Health and Family Life Education (HFLE) Resource Guide for Teachers

Lower Division
~ TABLE OF CONTENTS ~

Purpose of the Resource Guide ............................................................................... Section 1

Overview of Health and Family Life Education ....................................................... Section 2
  • HFLE Background
  • Why HFLE?
  • What is HFLE?
  • Ethical Guidelines for the delivery of HFLE

Overview of the New HFLE Curriculum ................................................................. Section 3
  • Self and Interpersonal Relationship
  • Sexuality and Sexual Health
  • Managing the Environment
  • Eating and Fitness

The HFLE Approach ................................................................................................. Section 4
  • Creating a positive HFLE Classroom environment
  • The Life Skills Approach to HFLE
  • Interactive Teaching Methodologies
  • HFLE Assessment Methods

HFLE Lesson Planning ............................................................................................. Section 5
  • Sample Lesson Plans for Self and Interpersonal Relationships
  • Sample Lesson Plans for Sexuality and Sexual Health

Glossary of Terms ................................................................................................. Section 6
“Society expects schools to assist in the education of children and youth in such ways as to prepare them to assume and practise responsible and positive roles in all aspects of personal, family, and community living. This is also a prerequisite for national and regional development. Because many of the problems affecting students impact negatively on learning, it is incumbent upon schools to go beyond their traditional boundaries to meet the challenge. The time has come for vigorous, coordinated and sustained effort to support the implementation and strengthening of HFLE in Belize.”
Section One:
PURPOSE OF THIS GUIDE
Purpose of this Guide

The purpose of this guide is to provide teachers with materials and resources to implement the Health and Family Life Education Curriculum. This guide builds on the foundation of the Regional Curriculum Framework for HLFE, which sets out the HFLE philosophy and standards for teaching and identifies the desired knowledge, skills and behavioral outcomes for students. Unit themes and the content of lessons are responsive to the many health and social challenges in the region, including HIV/AIDS, violence and substance abuse. The Guide thus provides schools and teachers with a concrete tool for HFLE implementation. Through the implementation of HFLE lessons in diverse school settings and communities, the goal is to have a positive impact on student health, which in turn, relates to school attendance and learning.

Drawing upon lessons learned and needs expressed by teachers over the past few years, the contents of this manual include the following:

1) Background resources and information for teachers on HFLE, Life Skills Education and Interactive Teaching Methods, including developmental tasks of children and adolescents, behavioural theory supporting life skills education, and information for setting ground rules and a respectful classroom atmosphere

2) A comprehensive overview of the revised HFLE Curriculum

3) Sample Lesson Plans for HFLE

4) A list of resource persons/organizations for HFLE
Section Two:
OVERVIEW OF HEALTH AND FAMILY LIFE EDUCATION (HFLE)
Overview of Health and Family Life Education (HFLE)

Sources:  *Life Skills Manual*, Caribbean Community (CARICOM) Project  
The HFLE Regional Curriculum Framework, UNICEF, 2005  
*Health and Family Life Education Evaluation, Form 1 Student and Teacher Baseline Survey Results*, Education Development Center, Inc., 2006.

**HFLE BACKGROUND**

The Caribbean Community (CARICOM) comprises of fourteen (14) Member States and five (5) Associate Members. The fourteen member States are: Antigua and Barbuda, Bahamas, Barbados, Belize, Dominica, Grenada, Guyana, Jamaica, Montserrat, St. KittsNevis, St. Lucia, St. Vincent and the Grenadines, Suriname and Trinidad and Tobago. The Associate Members of the Community are: Anguilla, Bermuda, British Virgin Islands, Cayman Islands and Turks and Caicos Islands.

Increasingly in the Caribbean, changing realities have placed additional strains on children and young people, modifying their behaviour and putting their life and health at risk. There is a need for education systems in the region to develop and implement curricula that respond to these changes. In the 1990’s, the Health and Family Life Education (HFLE) Programme was implemented in primary and secondary schools in some member states and in others to address some of these changes. However, the HFLE Programme, which is also commonly known as the Life Skills Programme, was not seriously implemented in classrooms. Findings of a survey to determine the status of HFLE in the Region (Semei, 2005) indicated that, for the most part, teachers delivered the programme in an ad hoc manner or did not receive adequate training to teach this programme. In addition, a great deal of emphasis was placed on conveying knowledge and information rather than developing life skills.

It became very clear, that in order to seriously address the numerous problems and challenges that young people in the Caribbean encounter on a daily basis, some serious modifications had to be made to the HFLE Programme, including a renewed emphasis on the acquisition of Life Skills. The CARICOM Secretariat, United Nations Children’s Fund (UNICEF), with support from the Pan American Health Organisation (PAHO) and other members of the HFLE Regional Working Group activated the process to accomplish that outcome.

In 1994, the CARICOM Standing Committee of Ministers of Education passed a resolution to support the development of a comprehensive approach to HFLE by CARICOM and the University of the West Indies (UWI). Support was also solicited from the United Nations agencies and other partner agencies working in the Region. In 1996, Ministers of Education and Health endorsed the document, "A Strategy for Strengthening Health and Family Life Education (HFLE) in CARICOM Member States."

At the Sixth Special Meeting of the Council for Human and Social Development (COHSOD) held in Trinidad and Tobago in April 2003, the Council, realizing the significant contribution that HFLE can make to help young people develop skills to build competencies and adopt positive behaviours, endorsed the need to develop a Life-Skills based HFLE Regional Curriculum Framework. This Framework, with Regional Standards and Core Outcomes, shifted the focus from what was a knowledge-based curriculum to one that was life skills-based. The Framework...
was intended to serve as a guide to member states to review or develop their national life skills HFLE curriculum. Additionally, the COHSOD agreed that HFLE should be a core area of instruction at all levels of the education, and should also be used to develop out-of-school youth programmes. The COHSOD also endorsed the:
1. Re-activation of the HFLE Regional Working Group
2. The inclusion of HFLE in Teacher Education Programmes;
3. Training for teachers, parents and other stakeholders

The CARICOM Secretariat, in collaboration with UNICEF and support from PAHO, pursued the mandates given by Council. A Regional Framework was developed for youth ages 9 -14 years, the Core Curriculum Guide for Teachers was revised, and teachers, teacher educators, curriculum officers and HFLE Coordinators were identified from all levels of the education system and trained as trainers in the Life Skills programme.

Partner agencies in the HFLE project include: the CARICOM Secretariat, Caribbean Child Development Centre (CCDC), UWI Schools of Education and the Advanced Training and Research in Fertility Management Unit (FMU), PAHO/WHO, UNESCO, UNDCP, UNFDA, UNDP, UNIFEM and UNICEF. The current operational mechanism for the project is a Regional Working Group. UNICEF has been carrying out overall coordination. Additionally, over the past two years, the Education Development Center, Inc. (EDC) from Newton, Massachusetts, has been involved in providing technical support to the project.

WHY HFLE?

There is the perception that traditional curricula do not ensure that children and youth achieve their full potential as citizens. In addition, increasing social pressures are impacting on young persons in ways that make teaching a challenge. Teachers are finding that young people are more disruptive, are more likely to question authority, and see little relevance of schooling that fails to adequately prepare them for their various life roles. The paradox is that schools are now seen as key agencies to redress some of these very issues. HFLE, then, is a curriculum initiative that not only reinforces the connection between health and education, but also uses a holistic approach within a planned and coordinated framework. It “is perceived as the viable way to bridge existing gaps to enable young persons to attain the high levels of educational achievement and productivity required for the 21st century.” (UNICEF/CARICOM, 1999, p 15.)

WHAT IS HFLE?

HFLE is a comprehensive, life skills-based programme, which focuses on the development of the whole person in that it:

- Enhances the potential of young persons to become productive and contributing adults/citizens.
- Promotes an understanding of the principles that underlie personal and social well-being.
- Fosters the development of knowledge, skills and attitudes that make for healthy family life.
- Provides opportunities to demonstrate sound health-related knowledge, attitudes and practices.
- Increases the ability to practice responsible decision-making about social and sexual behaviour.

Health and Family Life Education: Empowering Children and adolescents in Belize with the knowledge and skills for Health Living, July 2006
Adapted from HFLE Draft Teacher Training Manual, June 2006
• Aims to increase the awareness of children and youth of the fact that the choices they make in everyday life profoundly influence their health and personal development into adulthood.

ETHICAL GUIDELINES FOR THE DELIVERY OF HFLE

Responsibility to students

Teachers and other resource persons involved in the delivery of HFLE should:

• Have primary responsibility to the student, who is to be treated with respect, dignity, and with concern for confidentiality.
• Make appropriate referrals to service providers based on the needs of the student, and monitor progress.
• Maintain the confidentiality of student records and exchange personal information only according to prescribed responsibility.
• Provide only accurate, objective, and observable information regarding student behaviours.
• Familiarise themselves with policies relevant to issues and concerns related to disclosure. Responses to such issues should be guided by national and school policies, codes of professional organizations/unions, and the existing laws.

Responsibility to families

• Respect the inherent rights of parents/guardians for their children and endeavour to establish co-operative relationships.
• Treat information received from families in a confidential and ethical manner.
• Share information about a student only with persons authorized to receive such information.
• Offer ongoing support and collaboration with families for support of the child.

Responsibility to colleagues

• Establish and maintain a cooperative relationship with other members of staff and the administration.
• Promote awareness and adherence to appropriate guidelines regarding confidentiality and the distinction between private and public information.
• Encourage awareness of and appropriate use of related professions and organizations to which the student may be referred.

Responsibilities to self

• Monitor one’s own physical, mental and emotional health, as well as professional effectiveness.
• Refrain from any destructive activity leading to harm to self or to the student.
• Take personal initiative to maintain professional competence.
• Understand and act upon a commitment to HFLE.
Section 3:

OVERVIEW OF THE REVISED HFLE CURRICULUM
Overview of the Revised HFLE Curriculum

CONTENT

The content for HFLE is organized around **four** themes. These themes have been adopted from the core curriculum guide developed for teachers’ colleges as part of a PAHO initiative (see PAHO/Carnegie, 1994). Standards and core outcomes have been developed for each of these themes. This thematic approach marks a departure from the traditional topic centered organization of curricula. For example, the use of alcohol and drugs, as well as premature sexual activity, represent maladaptive responses to coping with poor self-worth, boredom, failure, isolation, hopelessness, and fragmented relationships. The thematic approach, therefore, addresses the complexity and connectedness between the various concepts and ideas, goals, components and standards, which are associated with attitude and behaviour change.

Method of Delivery

The approach adopted in the delivery of life skills-based HFLE should take into account context, needs, and availability of resources.

There are two major approaches to delivery:

- **Discipline-based** - HFLE is taught as a separate subject.
- **Integration** - HFLE is integrated with other subjects in the school curriculum. Models of integration include the following:
  - **Infusion** – An HFLE topic area and related skills are infused into another subject area. For example, strategies for developing healthy interpersonal relationships skills may be infused into a biology lesson that critiques the range of relationships found in living organisms. Decision-making and goal-setting skills related to promoting abstinence or delaying sexual activity may be infused into a mathematics lesson that explores statistical data related to the rates of incidence of HIV/AIDS among young persons of various age groups.
  - **Multidisciplinary** – Two or more subjects are organized around the same theme and skills. For example, subjects such as social studies, biology or science, language arts, physical education, and home economics, are subject areas that can be organized around the theme of “Eating and Fitness.” The core skills are identified, and specific areas are allocated among the identified subject areas.
  - **Interdisciplinary** – Skills form the focus of the integration among two or more subject areas. For example, if core skills such as critical thinking, communication, and problem-solving are selected as the focus, then content may be selected from two or more subject areas that are appropriate for the teaching of these skills. In this case, the content areas may or may not be directly related, since the focus is on skill acquisition.
  - **Trans-disciplinary** – This is used in problem-based learning. For example, a problem may be loosely structured around an environmental issue in a community, which has implications for health and the quality of life of persons living in that community. The assumption is that different subject areas are...
embedded in the problem. Students then brainstorm to determine what they know, what they need to know, and how they are going to find out. Learning objectives, including the implicated life skills, are then determined. Students have to access the available resources and demonstrate the identified skills in coming up with strategies for solving the problem.

All of these approaches have advantages, as well as disadvantages, and have implications for teacher training. The obvious advantage of the discipline-based approach is wider coverage of HFLE. This approach requires a core of teachers specially trained to deliver life skills-based HFLE.

The integrated approaches are more economical, with respect to resource demands - human resources, material resources, and time resources. However, in addition to special training in life skills teaching and methods/strategies for integration, they require a high level of organization, with respect to planning and collaboration across subject areas. For example, infusion, which is the simplest form of integration, requires that topics to be infused be developed and inventoried, that they be linked to the subjects in which they would be infused, that staff be rationally located to the tasks, and so on. In the case of trans-disciplinary integration, teachers would need additional training in problem-based learning methodologies. The major disadvantage with the integrated approaches is that key learning outcomes, from either HFLE, or the other subject/s area/s, or all, may be sacrificed.

Whether HFLE is integrated into existing curricula, taught as a separate subject or as a mix of both methods, will ultimately be a choice to be made by each school. Most schools have found a mixture of both to be effective.

**HFLE Thematic Areas**

The four thematic areas are as follows:

- **Sexuality and Sexual Health**
- **Self and Interpersonal Relationships**
- **Eating and Fitness**
- **Managing the Environment**

**Self and Interpersonal Relationships**

**Key Ideas:**

- Human beings are essentially social, and human nature finds its fullest expression in the quality of relationships established with others.
- Self-concept is learned, and is a critical factor in relationship building.
- Effective or healthy relationships are dependent on the acquisition and practice of identifiable social skills.
- Supportive social environments are critical to the development of social skills in order to reduce feelings of alienation, and many of the self-destructive and risk-taking tendencies, such as violence and drug-use among children and youth in the region.
- Teachers have a critical role to play in creating supportive school and classroom environments that preserve and enhance self-esteem-a critical factor in the teaching/learning process.
Sexuality and Sexual Health

Key Ideas:
- Sexuality is an integral part of personality, and cannot be separated from other aspects of self.
- The expression of sexuality encompasses physical, emotional, and psychological components, including issues related to gender.
- Sexual role behaviours and values of teachers and children are conditioned by family values and practices, religious beliefs, and social and cultural norms, as well as personal experiences.
- Educational interventions must augment the socialization role of the family and other social and religious institutions in order to assist in preventing/minimizing those expressions of sexuality that are detrimental to emotional and physical health and well-being.

Eating and Fitness

Key Ideas:
- Dietary and fitness practices are influenced by familial, socio-cultural and economic factors, as well as personal preferences.
- Sound dietary practices and adequate levels of physical activity are important for physical survival.
- The quality of nutritional intake and level of physical activity are directly related to the ability to learn, and has implications for social and emotional development.
- The eating and fitness habits established in childhood are persistent, conditioning those preferences and practices, which will influence quality of health in later life.
- Teachers are well poised to assist students in critically assessing the dietary choices over which they have control, using the leverage provided by classroom instruction and the provision of nutritionally-sound meals in the school environment.

