

*Catholic District School Board Writing Partnership*

# Course Profile

## **Health for Life**

Grade 11

Open

PPZ30

• *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 Profiles are professional development materials designed to help teachers implement the new Grade 11 secondary school curriculum. These materials were created by writing partnerships of school boards and subject associations. The development of these resources was funded by the Ontario Ministry of Education. This document reflects the views of the developers and not necessarily those of the Ministry. Permission is given to reproduce these materials for any purpose except profit. Teachers are also encouraged to amend, revise, edit, cut, paste, and otherwise adapt this material for educational purposes.

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### **Acknowledgments**

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## Course Overview

### Health for Life, Grade 11, Open, PPZ3O

**Secondary Policy Document:** *The Ontario Curriculum, Grades 11, 12: Health and Physical Education*

#### Course Description

This course helps students develop a personalized approach to healthy living. Students in Catholic Schools examine the factors that affect their own health and the health of individuals as members of the community. They learn about the components of the *Vitality* approach to healthy living – an initiative that promotes healthy eating, an active lifestyle, and a positive self-image. Throughout this course, students develop the skills necessary to take charge of and improve their own health, as well as to encourage others to lead healthy lives. This course helps students to meet the Ontario Catholic School Graduate Expectations by enabling each person to become a self-directed, responsible, life-long learner who sets goals, makes decisions and takes ownership and initiative in the promotion of a healthy lifestyle and a healthy environment.

#### How This Course Supports the Ontario Catholic School Graduate Expectations

Through Health for Life, students develop attitudes and values that promote healthy living and vitality as a way of life both for themselves and for others. Students are challenged to think reflectively and creatively to evaluate consumer issues, and environmental and health policies in light of gospel values. Students are asked to examine, evaluate and apply knowledge (physical, political ethical, socio-economic and ecological) to influence others in a positive Christian way for the development of a just and compassionate society. They implement the concept of a balanced lifestyle throughout course units of study.

#### Course Notes

It is recommended that the units be presented in the sequence listed. Students therefore are introduced to and encouraged to develop an understanding of the *Vitality* concept early in the course. The knowledge acquired regarding the *Vitality* concept is transferable to other unit activities and ultimately to various aspects of life. Due to the number of presentations in this course, students should be encouraged to use a variety of strategies to convey information (i.e., electronic slide show, video, role-play, etc.). Research facilities including access to a computer lab and the Internet are necessary and should be supported in the classroom. Therefore, the teacher would be responsible to book the facilities and media tools needed. Teachers should revisit research skills and techniques with students to ensure that a variety of resources are used and that salient information is extracted in an effective manner. For areas where health agencies are not available locally, use of provincial websites is recommended. Teachers should ensure the information contained in the websites is based on peer-reviewed scientific research, which has been published in either popular or medical journals. A brief, direct student checklist reflecting values/beliefs/attitudes, either student or teacher prepared, would assist students in their analysis regarding information either on, or missing from, the website. CGE 2a, 3d-4g would assist in the checklist formation. In Canada, the Canadian Health Network is the main site for information. Teachers should book a date for the health fair at the beginning of the year and contact exhibitors at least three months in advance. In Unit 4, students have an opportunity to be certified in First Aid. Teachers should have the appropriate certification (Instructors Level) or an instructor can be booked through St. John Ambulance or similar agency. The student can use this certificate when applying for postsecondary health science education or on a résumé when looking for a job in the workplace.

A variety of teaching strategies have been suggested for each unit. These strategies are suggestions that can be used or altered to meet the needs of individual classes and provide a choice for teachers. Physical activity components that connect to the *Vitality* expectations could be considered if time and space are available. Refer to the Ontario Curriculum Unit Planner or Teacher Companion for descriptions of most of the teaching strategies suggested in this profile.

### Units: Titles and Times

Unit 1	Personal Determinants of Health	12 hours
Unit 2	Consumer Health Issues	14 hours
Unit 3	Health and the Environment	21 hours
Unit 4	Health Promotion and Safety	21 hours
* Unit 5	Making the Personal Health Connection	22 hours
Unit 6	The Community Connection	20 hours

\* This unit is fully developed in this Course Profile.

### Unit Descriptions

#### Unit 1: Personal Determinants of Health

**Time:** 12 hours

##### Unit Description

Students are provided with an opportunity to develop a holistic balanced approach to their life. They look at the importance of living a balanced lifestyle and determine how effective they are in maintaining balance. By taking an active role in researching family history and background in relation to their own personal health, they have an opportunity for self-discovery in terms of their current lifestyle. They examine and analyse the numerous influences that affect their health (cultural, social, family, peers, genetic predisposition to disease, community, the media, and socio-economic status). Recognizing the health factors that students can control as well as those they cannot, they can decide which determinants play an important role in creating an integrated approach to the *Vitality* concept. Students develop a concerned awareness around creating environments that support healthy choices. **Note:** Teachers will need to be sensitive to students' family situations (e.g., adoption, difficulty accessing records...), when dealing with this unit. As a culminating activity, students are expected to convey their learned material by creating a multi-media presentation as well as writing a reflective paper.

##### Unit Overview Chart

Act.	Expectations	Assessment	Focus	Teaching Strategies
1	VIV.01, VI1.01; DHV.01, DHV.02, DH1.01, DH1.05, DH2.01; CGE2b, CGE3e, CGE4a, CGE4h	Knowledge/ Understanding	Five aspects of Personhood and the <i>Vitality</i> Concept	Think/Pair/Share Jigsaw Inquiry Lecture/Presentation
2	DHV.01, DHV.02, DH1.02; CGE2b, CGE4a, CGE 5a	Knowledge/ Understanding Communication	Family History and Health	KWL Collaborative/ Cooperative Learning
3	DHV.02, DH2.03; CGE4h, CGE7f	Knowledge/ Understanding	Culture and Health	COPE Guided Reading
4	DHV.02, DH2.02; CGE3f	Thinking/Inquiry	Social Influences on Health	Problem Posing Issue-Based Analysis

5	VIV.01, VII.01, VII.06; DHV.01, DHV.06, DH1.06; CGE4e, CGE4g	Application and Communication	Create and Implement the <i>Vitality Plan</i>	Goal Setting Sketching to Learn
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## Unit 2: Consumer Health Issues

**Time:** 14 hours

### Unit Description

Through interactive activities, students learn to recognize advertising techniques, compare various products and claims, understand consumer rights, distinguish between safe and dangerous items, and become familiar with safety rules. Research skills are reviewed and practised in order to complete assignments and make presentations to the class dealing with public health agencies within our communities. Students also engage in challenging tasks that force them to examine major consumer issues (i.e., quackery, food labels, determining the validity of health information, products and services). They are encouraged to think reflectively and creatively to evaluate situations and solve problems. Students also discuss the Regulated Health Professions Act and the role of health regulatory bodies in protecting the public by setting standards for health professionals. In addition, research from Ministry of Health and Long-Term Care publications and other scientific publications enable students to discuss and analyse various debate topics. Throughout this unit students make health decisions based on facts, explanations, theories and personal opinion. Students demonstrate their knowledge by means of a poster presentation and formal debate as a culminating activity.

### Unit Overview Chart

Act.	Expectations	Assessment	Focus	Teaching Strategies
1	CHU.01, CH1.01, CGE2b, CGE3c, CGE2e	Knowledge/ Understanding Thinking/Inquiry	Quackery in Health Products and Services	Directed Reading-Thinking Activity (DRTA) Think/Pair/Share Collaborative/Cooperative Learning Learning Centres
2	CHU.01, CH1.02, CGE2e, CGE4a, CGE7b	Knowledge/ Understanding	Label Smart	COPE Classifying Issue-Based Analysis Problem Posing Collaborative/Cooperative Learning
3	CHU.01, CH1.01, CGE3f, CGE7b, CGE7h	Knowledge/ Understanding	Better Business Bureaus and Consumer Rights	Inquiry Brainstorming The Question Matrix The KWL
4	CHV.01 VIV.02, U12.02, CH1.01, CGE4f, CGE7g	Knowledge/ Understanding Application Communication Thinking/Inquiry	Debate the Issues	The PMI (posters) ReQuest Issue-Based Analysis

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### Unit 3: Health and the Environment

Time: 21 hours

#### Unit Description

Students present a paper on a major environmental health issue and examine how environmental issues affect their quality of life. Stewardship is a common thread that runs throughout the unit activities. Specifically, while students investigate major issues such as water and waste management and ozone depletion, they are asked to examine the notion that care and concern for the environment is everyone's business. Throughout the unit, students are given plenty of opportunity to demonstrate an understanding of several major health concerns and describe specific protocols to prevent environmental disasters. Students are expected to demonstrate their learning by presentation techniques or by writing a research paper as a culminating activity. Students are challenged to listen actively and critically to thoroughly understand various topics and learn in light of gospel values.

