stress-reducing activities? How did my body feel? What was my emotional level? Did I feel comfortable, at ease?
 - d) Which techniques did I enjoy and would like to further explore? What was it about these techniques that appealed to me?
 - e) Where would I go to find out more information about these stress-reducing activities?
 - f) Which activities lead to mind, body, and spirit harmony? How do they provide integration or harmony?

Assessment & Evaluation of Student Achievement

- Summative evaluation of reflection paper

Accommodations

- Implement strategies recommended in students' IEPs.
- Use heterogeneous groupings
- Make appropriate alterations for ESL students.
- Students with special needs should be given extra time to complete questionnaires.
- Ensure that students with visual or auditory disabilities situate themselves accordingly during the practical experiences.

Resources

Canadian Mental Association, British Columbia – www.vcn.bc.ca/mdcmha/stressa.html

This site provides information dealing with stress, particularly relaxation and coping techniques.

Canadian Mental Health Association – www.cmha.ca

The CMHA site discusses education, advocacy, and research with regards to mental health and mental health disorders. The site shows materials (e.g., pamphlets) available for purchase.

Conscious Living Foundation – <http://www.cliving/bibliobiof.htm>

This site includes a life-stress test that can be used during Activity 4.

The Web's Stress Management and Emotional Wellness Page – <http://imt.net/~randolfi/StressPage.html>

This site provides links to other sites relating to stress and stress management.

Powell, Trevor. *The Mental Health Handbook* (Revised). Oxon: Winslow Press Ltd., 1992.

Rush, Anne Kent. *The Modern Book of Yoga: Exercising Mind, Body and Spirit*. New York: Dell Publishing, 1996. ISBN 0-440-50719-7

Schmitz, Connie and Hipp, Earl. *Fighting Invisible Tigers: A Stress Management Guide For Teens*. Minneapolis: Free Spirit Publishing, 1995. (To Order 1-800-735-7323)

Simmons, M. and Daw, Peter. *Stress Anxiety and Depression: A Practical Workbook*. Oxon: Winslow Press.

Activity 6: Health Fair Project

Time: 180 minutes

Description

Students will work individually or with a partner to further develop their knowledge of a particular subject related to mental health, mental health issues, and stress. Students will effectively communicate their ideas through oral, written, and visual presentation. Students will elaborate on information presented earlier in the unit.

Strand(s) & Learning Expectations

Ontario Catholic School Graduate Expectations

CGE2b - read, understand, and use written materials effectively;

CGE2c - present information and ideas clearly and honestly and with sensitivity to others;

CGE2e - use and integrate the Catholic faith tradition, in the critical analysis of the arts, media, technology, and information systems, to enhance the quality of life;

CGE5e - respect the rights, responsibilities, and contributions of self and others.

Strand(s): Healthy Living

Overall Expectations

HLV.03 - describe the influence of mental health on overall well-being.

Specific Expectations

HL3.02 - demonstrate the skills that enhance personal mental health (e.g., coping strategies for stress management);

HL3.04 - describe the impact of mental health disorders (e.g., phobias, anxiety disorder, schizophrenia, affective disorders) on a person's emotional and physical health.

Prior Knowledge & Skills

- Cooperative Learning Skills/Collaborative Group Skills
- Oral, visual and written presentation skills
- Research skills
- Computer and Internet skills

Planning Notes

- The teacher will have to decide if this project will be done individually or collaboratively with a partner. If students are working in partners, decide if partners will be chosen by student, teacher, or drawn randomly.
- This summative assignment should be distributed on the first day of the unit. Two other days will need to be scheduled, one for a work period, the other for a presentation day.
- Book the gymnasium for the Health Fair. The teacher may also consider inviting other classes, and administration, so they, too, can benefit from the knowledge and insight of the students in the class. It is possible to have these students become involved by having them vote for their favourite project, most creative, most knowledgeable, etc.
- Prepare for how the final day will be arranged. At what point do students leave their booth to look at other projects? Are students expected to take notes on other projects? Will the students be evaluated on all projects?
- Prepare assignment sheet and rubric (see Appendix 6).
- Prepare a timeline for student/teacher conference in reference to progress.
- Students will need to purchase a billboard for the visual presentation.
- Decide which topics students can work on (e.g., mental health, mental health disorders, stress, stress management, etc.). Decide whether you will allow more than one group to present the same topic.