Managing the Environment

Key Ideas:
- All human activity has environmental consequences.
- Access to, and current use of technologies have had an unprecedented negative impact on the environment.
- Human beings are capable of making the greatest range of responses to the environment, in terms of changing, adapting, preserving, enhancing, or destroying it.
- There is a dynamic balance between health, the quality of life, and the quality of environment.
### Theme 1: Self and Interpersonal relationships

**Infant Division**

<table>
<thead>
<tr>
<th>Strand: Self and Interpersonal Relationships</th>
<th>Infant One</th>
<th>Infant Two</th>
<th>Standard One</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Self:</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>a. Good self esteem</td>
<td>1. 1 Who am I?</td>
<td>1.1 Who am I?</td>
<td>1.1 Who am I?</td>
</tr>
<tr>
<td>b. Positive self concept</td>
<td>1.2 I am special</td>
<td>1.2 Things and people that make me feel special</td>
<td>1.2 Feelings (expressing feelings appropriately)</td>
</tr>
<tr>
<td>c. Self confidence</td>
<td>1.3 Helping out at home</td>
<td>1.3 Feelings (expressing feelings)</td>
<td>1.3 My special talents</td>
</tr>
<tr>
<td>d. Identifying and expressing emotions</td>
<td>1.4 Feelings (identifying feelings)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>2. Relationships</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>a. Belonging to a group</td>
<td>2.1 I belong to a family</td>
<td>2.1 Making new friends</td>
<td>2.1 I belong to a community</td>
</tr>
<tr>
<td>b. Respect for self and others</td>
<td>2.1.1 I am a special member of my family</td>
<td>2.1.2 qualities of a good friend</td>
<td>2.2 Respecting the property of others</td>
</tr>
<tr>
<td>c. Rules to guide us</td>
<td>2.2 Our class rules</td>
<td>2.3 Respecting others</td>
<td>2.3 Listening to others</td>
</tr>
<tr>
<td></td>
<td>2.3 Rules at home</td>
<td></td>
<td></td>
</tr>
<tr>
<td>3. Managing difficult situations</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>a. Managing conflicts</td>
<td>3.1 Getting along in the family</td>
<td>3.1 Resolving conflicts with friends</td>
<td>3.1 Resolving conflicts in the classroom</td>
</tr>
<tr>
<td>b. Coping with physical abuse and drug use</td>
<td>3.2 When adults are unkind : abuse in the home</td>
<td>3.2 Abuse at school</td>
<td>3.2 Discipline not abuse</td>
</tr>
<tr>
<td></td>
<td>3.3 Safe use of medicines</td>
<td>3.2 Why medicines must be used correctly</td>
<td>3.3 Dangers of common drugs</td>
</tr>
<tr>
<td>4. Embracing diversity</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>a. Diversity in families</td>
<td>4.1 Embracing diversity in families</td>
<td>4.2 Embracing diversity in families (That’s a family)</td>
<td>4.3 Embracing diversity in the classroom</td>
</tr>
<tr>
<td>b. Diversity in the classroom</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
Middle Division

<table>
<thead>
<tr>
<th>Strand : Self and Interpersonal relationships</th>
<th>Standard 11</th>
<th>Standard 111</th>
<th>Standard 1IV</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Self:</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>a. Self Concept and Self esteem</td>
<td>1.1 How I see myself</td>
<td>1.1 Building good self esteem</td>
<td>1.1 My role model</td>
</tr>
<tr>
<td>b. Personal Growth</td>
<td>1.2 I know I can</td>
<td>1.2 Happy People</td>
<td>1.2 Remembering our responsibilities</td>
</tr>
<tr>
<td></td>
<td>1.3 I have feelings too</td>
<td>1.3 Who will I be?</td>
<td>1.3 Setting Goals</td>
</tr>
<tr>
<td>2. Relationships</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>a. Myself and Others</td>
<td>2.1 Making and keeping friends</td>
<td>2.1 Being your own best friend</td>
<td>2.1 Resisting negative pressures</td>
</tr>
<tr>
<td>b. Effective Communication</td>
<td>2.2 Building a positive classroom climate</td>
<td>2.2 Communicating in families</td>
<td>2.2 Making good decisions</td>
</tr>
<tr>
<td>c. Dealing effectively with conflict</td>
<td>2.3 Managing Anger</td>
<td>2.3 Being assertive</td>
<td>2.3 Decisions and consequences</td>
</tr>
<tr>
<td>3. Managing difficult situations</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>a. Family Bonding</td>
<td>3.1 Coping with changes in the family</td>
<td>3.1 Building resiliency in families (in good times and in bad times)</td>
<td>3.1 Coping with hurtful situations</td>
</tr>
<tr>
<td>b. Coping with physical abuse and drugs</td>
<td>3.2 Physical abuse</td>
<td>3.2 Emotional abuse</td>
<td>3.2 Neglect</td>
</tr>
<tr>
<td></td>
<td>3.3 The effects of alcohol on the body</td>
<td>3.3 Harmful effects of tobacco</td>
<td>3.3 Effects of marijuana</td>
</tr>
<tr>
<td></td>
<td>3.4 Avoiding alcohol</td>
<td>3.4 Avoiding tobacco</td>
<td>3.4 Avoiding marijuana</td>
</tr>
<tr>
<td>4. Embracing Diversity</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>a. Diversity in the classroom</td>
<td>4.1 Embracing diversity in the classroom</td>
<td>4.1 Cultural Diversity</td>
<td>4.1 Building a caring and peaceful community</td>
</tr>
<tr>
<td>b. Diversity in the community</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
### Upper Division

<table>
<thead>
<tr>
<th>Strand: Self and Interpersonal Relationships</th>
<th>Standard V</th>
<th>Standard V1</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>1. Self:</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>a. Good Self concept and self esteem</td>
<td>1.1 The new me: I like what I see</td>
<td>1.1 Landmarks in my life</td>
</tr>
<tr>
<td></td>
<td>1.2 My life, my choices: learning from my mistakes</td>
<td>1.2 I am responsible for me</td>
</tr>
<tr>
<td></td>
<td>1.3 Setting personal goals</td>
<td>1.3 Setting personal goals</td>
</tr>
<tr>
<td></td>
<td>1.4 Roles with responsibilities</td>
<td></td>
</tr>
<tr>
<td><strong>2. Relationships</strong></td>
<td>2.1 My circle of influence</td>
<td>2.1 Role models</td>
</tr>
<tr>
<td>a. Myself and Others</td>
<td>2.2 Media Influences</td>
<td>2.2 Media messages</td>
</tr>
<tr>
<td>b. Effective Communication</td>
<td>2.3 Good family values</td>
<td>2.3 Good community values</td>
</tr>
<tr>
<td>c. Resisting Pressures</td>
<td></td>
<td>2.3 Peer pressure</td>
</tr>
<tr>
<td><strong>3. Managing difficult situations</strong></td>
<td>3.1 Responding to stress</td>
<td>3.1 Dealing with crisis</td>
</tr>
<tr>
<td>a. Managing stressful situations</td>
<td>3.2 Managing hurtful situations</td>
<td>3.2 Building resilience</td>
</tr>
<tr>
<td>b. Identifying and coping with Physical abuse</td>
<td>3.3 Discipline or child abuse</td>
<td>3.3 Positive alternatives to crime and violence</td>
</tr>
<tr>
<td>c. Resisting drugs</td>
<td>3.4 Use, misuse or abuse</td>
<td></td>
</tr>
<tr>
<td><strong>4. Embracing Diversity</strong></td>
<td>4.1 Building a caring and peaceful community (service learning)</td>
<td>A diverse but peaceful nation</td>
</tr>
</tbody>
</table>
### Theme 2: Sexuality and sexual health

#### Infant Division

<table>
<thead>
<tr>
<th>Strand</th>
<th>Infant One</th>
<th>Infant Two</th>
<th>Standard One</th>
</tr>
</thead>
</table>
| Sexuality and Sexual Health | **Taking care of my body**  
1.1 Good Personal hygiene  
1.2 Parts of the body that need special care when bathing  
1.3 Products used for care of the body | **Taking Care of my body**  
1.1 Importance of good personal hygiene  
1.2 Special care of the hair, teeth, hands  
1.3 Products used to care for the hair, teeth and hands | **Taking care of my body**  
1.1 Conditions related to poor hygiene practice  
1.2 Special care of feet, shoes and clothing  
1.3 Products used to take care of feet, shoes and clothing |
| | **2. My body belongs to me**  
2.1 My private parts  
2.2 The proper name for my private parts  
2.3 My body is special  
2.4 Good Touchy/bad touch  
2.5 Who can I tell? | **2. My body belongs to me**  
2.1 My private parts  
2.2 Proper name for my private parts  
2.3 Inappropriate exposure of my private parts  
2.4 Reasons why my body is special  
2.5 Good touch/bad touch (places where abuse may occur/people who may be abusers)  
2.6 Saying no  
2.7 Telling someone | **2. My body belongs to me**  
2.1 Different types of sexual abuse (fondling, patting, incest etc.)  
2.2 I have a right to say “no”  
2.3 Feelings about sexual abuse |
| | **3. I am Male, I am female**  
3.1 Things that make me male  
3.2 Things that make me female | **3. I am male, I am female**  
3.1 Physical differences between males and females  
3.2 What I like about being male/female  
3.3 What I like about the opposite sex | **3. I am male, I am female**  
3.1. How boys and girls are socialized  
3.2 Respecting the opposite sex |
## Sexuality and Sexual Health

### Middle Division

<table>
<thead>
<tr>
<th>Strand</th>
<th>Standard 11</th>
<th>Standard 111</th>
<th>Standard 1V</th>
</tr>
</thead>
<tbody>
<tr>
<td>Sexuality and Sexual Health</td>
<td>1. Taking care of the body</td>
<td>1. Taking Care of the body</td>
<td>1. Taking Care of the Body</td>
</tr>
<tr>
<td></td>
<td>1.1 Proper grooming</td>
<td>1.1 Oral Hygiene</td>
<td>1.1. Keeping clean, smelling nice</td>
</tr>
<tr>
<td></td>
<td>1.2 Benefits of good personal hygiene</td>
<td>1.2 Hair grooming</td>
<td>1.2. Body Odour</td>
</tr>
<tr>
<td></td>
<td></td>
<td>1.3 Care of fingers and nails</td>
<td>1.3. Products needed to keep clean/smell nice</td>
</tr>
<tr>
<td></td>
<td></td>
<td>1.4 Skin Care</td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td>1.5 Products needed for good care of the body</td>
<td></td>
</tr>
<tr>
<td>2. My body belongs to me</td>
<td>2.1 Building self esteem</td>
<td>2. My body belongs to me</td>
<td>2. My body belongs to me</td>
</tr>
<tr>
<td></td>
<td>2.2 Strangers and friends</td>
<td>2.1 My changing body</td>
<td>2.1 My changing body</td>
</tr>
<tr>
<td></td>
<td>2.3 Ways to prevent abuse</td>
<td>2.2 stranger's and friends</td>
<td>2.2 Forms of sexual abuse</td>
</tr>
<tr>
<td></td>
<td>2.4 Refusal skills</td>
<td>2.3 Preventing abuse</td>
<td>2.3 Avoiding sexual abuse</td>
</tr>
<tr>
<td></td>
<td>2.5 Coping with abuse</td>
<td>2.4 Refusal skills</td>
<td>2.4 Coping with sexual abuse</td>
</tr>
<tr>
<td></td>
<td></td>
<td>2.5 Coping with abuse</td>
<td></td>
</tr>
<tr>
<td>3. I am male, I am female</td>
<td>3.1 Different but equal</td>
<td>3. I am male, I am female</td>
<td>3. I am male, I am female</td>
</tr>
<tr>
<td></td>
<td>3.2 Roles and responsibilities of males and females in the home</td>
<td>3.1 Changes for males/females during puberty</td>
<td>3.1 Changes for males/females during puberty</td>
</tr>
<tr>
<td></td>
<td></td>
<td>3.2 Roles and responsibilities of males and females in the community / workplace</td>
<td>3.2 How society expects males/females to behave</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>4.2 Preventing the spread of HIV: I am not ready for sex right now</td>
<td></td>
<td>4.2 Preventing the spread of HIV: I am not ready for sex right now</td>
</tr>
<tr>
<td></td>
<td>4.3 Showing empathy to persons living and affected by HIV and AIDS</td>
<td></td>
<td>4.3 Showing empathy to persons living and affected by HIV and AIDS</td>
</tr>
<tr>
<td>Strand</td>
<td>Standard V</td>
<td>Standard V1</td>
<td></td>
</tr>
<tr>
<td>-------------------------</td>
<td>------------------------------------------------</td>
<td>-------------------------------------------------</td>
<td></td>
</tr>
<tr>
<td>Sexuality and Sexual Health</td>
<td>1. Taking Care of my body</td>
<td>Taking Care of the body</td>
<td></td>
</tr>
<tr>
<td></td>
<td>1.1. Good personal hygiene</td>
<td>1.1. Basic body care</td>
<td></td>
</tr>
<tr>
<td></td>
<td>1.2. discomfort with periods</td>
<td>1.1.1 bathing regularly</td>
<td></td>
</tr>
<tr>
<td></td>
<td>1.3. Care of the genitals</td>
<td>1.1.2 care of teeth</td>
<td></td>
</tr>
<tr>
<td></td>
<td>1.4. Identifying and accessing health information and services</td>
<td>1.1.3 pimples</td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td>1.1.4 exercise and rest</td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td>1.1.5 care of clothing</td>
<td></td>
</tr>
<tr>
<td></td>
<td>2. My growing and changing body</td>
<td>2. My growing and changing body</td>
<td></td>
</tr>
<tr>
<td></td>
<td>2.1 Coping with changes</td>
<td>2.1 understanding and coping with changes</td>
<td></td>
</tr>
<tr>
<td></td>
<td>2.2 Body image</td>
<td>2.2 Body image</td>
<td></td>
</tr>
<tr>
<td></td>
<td>2.3 Me as a sexual being</td>
<td>2.3 Me as a sexual being : managing sexual feelings and sexual arousal</td>
<td></td>
</tr>
<tr>
<td></td>
<td>2.4 Responsible sexual choices: what would you do?</td>
<td>2.4 When is the right time for sex</td>
<td></td>
</tr>
<tr>
<td></td>
<td>2.5 Parenting</td>
<td>2.5 Risky sexual behaviours</td>
<td></td>
</tr>
<tr>
<td></td>
<td>2.6 understanding sexual abuse/exploitation</td>
<td>2.6 Forms of sexual abuse</td>
<td></td>
</tr>
<tr>
<td></td>
<td>2.7 coping with sexual abuse/exploitation</td>
<td>2.7 Coping with sexual abuse</td>
<td></td>
</tr>
<tr>
<td></td>
<td>3. STI’s including HIV and AIDS</td>
<td>3. STI’s including HIV and AIDS</td>
<td></td>
</tr>
<tr>
<td></td>
<td>3.1 definition and types of STI’s</td>
<td>3.1 Common STI’s</td>
<td></td>
</tr>
<tr>
<td></td>
<td>3.2 Prevention and transmission of HIV and AIDS</td>
<td>3.2 Signs and symptoms of STI’s</td>
<td></td>
</tr>
<tr>
<td></td>
<td>3.3 Signs, symptoms and stages of HIV</td>
<td>3.3 Prevention and transmission of HIV and AIDS</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Care and support for persons living with HIV and AIDS</td>
<td>3.4 Stages of HIV</td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td>3.5 Stigma and discrimination</td>
<td></td>
</tr>
<tr>
<td></td>
<td>4. Gender issues</td>
<td>4. Gender Issues</td>
<td></td>
</tr>
<tr>
<td></td>
<td>4.1 roles and responsibilities of males and females in the home/community/workplace</td>
<td>4.1 Gender equity</td>
<td></td>
</tr>
<tr>
<td></td>
<td>4.2 Respect for the opposite sex</td>
<td>4.2 sexual orientation</td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td>4.3 respect for the opposite sex</td>
<td></td>
</tr>
</tbody>
</table>
### Theme 3: Eating and Fitness

#### Lower Division

<table>
<thead>
<tr>
<th>Strand : Eating and Fitness</th>
<th>Infant One</th>
<th>Infant Two</th>
<th>Standard One</th>
</tr>
</thead>
</table>
| **Food and Nutrition**      | 1.1 What is Food?  
1.2 Sources of Food  
1.3 Difference between plants and animals  
1.4 Nutrients  
1.5 Local and Imported foods | 1.1 The importance of food  
1.2 How food keeps the organs of the body functional  
1.3 Nutrients | 1.1 The importance of food  
1.2 Healthy Eating  
1.3 Ethnic foods |
| **2. Food Safety**          | 2.1 Food and Germs  
2.2 Basic rules for food safety | 2.1 Food and Germs  
2.2 Practicing basic food safety rules | 2.1 How Food can make us ill  
2.2 Basic Food Safety Rules |
| **3. Diet and Disease**     | 3.1 What is Disease?  
3.2 Types of diseases  
3.3 Diseases related to poor nutrition | 3.1 Foods that make us go, grow and glow  
3.2 Eating the right amounts of each foods  
3.3 malnutrition  
3.4 Oral Hygiene | 3.1 Consuming a proper diet |
| **4. Rest Exercise and Fitness** | 4.1 What is Fitness?  
4.2 Exercise and it’s importance to health  
4.3 Rest and it’s importance to health | 4.1 Rest and Exercise  
4.2 Importance of Exercise  
4.3 Importance of Exercise | 4.1 The importance of keeping fit  
4.2 The benefits of exercise  
4.3 Structured physical exercise |
### Eating and Fitness

**Middle Division**

<table>
<thead>
<tr>
<th>Strand: Eating and Fitness</th>
<th>Standard Two</th>
<th>Standard Three</th>
<th>Standard Four</th>
</tr>
</thead>
</table>
| **Food and Nutrition**    | 1.1 Food Groups  
1.2 Functions of Nutrients | 1.1 Nutrients  
1.2 Functions of Nutrients | 1.1 Healthy Foods  
1.2 Multi-Mix Principle  
1.3 Healthy Snacks  
1.4 Nutrition and Food Groups  
1.5 Methods of cooking |
| **2. Food Safety**        | 2.1 Keeping food safe  
2.2 Proper Storage of food  
2.3 practicing food safety rules | 2.1 Nutrition related diseases  
2.1.1 Pyorrhea  
2.1.2 Gingivitis  
2.1.3 Anemia  
2.1.4 Obesity | 1.1 Nutrition related diseases  
1.1.2 Hypertension  
1.1.3 Diabetes |
| **3. Diet and Disease**   | 3.1 Oral Health | 3.1 Importance of Food safety  
3.2 Hygiene in the Kitchen | 3.1. Applying food safety Principles  
3.2 Observing food safety Practices in the local Environment |
| **4. Rest Exercise and Fitness** | 4.1 Fitness  
4.2 Rest and Exercise  
4.3 Sleep  
4.4 Physical Exercises | 4.1 Fitness and Youth  
4.2 The circulatory system  
4.3 Physical Exercises | 4.1 Benefits of sports and exercise  
4.2 Conditions related to lack of exercise |
Eating and Fitness