#### Unit Overview Chart

Act.	Expectations	Assessment	Focus	Teaching Strategies
1	CHV.02, CHV.03, CH2.01, CH2.02, CH2.03, CH2.04, CH3.02, CGE1a, CGE2a, CGE3c	Knowledge/ Understanding Thinking/Inquiry	Water Management	Student Survey Guided Reading Directed Reading
2	CHV.02, CHV.03, CH2.01, CH2.02, CH2.03, CH2.04, CH3.02, CGE1d, CGE2a, CGE3c	Knowledge/ Understanding Thinking/Inquiry	Waste Management	Question Matrix KWL Four Way Recording and Reporting
3	CHV.02, CHV.03, CH2.01, CH2.02, CH2.03, CH2.04, CH3.02, CGE1d, CGE2a, CGE3c	Knowledge/ Understanding Thinking/Inquiry	Air Pollution and Respiratory Disease	Case Studies Editorial Analysis
4	CHV.02, CHV.03, CH2.01, CH2.02, CH2.03, CH2.04, CH3.02, CGE1d, CGE2a, CGE3c	Knowledge/ Understanding Thinking/Inquiry	Ozone and Skin Cancer	Video Guest speaker KWL Goal Setting
5	CHV.02, CHV.03, CH2.01, CH2.02, CH2.03, CH2.04, CH3.02, CGE1d, CGE2a, CGE3c	Knowledge/ Understanding Application Communication Thinking/Inquiry	Research Presentation on an Environmental Health Issue	Lecture/Presentation

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## Unit 4: Health Promotion and Safety

Time: 21 hours

### Unit Description

Students are encouraged to develop an appreciation and an understanding of concepts and approaches related to health promotion and disease prevention. This unit is also designed to give students the knowledge and confidence to handle first aid emergency situations and thus promote the sacredness of life. Students use practical experiences in first aid to keep up-to-date on new first aid procedures. As a culminating activity, students research and give a presentation on a public health agency. Students examine and evaluate a public health agency, applying their knowledge of interdependent systems (physical, ethical) to help promote a just and compassionate community.

### Unit Overview Chart

Act.	Expectations	Assessment	Focus	Teaching Strategies
1	CHV.03, CH3.04, CH3.01, CGE1d, CGE3f, CGE4g, CGE7j	Knowledge/ Understanding Communication	Chronic Diseases and Prevention	Think/Pair/Share Carousel Brainstorming Jig Saw Problem Posing
2	CHV.03, CHV.04, CH1.04, CH1.03, CH3.07, CGE3f, CGE3c, CGE1d	Knowledge/ Understanding Thinking/Inquiry	Health Care Services and Alternatives	Inquiry Student Questioning/Buddy System Lecture/Presentation
3	CHV.03, CH3.05, CGE7d, CGE7h	Knowledge/ Understanding Thinking/Inquiry	CPR and First Aid Certification	Lecture/Presentation Guest Speaker Remembering Techniques
4	CHV.01, CHV.03, CH1.04, CH3/04, CH3.01, CH3.07, CH1.05, CH3.08, CGE7j	Knowledge/ Understanding Communication Thinking/Inquiry Application	Public Health Agencies in Our Community	Research, web, Library/Resource Centre Student Presentations

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## Unit 5: Making the Personal Health Connection

Time: 22 hours

### Unit Description

This unit looks at developing a personal philosophy of health and examines theories about changing to and maintaining a healthy lifestyle. Students examine and reflect on their personal values, abilities, and aspirations influencing life choices and opportunities in various health related topics. Students acquire a knowledge and understanding of exercise behaviour and why people do or do not exercise. Students also look at what factors or determinants influence people to exercise and they identify strategies for increasing exercise adherence. Students also develop guidelines for improving their own exercise and healthy eating routine. Students further their understanding of health connection by visiting community agencies and organizations (retirement home, health club, the larger school community). Using interview technique surveys and looking at the media, students develop their own personal philosophy of vitality and create a video as a culminating activity.

### Unit Overview Chart

Act.	Expectations	Assessment	Focus	Teaching Strategies
1	VIV.01, VII.03, VIV.02, DHV.02, DH2.01, DH2.02, UI1.03, UI1.04, CGE2b, CGE2c, CGE4g	Thinking/Inquiry Knowledge/ Understanding	Exercise Behaviour and Adherence	Interview KWL Field Trip, (Retirement home) Four way Recording and Reporting
2	VIV.02, VIV.01, VI2.03, VII.02, DHV.01, DH1.03, CGE1d, CGE2c, CGE3c	Application Knowledge/ Understanding Thinking/Inquiry	Taking Personal Responsibility for MY Health	Classifying Research Field Trip, (Health Club) Collage (Media) Health Philosophy Chart, KWL Problem Posing Reflective Journals
3	VIV.01, VIV.02, VI2.03, DHV.01, DH1.03, CGE1d, CGE2c, CGE3c, CGE2b	Application Knowledge/ Understanding Thinking/Inquiry	Make a Personal Health Video	Cooperative Learning/Project Based Approach

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## Unit 6: The Community Connection

Time: 22 hours

### Unit Description

This unit provides students with the opportunity to apply course knowledge and experience to influence and support others in making positive healthy choices. The study of career opportunities in health promotion and disease prevention provides students with the skills and background needed to organize a school health fair and make them think critically about the meaning and purpose of work. A student-organized health fair is a culminating course activity and teaching strategy that enables students to promote sacredness of life, contribute to the common good, and discover, share and appreciate the concept of *Vitality*. The health fair experience also helps students recognize the importance of taking ownership of their own health as well as recognizing the agencies available to support their efforts.

### Unit Overview Chart

Act.	Expectations	Assessment	Focus	Teaching Strategies
1	CHV.03, CH3.08, CGE2c, CGE5b, CGE1d	Knowledge/ Understanding	Research Career opportunities	Lecture/Presentation Think/Pair/Share Three Step Interview
2	CHV.03, CH3.03, CGE1d, CGE7a, CGE7b	Knowledge/ Understanding Thinking/Inquiry	Treatment of Common Communicable Diseases	Inquiry Editorial Analysis
3	UIV.02, U12.01, U12.04, CHV.03, CH3.06, UIV.02, CGE1a, CGE7a, CGE7b, CGE7d, CGE7j	Application	Health Organizations in the Community	Collaboration/Cooperative Learning Independent Study

### Teaching/Learning Strategies

- Issue-Based Analysis
- Journal/Learning Log
- Brainstorming
- Buddy System
- Case Study
- Classifying
- Collaborative/Cooperative Learning
- Directed Reading-Thinking Activity (DRTA)
- Field Trip
- Guest Speaker
- Guided Reading
- Independent Study
- Inquiry
- Interview
- Jigsaw
- Journal Writing
- Learning Centres
- Research
- Sketching to Learn
- Think/Pair/Share
- KWL
- Cope
- Goal Setting
- Question Matrix
- PMI
- ReQuest
- Four Way Recording and Reporting
- Editorial Analysis
- Research
- Sketching to Learn
- Lecture
- Peer Teaching
- Problem Posing