Teaching/Learning Strategies

1. Introduce the health fair project to students. Discuss the rubric and answer any questions regarding evaluation of this project (see Appendix 6).
2. If students are working in pairs, introduce this and allow students to discuss topics with their partner. Set a due date for the health fair topic.
3. Share resources with students (e.g., pamphlets from the CMHA, Internet sites, books, videos, etc.).
4. a) Set a date for in-class work and for the health fair project presentation.
b) Set a date for student/teacher conferences.

Assessment & Evaluation of Student Achievement

- Summative Health Fair Project
- Formative student/teacher Conference

Accommodations

- Implement strategies recommended in student's IEP.
- Make appropriate alterations for ESL students.
- Provide resource material for students with an IEP, to aid in development of their health fair project. Teachers need to be consistent with other accommodations for students with an IEP.

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- Make modifications to final summative evaluation for those students with special needs (e.g., less extensive, extra time to work on in class, place them in a group with two other students).
 - Allow enrichment students to work alone on the summative project if they wish to do so.

Resources

Canadian Mental Health Association

Anxiety Disorders Association of America – www.adaa.org

This ADAA site breaks down the different anxiety disorders and specific phobias. It provides a variety of other resources and links.

Internet Mental Health Association – www.mentalhealth.com

This website is an excellent introduction to mental health disorders. It has many links to different research (e.g., magazines).

National Foundation for Depressive Illness – www.depression.org

This website discusses facts, treatment, and results of depression. It is an excellent introductory site.

Obsessive Compulsive Foundation – www.ocfoundation.org

This site introduces OCD and discusses how it is treated. It has many links to articles related to OCD.

The World Psychiatric Program to fight stigma due to Schizophrenia – www.openthedoors.com

The site is dedicated to fighting the stigmas involved with schizophrenia. The facts, myths, and causes are also discussed.

Appendix 6

Health Fair Evaluation Rubric

	Level 1 (50-59%)	Level 2 (60-69%)	Level 3 (70-79%)	Level 4 (80-100%)
Knowledge/ Understanding Understanding of particular mental health topic or stress management technique	- demonstrates limited understanding of the basic ideas and/or concepts	- demonstrates moderate understanding of the basic ideas and/or concepts	- demonstrates considerable understanding of the basic ideas and/or concepts	- demonstrates thorough understanding of the basic ideas and/or concepts
Thinking/Inquiry Use of a variety of critical and creative thinking skills in reflection (i.e., organizing, interpreting) Selection of strategies and resources that are relevant to topic and enhance presentation	- uses critical and creative thinking skills with limited effectiveness - selects strategies and resources with limited effectiveness	- uses critical and creative thinking skills with moderate effectiveness - selects strategies and resources with moderate effectiveness	- uses critical and creative thinking skills with considerable effectiveness - selects strategies and resources with considerable effectiveness	- uses critical and creative thinking skills with a high degree of effectiveness - selects strategies and resources with high degree effectiveness
Communication Communication of ideas concerning mental health/stress management clearly (through appropriate level of detail, organization of information, proper use of language conventions, presentation format) Use of symbols and visuals	- communicates ideas with limited clarity - uses symbols and visuals with limited effectiveness	- communicates ideas with moderate clarity - uses symbols and visuals with moderate effectiveness	- communicates ideas with considerable clarity - uses symbols and visuals with considerable effectiveness	- communicates ideas with a high degree of clarity - uses symbols and visuals with high degree effectiveness
Application Display of empathy for the feelings and situations of others by making connections through the research and presentation Use of scriptures and Church teachings to analyse the social issue of mental health from a faith perspective	- displays little empathy for the feelings and situations of others - demonstrates limited ability to analyse social issues using a faith perspective	- displays some empathy for the feelings and situations of others - demonstrates moderate ability to analyse social issues using a faith perspective	- displays considerable empathy for the feelings and situations of others - demonstrates considerable ability to analyse social issues using a faith perspective	- displays high degree of empathy for the feelings and situations of others - demonstrates high degree of ability to analyse social issues using a faith perspective

Note: A student whose achievement is below level 1 (50%) has not met the expectations for this assignment or activity.