Upper Division

<table>
<thead>
<tr>
<th>Strand: Eating and Fitness</th>
<th>Standard Five</th>
<th>Standard Six</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Food and Nutrition</td>
<td>1.1 Food Processing</td>
<td>1.1 applying the multi-mix principle: learning by doing</td>
</tr>
<tr>
<td></td>
<td></td>
<td>1.2 You are what you eat: Applying research and observation skills</td>
</tr>
<tr>
<td>2. Food Safety</td>
<td>2.1 Food Spoilage</td>
<td>2.1 Applying food safety principles at school and in the community</td>
</tr>
<tr>
<td></td>
<td>2.2 Proper storage and handling of food</td>
<td>2.2 Designing a food safety campaign</td>
</tr>
<tr>
<td></td>
<td>2.3 Conditions related to poor food safety practices</td>
<td></td>
</tr>
<tr>
<td></td>
<td>2.4 Applying food safety principles</td>
<td></td>
</tr>
<tr>
<td>3. Diet and Disease</td>
<td>3.1 Research on diseases related to diet in Belize and the Caribbean</td>
<td>3.1 Dietary diseases affecting teens</td>
</tr>
<tr>
<td></td>
<td>3.2 Developing a Plan to combat conditions related to poor diet</td>
<td></td>
</tr>
<tr>
<td>4. Rest Exercise and Fitness</td>
<td>4.1 Importance of active living</td>
<td>4.1 Eating and Fitness</td>
</tr>
<tr>
<td></td>
<td></td>
<td>4.2 Aerobic activity and sports</td>
</tr>
<tr>
<td></td>
<td></td>
<td>4.3 Practical exercises</td>
</tr>
<tr>
<td></td>
<td></td>
<td>4.3 Conditions associated with lack of exercise</td>
</tr>
<tr>
<td>Theme: Managing the Environment</td>
<td>Infant One</td>
<td>Infant Two</td>
</tr>
<tr>
<td>--------------------------------</td>
<td>-----------</td>
<td>------------</td>
</tr>
</tbody>
</table>

4.2 Age appropriate fitness activities
<table>
<thead>
<tr>
<th>Safe, Healthy, Sustainable Natural Environments</th>
<th>1.1 Responding to Natural and Social Systems</th>
<th>1.1 Elements of Natural and Social Systems</th>
<th>1.1 One-way links between elements of a system</th>
</tr>
</thead>
<tbody>
<tr>
<td>a) Inter-relationships of Systems</td>
<td>1.2 Clean and unclean environment</td>
<td>1.2 Practice cleanliness in the classroom and at home.</td>
<td>1.2 Broken/missing links can disrupt systems</td>
</tr>
<tr>
<td>b) Environmental Challenges</td>
<td>1.3 Self Cleanliness</td>
<td>1.3 Illustrate ways in which garbage can be properly disposed of.</td>
<td>1.3 Factors that hinder a clean surrounding/environment.</td>
</tr>
<tr>
<td>c) Creating a safe and Healthy Environment</td>
<td></td>
<td>1.4 Demonstrate methods of cleaning.</td>
<td>1.4 Practice cleanliness.</td>
</tr>
<tr>
<td>d) Sustainable Management</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>2. Responding to Environmental Health Threats</td>
<td>2.1 Safe and dangerous environments and practices and their consequences</td>
<td>2.1 Components of a safe and unsafe environment or practice</td>
<td>2.1 Dangerous substances, situations and environment</td>
</tr>
<tr>
<td>a) Safe Practices and Rules</td>
<td>2.2 Water safety</td>
<td>2.2 Safety in the playground</td>
<td>2.2 Adhering to safety rules at all times</td>
</tr>
<tr>
<td>b) Promoting Healthy living</td>
<td>2.3 What we do to keep healthy</td>
<td>2.3 Poor hygiene causes diseases</td>
<td></td>
</tr>
<tr>
<td>c) Disaster preparedness and responding to Emergencies</td>
<td>2.4 Major disasters and their effects</td>
<td>2.4 Helpful and harmful substances</td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td>2.5 Minimizing the effects of disasters</td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

- Safe and healthy, sustainable natural environments
- 1.1 Responding to natural and social systems
- 1.2 Clean and unclean environment
- 1.3 Self cleanliness
- 1.1 Elements of natural and social systems
- 1.2 Practice cleanliness in the classroom and at home.
- 1.3 Illustrate ways in which garbage can be properly disposed of.
- 1.4 Demonstrate methods of cleaning.
- 2.1 Safe and dangerous environments and practices and their consequences
- 2.2 Water safety
- 2.3 What we do to keep healthy
- 2.4 Major disasters and their effects
- 2.1 Components of a safe and unsafe environment or practice
- 2.2 Safety in the playground
- 2.3 Poor hygiene causes diseases
- 2.4 Helpful and harmful substances
- 2.5 Minimizing the effects of disasters
- 2.1 Dangerous substances, situations and environment
- 2.2 Adhering to safety rules at all times

Health and Family Life Education: Empowering Children and adolescents in Belize with the knowledge and skills for Health Living, July 2006
Adapted from HFLE Draft Teacher Training Manual, June 2006
### Theme: Managing the Environment

#### Middle Division

<table>
<thead>
<tr>
<th><strong>Theme:</strong> Managing the Environment</th>
<th><strong>Standard Two</strong></th>
<th><strong>Standard Three</strong></th>
<th><strong>Standard Four</strong></th>
</tr>
</thead>
</table>
| Safe, Healthy, Sustainable Natural Environments  
  a) Inter-relationships of Systems  
  b.) Environmental Challenges  
  c.) Creating a safe and Healthy Environment  
  d.) Sustainable Management | 1.1 Simple relationships between elements act to establish equilibrium in systems.  
  1.2 Elements of systems affect each other | 1.1 Cleaning the community  
  1.2 Sustainable development  
  1.3 Practice sustainable citizenship | 1.1 Output from one system is input to other parts/processes of another system  
  1.2 Practice cleanliness in environmental sensitive areas |
| 2. Responding to Environmental Health Threats  
  a.) Safe Practices and Rules  
  b.) Promoting Healthy living  
  c.) Disaster preparedness and responding to Emergencies | 2.1 Collect and use basic data for monitoring ones health.  
  2.2 Diseases related to poor sanitation | 2.1 Reducing threats to themselves and others.  
  2.2 Types of Disasters and the effects  
  2.3 Emergency equipment used in disaster | 2.1 Coping with accidents  
  2.2 Incidents caused by not adhering to safe practices  
  2.3 Prevention of disease and speedy recovery from illness.  
  2.4 Helpful or harmful information  
  2.5 Disease related to man-made pollutants  
  2.6 Promoting the health of others  
  2.7 The effects of different emergencies on our health and community  
  2.8 Preparedness plan |
| 3. Environmental Management Information and Activities  
  3.1 Institutions, Organizations, Agencies  
  3.2 Environmental Activities  
  3.3 Laws, policies, Conventions and Treaties | 3.1 Environmental activities taking place in Belize | 3.1 Environmental activities taking place in Belize | 3.1 Institutions, organizations and agencies involved in environmental management. |
### Managing the Environment

#### Upper Division

<table>
<thead>
<tr>
<th>Theme: Managing the Environment</th>
<th>Standard Five</th>
<th>Standard Six</th>
</tr>
</thead>
</table>
| Safe, Healthy, Sustainable Natural Environments  
  a) Inter-relationships of Systems  
  b.) Environmental Challenges  
  c.) Creating a safe and Healthy Environment  
  d.) Sustainable Management | 1.1 Examples of challenges that affect the environment  
  1.2 Pollution.  
  1.3 Prevention of environmental degradation.  
  1.4 Striking a balance between natures and human needs.  
  1.5 Practice sustainable citizenship | 1.1 Environmental Challenges  
  1.2 Impact of pollution, waste disposal, deforestation, erosion, and pesticide use.  |
| **2. Responding to Environmental Health Threats**  
  a.) Safe Practices and Rules  
  b.) Promoting Healthy living  
  c.) Disaster preparedness and responding to Emergencies | 2.1 Reduce the risk unhealthy and dangerous situations  
  2.2 Diseases based on environmental, and behavioral factors. | 2.1 Preventing and avoiding accidents.  
  2.2 People and careers involved in safety, emergencies and disasters.  
  2.3 Disaster Management Cycle  
  2.4 Effects of different emergencies on our health and community |
| **3. Environmental Management Information and Activities**  
  3.1 Institutions, Organizations, Agencies  
  3.2 Environmental Activities  
  3.3 Laws, policies, Conventions and Treaties | 3.1 resources use in environmental management  
  3.2 Collecting information about the environment  
  3.3 The effectiveness of environmental activities being conducted in Belize.  
  3.4 International conventions and treaties and Belize’s response | 3.1 Environmental Activities in Belize  
  3.2 Conducting an environmental management activity.  
  3.3 Conservation, rehabilitation and restoration strategies  
  3.4 Local laws and policies dealing with environmental management |

---

Health and Family Life Education: Empowering Children and adolescents in Belize with the knowledge and skills for Health Living, July 2006

Adapted from HFLE Draft Teacher Training Manual, June 2006
Section Four: THE HFLE APPROACH
Creating a Positive HFLE Classroom Environment

Setting Up the Classroom Atmosphere

Students may react to HFLE lessons in different ways. They may:

- Ask baiting questions (to try to embarrass you).
- Remain silent because of embarrassment.
- Shock or try to amuse by describing sexually explicit behaviors.
- Ask very personal questions about your private life.
- Make comments that open themselves to peer ridicule or criticism.

To deal with these situations it is important to set class rules. These must be very clear to the students before you start. You can have students develop their own rules or you can start with a list and discuss with the students if they are fair and why they are important. A suggested list might be:

- Students are expected to treat each other in a positive way and be considerate of each other’s feelings.
- Students are not to discuss personal matters that were raised during the lesson with others outside of the classroom.
- Students should avoid interrupting each other.
- Students should listen to each other and respect each other’s opinions.
- Both students and teachers have a “right-to-pass” if questions are too personal.
- No put-downs – no matter how much you disagree with the person you do not laugh, make a joke about them or use language that would make that person feel inferior.
- Students may be offered the possibility of putting their questions anonymously to the teacher.
- Many times students laugh and giggle about sex. This should be allowed in the beginning, as it lowers the barriers when discussing sexuality.

Strategies to deal with special problems

The following strategies might be used to deal with personal questions, explicit language and inappropriate behavior.

- Respond to statements that put down or reinforce stereotypes (for example, statements that imply that some groups of people are responsible for the AIDS epidemic) by discussing the implications of such statements.
- Be assertive in dealing with difficult situations – for example, “That topic is not appropriate for this class. If you would like to discuss it, I’d be happy to talk to you after class.”
- Avoid being overly critical about answers – so that students will be encouraged to express their opinions openly and honestly.
- Present both sides of a controversial issue. Avoid making value judgments.
• It might be important to separate males and females in group activities that might be embarrassing to the students or where separated groups may function more efficiently.

Helping the anxious student

• It is helpful to think ahead of how you might respond to students in the class who feel particularly sensitive to a topic covered in class as a result of their own personal experiences. It is important that you behave in such a way that students who are worried will feel comfortable seeking your advice.

• Your responsibility in teaching a life-skills programme includes learning in advance what help and services are available in your community.

• Listen to the student who approaches you, without imposing your values, moral judgments, or opinions. Do not ask leaning or suggestive questions about his or her behavior.

• Convey your concern for the student’s health or well-being and when appropriate, tell the student that you know of services that can help him/her. Offer to start the process by contacting the one the student chooses.

• Continue your support by confidentially asking the student from time to time if he or she needs more information, has taken any action, or is still concerned about anything related to your conversation.

The HFLE Teacher as a Facilitator: Critical Role for Teachers

When facilitating learning activities, skillful facilitators take on several roles. They:
• Develop and maintain a positive atmosphere
• Address all goals and objectives of the training and “cover” essential content
• Balance the content and the process of training

Developing a Positive Atmosphere

Teachers need to establish an atmosphere of trust – one that supports and encourages respectful, open, and honest sharing of ideas, opinions, attitudes, and behaviors. Such an atmosphere is characterized as warm, accepting, and non-threatening, and promotes learning. The behavior and attitude of the teacher are critical in establishing warmth, interest, and support, establish an atmosphere that invites active participation. This kind of atmosphere can be established by:

• Including opportunities for non-threatening introductory activities – an “ice-breaker” – to acclimate students to the subjects to be addressed.
• Establishing norms – ranging from concerns about confidentiality, the amount of time allotted for lunch, and even the location of the amenities.
• Discussing expectations – what will and won’t be addressed, what learners will and won’t do, and what teachers will and won’t do.
• Encouraging all learners to join in discussions and keeping overly zealous participants from monopolizing.
• Acknowledging sound ideas and interesting points and rephrasing comments so that learners know that they’ve been heard and understood.
• Maintaining trust and confidentiality by reminding learners of established ground rules/norms.
• Remaining open and responding positively to comments.
Reaching Goals and “Covering” Material

To address goals and objectives, as well as “cover” appropriate content, a teacher needs to be able to:

- Link topics together by introducing new topics and pointing out connections to ones addressed earlier.
- Provide needed information clearly, succinctly, and in an interesting way.
- Give (and model) clear, step-by-step instructions for each activity.
- Promote thoughtful discussion by asking well-planned questions that require more than “yes” or “no” responses.
- Know when and how to bring a discussion back to the topic at hand when the discussion strays.
- Tie things together by reminding learners of feelings, ideas, opinions, or questions mentioned earlier.
- Bring closure to an activity or lesson by seeking final questions and acknowledging when time requires the group to move.

Balancing Content and Process

During activities, teacher facilitators:

- Circulate among learners to develop a clear picture of what's happening and how it's happening
- Help learners redirect their focus when they need to.
- Accept that outcomes of activities may not be exactly what was planned – and that many different, valuable lessons can come out of the same activity.
- Help learners identify, analyze and generalize from activities – whether outcomes were planned or not!

Developed by the National Training Partnership, EDC. Inc., 1998
The Life Skills Approach to HFLE


What is Life Skills Education?

Skills-based or Life Skills education focuses on the development of “abilities for adaptive and positive behavior that enables individuals to deal effectively with the demands and challenges of everyday life” (WHO 1993). The acquisition of life skills can greatly affect a person’s overall physical, emotional, social, and spiritual health which, in turn, is linked to his or her ability to maximize upon life opportunities. The success of skills-based health education is tied to three factors: 1) the recognition of the developmental stages that youth pass through and the skills they need as they progress to adulthood, 2) a participatory and interactive method of pedagogy, and 3) the use of culturally relevant and gender-sensitive learning activities.

Various health, education and youth organizations and researchers have defined and categorized key skills in different ways. Despite these differences, experts and practitioners agree that the term “life skills” typically includes the life skills listed in the table on page 43. The process of categorizing various life skills may inadvertently suggest distinctions among them. However, many life skills are interrelated and several of them can be taught together in a learning activity.

The Life Skills programme is a comprehensive behaviour change approach that concentrates on the development of the skills needed for life such as communication, decision-making, managing emotions, assertiveness, self-esteem building, resisting peer pressure, and relationship skills. Additionally, it addresses the important related issues of empowering girls and guiding boys towards values. The programme moves beyond providing information. It addresses the development of the whole individual, so that a person will have the skills to make use of all types of information, whether it be related to HIV/AIDS, STDs, reproductive health, safe motherhood, other health issues, and other communication and decision-making situations. The Life Skills approach is completely interactive, using role-plays, games, puzzles, group discussions, and a variety of other innovative teaching techniques to keep the participant wholly involved in the sessions.

In practice the skills are not separate or discrete, and more than one skill may be used simultaneously.

The Life Skills Approach

The Life Skills approach is built on the assumption that opportunities can be created for youth to acquire skills that will boost their protective factors and enable them to avoid being manipulated by outside influences. The use of life skills is to enable youth people to be able to recognise the coercive forces of social pressures in their immediate environment that promote behaviours that can jeopardize their health, emotional and psychological well-being.
The Life Skills approach aims to assist young people develop healthy lifestyles and to regain control of their behaviours, while at the same time take informed decisions that will positively influence their values, attitudes and behaviours. This approach should serve as a means to develop in young people skills that will lead to optimum health, social and physical well-being.

Life Skills education is designed to facilitate the practice and reinforcement of psychosocial skills in a culturally and developmentally appropriate way. It contributes to the promotion of personal and social development, the projection of human rights, and the prevention of health and social problems. Another justification for the life skills approach is that it is a natural vehicle for the acquisition of the educational, democratic and ethical values. In the delivery of Life Skills, the fostering of laudable attitudes and values is set alongside the knowledge and skill components. Some of the commonly held values are respect for self and others; empathy and tolerance; honesty; kindness; responsibility; integrity; and social justice.

The teaching of values is to encourage young people to strive towards accepted ideals of a democratic, pluralistic society such as self-reliance, capacity for hard work, cooperation, respect for legitimately constituted authority, and ecologically sustainable development. This is done in the context of existing family, spiritual, cultural and societal values, and through critical analysis and values clarification, in order to foster the intrinsic development of values and attitudes (Regional Curriculum Framework, 2005).

To be effective in supporting quality learning outcomes, skills-based health education must be used in conjunction with a specific subject or content area. Learning about decision-making, for example, is more meaningful if it is addressed in the context of a particular issue (e.g., the decisions we make about tobacco use). In addition, while skills-based education focuses somewhat on behavior change, it is unlikely that a learning activity will affect behavior change if knowledge and attitudinal aspects are not addressed (e.g., a student will not try to negotiate for effective condom use if he/she doesn’t know that they can prevent disease transmission or doesn’t believe that condoms are necessary). Therefore, it is important for skills-based approaches to be accompanied by activities which focus on students’ knowledge and attitude.