## Assessment & Evaluation of Student Achievement

### Framework for Organizing Assessment Strategies

<b>Method</b> (a way of assessing or evaluating learning)	<b>Sample Strategies</b> (individual activity/technique used to assess or evaluate learning)	<b>Sample Instruments</b> (something used to initiate or guide the assessment activity or to track/monitor the assessment data)
<b>Reflection</b>		
Method used to determine how and why students learn; to assess dimensions of learning not easily observed or measured through tasks; to assess student understanding of personal growth and development	<ul style="list-style-type: none"> <li>• self-assessment</li> <li>• peer-assessment</li> <li>• response journals</li> <li>• learning logs</li> <li>• wrap-up activities</li> </ul>	<ul style="list-style-type: none"> <li>• learning rubrics</li> <li>• anecdotal comments</li> <li>• checklists</li> <li>• surveys</li> </ul>
<b>Observation</b>		
Method used to monitor and assess intellectual, social, emotional, and spiritual growth and development not otherwise easily measured or inferred	<ul style="list-style-type: none"> <li>• formal teacher observation</li> <li>• informal teacher observation</li> </ul>	<ul style="list-style-type: none"> <li>• checklists</li> <li>• student profile sheets</li> <li>• anecdotal notes</li> <li>• rubrics</li> </ul>
<b>Conferencing</b>		
Method used to collect evidence of student learning through listening, questioning, responding, explaining; to assess communication and thinking skills; to monitor personal growth and development and attitudes toward learning	<ul style="list-style-type: none"> <li>• Student-Teacher conferencing</li> <li>• Parent-Teacher conferencing</li> <li>• Peer conferencing</li> </ul>	<ul style="list-style-type: none"> <li>• anecdotal notes</li> <li>• probe questions</li> <li>• surveys</li> </ul>
<b>Paper-and-Pencil Tests</b>		
Method used to assess student's achievement of particular knowledge or skills in depth	Standards Tests <ul style="list-style-type: none"> <li>• Teacher-made (standards referenced) tests</li> </ul>	<ul style="list-style-type: none"> <li>• teacher-created tests</li> </ul>
<b>Performance Assessments</b>		
Method used to assess student ability to apply, integrate and transfer their knowledge, skills and values; to evaluate student progress and achievement of learning expectations and standards; to determine expanded opportunities for individual students	<ul style="list-style-type: none"> <li>• presentations, performances</li> <li>• exhibitions, demonstrations</li> <li>• role performances</li> <li>• formal written assignments (essays, reports...)</li> <li>• projects</li> </ul>	<ul style="list-style-type: none"> <li>• rubrics</li> <li>• checklists</li> <li>• logs</li> <li>• peer assessment</li> <li>• developmental profiles</li> <li>• video/audio taping</li> <li>• mind maps, Venn diagrams, T-charts</li> </ul>

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.

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## Accommodations

- Reduce volume of material assigned.
- Extend timelines for tests and assignments.
- Provide educational assistance support.
- Provide peer support (students identified as IEP – contact with Resource teacher is important to receive specific adaptations for the student).
- Test writing in the Library/Resource Centre.
- Prolong testing over two days.
- Test rewrites.
- Pre-test/post-test review activities.
- Apply hands-on, practical, life skills approach.
- Student directed learning activities.
- Preferential seating in class.
- Time-out breaks in the Library/Resource Centre.
- Ongoing monitoring one-to-one to ensure understanding of concepts presented in class.
- Continuous review of previously taught material.
- Oral, taping, visual responses offered according to student's strengths.

## Resources

**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.

American Medical Association – [www.ama-assn.org](http://www.ama-assn.org)

*Annual Report on Health*. MacLean's – [www.becelcanada.com](http://www.becelcanada.com)

Merki, Mary Bronson, Ph.D., and Don Merki, Ph.D. *Glencoe Health*. McGraw-Hill, 1999.

[www.consumerhealthweb.com](http://www.consumerhealthweb.com)

Health Canada Online – [www.hc-sc.gc.ca/english](http://www.hc-sc.gc.ca/english)

[www.healthfinder.gov](http://www.healthfinder.gov)

[www.healthyfridge.com](http://www.healthyfridge.com)

[http://www.lib.uoguelph.ca/pathfinders/health.web\\_links.html](http://www.lib.uoguelph.ca/pathfinders/health.web_links.html)

The Merck Manual – [www.merck.com/pubs/manual](http://www.merck.com/pubs/manual)

[www.ophea.com](http://www.ophea.com)

[www.nih.gov/health/consumer/index.html](http://www.nih.gov/health/consumer/index.html)

Riozzo Toner, Patricia. *Consumer Health and Safety Activities*. West Nyack, NY: Centre for Applied Research in Education, 1993.

Weinberg, Roberts and Dan Gould. *Foundations of Sport & Exercise Psychology*, 2nd ed. Human Kinetics Publishers, Champaign Illinois, 1999. pp. 371-391

*Teaching & Learning Strategies – The Ontario Curriculum Unit Planner*.

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

Ministry of Health and Long-Term Care (Ontario) – [www.gov.on.ca/health](http://www.gov.on.ca/health)

[www.thriveonline.com/fitness](http://www.thriveonline.com/fitness)

*Spirituality and Wellness* by Doctor Richard Gilmartin.

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## Coded Expectations, Health for Life, Grade 11, Open, PPZ30

### Determinants of Health

#### Overall Expectations

- DHV.01 · analyse the role of individual responsibility in enhancing personal health;
- DHV.02 · analyse the social factors that influence personal health.

#### Specific Expectations

##### Personal Factors

- DH1.01 – describe the interrelationship of physical, social, and mental health in enhancing personal health;
- DH1.02 – describe the heredity factors that influence personal health (e.g., a family history of an illness such as diabetes, breast cancer, cardiovascular disease, or mental illness; body shape and size);
- DH1.03 – analyse how various lifestyle choices (e.g., decisions pertaining to nutrition, physical activity, and smoking) affect health;
- DH1.04 – evaluate the factors (e.g., personal responsibility; the influence of peers, culture, and the media) that influence personal choices with regard to health-related products and services;
- DH1.05 – explain how stress and one’s ability to cope with stress affect personal health;
- DH1.06 – implement a personal plan for healthy living.

##### Social Factors

- DH2.01 – describe how family, peers, and community influence personal health;
- DH2.02 – analyse the social factors that influence personal health (e.g., employment, education, socio-economic status, isolation, rural and urban settings, access to health and recreational services);
- DH2.03 – describe the influence of culture on health (e.g., foods eaten, methods of treating illness, gender roles).

### Community Health

#### Overall Expectations

- CHV.01 · analyse the value of health information and health-promoting products and services;
- CHV.02 · analyse how the environment influences the health of the community;
- CHV.03 · demonstrate an understanding of concepts and approaches related to health promotion and disease prevention.

#### Specific Expectations

##### Consumer Health

- CH1.01 – determine the validity of health information, products, and services (e.g., information on food labels, health and exercise equipment) based on research (e.g., Ministry of Health publications, scientific publications);
- CH1.02 – identify the factors (e.g., the consumption of foods after their expiration dates, certain food additives) that lead to food-generated ailments (e.g., food poisoning, food allergies);
- CH1.03 – analyse alternative health care practices and services (e.g., acupuncture, homeopathy, naturopathy);
- CH1.04 – analyse the cost and accessibility of health care services;

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- CH1.05** – evaluate the effectiveness of school and community health services (e.g., public health units, community agencies, mental health facilities) for themselves and others;
- CH1.06** – evaluate the effectiveness of the methods and means used to communicate health information and ideas (e.g., the Internet, print media, research journals).

### **Health and Environmental Factors**

- CH2.01** – analyse the environmental factors (e.g., air and water quality, living conditions) that affect personal health (e.g., increase in respiratory and communicable diseases);
- CH2.02** – describe environmental influences on health on the local, national, and global levels (e.g., pollution, industrial activity, weather);
- CH2.03** – describe the impact of specific health problems (e.g., malnutrition, skin cancer, lung cancer, cholera, typhoid) on personal health and the health of others;
- CH2.04** – analyse the impact of public health policies and government regulations on environmental health and community health (e.g., water treatment, waste disposal management, immunization program);
- CH2.05** – identify school and workplace health issues (e.g., air quality, occupational injuries).