The following figure gives examples of ways in which skills-based health education can be applied to specific informational content. These illustrate only a few possible examples; there are numerous other ways that life skills can be incorporated into these content areas.

<table>
<thead>
<tr>
<th>Health Topics</th>
<th>Examples of ways that life skills may be used</th>
</tr>
</thead>
<tbody>
<tr>
<td>Sexual and Reproductive Health</td>
<td><strong>Communication Skills</strong>: Students can observe and practice ways to effectively express a desire to not have sex</td>
</tr>
<tr>
<td>and HIV/AIDS Prevention</td>
<td><strong>Critical Thinking Skills</strong>: Students can observe and practice ways to analyse myths and misconceptions about</td>
</tr>
<tr>
<td></td>
<td>HIV/AIDS, gender roles and body image that are perpetuated by the media</td>
</tr>
<tr>
<td></td>
<td><strong>Skills for Managing Stress</strong>: Students can observe and practice ways to seek services for help with reproductive</td>
</tr>
<tr>
<td></td>
<td>and sexual health issues</td>
</tr>
<tr>
<td>Alcohol, Tobacco and Other</td>
<td><strong>Advocacy Skills</strong>: Students can observe and practice ways to generate local support for tobacco-free schools</td>
</tr>
<tr>
<td>Drugs</td>
<td>and public buildings</td>
</tr>
<tr>
<td></td>
<td><strong>Negotiation/refusal Skills</strong>: Students can observe and practice ways to resist a friend’s request to chew or</td>
</tr>
<tr>
<td></td>
<td>smoke tobacco without losing face or friends</td>
</tr>
<tr>
<td>Violence Prevention or Peace</td>
<td><strong>Skills for Managing Stress</strong>: Students can observe and practice ways to identify and implement peaceful ways</td>
</tr>
<tr>
<td>Education</td>
<td>to resolve conflict</td>
</tr>
<tr>
<td></td>
<td><strong>Decision-Making Skills</strong>: Students can observe and practice ways to understand the roles of aggressor, victim</td>
</tr>
<tr>
<td></td>
<td>and bystander.</td>
</tr>
</tbody>
</table>
In addition, skills-based education emphasizes the use of learning activities which are culturally relevant and gender-sensitive. To achieve this, the learning activities offer numerous opportunities for participants to provide their own input into the nature and content of the situations addressed during the learning activities (e.g., creating their own case studies, brainstorming possible scenarios, etc.). This approach ensures that the situations are realistic and relevant to the everyday lives of participants. It is critical that the skills youth build and practice in the classroom are easily transferable to their lives outside the classroom.

How Do You Teach Life Skills?

The primary goal of skills-based education is to change not only a student’s level of knowledge, but to enhance his or her ability to translate that knowledge into specific, positive behaviors. **Participatory, interactive teaching and learning methods are critical components of this type of education.** These methods include role plays, debates, situation analysis, and small group work. It is through their participation in learning activities that use these methods that young people learn how to better manage themselves, their relationships, and their health decisions. A chart outlining some participatory teaching methods is found in Section 5, Module Two.

The foundation of life skills education is based on a wide body of theory-based research which has found that people learn what to do and how to act by observing others and that their behaviors are reinforced by the positive or negative consequences which result during these observations. In addition, many examples from educational and behavioral research show that retention of behaviors can be enhanced by rehearsal. As Albert Bandura, one of the leading social psychologists in the area has explained, “*When people mentally rehearse or actually perform modeled response patterns, they are less likely to forget them than if they neither think about them nor practice what they have seen*” (Bandura, 1977). A summary of behavioral theories that support life skills education is found in this training manual in Section Five, Module One.

Cooperative learning or group learning is another important aspect of skills-based programs. Many skills-based programs capitalize on the power of peers to influence the acquisition and subsequent maintenance of positive behavior. By working cooperatively with peers to develop prosocial behaviors, students change the normative peer environment to support positive health behaviors (Wodarski and Feit). “As an educational strategy, therefore, skills-based health education relies on the presence of a group of people to be effective. The interactions that take place between students and among students and teachers are essential to the learning process.”*

In addition to the use of participatory, interactive teaching methods, skills-based health education also considers the developmental stages (physical, emotional, and cognitive) of a person at the time of learning. There are three distinct stages in the adolescence period—early adolescence (12-14 years), middle adolescence (14-17) and late adolescence (17-19), this explains the major difference between a thirteen year old and an eighteen year old.

Each learning activity is designed to be appropriate to the students’ age group, level of maturity, life experiences, and ways of thinking. A guideline to the developmental learning tasks of children and adolescents are found in this training manual on page 44. At the same time, participatory activities provide the opportunity for students to learn from one another and appreciate the differences, as well as similarities, among individuals in the classroom setting.

Why Is Life Skills Education Important?

Over the last decade, a growing body of research has documented that skills-based interventions can promote numerous positive attitudes and behaviors, including greater sociability, improved communication, healthy decision-making and effective conflict resolution. Studies demonstrate that these interventions are also effective in preventing negative or high-risk behaviors, such as use of tobacco, alcohol and other drugs, unsafe sex, and violence. The table below summarizes some of the results from research studies conducted on skills-based education programs. It is important to note that research has also found that programs which incorporate skills development into their curricula are more effective than programs which focus only on the transfer of information (e.g. through lecture format).

Research shows that skills-based health education programs can:

- Prevent high-risk sexual behavior (O'Donnell et al., 1999; Kirby, 1994; Schinke, Blythe, and Gilchrest, 1981)
- Prevent delinquency and (Young, Kelley, and Denny, 1997)
- Promote positive social adjustment criminal behavior (Englander-Golden et al. 1989)
- Improve health-related behaviors and self-esteem (Elias, Gara, Schulyer, Branden-Muller, and Sayette, 1991)
- Improve academic performance (Elias, Gara, Schulyer, Branden-Muller, and Sayette, 1991)
- Prevent peer rejection (Mize and Ladd, 1990)

The Core Life Skills

<table>
<thead>
<tr>
<th>Social Skills</th>
<th>Cognitive Skills</th>
<th>Emotional/Coping Skills</th>
</tr>
</thead>
<tbody>
<tr>
<td>• Interpersonal Skills</td>
<td>• Decision-making skills</td>
<td>• Healthy self-management skills</td>
</tr>
<tr>
<td>• Communication Skills</td>
<td>• Problem-solving skills</td>
<td>• Self-monitoring skills</td>
</tr>
<tr>
<td>• Refusal Skills</td>
<td>• Critical-thinking skills</td>
<td>•Self-awareness skills</td>
</tr>
<tr>
<td>• Negotiation Skills</td>
<td>• Creative-thinking skills</td>
<td>• Coping with emotions</td>
</tr>
<tr>
<td>• Empathy Skills</td>
<td></td>
<td>(anger, self-esteem, grief, loss)</td>
</tr>
<tr>
<td>• Cooperation Skills</td>
<td></td>
<td></td>
</tr>
<tr>
<td>• Advocacy Skills</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Life Skills</td>
<td>Definitions</td>
<td>Significance</td>
</tr>
<tr>
<td>----------------------------------------</td>
<td>-----------------------------------------------------------------------------</td>
<td>------------------------------------------------------------------------------</td>
</tr>
<tr>
<td>Decision making</td>
<td>The ability to choose a course of action from a number of options which may result in a specific outcome or involve only the resolve to behave in a certain way in the future.</td>
<td>Helps us deal constructively with health and other decisions about our lives by enabling us to assess the different options and what effects different decisions may have.</td>
</tr>
<tr>
<td>Problem solving</td>
<td>The process thought which a situation/problem is resolved (i.e., diagnosing the problem, taking action to close the gap between present situation and desired outcome, and generalizing the principles to other situations)</td>
<td>Allows us to deal constructively with problems in our lives, that left unattended, could cause new problems, including mental and physical stress.</td>
</tr>
<tr>
<td>Creative thinking</td>
<td>The ability to depart from traditional ways of thinking, resulting in the generation of original and innovative ideas that enable us to respond adaptively to life situations.</td>
<td>Contributes to both decision making and problem solving by enabling us to explore the available alternatives and various consequences of our actions or non-actions.</td>
</tr>
<tr>
<td>Effective communication</td>
<td>The ability to express ourselves, both verbally and non-verbally, in ways that are appropriate to our cultures and situations.</td>
<td>Allows the transfer of information, understanding, and emotion from one person to another to make one’s intent clear.</td>
</tr>
<tr>
<td>Interpersonal relationship skills</td>
<td>The ability to relate positively with people, creating an environment in which people feel secure and free to interact and express their opinions.</td>
<td>Allows us to keep friendly relationships, which can be of great importance to our mental and social well-being, and impacts the way we communicate with, motivate and influence each other.</td>
</tr>
<tr>
<td>Self-awareness</td>
<td>Having a sense of identity and an understanding of our own feelings, beliefs, attitudes, values, goals, motivations, and behaviors.</td>
<td>Helps us to recognize our feelings and values and is a prerequisite for effective communication, interpersonal relationships, and developing empathy for others.</td>
</tr>
<tr>
<td>Empathy</td>
<td>The ability to imagine what life is like for another person, even in a situation that we are unfamiliar with.</td>
<td>Can help us to accept others who may be very different from ourselves, respond to people in need, and promote other positive social interactions.</td>
</tr>
<tr>
<td>Coping with emotions</td>
<td>The ability to recognize a range of feelings in ourselves and others, the awareness of how emotions</td>
<td>Enables us to respond appropriately to our emotions and avoid the negative effects that prolonged, pent up emotions</td>
</tr>
<tr>
<td>Life Skills</td>
<td>Definitions</td>
<td>Significance</td>
</tr>
<tr>
<td>------------------------------------------------</td>
<td>-----------------------------------------------------------------------------</td>
<td>------------------------------------------------------------------------------</td>
</tr>
<tr>
<td><strong>Assertiveness Skills</strong></td>
<td>The ability to state one’s point of view or personal rights clearly and confidently, without denying the personal rights of others.</td>
<td>Assertiveness skills enable people to take actions that are in their own best interests. Such actions include the ability to stand up for oneself or someone else without feeling intimidated or anxious and to express feelings and points of view honestly and openly.</td>
</tr>
<tr>
<td><strong>Healthy self-management/monitoring skills</strong></td>
<td>The ability to make situational and lifestyle behavior choices that result in attaining and/or maintaining one’s physical, social, emotional, spiritual, and environmental health.</td>
<td>Enables us to maintain health-enhancing decisions from day to day as well as to reach longer-term health and wellness goals.</td>
</tr>
<tr>
<td><strong>Coping with stress</strong></td>
<td>The ability to recognize the sources of stress in our lives and the effects that stress produces, and the ability to act in ways that help us cope or reduce our levels of stress.</td>
<td>Enables us to adjust our levels of stress and avoid the negative consequences of stress, including boredom, burnout, susceptibility to diseases, and behavioral changes.</td>
</tr>
<tr>
<td><strong>Negotiation Skills</strong></td>
<td>The ability to communicate with other people for the purpose of settling a matter, coming to terms, or reaching an agreement. This may involve the ability to compromise or to give and take.</td>
<td>Helps us to meet and address individual needs and concerns in ways that are mutually beneficial. This is a key factor in working and playing cooperatively with others.</td>
</tr>
<tr>
<td><strong>Refusal Skills</strong></td>
<td>The ability to communicate the decision to say “no” effectively (so that it is understood).</td>
<td>Enables us to carry out health-enhancing behaviors that are consistent with our values and decisions.</td>
</tr>
</tbody>
</table>

Source: CARICOM Multi-Agency HFLE Programme Manual for Facilitators of Life Skills Based HFLE Programmes in the Formal and non-Formal Sectors and Teenage Health Teaching Modules
Using Interactive/Participatory Teaching Methods

Participatory Learning is central to life skills teaching; it is also the basis for the training of life skills trainers. Participatory learning relies primarily on learning in groups.

During childhood and adolescence, as in adulthood, much social interaction occurs in groups. This can be capitalized upon, and used in a structured way to provide a situation in which members can learn, share experiences and practice skills together.

The role of the teacher or teacher trainer is to facilitate this participatory learning of the group members, rather than conduct lectures in a didactic style.

Participatory learning:

- utilizes the experience, opinions and knowledge of group members
- provides a creative context for the exploration and development of possibilities and options
- provides a source of mutual comfort and security which is important for the learning and decision making process

It is recognized that there are advantages of working in groups, with adults and with young people because group work:

- increases participants' perceptions of themselves and others
- promotes cooperation rather than competition
- provides opportunities for group members and their trainers/teachers or carers to recognize and value individual skills and enhance self-esteem
- enables participants to get to know each other better and extend relationships
- promotes listening and communication skills
- facilitates dealing with sensitive issues
- appears to promote tolerance and understanding of individuals and their needs
- encourages innovation and creativity.

Interactive Health and Family Life Education requires active methods. Many people think of active methods merely as ways of learning which are fun for children, and which help them to remember their lessons better because they linked learning to doing. This is only part of the meaning. Active methods are also those which lead to active thinking, which promotes real understanding of HFLE themes and ideas, which develop skills in planning, in taking action and in spreading health messages to others, and which help children gain life skills, develop attitudes and confirm values.

There is no question that such active methods do involve teachers in extra time and effort. Most teachers already work hard in very difficult conditions. No one expects schools and teachers to try all the new methods suggested or try them all at one time. But it is well worth the start. Many schools that utilize interactive approached have found that teachers, children, parents and community members learn how to work together and teaching becomes easier, more cooperative and fun. The teacher and others work with the children rather than for the children. The children become more responsible, more aware of their need to help others, better problem solvers, and better citizens.
### Some Interactive/Participatory Methodologies

Each of the teaching methods in the following chart can be used to teach life skills.

<table>
<thead>
<tr>
<th>Teaching Method</th>
<th>Description</th>
<th>Benefits</th>
<th>Process</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>CLASS DISCUSSION (in Small or Large Groups)</strong></td>
<td>The class examines a problem or topic of interest with the goal of better understanding an issue or skill, reaching the best solution, or developing new ideas and directions for the group.</td>
<td>Provides opportunities for students to learn from one another and practice turning to one another in solving problems. Enables students to deepen their understanding of the topic and personalize their connection to it. Helps develop skill in listening, assertiveness, and empathy.</td>
<td>• Decide how to arrange seating for discussion  • Identify the goal of the discussion and communicate it clearly  • Pose meaningful, open-ended questions  • Keep track of discussion progress</td>
</tr>
<tr>
<td><strong>BRAINSTORMING</strong></td>
<td>Students actively generate a broad variety of ideas about a particular topic or question in a given, often brief period of time. Quantity of ideas is the main objective of brainstorming. Evaluating or debating the ideas occurs later.</td>
<td>Allows students to generate ideas quickly and spontaneously. Helps students use their imagination and break loose from fixed patterns of response. Good discussion starter because the class can creatively generate ideas. It is essential to evaluate the pros and cons of each idea or rank ideas according to certain criteria.</td>
<td>• Designate a leader and a recorder  • State the issue or problem and ask for ideas  • Students may suggest any idea that comes to mind  • Do not discuss the ideas when they are first suggested  • Record ideas in a place where everyone can see them  • After brainstorming, review the ideas and add, delete, categorize</td>
</tr>
<tr>
<td><strong>ROLE PLAY</strong></td>
<td>Role play is an informal dramatization in which people act out a suggested situation.</td>
<td>Provides an excellent strategy for practicing skills; experiencing how one might handle a potential situation in real life; increasing empathy for others and their point of view; and increasing insight into one’s own feelings.</td>
<td>• Describe the situation to be role played  • Select role players  • Give instruction to role players  • Start the role play  • Discuss what happened</td>
</tr>
<tr>
<td><strong>SMALL GROUP/BUZZ GROUP</strong></td>
<td>For small group work, a large class is divided into smaller groups of six or less.</td>
<td>Useful when groups are large and time is limited. Maximizes student input.</td>
<td>• State the purpose of discussion and the amount of time</td>
</tr>
<tr>
<td>Teaching Method</td>
<td>Description</td>
<td>Benefits</td>
<td>Process</td>
</tr>
<tr>
<td>--------------------------------------</td>
<td>-----------------------------------------------------------------------------</td>
<td>----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------</td>
<td>----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------</td>
</tr>
<tr>
<td>less and given a short time to</td>
<td>less and given a short time to accomplish a task, carry out an action, or</td>
<td>Lets students get to know one another better and increases the likelihood that they will consider how another person thinks. Helps students hear and learn from their peers.</td>
<td>available</td>
</tr>
<tr>
<td>accomplish a task, carry out an</td>
<td>discuss a specific topic, problem, or question.</td>
<td></td>
<td>• Position seating so that members can hear each other easily</td>
</tr>
<tr>
<td>action, or discuss a specific topic,</td>
<td></td>
<td></td>
<td>• Position seating so that members can hear each other easily</td>
</tr>
<tr>
<td>problem, or question.</td>
<td></td>
<td></td>
<td>• Ask group to appoint recorder</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>• At the end have recorders describe the group’s discussion</td>
</tr>
<tr>
<td>GAMES AND SIMULATIONS</td>
<td>Students play games as activities that can be use for teaching content,</td>
<td>Games and simulations promote fun, active learning, and rich discussion in the classroom as participants work hard to prove their points or earn points. They require the combined use of knowledge, attitudes, and skills and allow students to test out assumptions and abilities in a relatively safe environment.</td>
<td></td>
</tr>
<tr>
<td></td>
<td>critical thinking, problem, solving, and decision-making and for review and</td>
<td></td>
<td>Games:</td>
</tr>
<tr>
<td></td>
<td>reinforcement. Simulations are activities structured to feel like the real</td>
<td></td>
<td>• Remind students that the activity is meant to be enjoyable and that it does not matter who wins</td>
</tr>
<tr>
<td></td>
<td>experience.</td>
<td></td>
<td>Simulations:</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>• Work best when they are brief and discussed immediately</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>• Students should be asked to imagine themselves in a situation or should play a structured game or activity to experience a feeling that might occur in another setting</td>
</tr>
</tbody>
</table>
| **SITUATION ANALYSIS AND CASE STUDIES** | Situation analysis activities allow students to think about, analyze, and discuss situations they might encounter. Case studies are real-life stories that describe in detail what happened to a community, family, school, or individual. | Situation analysis allows students to explore problems and dilemmas and safely test solutions; it provides opportunities to work together, share ideas, and learn that people sometimes see things differently. Case studies are powerful catalysts for thought and discussion. Students consider the forces that converge to make an individual or group act in one way or another, and then evaluate the consequences. By engaging in this thinking process, students can improve their own decision-making skills. Case studies can be tied to specific activities to help students practice healthy responses before they find themselves confronted with a health risk. | • Guiding questions are useful to spur thinking and discussion  
• Facilitator must be adept at teasing out the key points and step back and pose some ‘bigger’ overarching questions  
• Situation analyses and case studies need adequate time for processing and creative thinking  
• Teacher must act as the facilitator and coach rather than the sole source of ‘answers’ and knowledge |

| **DEBATE**<sup>1</sup> | In a debate, a particular problem or issue is presented to the class, and students must take a position on resolving the problem or issue. The class can debate as a whole or in small groups. | Provides opportunity to address a particular issue in-depth and creatively. Health issues lend themselves well; students can debate, for instance, whether smoking should be banned in public places in a community. Allows students to defend a position that may mean a lot to them. Offers a chance to practice higher thinking skills. | • Allows students to take positions of their choosing. If too many students take the same position, ask for volunteers to take the opposing point of view.  
• Provide students with time to research their topic.  
• Do not allow students to dominate at the expense of other speakers.  
• Make certain that students show respect for the opinions and |

---


Health and Family Life Education: Empowering Children and adolescents in Belize with the knowledge and skills for Health Living, July 2006

Adapted from HFLE Draft Teacher Training Manual, June 2006
<p>| | | | |</p>
<table>
<thead>
<tr>
<th></th>
<th></th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>STORY TELLING</strong></td>
<td>The instructor or students tell or read a story to a group. Pictures, comics and photonovels, filmstrips, and slides can supplement. Students are encouraged to think about and discuss important (health-related) points or methods raised by the story after it is told.</td>
<td>Can help students think about local problems and develop critical thinking skills. Students can engage their creative skills in helping to write stories, or a group can work interactively to tell stories. Story telling lends itself to drawing analogies or making comparisons, helping people to discover healthy solutions.</td>
<td>• Keep the story simple and clear. Make one or two main points. • Be sure the story (and pictures, if included) relate to the lives of the students. • Make the story dramatic enough to be interesting. Try to include situations of happiness, sadness, excitement, courage, serious thought, decisions, and problem-solving behaviors.</td>
</tr>
</tbody>
</table>


---

Tips for Teachers on Using Interactive Teaching Methods

1. If your class time is 80 minutes, the expectation would be to cover 2 lessons not drag out one lesson to fill up the time.

2. Leave time to reinforce conclusions and skills at the end of lesson

3. Reinforce to teachers to make lessons age/language appropriate. If necessary, teacher must interpret lessons so students can understand.

4. Keep small group work to the limited time frame. Tell students that it’s okay if they didn’t get everything done before time was up. There will be time to discuss further as a class.

5. Tips on how to facilitate group discussion
   - Give students examples of possible answers if no one is willing to start the discussion. You might say, “What about....”
   - Keep the discussion to the limited amount of time
   - Allow as many students as possible to participate. If one student is dominating the conversation, ask “[Name of student] has provided some great ideas. Does anyone else have an answer?”
   - If there is not enough time for all students to answer, say “We’ve had a really good discussion. There will be time in a later activity or lesson for others to participate.”

6. Tips on using small group work
   - Small groups are useful for encouraging student participation
   - Divide students into even groups (e.g., five students in each group)
   - For topics that may be gender-sensitive, separate girls and boys
   - Note that one person may need to report back to the larger group, and for students to select one person to be that reporter
   - Encourage students to take notes if necessary
   - Walk around during the group activity to hear what students are saying

7. Tips on using role-playing
   - Role-playing is a useful teaching method for practicing interpersonal skills
   - Let students know before the activity if they may be asked to role-play in front of the class afterwards
   - Remind students of the importance of body language during role-playing and paying attention to non-verbal cues.
   - If students start to get rowdy during role-playing activities, remind them to stay on the topic and walk around the class to help them focus.

8. Tips on using brainstorming
   - Brainstorming is useful for gather many answers in a short amount of time.
   - Although a number of students may want to provide answers to your question, this exercise should last only 5 minutes. You may not be able to get answers from all the students.
   - Tell students after 5 minutes that they will have many other opportunities to provide answers. Give students positive feedback on their answers.
Tips to Encourage Discussion

(a) Ask open-ended questions which allow for any possible response (How did you feel about...)

(b) Ask open-ended questions which guide the discussion in a particular direction (What else could the boy have done in the story?)

(c) Use active or reflective listening. This technique involves paraphrasing a person's comments (without inserting opinions and/or judgments) so that the person knows why they have been heard. For example:

   Student: "I think my friend acted like a spoiled child."

   Teacher: "So you feel some of her behavior was immature."

Paraphrasing allows the teacher to clarify his/her understanding of the speaker's word. If the paraphrasing is incorrect, the student has the opportunity to restate what she/he meant; if the paraphrasing is correct the teacher will feel encouraged to elaborate her/his initial comment. In either case, paraphrasing shows the student that the teacher cares enough to listen. This type of listening takes time and special effort in attending to the student and the communication process. It is necessary that the teacher put aside preoccupation and concern with what she/he is going to say next.

Active listening conveys to the student that her/his point of view has been communicated and understood. This requires the teacher to:

(a) **Listen to the total meaning of the message.** (i.e. the content of the message and the feeling or attitude underlying this content.)

(b) **Respond to feelings.** In some instances the content is far less important than the feeling which underlies it. You must respond particularly to the feeling component to catch the full meaning of the message.

(c) **Reflect back in his/her own words what the student seems to mean by his/her words or actions.** The teacher's response will demonstrate whether the student feels understood. An example of a reflective question is: "What I heard you say is that you are concerned about the importance of knowing everything. Is that what you said?"

(d) **Listen to and support every student's contribution.** This does not mean that you agree or disagree with their ideas. It means that you listen carefully and accurately and respect the feelings of others.

(e) **Use body language which engages students.** Make direct eye contact; if you are sitting, lean in the direction of the group; if you are standing, circulate so as to increase contact with the students.

The teacher avoids:

(a) **Using closed-ended questions** - questions which are answered by yes or no. (Did you like the film?)

(b) **Making judgments about the rightness or wrongness of students' opinions** - (I couldn't disagree with you more)

(c) **Interpreting students remarks:** You must really have a hang-up about your father."

Prepared by: Annette Wiltshire
Tips on Giving Feedback

- Keep in mind that the feedback process should be experienced as a positive, learning experience for everyone. The emphasis should be on strengthening skills, not making judgments.

- If possible, allow the person to do a self-assessment before you offer your comments.

- Use clear criteria or a checklist for giving feedback. If there are specific expectations for performance, share these with the person in advance and then use the written expectations as the basis for your feedback.

- If appropriate, make eye contact with the other person. Eye contact is an example of how body language can reinforce a verbal message. Be aware that in some cultures, eye contact between two people (e.g., a young person and an adult) might be considered disrespectful.

- First, share positive comments. This will help the person to feel good about him- or herself, and might enable the person to be more open to your suggestions for new strategies to try.

- Use constructive, positive language to offer your comments. For example, you can say, "Have you considered...?" or "It might help to try . . . ."

- Focus your comments on aspects of the performance or task, not on the person.

- Be as specific as possible. The clearer and more specific you are with your feedback-your sense of what worked as well as suggestions for improvement-the more likely the person will be to learn from the feedback and integrate your input.

- Make sure that the feedback process is two-way. Allow the person opportunities to ask clarifying questions, offer his or her opinion, etc.

- Remember that there are many ways to perform a task effectively. Don't expect the other person to adopt your way of doing things; each person needs to find an approach that works for him or her.

- Following the feedback session, give the person opportunities to demonstrate how he or she has improved in the performance of the task. Ideally, feedback should be an ongoing part of the learning process, not an isolated event.

HFLE ASSESSMENT METHODS

Alternative Assessment Defined

The paradigm shift in education from the traditional teacher directed classroom to a more active learning, student based classroom has created the need for educators to re-evaluate the ways they have previously assessed student learning. The push to better examine what students are really learning has led to the refinement of assessment alternatives.

Most alternative assessment strategies share a common vision:

- Ask students to perform, create, produce or do something.
- Tap higher-level thinking and problem-solving skills.
- Use tasks that represent meaningful instructional activities.
- Invoke real world applications.
- People, not machines, do scoring, using human judgement.
- Require new instructional and assessment roles for teachers.

Alternative Assessment can be any type of measurement, except multiple choice or true/false. It usually involves an extended, multi-step production tasks, such the carrying out a project, or open ended questions without a single correct answer. Students are rated by their own teacher or another teacher according to previously agreed-upon standards

http://www.miamisci.org/ph/lpexamine1.html

Some Forms of Alternative Assessment

Performance Tasks

Performance tasks (pts) are assignments that ask students to undertake a task or series of tasks to demonstrate proficiency with health knowledge and skills. They provide a means for students to demonstrate progress in meeting hfle objectives. A pt presents a descriptions of the student work and the health education standards and criteria by which the students' work will be evaluated.

What kinds of activities could qualify as a performance task?

Generally, pts will fall into one of four categories:
- constructed responses: answers on tests, student-generated diagrams, and/or visuals presentations such as concept maps or graphs.
- Products: an essay, research paper, or lab report; a journal; a story, play, or poem; a portfolio; an exhibit or model; a video- or audio-tape; a spreadsheet
- Performances: an oral report; a dance demonstration; a competition; a dramatic presentation; an enactment; a debate; a recital
- Processes: a session for oral questioning; observation; an interview or conference; an ongoing learning log; a record of thinking processes

Although some pts may be simple and involve an open-ended question, others
Can be more complex and require several days, weeks, or months to complete. For a more ideas, review the options for performance tasks handout.

How do you know when you have an effective performance task? A pt is more than an activity or incidental product. It needs to answer a central question to qualify as valid:

**Will this task enable students to demonstrate that they have acquired the skills and knowledge embodied in the standards?**

If this question cannot be answered affirmatively, the pt must be reconsidered.

In addition, a good performance task:

1. Clearly indicates what the student is being asked to do
2. Addresses specific content standards and performance descriptions
3. Is developmentally appropriate and of interest to students
4. Provides for student ownership and decision-making
5. Requires student to be actively engaged
6. Flows from previous activities
7. Provides an opportunity for the student to stretch abilities to the next level
8. Allows the teacher to gather important evidence about what the student knows and does
9. Emphasizes higher order thinking skills
10. Requires evaluation and synthesis of skills
11. Is linked to ongoing instruction
12. Reflects a real world situation
13. Clearly indicates how good is good enough
14. Has criteria that are clear to students and teacher

Finally, for a performance task to be sound, it must be one that is actually feasible and that doesn't require inordinate time or resources or create undue controversy.

**Examples of Different Performance Tasks**

- Advertisement
- Animated Movie
- Annotated Bibliography
- Art Gallery
- Block Picture Story Brochure
- Bulletin Board
- Bumper Sticker
- Chart Choral Reading Clay Sculpture
- Collage Collection Computer Program
- Cookbook
- Crossword
- Comic Strip Community Display
- Calendar Flip Book
- Detailed Illustration
- Data Analysis Database Debate
- Demonstration
- Diorama Display
- Editorial Essay
- Fairy Tale
- Family Tree
- Film
- Fitness
- Game
- Graph
- Historical Perspective
- Illustrated Story
- Infomercial
- Internet Review
- Interview
- Journal
<table>
<thead>
<tr>
<th>Performance Tasks</th>
<th>Criteria</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Highest score</td>
</tr>
<tr>
<td></td>
<td>4</td>
</tr>
<tr>
<td>Task #1:</td>
<td></td>
</tr>
<tr>
<td>Task #2:</td>
<td></td>
</tr>
<tr>
<td>Task #3:</td>
<td></td>
</tr>
<tr>
<td>Total:</td>
<td></td>
</tr>
</tbody>
</table>

Sample Rubric for Evaluation of a Life Skills-based Lesson
SAMPLE LESSON PLAN TO DEMONSTRATE USE OF GRAPHIC ORGANIZER

<table>
<thead>
<tr>
<th>REGIONAL STANDARD 2:</th>
<th>Acquisition of coping skills to deter behaviours and lifestyles associated with crime, drugs, violence, motor vehicle accidents, and other injuries.</th>
</tr>
</thead>
<tbody>
<tr>
<td>CORE OUTCOME 2:</td>
<td>Analyse the impact of alcohol, and other illicit drugs on behaviour and lifestyle.</td>
</tr>
</tbody>
</table>

Title

Could It Happen To Me?

Age Level

12 - 13 yrs

Time

40 min

Purpose

Students need to understand why people take drugs and the consequences drug use can have on their lives.

Overview

(Include Concepts)

Students will reflect on reasons why people use drugs and the devastating effects drugs can have on all aspects of a person's life. Using a graphic organizer, students will identify behaviours associated with drug abuse and possible consequences.

Specific Objectives

Students will be able to:

1. Identify three reasons people abuse drugs;
2. Acknowledge the consequences of drug use on a person's life;
3. Use decision-making skills to determine the consequences of drug abuse on various aspects of a person's life.

Resources and Materials

Scenario, graphic organizer

Methods and Strategies

Individual and small group work

PROCEDURE

Step I Introduction

(15 min)

Introduce the lesson as being about the dangers of substance abuse and the devastating effect it can have on people's lives. Divide students into small groups, and ask them to discuss why people abuse drugs. Some common answers are peer pressure, imitating adults, to please others, to feel like an adult, to challenge authority, curiosity, to escape problems at home or school.

Ask one group to report out to the class and other groups are asked to add to the list. Write the reasons on the board.

Step II Skill Development

Hand out a graphic organizer to each student and tell students they are going to use decision making skills to determine the consequences of drug use.
Reinforcement (15 min)  

abuse on various aspects of a person's life. Read the scenario Alicia and introduce students to the graphic organizer. Ask students to answer the following questions using the scenario “Alicia” to complete work on the graphic organizer.

1. What is the problem?
2. What drug(s) is being abused?
3. How is the drug impacting Alicia’s behaviour?
4. What could be the consequences of that behaviour on Alicia’s personal life, home life, performance in school, on friends, family and the community (accidents, crime etc)?

CONCLUSION (5 min)  

Reinforce the dangers of drug abuse including alcohol and tobacco. Review why some people resort to abusing drugs and the devastating consequences it can have on their lives.

HOMEWORK:  

Ask students to complete the graphic organizer for homework. On the back of the graphic organizer, students will write 2 paragraphs on how this information will affect their decisions about drug use.

Notes For Lesson  

Alicia  

My name is Alicia and I started using drugs at 13 years old. It first started with drinking beer and smoking cigarettes with my friends, and then I was introduced to ganja. From there, I was up for trying anything. I found that the more drugs I took the more worthless I felt. I didn’t care about how I looked any more. I didn’t bathe or wash my hair as often, I stopped visiting my grandmother who was ill and I fought with my mother all the time. My best friend decided she wanted to be friends with other girls. My parents would try to talk to me, but I knew better. It was MY life! I started hanging around boys that were drinking and doing drugs, and I got pregnant by a boy who didn’t love me at all. At sixteen, I had to drop out of school and my mother had to take care of my baby. I looked in my mother’s eyes and saw her disappointment. I would look in the mirror and ask myself, “what went wrong?” This was not how I dreamed my life would be.

I am twenty years old now and trying to get my life back together. My daughter will be going to school soon. I dumped that boyfriend and I am dating a man who respects and values me. My advice to young people is to hold on to your hopes and dreams and avoid drugs at all costs. This story could be about you!
Graphic Organizer

Problem

Effect on Me (physical and emotional)

Home

School

Behaviour

Consequences

Behaviour

Consequence

Behaviour

Consequence

Behaviour

Consequence

Behaviour

Consequence

Behaviour

Consequence

Behaviour

Consequence

Behaviour

Consequence

Behaviour

Consequence

Behaviour

Consequence

Behaviour

Consequence

Behaviour

Consequence

Family Relationships

Friends

Sports

Community
What Is a Portfolio?