### **Health Promotion**

- CH3.01** – explain the factors that contribute to the strengthening of the immune system (e.g., proper nutrition, physical exercise);
- CH3.02** – explain methods used to prevent the transmission of communicable diseases (e.g., abstinence from practices that may lead to contamination, avoidance of drugs);
- CH3.03** – evaluate the effectiveness of different types of treatment for the most common communicable diseases (e.g., hepatitis B, tuberculosis, STDs, HIV/AIDS);
- CH3.04** – describe how to reduce the risks and/or delay the onset of chronic diseases in adulthood (e.g., cardiovascular disease, cancer, arthritis, diabetes);
- CH3.05** – demonstrate specific skills that can help others in emergency health situations (e.g., CPR, first aid);
- CH3.06** – demonstrate an awareness of the contributions that individuals can make to the health of others (e.g., by giving blood, by consenting to be an organ donor, by participating in an anti-smoking campaign);
- CH3.07** – analyse how research and medical advances influence the prevention and control of health problems;
- CH3.08** – identify career opportunities in health promotion and disease prevention.

## **Vitality**

### **Overall Expectations**

- VIV.01** · demonstrate an understanding of the *Vitality* concept;
- VIV.02** · use strategies to promote the *Vitality* concept.

### **Specific Expectations**

#### **The Concept**

- VII.01** – demonstrate an understanding of the components of the *Vitality* concept (i.e., healthful eating, an active lifestyle, a positive self-concept);
- VII.02** – describe a model that reflects their personal philosophy of health;
- VII.03** – describe the stages identified in behavioural change theory (e.g., precontemplation, contemplation, preparation, action, maintenance) as they relate to modifying personal lifestyle;
- VII.04** – describe barriers to decision making with respect to the *Vitality* concept.

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**Personal Commitment**

**VI2.01** – demonstrate a commitment to the promotion of personal health and a healthy lifestyle within the school community (e.g., by conducting a school fitness survey or organizing a health fair; by conducting a violence prevention program for younger students);

**VI2.02** – explain facts, theories, and personal opinions related to health issues (e.g., by debating current issues, presenting information);

**VI2.03** – implement plans for attaining personal health that involve the components of the *Vitality* concept;

**VI2.04** – demonstrate an ability to influence and support others in making positive health choices.

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## 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.

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**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.

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## Unit 5: Making the Personal Health Connection

**Time:** 22 hours

### Unit Description

This unit looks at developing a personal philosophy of health and examines theories about changing to and maintaining a healthy lifestyle. Students examine and reflect on their personal values, abilities and aspirations influencing life choices and opportunities in various health-related topics. Students acquire a knowledge and understanding of exercise behaviour and why people do or do not exercise. Students also look at what factors or determinants influence people to exercise and identify strategies for increasing exercise adherence. Students also develop guidelines for improving their own exercise and healthy eating routine. Students further their understanding of health connections by visiting community agencies and organizations (retirement home, health club, the larger school community). Using interview technique surveys and looking at the media, students develop their own personal philosophy of vitality and create a video as a culminating activity.

### Unit Synopsis Chart

Activity	Time	Expectations	Assessment	Tasks
1. Exercise Behaviour Adherence	240 min	VIV.01, VIV.02, DHV.02, DH2.01, DH2.02, UI1.03, UI1.04 CGE2b, CGE2c, CGE4g	Thinking/Inquiry Knowledge/ Understanding Communication Application	Participate in a class discussion, reading activities on exercise behaviour and adherence Prepare a questionnaire for senior citizens on exercise and lifestyle experiences Visit a retirement home Write a reflection paper
2. Taking Personal Responsibility for My Health	450 min	VIV.02, VIV.01, VII.02, DHV.01, DHV.03 CGE2c, CGE3c	Knowledge/ Understanding Communication Application Thinking/Inquiry	Visit a fitness facility Create a collage on the shift to the <i>Vitality</i> approach Complete a lifestyles philosophy chart
3. Make a Personal Health Video	630 min	VIV.02, VIV.01, VI2.03, DHV.01, DH1.03 CGE2c, CGE3c	Communication Application Thinking/Inquiry	Create a personal health video promoting healthy active living

### Activity 1: Exercise Behaviour Adherence

**Time:** 240 minutes

#### Description

In this activity, students are introduced to the topic of exercise adherence and why people start and stop exercise programs. Students gain the necessary knowledge to recognize determinants of exercise and apply it to their own active living lifestyle as well as reflect on personal goals and priorities. Students interview senior citizens to see how life experiences and healthy living (or lack of) affects us over a lifetime thus furthering their understanding of the *Vitality* concept and determinants of health. As a culminating activity, they write a reflection paper on their findings.

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## 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 with sensitivity to others;

CGE4g - examine and reflect on one's personal values, abilities, and aspirations influencing life's choices and opportunities.

**Strand(s):** Vitality, Determinants of Health

### Overall Expectations

VIV.01 - demonstrate an understanding of the *Vitality* concept;

VIV.02 - use strategies to promote the *Vitality* concept;

DHV.02 - analyse the social factors that influence personal health.

### Specific Expectations

VII.03 - describe the stages identified in behavioural change theory as they relate to modifying personal lifestyle;

VII.04 - describe barriers to decision making with respect to the *Vitality* concept;

DH2.01 - describe how family, peers and community influence personal health;

DH2.02 - analyse the social factors that influence personal health.

### Planning Notes

- Obtain current statistics using current publications or websites on participation in exercise.
- Contact a retirement home for people interested in being interviewed and send a copy of the interview questions to the contact prior to the visit, if possible. Contact people at the home, (e.g., a recreational therapist or an activity coordinator) concerning the exercise lifestyle of the resident.
- Arrange transportation from school to the retirement home, if necessary.
- After class discussion, type up questionnaire for students to bring to interview.

### Prior Knowledge & Skills

- Communication skills;
- Listening skills;
- Note-taking skills;
- The *Vitality* concept (Unit 1).

### Teaching/Learning Strategies

#### Day 1

1. Review the *Vitality* concept introduced in Unit 1 and the shift away from a weight-centred health approach.
2. Initiate discussion by presenting the following statistics:
  - Of people who start exercise programs 50% will drop out within six months.
  - In Canada, among children and adults 25% report no vigorous physical activity.
  - Among adults only 15% participate in vigorous activity 3 times a week for 20 minutes. (Health Canada Online – [www.hc-sc.gc.ca/english](http://www.hc-sc.gc.ca/english))
3. Brainstorm answers to the question. “What are some reasons people do or do not exercise?” Write answers on the board.

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### **Reasons to Exercise**

- Weight Control
- Reduced Risk of Cardiovascular Disease
- Reduction of Stress and Depression
- Enjoyment
- Building of Self Esteem
- Socializing
- Other

### **Reasons for Not Exercising**

- Lack of Time
  - Lack of Energy
  - Lack of Motivation
  - Physical Disabilities or Limitations and Health Conditioning
  - Other
4. Teachers introduce the topic of behavioural change and exercise using the transtheoretical model of exercise behaviour. Teachers hand out Appendix 1A to each student and read it as a class. This model shows that when people are trying to alter their lifestyle, habit change is cyclical rather than linear. This would explain why many people do not succeed in their efforts of establishing and maintaining a lifestyle change.
  5. Students examine their own reasons for exercising by completing Appendix 1B – Active Living – No Excuses. Teachers use the KWL teaching strategy (Appendix 1C) to review the topic in Strategy 3 and apply it to their own lifestyle to see what stage of model they are presently in. Teachers may want to re-create the model in Appendix 1A in a different format so students can fill in blanks and make notes.
  6. For homework, have students poll parents concerning their lifestyles and things they would like to change.

### Day 2

1. The teacher introduces and has the students examine the personal and environmental factors (determinants of health) that influence exercise adherence.