A portfolio is a collection or showcase of examples of a person's best work in a particular field. For example, Architects create portfolios that contain blueprints they have drawn. Artists' portfolios typically include collections of sketches and drawings they have made. Musicians may create portfolios using audiotapes or videotapes of songs they have performed or composed. People use portfolios to show others what they can do. Students can use the portfolio to demonstrate to others what they know and what they can do in health education.

Rationale for Portfolio

Portfolios have the advantage of containing students' work (product) over a period of time and their reflections (process) about doing the work and the learning they believe took place. Portfolios provide evidence of students' growth in health knowledge and skills and document progress as a learner. Portfolios form a solid basis for a student's conferencing with teacher, parent, student or other interested parties.

Essential Elements of a Portfolio

Portfolios should be designed so those who read them will understand why students chose each piece of work and what each piece of work demonstrates. Students need to spend time organizing and describing the pieces they select and their reasons for selecting them. A portfolio is not a collection of everything students have done.

Portfolios use samples of students' best work. Decisions about what work to include and not to include are made by teacher and student together. Only the final version of a student's best work should be included.

Expert practitioners in every field realize the strategic importance of improving their work samples. In our quest to produce lifelong learners, we must encourage students to develop the habits and skills of professional learners. These skills include revision, reflection and self-assessment using clear standards of achievement. These three practices are essential elements of the portfolio process.

Revision

Throughout the course of a school year, students learn new information and develop and practice new skills. In the portfolio process, students have the opportunity to revise and restructure their work. Teachers should provide multiple opportunities to utilize the health education standards, so students have a wide selection of work from which to choose their best examples.

Students must be taught that revision is more than revising to fix mechanical mistakes and be given multiple opportunities to practice revising their work. Students should be encouraged to keep all scratch notes, rough drawings, doodling and draft copies. An examination of these thinking tools and practice works will allow students to compare and contrast, categorize and relate, infer and apply all essential components of revision. With increased practice, students will become more skilled at revision.

Engaging Students In Portfolio

Explain to students that a portfolio will be a collection of their best work. Just as artists, models, architects, writers use their portfolios to show others what they have accomplished in their chosen field, students can use their health portfolios to demonstrate what they know.
understand and are able to do in health education - in other words, their level of health literacy. Besides teachers and parents, potential employers would be an interested audience for a health portfolio. Clearly explain the logistics (location, schedule for portfolio work', due dates, conference etc.) Let students know that you would like to photocopy their best work as benchmarks for subsequent years.

- Clearly explain how portfolios will be assessed.
- Have a set portfolio work time.
- Set a timeline with due dates for installments.
- Encourage peer evaluation.
- Check with other teachers to see if some health portfolio work could receive credit in other classes.
- Explain that parents will be encouraged to review students portfolios and to offer suggestions. Portfolios could also form the basis for a parent/teacher student conference.

**Managing Portfolios**

Of paramount importance is accessibility of portfolios to-students so one of the first challenges is deciding where in your classroom portfolios will be stored. Some teachers use boxes with hanging files, some milk cartons, others a file drawer or stackable plastic bins like the postal workers use. Because student work may come in all shapes ad sizes, student folders need to be legal size or accordion. Teachers may use color-coding to distinguish one class from another. Teachers need to set aside time each week for students to work with their portfolios.

Getting and staying organized is also important with portfolios. In addition to designing a management system for the portfolios themselves, a management system for the contents of the portfolio is crucial.

In addition to arranging the classroom, scheduling time for students to work with portfolio and preparing student handouts, teachers need to think about how they will conference with students. Conferences could be held during the scheduled portfolio time. The conference is an opportunity for student and teacher (or a few students and a teacher) to talk about the student's portfolio work. The more chances students have to discuss their work, (how they did, what they learned, how they feel, how they might improve the work, what new goals they want to set for their work, what growth they see in themselves) the greater the likelihood that they will become better and lifelong learners. Conferences are collaborative, not teacher led; the teacher listens the students and asks leading questions. It is a true blend of instruction and assessment. A conference is a time for teachers to learn first- hand about the instructional strengths and needs of a students. The teacher could meet with one or more students. Building conferencing skills takes time.

**Involving Parents in the Health Literacy Portfolio**

Portfolios are a good way to involve parents in their children's learning. Teachers need to communicate to parents (in writing, at meetings, in newsletters):

- what portfolios are,
- the purpose of this particular portfolio,
- how it will be scored,
- what part of the child's grade it will be,
- how it is different from traditional paper-pencil tests, and
- how they, the parents, can play an active part in their child's learning.
Teachers can encourage parents to:

- be a receptive audience for their child as he/she develops or decides what work to include in the portfolio,
- offer the child constructive feedback (this is helped by the use of rubrics),
- ask questions that encourage a child's reflection on his/her learning,
- communicate with the teacher about the growth in knowledge and skills they observe in their child,
- write reflective comments about the child's learning as demonstrated at home and in the portfolio, and
- discuss the portfolio work at parent teacher conferences.

The less familiar parents are with portfolios, the more important it is for communication about them to be ongoing with parents.

**Evaluating the Portfolio**

Teachers need to decide in advance how they are going to evaluate and share this information with their students. An assessment portfolio documents what a student has learned over time. It serves as a showcase of their best work. A review of a portfolio should provide the reader with a sense of the student's purpose and a portrait of the student's growth over time. In order for this to happen, the portfolios should:

- Have some kind of organization;
- Contain a range of work in context rather than as isolated pieces and skills;
- Include pieces from throughout the assignment period in order to show growth;
- Provide clear links between the health education standards and the pieces of work;
- Present evidence of self-assessment.

Teachers may also decide to incorporate portfolios as part of a grading system and may even use them in as a final grade. If used for grades, some questions that educators need to answer in advance are:

- How much of the student's grade will portfolios be?
- Will they be used as part of or in place of a final examination?

Students need to know from the start the requirements for the portfolio and what they need to produce for a portfolio that achieves the performance standard.

It is likely that the teacher will develop a rubric or set of rubrics to guide students in their portfolio development. (See Sample HFLE Portfolio and Rubric DRAFT as created by Arthusa Semei, 2006). These rubrics would apply to the entire portfolio not to individual lessons that would have their own rubrics.

Adapted from: Rhode Island Department of Education Assessment Portfolio Project and Council of Chief State School Officers SCASS Project
Getting Started with Portfolios Worksheet

Tasks to consider:

- Define the purpose of the collection. How will it relate to the HFLE objectives?

- What will you require students to put in their HFLE portfolio? What kinds of student work will you include? How can this be related to performance tasks?

- Decide how the finished HFLE portfolio will be evaluated. Will you develop criteria? What are some of the criteria?

- Decide what part of the students’ grade the portfolio will be.

- How will you guide students through the process of reflecting on their work? Will you also include peer reflection? How will you incorporate student self-reflection with teacher reflection? How will this be used? What forms will you need? What would they look like?

- Decide how you will manage portfolios in the classroom.

- Review sample portfolio forms. Which ones will you use? Which ones will you revise? How? What other forms do you need to prepare? Be sure to include: an information sheet; a table of contents; a reflective summary; examples of student work entry slips.

- Explain how you will engage students in portfolio work. How will you introduce it? How will you get them to actively participate?

- Decide how to involve parents in their children’s portfolio.

- How will you instruct, monitor, guide, and conference with students.

- Reflect on the portfolio process and revise any of the above as necessary.
Section 5: HFLE LESSON PLANNING
INFANT ONE LESSON PLANS
### LESSON PLAN # 1

#### THEME: SEXUALITY AND SEXUAL HEALTH

<table>
<thead>
<tr>
<th>CONTENT STANDARD 1:</th>
<th>Demonstrate an understanding of the concept of human sexuality as an integral part of the total person that finds expression throughout the life cycle.</th>
</tr>
</thead>
<tbody>
<tr>
<td>CORE OUTCOME 1:</td>
<td>Differentiate between appropriate and inappropriate forms of touching and identify feelings associated with appropriate and inappropriate touching. Demonstrate the use of relevant skills to avoid bad touches</td>
</tr>
</tbody>
</table>

**Title**

*Good Touch bad touch*

HFLE Curriculum Pgs. 14 & 15 (2.5)

**Class**

Infant 1

**Time**

30 - 35 minutes

**Purpose**

To help students differentiate between good and bad touches and to provide them with basic skills to avoid sexual abuse.

**Overview (Include Concepts)**

*In this lesson students will be discussing touches and feelings they get from touches. They will identify good touches and bad touches and they will practice different ways to refuse bad touches.*

**Specific Objectives**

Students will be able to:

1. Identify various types of touches and feelings associated with touches.
2. Use critical thinking skills to differentiate between good touches and bad touches
3. Apply assertiveness skills to refuse bad touches

**Resources and Materials**

Teacher resource information sheet, pictures of good and bad touches, scenarios describing good and bad touches from the teacher resource section.

**Methods and Strategies**

Role playing, discussion, individual worksheets

**PROCEDURE**

**Step I**

**Introduction: Feelings (5 min)**

Explain to children that in today’s lesson they will learn about touches and feelings. Tell students that you will show some cards with feelings and you want them to name those feelings. Display cards with faces depicting sad, angry,
embarrassed, afraid and ashamed. Have students identify each feeling and
discuss what each feeling means. Ask students to share an example of times
when they may experience these feelings.

<table>
<thead>
<tr>
<th>Teacher Tip:</th>
</tr>
</thead>
</table>
| Many students are not accustomed to exploring their feelings at this age.
Students may confuse feelings. It is important for teacher to spend the
necessary time to clarify and help students identify feelings being
described. |

<table>
<thead>
<tr>
<th>Step II</th>
</tr>
</thead>
<tbody>
<tr>
<td>Skill development and reinforcement:</td>
</tr>
<tr>
<td>Touches and feelings</td>
</tr>
</tbody>
</table>

Invite two members of the class to come forward. Touch their shoulders, nose
and head. Elicit from students the word touch to describe what you are doing.
Explain to students that there are many types of touches some can be good and
some can be bad. Tell students that a good touch for you is a touch on the
shoulder or on the head. Share pictures of adults touching children and ask
students if they think these are good touches. Why? *(Both people in the
pictures are happy and seem to be comfortable with the touch)* Ask
students to name other touches that can be pleasant.

Establish that a good touch is a touch that does not hurt and does not make us
feel sad, embarrassed, or afraid.

Explain to students that sometimes what starts out as a good touch can end up
becoming a bad touch. All touches give us feelings. Good touches make us feel
happy but bad touches can make us feel sad, afraid or embarrassed. Ask
students to raise their hands if they like to be tickled. Present a picture of a
boy being tickled. Ask students if they think these are good touches. Why? *(Yes)* How can they tell? *(By the look on his face)* Ask class the following
questions: If we like to be tickled can it be fun? Is it a good touch? *(Yes)* But
suppose we are being tickled too long and too hard? Is it still fun? *(No)*

Suppose it starts hurting and you are telling the person to stop and they don’t
is it still fun? *(No)* Display a picture of a boy being tickled and not enjoying it.
Ask students if they think it is a good touch.* *(No)* How can you tell? *(By the
look on the boy’s face)*

Does he seem to be having a good time? *(No)*

Ask students to say who should decide if a touch is good or bad, the person
giving the touch or the person being touched? *(The person being touch)*

Ask students to imagine that the person giving the touch says it’s okay or it’s
fun but they don’t like it. What kind of touch is it? *(A bad touch)*

Read aloud a list of scenarios to students and ask them give a thumbs up for
those that describe a good touch and thumbs down for those that describe a
bad touch.
Ask students to imagine that someone is giving them a touch they do not like. What would they do? Have students suggest as many responses as possible. Explain to students that they have a right to say no to bad touches. They must say no in a big voice, run away and tell a grown up immediately.

### Step III

#### Conclusion

Act out several scenarios of an adult approaching children and giving them a bad touch such as tickling them under the arm, pulling their hair lightly or pinching them lightly and have students demonstrate some ways they would respond to these bad touches.

### Assessment

Have students draw and colour pictures of faces that reflect feelings they get with good touches or bad touches. Have them share pictures with classmates and then display them on the classroom wall. Use rubric to establish criteria and assess students drawing based on student’s depiction of feelings.
Teacher Resource Page for Lesson # 1

Faces with emotions

Happy

Sad

Angry
## LESSON PLAN # 2

**THEME: SEXUALITY AND SEXUAL HEALTH**

| CONTENT STANDARD 1: | Demonstrate an understanding of the concept of human sexuality as an integral part of the total person that finds expression throughout the life cycle |
| CORE OUTCOME 1: | Differentiate between appropriate and inappropriate forms of touching and identify feelings associated with appropriate and inappropriate touching. Identify inappropriate touching of private body parts. Demonstrate the use of relevant skills to avoid bad touches. |

| **Title:** | Good Touch, Bad Touch (Part 2)  
HFLE Curriculum pgs. 14&15 (2.5) |
| **Class:** | Infant One |
| **Time:** | 30-35 minutes |

**Purpose**

To help students develop an understanding of parts of the body that are considered private parts and to differentiate between good and bad touches as it relates to their private body parts. Students will also practice applying basic skills to avoid sexual abuse.

**Overview (Include Concepts)**

In this lesson students will be introduced to the proper names for their private body parts. They will identify good touches and bad touches as it relates to their private parts and practice skills to refuse bad touches.

**Specific Objectives**

Students will be able to:

1. Identify private body parts and use the proper names to describe them.
2. Use critical thinking skills to differentiate between good touches and bad touches of their private body parts.
3. Apply assertiveness skills to refuse bad touches to their private body parts.

**Resources and Materials**

Story from resource page (STOP! Uncle Ernest!), Pictures of children in swimsuits, Pictures depicting good and bad touches from teacher resource page

**Methods and Strategies**

Story telling, discussion, individual worksheets
<table>
<thead>
<tr>
<th>Procedure</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Step I Introduction</strong></td>
<td>Review the concept of good and bad touches by reading the story &quot;STOP! Uncle Ernest!&quot; from teacher resource pages to class. Ask students questions based on the story to reinforce what a good touch is, how a good touch can become a bad touch, ways they can respond to a bad touch etc.</td>
</tr>
<tr>
<td><strong>Step II</strong></td>
<td>Introduce the word private to students and have students brainstorm for the meaning of the word private. Establish that private means that it belongs to you, it is your own and it is special to you. Explain to students that we have many body parts. Have students name some. Explain that some of these body parts are private. Ask students if they can tell which body parts are private. Present a picture of a boy and a girl in a bathing suit and ask students to describe the picture. (See teacher resource pages) Explain to students that they can always remember their private body parts: they are the parts of the body that are covered by a swimming suit if they are going swimming. Elicit from students the private parts for boys (penis), for girls (breast and vagina), and for both girls and boys (bottoms).</td>
</tr>
</tbody>
</table>

**Teacher Tip:**

Many students might not be accustomed to using the proper names for their private body parts. Be sure to take enough time to explain that there are several names for their private body parts but it is best to use the proper names. Students may even be asked to give some names they have heard or that they use and the teacher can use this opportunity to have students point out the proper names for the terms regularly used. Have students practice using the proper names whenever the opportunity presents itself and eventually students will develop a level of comfort using the proper terms.

Ask students to suggest why they think these parts are called private. Establish that they are called private because they are our own, they belong to us and they are special to us. Explain to students that it is especially important that they know when they are receiving a bad touch to their private parts. Present pictures of parents changing a child diapers and a doctor giving a child a check up (see teacher resource pages) and ask students to describe the pictures. Ask students why it appears that the parent and the doctor are touching the person's private parts. (The parent is changing the child, the doctor is giving a check up) Explain to students that it is only okay for an adult to touch your private parts in the following situations: A parent giving a child a bath, helping them to change, or checking for infection, cuts, bruises etc. A doctor can also touch their private part if they are getting a check up. Remind children that even though the trusted adult is allowed to touch them under those circumstances, if they feel it is a bad touch or if the adult start touching them in a way they do not like they must ask them to stop.
| **Step III**  
| **Conclusion**  
| ---  
| Provide students with several scenarios of good touch and bad touch of their private parts and have students identify them as good or bad touches. Explain to students that it is always good to remember the touching rule. Review the rule with class (if someone is touching you in a way that you do not like then you must ask them to stop in a big voice then run and tell someone).  
| **Assessment**  
| Read the two scenarios provided in the teacher resource pages aloud to students and have students suggest how the children in the scenarios should respond based on the safety rule.  
| **Evaluation:**  
| See Lesson logging form |
What is sexual abuse?  
Child sexual abuse includes a wide range of sexual behaviors that take place between a child and an older person. These sexual behaviors are intended to erotically arouse the older person, generally without consideration for the reactions or choices of the child and without consideration for the effects of the behavior upon the child. Behaviors that are sexually abusive often involve bodily contact, such as in the case of sexual kissing, touching, fondling of genitals, and oral, anal, or vaginal intercourse. However, behaviors may be sexually abusive even if they don’t involve contact, such as in the case of genital exposure (“flashing”), verbal pressure for sex, and sexual exploitation for purposes of prostitution or pornography.

Child sexual abuse can take place within the family, by a parent, step-parent, sibling or other relative; or outside the home, for example, by a friend, neighbor, child care person, teacher, or stranger. When sexual abuse has occurred, a child can develop a variety of distressing feelings, thoughts and behaviors.