#### **Personal Factors**

- Demographic Variables - Gender, socio-economic or skill.
- Cognitive and Personality - Level of competence or skill.
  - Self esteem.
  - Motivation.
  - Knowledge of health benefits.
- Behaviour - Level of family activity.
  - Participation in an activity for more than six months increases likelihood of exercising for 1 to 2 years.

#### **Environmental Factors**

- Social - Spousal support.
  - Encouragement from peers.
- Physical Environment - Facilities, proximity and convenience.
  - Amount of time available.
- Type of Activity - High intensity vs. low intensity.
  - Group program vs. individual program.
- Personal Values.

- 
2. Using information gathered from parents for homework, students participate in a teacher-led discussion on Canada's most popular active living activities and most popular activities people fit into this schedule (Appendix 1D). Ask students how these activities and those of their parents fit in with the shift to *Vitality*. Emphasize the shift away from prescriptive exercise to fitting exercise into everyday activities.
  3. Students complete the Decision Balance Sheet (Appendix 1E) and then analyse the potential benefits and costs of an exercise program and how these lifestyles affect us over a lifetime.
  4. Teacher and students collaboratively prepare a questionnaire to interview senior citizens for the following class. Questions should ask about seniors' present and past activity levels and lifestyle and may ask about things they might change if they could or how they perceive changes in our culture from when they were teenagers compared with today (Appendix 1F).
  5. Teachers prepare students to cherish each resident's life experiences and stories. The questionnaire is just a tool; the most important goal is to listen. Students should be aware that each resident might have age-related difficulties (i.e. hearing impairment, loss of mobility).

### Day 3

Students participate in a field trip to a retirement home. It is highly suggested, prior to the visit, that the instructor discuss student sensitivity and appropriate respectful behaviour.

### Day 4

1. The teacher leads a class discussion on students' findings from the previous day. Using the Four-Way Recording and Reporting (Appendix 1H), divide class into groups of four.
2. Students write a reflective paper on what they learned about the seniors' past and present active lifestyle. The paper should address how/if the senior's experience affected their decisions regarding active living and healthy lifestyle. See Appendix 1F for suggested questions and criteria for evaluation.

### **Assessment & Evaluation of Student Achievement**

1. Formative assessment using a paper-and-pencil test to assess student's Knowledge and Understanding of definitions and theory.
2. Formative assessment using *Your Shift to Vitality* – Appendix 1C to assess Thinking and Inquiry skills.
3. Formative assessment of Decision Balance Sheet – Appendix 1E. Assess as complete/incomplete.
4. Summative evaluation using a written reflection paper assignment.

### **Accommodations**

- Photocopy notes for insertion into students' notebooks.
- Allow extra time for students to complete activities, if necessary.
- For interview, students could be placed in pairs.
- Implement strategies recommended in students' IEPs.

### **Resources**

Health Canada Online – [www.hc-sc.gc.ca/english](http://www.hc-sc.gc.ca/english)

Roberts, Weinberg L Gould, *Foundations of Sport and Exercise Psychology*, 2nd ed. Human Kinetics Publishers, Champaign Illinois, 1999. (pp. 371-391)

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## Appendix 1A

### Models of Exercise Behaviour

#### **Transtheoretical Model** (Behavioural Change Theory)

The Transtheoretical Model (Prochaska, DiClemente, & Norcross, 1992) argues that individuals progress through stages of change, and movement across the stages is cyclic rather than linear, because many people do not succeed in their efforts at establishing and maintaining lifestyle changes. These are the five stages in the Transtheoretical Model:

*Precontemplation stage.* In this stage individuals do not intend to start exercising in the next six months. They are “couch potatoes”. People in this first stage may be demoralized about their ability to change; they may be defensive due to social pressures, or they may be uninformed about the long-term consequences of their behaviour.

*Contemplation stage.* In this stage people seriously intend to exercise within the next six months. Despite their intentions, individuals usually remain in this second stage, according to research, for about two years. So the “couch potato” has a fleeting thought about starting to exercise but is unlikely to act on that thought.

*Preparation stage.* People in this stage are exercising some, perhaps less than three times a week, but not regularly. Hence, though our couch potato now exercises a bit, it is not regularly enough to gain major benefits. In the preparation stage, individuals typically have a plan of action and have indeed taken action (in the past year or so) to make behavioural changes, such as exercising a little.

*Action stage.* Individuals in this stage exercise regularly (three or more times a week for twenty minutes or longer) but have been doing so for fewer than six months. This is the least stable stage; it tends to correspond with the highest risk for relapse. It is also the busiest stage, in which the most processes for change are being used. So our “couch potato” is now an “active potato” who could easily fall back into his or her old ways.

*Maintenance stage.* Individuals in this stage have been exercising regularly for more than six months. Once they stay in this stage for five years, they are likely to maintain regular exercise throughout the life span except for time-outs because of injury or other health-related problems. At this stage, one is truly an active potato—and for a lifetime.

- *Foundations of Sport and Exercise Psychology*, 2nd ed. (p. 377)

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## Appendix 1B

### Active Living – No Excuses

Active living encourages everyone, not just people who are young and fit, to make enjoyable physical activity a part of their everyday life. Active living includes just about anything, from gardening and walking to badminton and golf.

#### Excuses, excuses

Check off the excuses you've given for not exercising:

- "I hate the idea of exercise." Try it, you'll like it (though maybe not the first time out).
- "I'm too tired to exercise." Start out by doing just a little bit, then gradually build it up. You'll end up feeling less tired.
- "A person my age would look ridiculous jogging." Who said you have to jog? Would you look ridiculous walking? (Anyway, people of all ages jog).
- "I feel fine, I don't need to exercise." You may not be ill, but that's not the same as being positively fit and well. And if you don't exercise, your heart and circulatory system cannot be in tiptop shape.
- "I'm too heavy to exercise." That's an excellent reason to start.
- "I don't have time." There are exercises you can do while shopping, reading and watching T.V., sit-ups and stretching, for example.
- "Exercise will make me hungrier. I'll eat more and put on weight, not lose it." Exercise doesn't have to increase your appetite. Moderate exercise before a meal can even curb an appetite.

Add any other excuses you've made for not being active, as well as good reasons for being active.

- \_\_\_\_\_
- \_\_\_\_\_
- \_\_\_\_\_
- \_\_\_\_\_

Health Canada, *The Vitality Approach: A guide for Leaders* 2000. [www.hc-sc.gc./english](http://www.hc-sc.gc./english)

**Appendix 1C**  
**Your Shift to Vitality**

	<b>Where you are now</b>	<b>Where you want to be</b>	<b>How will you get there</b>
<p><b>Healthy Eating</b>            Take pleasure in eating a variety of foods.            Meet the body's energy and nutrient needs through a lifetime of healthy enjoyable eating.            Take control of what you eat by listening to your hunger cues.</p>			
<p><b>Active Living</b>            Value and practice activities that are moderate and fun.            Be active your way, everyday.            Participate for the joy of feeling how your body moves.            Enjoy physical activities as part of your daily lifestyle.</p>			
<p><b>Positive Self and Body Image</b>            Accept and recognize that healthy bodies come in a range of weights, shapes, and sizes.            Appreciate your strengths and abilities.            Be tolerant of a wide range of body sizes and shapes.            Relax and enjoy the unique characteristics you have to offer.            Be critical of messages that focus on unrealistic thinness (in women) and muscularity (in men) as symbols of success and happiness.</p>			

*Foundations of Sport & Exercise Psychology, 2nd ed. (p. 380)*

## Appendix 1D

### The Vitality Approach, Health Canada – Active Living

Canada's Most Popular Active Living Activities	Most Popular Activities People Fit Into Their Schedule
<ol style="list-style-type: none"> <li>1. Walking</li> <li>2. Gardening</li> <li>3. Home exercise</li> <li>4. Social dancing</li> <li>5. Swimming</li> </ol>	<ol style="list-style-type: none"> <li>1. Taking the stairs instead of the elevator 80%</li> <li>2. Choosing to do light chores for exercise 67%</li> <li>3. Choosing to do heavy chores for exercise 66%</li> <li>4. Commuting by walking 64%</li> <li>5. Commuting by bicycle 24%</li> </ol>

[www.ha-sc.gc.ca/english](http://www.ha-sc.gc.ca/english)

## Appendix 1E

### Student Activity – A Decision Balance Sheet for Being Active

#### Example – Teacher Reference

<p><b>Gains to self</b></p> <ul style="list-style-type: none"> <li>• Better physical condition</li> <li>• More energy</li> <li>• Weight Loss</li> </ul> <p><b>Gains to important others</b></p> <ul style="list-style-type: none"> <li>• Healthier so I can play baseball with my kids</li> <li>• Become more attractive to my spouse</li> </ul> <p><b>Approval of others</b></p> <ul style="list-style-type: none"> <li>• My children would like to see me be more active</li> <li>• My spouse would like me to lead a healthier lifestyle</li> </ul> <p><b>Self-approval</b></p> <ul style="list-style-type: none"> <li>• Feel more confident</li> <li>• Improved self-concept</li> </ul>	<p><b>Losses to self</b></p> <ul style="list-style-type: none"> <li>• Less time with hobbies</li> </ul> <p><b>Losses to important others</b></p> <ul style="list-style-type: none"> <li>• Less time with my family</li> <li>• Less time to devote to work</li> </ul> <p><b>Disapproval of others</b></p> <ul style="list-style-type: none"> <li>• My boss thinks it takes time away from work</li> </ul> <p><b>Self-disapproval</b></p> <ul style="list-style-type: none"> <li>• I look foolish exercising because I'm out of shape</li> </ul>
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## Appendix 1E (Continued)

Student Name:

<b>Gains to self</b> 1. _____ 2. _____ 3. _____	<b>Losses to self</b> 1. _____ 2. _____ 3. _____
<b>Gains to important others</b> 1. _____ 2. _____ 3. _____	<b>Losses to important others</b> 1. _____ 2. _____ 3. _____
<b>Approval of others</b> 1. _____ 2. _____ 3. _____	<b>Disapproval of others</b> 1. _____ 2. _____ 3. _____

### Your Answers

<b>Self-approval</b> 1. _____ 2. _____ 3. _____	<b>Self-disapproval</b> 1. _____ 2. _____ 3. _____
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## Appendix 1F

### Retirement Home Interview

Student's Name: \_\_\_\_\_ and \_\_\_\_\_

#### Resident Information

##### 1. Demographics

- Resident Age:
- Resident Gender:
- Resident Name:
- What was your family's background, i.e., where were you born and raised? What did your parents do for a living? Did you think of yourself as poor, fairly well off or rich?

##### 2. Personality

- Were you an active person throughout your life? Yes / No
- When were you most active? Youth/Mid-Life/ Now
- Highlight your fitness strengths and weaknesses:
- What were your best sports/activities?
- Rank the way you felt about yourself on a scale from 1-10 (1 being the weakest) during your most active stage in life. Has that changed as you have aged?
- Were you ever motivated to IMPROVE your fitness level? What were the key motivators keeping you active?
- Can you identify at least three health benefits of regular fitness activity?
- While growing up, did you have sound knowledge of the effects of smoking, drinking and stress on the body? If yes, where did you gain the appropriate knowledge?

##### 3. Behaviour

- What was your family "feeling" on regular activity?
- At what age were you most active, least active? Explain why.
- Did your parents lead an active lifestyle? What types of activities did they participate in?
- Was nutrition emphasized more when you were: Young/Middle-age/Older/Throughout

##### 4. Social

- Where did you receive most of your support/encouragement to participate in physical activity? Parents/Coaches/Siblings/Teachers/Co-Workers
- Was fitness promoted at: Home/School/Outside school

##### 5. Physical Environment

- What types of activities were available to you when you were growing up?
- How much time a week did you spend participating in fitness activities during the week? less than 1 hour/more than 2 hours/about 3 times a week/more than 3 times a week

##### 6. Types of Activities

- What types of activities did you most enjoy participating in?
- How has that changed NOW?
- What do you do now to stay fit?
- What are the greatest benefits you receive at this point from regular fitness activity?

##### 7. Other

- Do you believe there is a link between fitness and longevity?
- If you could, what would you change about your present AND past fitness plans?
- If you could send one message to young people today regarding fitness, what would you say? What would you encourage/discourage them to do?

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## Appendix 1G

### Reflection Paper

#### Nursing Home Interview and the Vitality Concept

You are responsible for writing a two-page reflection on your interview experience. Thinking in terms of the *Vitality* concept, what are your thoughts and insights concerning the individual you interviewed?

#### Use the following questions to help guide your thoughts and analysis.

- What did you observe in general about the people in the home?
- What benefits did you receive from the interview?
- Did it make you think about your current lifestyle decisions?
- Did it reinforce your decisions or cause you to think about a lifestyle change?
- Did this interview make you appreciate your youth and health and give you a better understanding of the importance of living a *Vitality* lifestyle and of continuing it throughout your entire life?
- Would you talk to your parents or a family member about *Vitality*? What would you tell them?
- Would this experience cause you to talk to your friends? What would you tell them about *Vitality*?
- Would you go back to visit the home?
- In conclusion what changes are you going to make now?

#### Evaluation Criteria

1. Understands the concept of *Vitality*?  
**Knowledge/Understanding**
2. Reflects, analyses and explains the experience of the interview with sensitivity and honesty.  
**Thinking/Inquiry**
3. Interprets and assess the information gathered from the residents and forms conclusions about health, active living and longevity and aspirations influencing life's choices and values.  
**Thinking/Inquiry**
4. Communicates ideas logically.  
**Communication**
5. Applies communication skills of language including spelling, grammar and punctuation.  
**Communication**
6. Sets goals and plans future lifestyle changes according to their experience(s).  
**Application**

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## Appendix 1H

### Four-Way Recording and Reporting

**Description:** Four-Way Recording and Reporting is a strategy that supports students' learning styles by involving them in using different methods to record information and report it to one another. This strategy can be used when the teacher wishes to:

- gain information about students' learning preferences
  - build upon or refine students' recording and reporting skills
  - introduce new methods of recording and reporting
  - give students the opportunity to process learning using the method most appropriate to their learning styles
  - consolidate information or concepts that have been presented.
1. Divide the class into groups of four. Provide each student with notepaper to record information.
  2. Have each member of the group select a different aspect of the lesson being taught.
  3. Have the students record the information. They are responsible for using a recording technique of their choice (e.g., mind-mapping, listing key points, note-taking).
  4. Call upon students to pair off, report to each other, and record what is being reported using a different technique than originally used.
  5. Have students meet with another group member to exchange information using a third recording method.
  6. Finally have the students meet with a fourth member of the group to report and record using a fourth method.

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## Activity 2: Taking Personal Responsibility for My Health

**Time:** 450 minutes

### Description

Students have the opportunity to explore various fitness facilities in the community. They compare and contrast the differences between the facilities and examine why the facilities appeal to their particular clientele. This experience, at fitness facilities, allows the students to further explore the importance of the *Vitality* concept. By developing a collage, students visualize the *Vitality* concept as an *integrated approach to healthy living* that shifts the focus away from rigid ideals, dieting, and prescriptive exercises towards an acceptance of a variety of body sizes and shapes and an emphasis on healthy eating, active living, and a positive self and body image. The collage activity furthermore challenges students to think reflectively and creatively to evaluate specific situations and solve problems. The knowledge that students acquire about the shift to the *Vitality* concept will help empower them to make healthy choices about eating, being active, and feeling good about themselves. Students develop a personal health lifestyle chart as well as discuss obstacles they may encounter in achieving healthy lifestyle goals.

### Strand(s) & Learning Expectations

#### Ontario Catholic School Graduate Expectations

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

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

CGE4g - examine and reflect on one's personal values, abilities, and aspirations influencing life's choices and opportunities.