No child is psychologically prepared to cope with repeated sexual stimulation. Even a two or three year old, who cannot know the sexual activity is wrong, will develop problems resulting from the inability to cope with the overstimulation.

The child of five or older who knows and cares for the abuser becomes trapped between affection or loyalty for the person, and the sense that the sexual activities are terribly wrong. If the child tries to break away from the sexual relationship, the abuser may threaten the child with violence or loss of love. When sexual abuse occurs within the family, the child may fear the anger, jealousy or shame of other family members, or be afraid the family will break up if the secret is told.

A child who is the victim of prolonged sexual abuse usually develops low self-esteem, a feeling of worthlessness and an abnormal or distorted view of sex. The child may become withdrawn and mistrustful of adults, and can become suicidal.

Some children who have been sexually abused have difficulty relating to others except on sexual terms. Some sexually abused children become child abusers or prostitutes, or have other serious problems when they reach adulthood.

Often there are no obvious physical signs of child sexual abuse. Some signs can only be detected on physical exam by a physician.

Sexually abused children may develop the following:

- unusual interest in or avoidance of all things of a sexual nature
- sleep problems or nightmares
- depression or withdrawal from friends or family
- seductiveness
• statements that their bodies are dirty or damaged, or fear that there is something wrong with them in the genital area
• refusal to go to school
• delinquency/conduct problems
• secretiveness
• aspects of sexual molestation in drawings, games, fantasies
• unusual aggressiveness, or
• suicidal behavior

Child sexual abusers can make the child extremely fearful of telling, and only when a special effort has helped the child to feel safe, can the child talk freely. If a child says that he or she has been molested, parents should try to remain calm and reassure the child that what happened was not their fault.

**Important information to reinforce in lessons on sexual abuse**

You can decide who can touch you, who can kiss you, or who can give you a hug. You have the right to say, "no."

What do you do when someone touches you inappropriately?

• Say no! Tell the person that you don’t like it and you don’t want to be touched.
• Get away fast! Run away from the person whose touch you don’t like. Never stay alone with that person ever again.
• Call for help. You can scream.
• Believe in yourself. You did nothing wrong.

If someone touches you inappropriately, tell someone you trust what has happened. Don’t let threats scare you into running away or keeping quiet.

When a person touches you and asks you to keep it a secret between the two of you, ask yourself, "Do I feel comfortable about keeping this secret? Does the secret bother me?"

Don’t keep secrets that make you feel uncomfortable. Go to a person you trust: a parent, a relative, a teacher, or your doctor. If the person you go to doesn’t believe you, go to someone else you trust until someone believes you and helps you.

Do everything you can to stay away from the threatening and intimidating person. Don’t stay alone with a person who touches you in a way that makes you uncomfortable or makes you feel unsafe.

**Good Touch**

It feels good to be hugged and kissed by the people you love. For example:

• When Mommy gives you a hug and kiss after you wake up.
• When Daddy gives you a good-night hug and kiss.
• When Grandma and Grandpa come to visit and everyone gets hugs and kisses.
Bad Touch

Touches that make you feel uncomfortable are usually bad touches. You don’t have to keep a secret when someone gives you bad touch. Don’t feel that you are bad. Whoever gives you a bad touch is the one who is bad, not you. Your body belongs to you. Nobody should touch you if you don’t want to be touched.

Do you know what a bad touch is?

- It is a bad touch if it hurts you.
- It is a bad touch if someone touches you on your body where you don’t want to be touched.
- It is a bad touch if a person touches you in a way that makes you feel uncomfortable.
- It is a bad touch if that touch makes you feel scared and nervous.
- It is a bad touch if a person forces you to touch him or her.
- It is a bad touch if a person asks you not to tell anyone.
- It is a bad touch if a person threatens to hurt you if you tell.

Unfortunately, some adults may abuse the trust you give them. The person who touches you in a way you don’t like is the person who is doing something wrong, not you. Sexual abuse is always the fault of the bigger, older, or stronger person. Do not blame yourself and don’t allow anyone to blame you.
Activities for Students

Scenarios for Lesson # 1

1. Read the list of good touches and bad touches and have students give thumbs up when they hear a good touch mentioned and thumbs down when they hear a bad touch mentioned.

   1. Your mother gives you a hug when you wake up.
   2. Your father gives you a kiss on the cheek when you go to bed.
   3. A classmate pushes you to the ground.
   4. Someone is tickling you and it hurts.
   5. Your brother pulls you by the ear and does not want to let go of your ear.
   6. The next door neighbor wants to kiss you on your lips.

2. Story for Lesson # 2: STOP! Uncle Ernest!

   Stop! Uncle Ernest!

   Shera is six years old. She lives with her mother in Corozal Town. Shera's favourite uncle is Uncle Ernest. Shera likes Uncle Ernest because whenever he visits he brings her chocolate, sweets, ice cream, and cake. Shera likes to sit on Uncle Ernest's lap and listen to Anansi stories. She laughs loudly when Uncle Ernest tells her how Brer Anansi tricks Brer Tiger. One day, as she was laughing, Uncle Ernest began to tickle her on her side. She began to laugh even louder. Then he began to tickle her under the arm. Shera wanted him to stop because it was beginning to hurt and she did not feel like laughing anymore. At first she did not want to say anything because she did not want to make Uncle Ernest mad but she remember what her teacher had said in class about a bad touch. Her teacher had told the class that if someone is touching you in a way that you do not like you should say no and ask them to stop.

   So Shera said in a big voice "Stop tickling me like that Uncle Ernest. It hurts." Uncle Ernest stopped tickling Shera. He was sorry. He told Shera that he did not mean to hurt her and that he would never tickle her in that way again. Shera gave Uncle Ernest a big hug. She was happy that he listened to her when she asked him to stop.

   Remember it's your body and you have a right to tell someone no if you are getting a bad touch.

3. Scenarios for Lesson # 2

   1. One evening Melissa was at home with her older brother. They were sitting on the sofa watching TV when he stretched over and gave her a hug. Melissa hugged him back but when she tried to let go he kept hugging her and he began to touch her hair. Melissa loved her brother but she did not like the way he was touching her. If you were Melissa what would you do? If you ask him to stop in a big voice and he does not stop what should you do?
2. Jerry is six years old. One day his mother sent him to borrow some sugar from his uncle who lives close by. His uncle told him to come in and wait in the living room while he went to get the sugar. Soon his uncle came back with a chocolate and two shiny dollar coin. He told Jerry that he could have the chocolate and the two shiny dollar coins if he took off his clothes and allowed him to touch his private parts. If you were Jerry what would you do?

4. Pictures for Step both lessons # 1 and 2 attached overleaf
### LESSON PLAN # 3

**THEME: SEXUALITY AND SEXUAL HEALTH**

<table>
<thead>
<tr>
<th>CONTENT STANDARD 3 &amp; 4:</th>
<th>Build capacity to recognize the basic criteria and conditions for optimal reproductive health</th>
</tr>
</thead>
</table>
| **Learning Outcomes:** | Distinguish between poor and proper hygiene practices  
Apply proper hygiene practices  
Identify and describe store bought and local products utilized for bathing |
| **Title:** | “Taking Care of my body: The importance of bathing”  
HFLE Curriculum pg. 12 & 13 (1.1) |
| **Class:** | Infant 1 |
| **Time:** | 35-40 minutes |
| **Purpose:** | To help students develop and appreciation for good personal hygiene with specific emphasis on the importance of taking a proper bath. |
| **Overview (Include Concepts):** | Students will engage in several participatory activities to establish the importance of bathing for good personal hygiene. Students will establish that hygiene is important because poor hygiene practices can lead to diseases and infections. |
| **Specific Objectives:** | Students will be able to:  
1. Identify ways of taking care of the body.  
2. Demonstrate the proper way to take a bath  
3. Identify products used for bathing |
| **Resources and Materials:** | Water, soap, local alternatives to soap where available, doll, bath rag, towel, newsprint, markers |
| **Methods and Strategies:** | Discussion, demonstration, art |

### PROCEDURE

**Step I Introduction**  
Display pictures of children bathing. Ask class to describe what is happening in the picture. Ask students the following questions: Why do we bathe? Why is it important to take a bath daily/regularly? What do we use to take a bath? How would it feel if they did not bathe for a long time? What might happen? Engage students in a discussion on the relationship between bathing and keeping healthy.
### Teacher Tip:

In conducting lessons on hygiene, there is the risk of discriminating against children who are less hygienic for reasons of parental neglect or other problems at home. Quality teachers are aware of such problems and encourage and praise them for practicing good personal hygiene with simple means. They also stimulate understanding and social consciousness among the other children. The teacher discreetly helps children with specific problems instead of pointing out their negative practices publicly.

### Step II: Skill Development and Reinforcement

Ask children to think of bath time at their house. Have students stand up and pair with another student. Each person must explain to the other how they take a bath.

Ask a few pairs to share what they learned from each other.

Discuss the steps involved in taking a good bath:
- What is needed, what parts of the body need special care etc.
- It is important to establish a routine that children can remember. For example, what do we wash/clean first, second, third: our face, our hair, behind the ears, the neck, shoulders, back, chest etc.

Demonstrate steps using a doll, water and other bath products.

Have a few volunteers demonstrate to class steps involved in taking a bath using the doll. Make sure volunteers are describing each step to class.

### Step III: Conclusion

Have students work individually to draw pictures of themselves taking a bath.

Make sure that students include the necessary products needed for taking a bath. Have some volunteers describe the picture they have constructed.

**Assignment:**

Have students collect products used for bathing around the home and mount a display in a corner of the classroom which includes bath products and the pictures constructed during this lesson.

### Evaluation:

See lesson logging form
Lesson # 1

Good Personal Hygiene
Good hygiene is important in taking care of yourself physically as well as emotionally. People often have infections because they don’t take good care of themselves physically, which can lead to emotional difficulties as well. To avoid physical problems associated with poor hygiene, consider the following ideas to keep yourself clean:

Hair Care
Washing Your Hair. It’s so important to keep your hair clean and conditioned to ensure it stays healthy and strong. Washing your hair at least every other day is important to keeping your hair healthy and in good shape. If you wash it too frequently, your hair will become brittle and dry, making it difficult to grow and keep strong. If you wash it too infrequently, it will become greasy and will also stunt its growth.

Washing your hair too frequently also strips it of necessary nutrients required to keep it strong and healthy. Conditioning your hair is critical to keeping the nutrients within your hair intact. Use a “leave-in” conditioner every time you wash your hair. The long-lasting conditioning agents will rebuild your hair every time you use it.

Cutting Your Hair. Getting your hair cut frequently is critical to healthy hair. The longer you wait to get your hair cut, the more frail and brittle your hair can become, especially if it is longer.

The length of your hair will determine how often you get your hair cut. If you are male, or a female with a very short hairstyle, getting your hair cut every six weeks is best in order to keep it trim and neat, while keeping it healthy as well. If you have longer hair, you can go as long as 10 weeks without a haircut, but try to get your hair cut at least every 10 weeks. This will help keep your hair strong, and if you are trying to grow your hair, will enable your hair to grow more quickly, because you will get rid of the dead, dry ends and will enable the healthy part to grow more effectively.

Dental Care
Going to the Dentist. The mouth is the area of the body most prone to collecting harmful bacteria and generating infections. In order to have and maintain good oral hygiene, it is critical to visit your dentist at least every six months. In some cases, your dentist may recommend every four months, depending on how much tartar builds up on your teeth and how often you need to have it removed. To keep your teeth free from tartar build-up and tooth decay, make sure you visit your dentist as frequently as he or she recommends. This will ensure your teeth and your mouth stay healthy and strong.

Brushing Your Teeth. Make sure you brush your teeth at least two times per day, if not after every meal. This will help minimize the amount of bacteria in your mouth which leads to tooth decay, and will help you maintain a healthy, happy smile.

Flossing Your Teeth. In addition to regular brushing, it is critical to floss your teeth at least once a day, usually before you go to bed. This will enable you to reduce plaque in the more difficult to
reach places—between teeth and at the back of your molars. Flossing also keeps your gum healthy
and strong, and will help protect your mouth from a variety of diseases that could eventually cost
you your teeth.

Physical Care
Cleanliness of Your Body. Taking a bath or shower once daily is very important to ensuring your
body stays clean. Cleaning your body is also important to ensure your skin rejuvenates itself, as the
scrubbing of your arms, legs, and torso will slough off dead, dry skin and help your skin stay healthy
and refreshed.

Shaving. In most cultures, it is important to remember that shaving is a critical part of cleanliness.
For men, shaving the face enables it to stay cleaner and is a more acceptable hygienic practice. For
women, shaving the legs and under the arms also keeps the body cleaner, with less places for
bacteria to grow.

Washing Your Face. It is important to wash your face at least once a day to remove all dirt and
grime that you have come in contact with during the course of the day. This will keep your face
freer from wrinkles and pimples, which are the result of clogged pores. Using some sort of
moisturizer will also ensure your face stays rejuvenated and fresh.

Trimming Your Nails. Keeping your nails trimmed and in good shape is also important in maintaining
good health. Going to a professional to learn proper nail care will help you get on the right track to
trimming your fingernails as well as toenails. Proper trimming techniques will also help you avoid
hangnails and infected nail beds.

Washing Your Hands
Before Meals. It’s important to have clean hands before you sit down to eat. Washing with hot
water and soap will clean your hands so that they do not carry bacteria to your family and friends
as you pass the bread!

After Restroom Use. To ensure you don’t carry fecal or other bacteria to other parts of the body
or to other individuals, you will want to wash your hands after every time you use the restroom.
Make sure you wash your hands immediately afterward—don’t touch your nose or mouth to avoid
unnecessary illness.

Before Preparing Food. Washing your hands before you prepare food is very important to ensure
you don’t spread bacteria to your food. Wash them with hot, soapy water for at least 2 minutes
before you begin working with food, particularly poultry or red meat. This will keep your food free
from bacteria, and will ensure your food is healthy to serve once it’s cooked!

After Preparing Food. Again, washing your hands for at least 2 minutes with hot, soapy water
after you have prepared food (and before serving) will ensure you don’t carry bacteria with you,
thus potentially infecting you or others.

Good hygienic habits are easy to begin and maintain. Starting with a few of these ideas will help you
start on your way to developing good hygiene for both you and your family.
### STRAND: Self and interpersonal relationships

<table>
<thead>
<tr>
<th>REGIONAL STANDARD 1:</th>
<th>Examine the nature of self, family, school and community in order to build strong, healthy relationships</th>
</tr>
</thead>
<tbody>
<tr>
<td>CORE OUTCOME 1:</td>
<td>Identify various similarities and differences among family members. Demonstrate respect for diversity among family members</td>
</tr>
</tbody>
</table>

### Title
**Our Family Forest**

### Age Level
Infant I

### Time
25-30 minutes

### Purpose
To help students explore diversity through the making of family trees.

### Overview (Include Concepts)
In this lesson, will listen to a story about family and explore the diversity of family members and of types of families.

### Specific Objectives
At the end of this lesson, students will be able to:
1. explain what a family is
2. make a family tree showing the different branches of their family
3. identify the differences and similarities in their family

### Resources and Materials
Student handout - "Our Family Forest", pictures of family

### Methods and Strategies
Brainstorming; individual work, class sharing

### PROCEDURE

#### Step I Introduction (5 min)
Ask students: "What is family?" and "Who makes up family?". Tell them that they are going to see pictures of real families. Show them pictures that you have collected that show "unusual "families. (mixed ethnicity, adopted children, senior citizens, etc.)

### Teacher Tip:
This is a brainstorming activity, so it is important to gather many answers in a short amount of time. Although a number of students may want to provide answers to your question, this exercise should last only 5 minutes. You may not be able to get answers from all the students. Tell students after 5 minutes that they will have many other opportunities to provide answers. Also, give students positive feedback on their answers.
<table>
<thead>
<tr>
<th>Step II</th>
<th>Making the Connection (10 min)</th>
</tr>
</thead>
<tbody>
<tr>
<td>• After looking at the pictures, ask the questions again. Ask students if they have changed their ideas about what family is. Share with them that a) there are many different types of family and family members, and that none are better than the other, b) the basic ingredient in each family is love and caring for each member, c) families may consist of one parent/guardian, children, grandparents, aunts, friends, and d) sometimes a child can have more than one family (in the case of divorce or separation, or through special circumstances).</td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Step III</th>
<th>Think and Do (20 mins.)</th>
</tr>
</thead>
<tbody>
<tr>
<td>• Distribute the family tree handout and tell students to each make a family tree on which leaves represent family members. Encourage children to draw small pictures of their individual family members on each leaf. Ensure that ONE leaf has the student's name and picture. Leaves will then be pasted on to the child's family tree. Students will then be asked to share something about their family. As you go along, highlight the similarities and differences in families. Have each student talk about something that is the same or different.</td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Step IV</th>
<th>Conclusion (5 mins.)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Summarize the information shared in the lesson by putting all the individual students' leaves on a prepared class tree, and show how the class too can be a family with similarities and differences.</td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Assessment</th>
</tr>
</thead>
<tbody>
<tr>
<td>Ask students to look at the new class family tree. Ask them to say why they are a family. Ask them to write a suggestion for a name for the new family tree and say why the name would be appropriate.</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>HOMEWORK</th>
</tr>
</thead>
<tbody>
<tr>
<td>Have students take home the trees and ask parents for any additional family members that should be added.</td>
</tr>
</tbody>
</table>
OUR FAMILY FOREST
Teacher's Page

Types of Families

There are many types of families. The smallest family is that of two persons such as a husband and wife, a parent and child, or a brother and sister. These units are kinds of nuclear families. Nuclear families include any two or more persons related to one another by blood, marriage, or adoption and who share a common residence. When the unit includes a husband and wife, it is considered a conjugal family as well.