**Strand(s):** Vitality, Determinants of Health

#### Overall Expectations

V1V.01 - demonstrates an understanding of the *Vitality* concept;

V1V.02 - use strategies to develop the *Vitality* concept;

DHV.01 - analyse the role of the individual responsibility in enhancing personal health.

#### Specific Expectations

VI1.02 - describe a model that reflects a personal philosophy of health;

VI2.03 - implement plans for attaining personal health that involve components of the *Vitality* concept;

DH1.03 - analyse how various lifestyle choices affect health.

### Planning Notes

- Prepare and provide students with fitness facility questionnaire.
- Prepare and provide students with a personal health chart.
- Book fitness facilities in advance for class tours.
- Prepare folders including pictures of various people (shapes, sizes).
- Gather magazines for collage work.

### Prior Knowledge & Skills

- Note-taking skills
- Critical thinking skills
- Active listening skills
- Communication skills
- Understanding of *Vitality* concept and society's (media-influenced) standard of beauty (Unit 1)
- Reflection process and skills
- Emphasis on gospel values

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## Teaching/Learning Strategies

### Day 1

1. Initiate class discussion regarding what a good fitness facility has to offer. List student responses on the board.
2. In pairs, have students develop a series of questions they should ask when examining a fitness facility and its effectiveness in serving the community (i.e., thinking about the needs of young, old, family, physically disabled, and issues of income and location).
3. Use (Appendix 2A) to design a fitness facility questionnaire. Read over the questions, elaborating on their meaning to provide full understanding. Use Strategy 2 to help design questionnaire.

### Days 2, 3, 4

1. Students visit 3 different facilities within a three-day period. Upon completion of these visits and the questionnaire, students are responsible for a 2-page reflection discussing:
  - Likes and dislikes;
  - The facility they would choose, and their reasons;
  - Location and accessibility;
  - Which best suits the community, not just one or two demographic groups, and their reasons.

### Day 5

1. In a large group discussion, review and brainstorm what society's standard of beauty looks like and what the *Vitality* approach looks like covered in Unit 1. The *Vitality* approach calls for a shift from negative to positive thinking about how to achieve and maintain healthy weights. (Appendix 2B)

#### **From a weight-centred approach**

##### **Dieting**

- Restrictive eating
- Counting calories, prescriptive diets
- Weight cycling (yo-yo diets)
- Eating disorders

##### **Exercise**

- No pain, no gain philosophy
- Prescriptions such as three times a week in your target heart rate zone
- Burn calories
- High attrition rates for vigorous exercise programs

##### **Dissatisfaction with self**

- Unrealistic goals for body size and shape
- Obsession and preoccupation with weight
- Fat phobia and discrimination against overweight people
- Striving to be a perfect 10 and maintain an impossible ideal (thin or muscular) body size
- Accepting the fashion, diet and tobacco industries emphasis on slimness

##### **To the *Vitality* approach**

##### **Healthy eating**

- Take pleasure in eating a variety of foods.
- Enjoy lower fat and complex-carbohydrate foods more often.
- Meet the body's energy and nutrient needs through a lifetime of healthy, enjoyable eating.
- Take control of how you eat by listening to your hunger cues.

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### **Active Living**

- Value and practise activities that are moderate and fun.
- Be active your way, every day.
- Participate for the joy of feeling your body move.
- Enjoy physical activities as part of your daily lifestyle.

### **Positive Self and Body Image**

- Accept and recognize that healthy bodies come in a range of weights, shapes, and sizes.
  - Appreciate your strengths and abilities.
  - Be tolerant of a wide range of body sizes and shapes (i.e., Endomorph, Ectomorph, Mesomorph).
  - Relax and enjoy the unique characteristics you have to offer.
  - Be critical of messages that focus on unrealistic thinness (in women) and muscularity (in men) as symbols of success and happiness.
2. Provide magazines for the students to make up their own collage. On one half of a large piece of paper have them put images representing the weight-centred approach to health. The other half of the paper represents the shift to the new way of thinking about health, the *Vitality* concept approach. Make sure students label images to identify the weight-centred or *Vitality* concept characteristic. Teachers have the option of having students present their collages in class before posting.

### **Day 6**

1. Provide students with a handout containing a chart they will use to evaluate their current lifestyle. Students use the chart to help guide them in making healthier lifestyle choices by prioritizing goals, maintaining balance, and making a direct link to values that effect decision making. (Appendix 2C)
2. Once students have completed the chart they identify personal obstacles they would encounter when trying to achieve their healthy lifestyle goals. In pairs, have students brainstorm these obstacles and work out strategies to overcome them. Teachers lead a large group discussion examining these obstacles and strategies. (K.WL Course Overview Appendix 1-Strategy 1)

### **Assessment & Evaluation of Student Achievement**

- Formative assessment of individual participation in class discussions using a participation rubric
- Formative assessment of the reflective paper concerning fitness facility awareness
- Formative assessment of the learning skills of work habits
- Formative assessment of collage representing a good understanding of the *Vitality* concept versus society's idealistic standard of beauty
- Formative assessment of personal health chart indicating a sound awareness and understanding of student's current lifestyle, changes that need to be made, how they will make these changes, as well as strategies they will use to overcome personal obstacles

### **Accommodations**

- Allow extra time for students to complete the activities if necessary.
- Implement strategies recommended in students' IEPs.
- Be aware of safety concerns with off-campus tours and students with special needs.
- Be aware of individual comfort level of the students in regards to personal issues that may arise.

### **Resources**

Health Canada online – [www.hc-sc.gc.ca/english](http://www.hc-sc.gc.ca/english)

Merki, Mary Bronson PhD and Don Merki: Ph.D. *Glencoe Health*. McGraw Hill, 1999.

## Appendix 2A

The fitness facility questionnaire involves the following series of questions

- What are your facility hours?
- What is the cost of a membership?
- Is there an initiation fee or are there any hidden costs involved?
- What programs do you have to offer in conjunction with use of the gym facilities (i.e. aerobic classes, stress classes, nutrition classes)?
- Is there a cost involved with these programs?
- What assistance is available to those who need direction in designing a program? Is there a cost involved?
- How many members currently frequent your facility?
- Is there a dominant age group or specific demographic profile for your members (i.e., 18-25)?
- If not, how does your facility appeal to the cross-section of individuals within our community?
- Is your facility wheelchair-accessible?
- Are there separate areas for men and women to workout?
- Is this a private fitness club, a publicly funded recreation/fitness centre, or a non-profit health organization?

## Appendix 2B

### The Shift to *Vitality*

The *Vitality* approach calls for a shift from negative to positive thinking about how to achieve and maintain healthy weight.

### From a weight-centred approach to the *Vitality* Approach

<b>Dieting</b>	<b>Healthy Eating</b>
•	•
<b>Exercise</b>	<b>Active Living</b>
•	•
<b>Dissatisfaction with Self</b>	<b>Positive Self and Body Image</b>
•	•

## Appendix 2C

Lifestyle component	Where I am now	Where I want to be	How will I get there
Nutrition	<i>i.e., too much fast food – not enough good food.</i>	<i>i.e., healthier eating habits.</i>	<i>i.e., everything in moderation, more time planning meals.</i>
Rest			
Amount of Physical Activity			
Level of Stress			
Time Management Skills			

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## Activity 3: Personal Health Video

**Time:** 630 minutes

### Description

In this activity, students create their own **personal health** video promotion that thoroughly examines the *Vitality* concept. They focus on healthy eating and fitness behaviours, body image, motivation and personal, mental and spiritual factors that affect overall **personal health**. Students are challenged to convey a positive and inspiring *Vitality* message while developing individual strategies for improvement. Students' video presentations must use a variety of media aids, such as music, costume, script and effective videography techniques. Students are encouraged to explore various media devices i.e., humour, interview, sensitivity, seriousness, silence, etc., to convey their message. The personal health video should be done in groups of two or three students and should run between two and five minutes in length.

### Strand(s) & Learning Expectations

#### Ontario Catholic School Graduate Expectations

CGE2c - present information and ideas clearly and honestly and with sensitivity to others;  
CGE1i - integrate faith with life;  
CGE7d - promote sacredness of life;  
CGE3c - think reflectively and creatively to evaluate situations and solve problems;  
CGE5c - develop one's God-given potential and make a meaningful contribution to society;  
CGE4a - set appropriate goals and priorities in school, work and personal life.

**Strand(s):** Determinants of Health, Vitality

#### Overall Expectations

V1V.01 - demonstrate an understanding of the *Vitality* concept;  
V1V.02 - use strategies to promote the *Vitality* concept;  
DHV.01 - analyse the role of the individual's responsibility in enhancing personal health.

#### Specific Expectations

VII.01 - demonstrate an understanding of the *Vitality* concept;  
VI2.04 - demonstrate an ability to influence and support others in making positive health choices;  
DH1.03 - analyse how various lifestyle choices affect health.

### Planning Notes

- Encourage students to respect individual feelings/opinions.
- Be sensitive to balance in student achievement when forming groups.
- Prepare a detailed handout of expectations (Appendix 1).
- Provide a rubric outlining the Achievement Chart.
- Photocopy and review proper videography technique.
- Determine how many students require video-camera sign-outs, videotapes.
- Pre-determine how many class days are needed (five days are suggested including script writing).
- Encourage students to work to their full potential and create a meaningful video message.
- It is recommended to "weight" parts 1 and 2 more since they directly reflect expectations. You may choose to "weight" other areas to reflect classroom personalities and knowledge base.
- Book editing room for video, if available.
- Make sure you have access to a gym facility/drama room/free-classroom for various videotaping environments. Booking in advance will make things run more smoothly.

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## Prior Knowledge & Skills

- Communication skills
- Brainstorming skills
- Creativity skills
- Group work skills

## Teaching/Learning Strategies

### Days 1-2

1. As an opening, ask the students to brainstorm ways in which the media (specifically television) attempts to gain the attention of its viewers and **sell** a product or service, i.e., humour, role-models, musical jingle, or stars. Once students have identified the major promotional tactics used by the media, introduce the **Personal Health Video** assignment. Students are required to produce a video that conveys a positive and inspiring *Vitality* concept message. Combine students to form heterogeneous groups. Remind students of the importance of **teamwork** emphasizing **full group** cooperation. Include a discussion that highlights personal fitness values and related stress issues. Prepare a brief review of the *Vitality* concept, so that students are clear about what type of message to send. Distribute a copy of the video presentation expectation checklist highlighting each area thoroughly and clarifying any questions the students may have (Appendix 3A). If the students are clear about the expectations, continue by giving them in-class time to create their health promotion script (emphasize the use of proper grammar and spelling). Prepare a brief review of the *Vitality* concept so that students are clear about what type of message to send. Circulate to answer questions and make sure students are on the right track. The script may take one or two classes to develop.

### Days 3-8

1. Once the groups have completed and have had their scripts approved, they proceed to videotaping. Be aware that students may need to access various environments to make their promotion unique (gym, drama room, etc.). Flexibility is recommended as well as a mutual trust factor with equipment. It is highly recommended that students videotape on school premises only, although some groups may prefer to videotape at home. Remind students that, each day, you will be giving them a group-work mark (Appendix 3B). The video should be edited and put to music.

### Days 9-10

1. Students have one week for the task. After all assignments have been handed in, the **Personal Health Videos** are viewed/assessed by student peer and teacher evaluation (Appendix 3C).

### Day 11

1. Completion of the **Personal Health Video** presentations. Themes, media methods and gospel values should be identified through classroom discussion.

## Assessment & Evaluation of Student Achievement

A summative assessment of the completion of the **Video Presentation** using a rubric (Appendix 3C) is suggested, as well as daily in-class group work assessment (Appendix 2B).

## Accommodations

- Make modifications to the **Personal Health Video** (e.g., extend due date, larger groups).
- Be aware of the needs of ESL/ESD students.
- Implement strategies recommended in the student's IEP.
- Conference frequently with special-needs students providing additional help where necessary.

## Resources

[www.edu.gov.on.ca](http://www.edu.gov.on.ca) (Grade 11 Media Studies)

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## Appendix 3A

### Personal Health Video Promotion Presentation

Group Members: \_\_\_\_\_

**Expectations:** Each presentation must include the following criteria:

1. **Appropriate Content:** Your video must have a positive message focusing on the *Vitality* concept. Your main emphasis should be aimed at **selling** your message to the public.
2. **Group Work:** You must attempt to work cooperatively and effectively with all group members sharing the presentation assignment fairly. Organization and preparation are also emphasized.
3. **Time:** Your video presentation must be a minimum of two minutes in length, a maximum of five minutes in length.
4. **Script:** Your group must present a written script upon completion of your video. It is evaluated on clarity, spelling, grammar, and effectiveness, as well as chosen media form (i.e., recast a short story, novel, poem, song, interview or documentary).
5. **Props/Music:** Props and music are highly recommended and can make your video unique and effective. A minimum of three props and one musical aid are suggested.
6. **Creativity:** Use your imagination! The more creative you can be, the more effective your presentation (i.e., themes, lighting, costumes, videography etc).
7. **Videotaping:** Your video should be easy to follow and understand. Use different techniques to enhance your video (i.e. angles, lighting, voice, facial/body language, tone, slow motion, sound effects, use of headlines, captions etc.).
8. **Overall Impression:** Did your group **sell** your health concept? Was your idea creative, eye-catching or compelling? Were gospel values clearly evident?

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## Appendix 3B

### Group Work

#### Teamwork in the Health Class (Brainstorming/Classroom Discussions)

Criteria	Level 1 (50-59%)	Level 2 (60-69%)	Level 3 (70-79%)	Level 4 (80-100%)
Works willingly and cooperatively with others	- rarely works willingly and cooperatively with others	- sometimes works willingly and cooperatively with others	- usually works willingly and cooperatively with others	- always works willingly and cooperatively with others
Listens attentively without interrupting	- rarely listens attentively without interrupting	- sometimes listens attentively without interrupting	- usually listens attentively without interrupting	- always listens attentively without interrupting
Contributes information and ideas to solve problems and make decisions	- rarely contributes information and ideas to solve problems and make decisions	- sometimes contributes information and ideas to solve	- usually contributes information and ideas to solve	- always contributes information and ideas to solve
Shows respect for the ideas and opinions of others in the group or class	- rarely shows respect for the ideas and opinions of others in the group or class	- sometimes shows respect for the ideas and opinions of others in the group or class	- usually shows respect for the ideas and opinions of others in the group or class	- always shows respect for the ideas and opinions of others in the group or class

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

## Appendix 3C

### Video Presentation Rubric

Category/ Criteria	Level 1 (50-59%)	Level 2 (60-69%)	Level 3 (70-79%)	Level 4 (80-100%)
<b>Communication</b> Script	- demonstrates limited effectiveness in script design; spelling and grammatical errors are evident	- demonstrates some effectiveness in script design; moderate spelling and grammatical errors	- demonstrates considerable effectiveness in script design; minimal spelling and grammatical errors	- demonstrates thorough effectiveness in script design; no spelling and grammatical errors
<b>Knowledge/ Understanding Application</b> Video Content	- demonstrates limited awareness of <i>Vitality</i> concept and sacredness of life throughout video	- demonstrates some awareness of <i>Vitality</i> concept and sacredness of life throughout video	- demonstrates considerable awareness of <i>Vitality</i> concept and sacredness of life throughout video	- demonstrates thorough awareness of <i>Vitality</i> concept and sacredness of life throughout video
<b>Communication</b> Props/Music and Scene/character development	- presents limited character and scene development with no use of music and props	- presents some character and scene development with minimal use of music and props	- presents considerable character and scene development with considerable use of music and props	- presents thorough character and scene development with extensive use of music and props
<b>Thinking/Inquiry</b> Creativity	- presents limited creativity in fitness promotion	- presents some creativity in fitness promotion	- presents considerable creativity in fitness promotion	- presents a thoroughly creative fitness promotion

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