Almost everyone is born and reared in a nuclear family unit consisting of self, parents, and sometimes siblings. This particular type of nuclear family is termed a family of orientation, a family in which most basic early childhood experiences and learning occur. When a person marries, a new nuclear (and conjugal) family is formed, a family of procreation. This family consists of self, spouse, and children.

Nuclear and conjugal families as isolated and independent units are very rare in the world. In most societies the extended family is the norm. This type goes beyond the nuclear family unit of parents and children to include relatives such as grandparents, aunts, uncles, or cousins.

The extended family is simply any family that extends beyond the limits of the family of orientation or the family of procreation. When, for example, a married couple lives with the husband's parents or a grandparent shares a household, the family changes from a nuclear to an extended one. The addition of any persons beyond the nuclear unit makes the family extended.

American families typically have what is called a modified extended family structure. When couples marry they are likely to form a household separate from either set of parents. Yet they maintain close ties with their families of orientation. While the newly created nuclear family units do not reside in an extended family household, they do exchange phone calls, letters, and holiday or birthday greetings and turn to one another for assistance. In this sense a nuclear family becomes a modified form of an extended one though not in terms of residence.

Interactions with relatives beyond the nuclear or modified extended family are termed kin, or kinship, relationships. All societies have rules for defining kin groups and how these relationships are organized— who lives together; who is the head of the family; who marries whom; how mates are selected; which relatives, family, and kin groups are most important; and how children are to be reared and by whom. While these rules and systems vary greatly, certain general rules determine the statuses and roles.

Families can be made up of persons who are not related by blood. Sometimes children are adopted, or raised by persons who have no blood relation to them. Also, families are not always made up of one ethnic group. There are many families that have persons who are from mixed backgrounds.
<table>
<thead>
<tr>
<th>STRAND: Self and interpersonal relationships</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>REGIONAL STANDARD 1:</strong></td>
</tr>
<tr>
<td><strong>CORE OUTCOME 1:</strong></td>
</tr>
</tbody>
</table>

**Title** | All of Me |

**Age Level** | Infant 1 |

**Time** | 30 - 35 minutes |

**Purpose** | To show students that they are an important part of their family. |

**Overview (Include Concepts)** | In this lesson, students will look identify their roles and appreciate the function of the roles in their family. |

**Specific Objectives** | At the end of this lesson, students will be able to:  
1. Identify their different roles.  
2. Develop a better appreciation of the roles they fill in their families and community. |

**Resources and Materials** | Crayons / coloured pencils, Handout : All of Me |

**Methods and Strategies** | Brainstorming; individual work, class sharing |

**PROCEDURE**

**Step I**  
**Introduction (5 min)**  
Discussion with students the fact that they fill many different roles in their families. Point out that a girl may be a daughter, sister, niece and granddaughter, while a boy might be a son, brother, nephew and grandson. Ask children to tell about the different roles they fill in their families. Record their answers on the board or on shop paper. |

**Step II**  
**Making the Connection (5 min)**  
Ask students to think about what roles they fill in the community. Point out that they are students - that’s one role. Ask them what else they do. For example, are they in Scouts? Or play on a team?  
Distribute copies of the All of Me Handout and have children draw pictures to show some of the different roles they fill in their lives. (Some children might need more than one sheet). Children can refer to the list created earlier for help in labeling their pictures.
| Conclusion (5 mins.) | When students are finished, have them share their pictures with the class.  
|                     | Ask students how they feel in each role. Remind them that they play an important role in their family and their community. |
| Assessment          | Have students describe the role that is most important and why. |
| HOMEWORK            | Have students take home their pictures to show parents. Parents may include compliments to validate the student’s role. |
### STRAND: Self and interpersonal relationships

<table>
<thead>
<tr>
<th>REGIONAL STANDARD:</th>
<th>Examine the nature of self, family, school and community in order to build strong, healthy relationships</th>
</tr>
</thead>
<tbody>
<tr>
<td>CORE OUTCOME:</td>
<td>Identify a variety of emotions and associate emotions with relevant situations.</td>
</tr>
</tbody>
</table>

**Title**  
How Do I Feel?

**Age Level**  
Infant 1

**Time**  
25-30 minutes

**Purpose**  
To help students to identify different emotions and associate them with different situations.

**Overview**

(Include Concepts)

In this lesson, students will look at different emotions and match them with different situations.

**Specific Objectives**

At the end of this lesson, students will be able to:

3. Identify different emotions (happy, sad, angry, excited, frightened, calm)
4. Associate the emotions with the relevant situations.
5. Describe how they know when others are feeling these emotions.

**Resources and Materials**

Story on feelings, large sheets of paper, crayons/markers, sample emotions sheet

**Methods and Strategies**

Story reading, Brainstorming; individual work, class sharing

**PROCEDURE**

**Step I**

**Introduction**

(5 min)

Introduce topic to students by asking them about how they’ve felt at different times. Lead a discussion of these feelings. Some questions to facilitate discussion might include:

- How did you react to the feelings?
- How long did the feeling last?
- Did other people know how you were feeling?

Tell students that they will now hear a story about Sandra’s birthday.

**Step II**

**Making the Connection**

(5 min)

Read the story “Sandra’s Wet Birthday”. Review the story by highlighting the different feeling expressed by the main character:

- Excitement
- Happiness
- Fright

Health and Family Life Education: Empowering Children and adolescents in Belize with the knowledge and skills for Health Living, July 2006
Adapted from HFLE Draft Teacher Training Manual, June 2006
### Step III
**Practicing**
(15 mins.)

- Calm
- sadness

Ask for volunteers to show the rest of the class different emotions that were expressed in the story. Discuss with students the differences in facial expression and body language.

Hand out the sheets of paper to the students and tell them that they are going to make their own pictures of different emotions to share with the class. (They will be assigned a situation and asked to illustrate the emotion to illustrate). Share work with class - have students describe the emotion and ask them to say what would cause such an emotion and say how other people might feel when the emotion was being expressed.

### Conclusion
(5 mins.)

Summarize the fact that everyone has emotions and that we all express different emotions in different situations. Everyone also reacts to how we express ourselves. We must always remember that how express ourselves has an effect on other people.

### Assessment

Compile students’ illustrations into one booklet to be placed in the class. Show students pictures of people expressing the various emotions. Ask them to describe a situation that would bring about the different emotions.

### HOMEWORK

Have students find a picture of a person/perssons expressing certain emotions in a magazine and bring to class. They will make up a story about why the person is expressing the feeling in the picture.
SANDRA’S WET BIRTHDAY

Sandra got up early on the morning of her birthday. She was so excited. Her Aunt May had promised to take her the new Bacab Water Park for the day. Her parents were already having breakfast when she went into the kitchen. They wished her “Happy Birthday” and gave her lots of hugs and kisses. She couldn’t even eat all her breakfast because she was in such a hurry to get ready for when her Aunt May arrived to pick her up. She sat around the table thinking about cooling off on the water slide and about splashing playing in the pool.

While she was putting on her slippers, she heard a loud crashing sound. Sandra was frightened. It was thunder, and she ran to her mother, who held her and told her that it was ok – the thunder was just a sound and nothing to be afraid of. She felt better and went back to her room to get the towel that she was taking with her.

Just then, she heard another sound. She looked out the window and saw the heavy drops of rain beating down on the ground in the yard. The sky had turned grey and the wind was blowing the trees until they were almost bent over. Sandra saw Aunt May drive up to the house and run through the rain to the front door. Aunt May had bad news – they were not going the water park. The weather was too bad and she did not want to be driving on the highway in such pouring rain.

Sandra sat on the floor next to her bed and cried. Her birthday was ruined.

Teacher’s Page:
Sample Emotions
INFANT TWO LESSON PLANS

LESSON PLAN # 1

Health and Family Life Education: Empowering Children and adolescents in Belize with the knowledge and skills for Health Living, July 2006
Adapted from HFLE Draft Teacher Training Manual, June 2006  Page 85
### THEME: SEXUALITY AND SEXUAL HEALTH

| CONTENT STANDARD : | Build capacity to recognize the basic criteria and conditions for optimal reproductive health  
Develop action competence to reduce vulnerability to priority problems, including HIV/AIDS, cervical cancer, and STI’s. |
|---------------------|--------------------------------------------------------------------------------------------------|
| Learning Outcomes:  | Distinguish between poor and proper hygiene practices  
Apply proper hygiene practices  
Identify and describe store bought and local products utilized for various grooming practices |
| Title:             | “A clean and healthy me: Practicing good personal hygiene” |
| Class              | Infant 11 |
| Time               | 35-40 minutes |
| Purpose            | To help students develop and appreciation for good personal hygiene practices in themselves and other as well as discuss risky hygiene practices without discrimination. |
| Overview (Include Concepts) | Students will engage in several participatory methods including singing and open discussion to explore common hygiene practices and to evaluate these practices as good or bad practices. Students will establish that hygiene is important because poor hygiene practices can lead to diseases and infections. |
| Specific Objectives | Students will be able to:  
   4. Define good grooming.  
   5. Identify different parts of the body  
   6. Tell how common diseases are spread through poor personal hygiene practices. |
| Resources and Materials | Water, soap, local alternatives to soap where available, commercial toothbrush, nail cutter, comb, toothpaste, flash cards, strips of paper, beans or seeds. |
| Methods and Strategies | Singing, miming, Games, discussion |

#### PROCEDURE

**Step I Introduction**  
**Singing and miming**  
Prepare a song for young children that allows them to mime specific habits of personal hygiene. For example:  
“This is the way we wash our face….we wash our face….we wash our face. This is the way we wash our face…early in the morning. This is the way we comb our
hair, etc. Brush our teeth...Cut our nails,” etc. until all personal hygiene activities have been covered.
Encourage children, in open discussion, to describe their personal hygiene habits.
Teach the children to sing the first couplet of the song. Encourage the children to come up with their own examples of hygiene.
Invite children one by one to sing and mime what they have done before coming to school. Sing about and mime one practice with them and then ask them to suggest the next practice.

Teacher Tip:

In conducting lessons on hygiene, there is the risk of discriminating against children who are less hygienic for reasons of poverty and/or other problems at home. Quality teachers are aware of such problems and encourage and praise them for practicing good personal hygiene with simple means. They also stimulate understanding and social consciousness among the other children. The teacher discreetly helps children with specific problems instead of pointing out their negative practices publicly.

<table>
<thead>
<tr>
<th>Step II: Skill Development and Reinforcement</th>
</tr>
</thead>
<tbody>
<tr>
<td>After singing, stimulate a group discussion on, for example,</td>
</tr>
<tr>
<td>a) why each practice is important;</td>
</tr>
<tr>
<td>b) what you need for it;</td>
</tr>
<tr>
<td>c) What else you can use, e.g. ashes for soap; foam from certain plans for toothpaste</td>
</tr>
<tr>
<td>Ask children to draw on paper, products and implements used for personal hygiene. Alternatively, bring some real products and implements; including some used locally such ashes.</td>
</tr>
<tr>
<td>• Ask the children to form pairs and match the pictures or the implement with the parts of their body on which they will use them.</td>
</tr>
<tr>
<td>• Ask them to explain to each other how they are used and why.</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Step III: Conclusion</th>
</tr>
</thead>
<tbody>
<tr>
<td>Ask children to prepare a real live demonstration of good and bad personal hygiene habits. They can use actual materials or act the habits, using mime.</td>
</tr>
<tr>
<td>• Ask them to give an explanation of what they show and the reasons why this is good or bad practice, or to use mime to demonstrate in silence.</td>
</tr>
<tr>
<td>• Ask the other children to explain what they have seen and why the practice was good or bad.</td>
</tr>
<tr>
<td>Put drawings of equipment or real equipment into a box or basket for younger children. Ask them to pick one in turn and explain their use and benefits.</td>
</tr>
</tbody>
</table>
| Assessment | As a home assignment, ask children to list which simple items of personal hygiene are present in their homes, such as a comb, soap, a nailbrush, a nail cutter, etc.  
- In class, ask the children to give the name of the first item, write it on the board (or let the children do this) and then tally, or let them tally how many children have the item at home.  
- Do the same with the next item, until all items have been listed.  
- Use this information to let the children do some numerical exercises, such as counting the tallies and writing the totals in figures behind them, ordering the items from most to least present.  
- Finally, help them analyze what the findings tell them about strengths and weaknesses of personal hygiene.  
- Discuss where and how improvements can be made. |
| Evaluation: | See lesson logging form |

Lesson adapted from *The Joy of Learning: Participatory Lesson Plans on hygiene, sanitation, water, health and the environment*. International Water and Sanitation Centre, 2005
Lesson # 1

Good Personal Hygiene

Good hygiene is important in taking care of yourself physically as well as emotionally. People often have infections because they don't take good care of themselves physically, which can lead to emotional difficulties as well. To avoid physical problems associated with poor hygiene, consider the following ideas to keep yourself clean:

Hair Care

Washing Your Hair. It's so important to keep your hair clean and conditioned to ensure it stays healthy and strong. Washing your hair at least every other day is important to keeping your hair healthy and in good shape. If you wash it too frequently, your hair will become brittle and dry, making it difficult to grow and keep strong. If you wash it too infrequently, it will become greasy and will also stunt its growth.

Washing your hair too frequently also strips it of necessary nutrients required to keep it strong and healthy. Conditioning your hair is critical to keeping the nutrients within your hair intact. Use a “leave-in” conditioner every time you wash your hair. The long-lasting conditioning agents will rebuild your hair every time you use it.

Cutting Your Hair. Getting your hair cut frequently is critical to healthy hair. The longer you wait to get your hair cut, the more frail and brittle your hair can become, especially if it is longer.

The length of your hair will determine how often you get your hair cut. If you are male, or a female with a very short hairstyle, getting your hair cut every six weeks is best in order to keep it trim and neat, while keeping it healthy as well. If you have longer hair, you can go as long as 10 weeks without a haircut, but try to get your hair cut at least every 10 weeks. This will help keep your hair strong, and if you are trying to grow your hair, will enable your hair to grow more quickly, because you will get rid of the dead, dry ends and will enable the healthy part to grow more effectively.

Dental Care

Going to the Dentist. The mouth is the area of the body most prone to collecting harmful bacteria and generating infections. In order to have and maintain good oral hygiene, it is critical to visit your dentist at least every six months. In some cases, your dentist may recommend every four months, depending on how much tartar builds up on your teeth and how often you need to have it removed. To keep your teeth free from tartar build-up and tooth decay, make sure you visit your dentist as frequently as he or she recommends. This will ensure your teeth and your mouth stay healthy and strong.

Brushing Your Teeth: Make sure you brush your teeth at least two times per day, if not after every meal. This will help minimize the amount of bacteria in your mouth which leads to tooth decay, and will help you maintain a healthy, happy smile.

Flossing Your Teeth. In addition to regular brushing, it is critical to floss your teeth at least once a day, usually before you go to bed. This will enable you to reduce plaque in the more difficult to
reach places—between teeth and at the back of your molars. Flossing also keeps your gums healthy and strong, and will help protect your mouth from a variety of diseases that could eventually cost you your teeth.

Physical Care

Cleanliness of Your Body. Taking a bath or shower once daily is very important to ensuring your body stays clean. Cleaning your body is also important to ensure your skin rejuvenates itself, as the scrubbing of your arms, legs, and torso will slough off dead, dry skin and help your skin stay healthy and refreshed.

Shaving. In most cultures, it is important to remember that shaving is a critical part of cleanliness. For men, shaving the face enables it to stay cleaner and is a more acceptable hygienic practice. For women, shaving the legs and under the arms also keeps the body cleaner, with less places for bacteria to grow.

Washing Your Face. It is important to wash your face at least once a day to remove all dirt and grime that you have come in contact with during the course of the day. This will keep your face freer from wrinkles and pimples, which are the result of clogged pores. Using some sort of moisturizer will also ensure your face stays rejuvenated and fresh.

Trimming Your Nails. Keeping your nails trimmed and in good shape is also important in maintaining good health. Going to a professional to learn proper nail care will help you get on the right track to trimming your fingernails as well as toenails. Proper trimming techniques will also help you avoid hangnails and infected nail beds.

Washing Your Hands
Before Meals. It’s important to have clean hands before you sit down to eat. Washing with hot water and soap will clean your hands so that they do not carry bacteria to your family and friends as you pass the bread!

After Restroom Use. To ensure you don’t carry fecal or other bacteria to other parts of the body or to other individuals, you will want to wash your hands after every time you use the restroom. Make sure you wash your hands immediately afterward—don’t touch your nose or mouth to avoid unnecessary illness.

Before Preparing Food. Washing your hands before you prepare food is very important to ensure you don’t spread bacteria to your food. Wash them with hot, soapy water for at least 2 minutes before you begin working with food, particularly poultry or red meat. This will keep your food free from bacteria, and will ensure your food is healthy to serve once it’s cooked!

After Preparing Food. Again, washing your hands for at least 2 minutes with hot, soapy water after you have prepared food (and before serving) will ensure you don’t carry bacteria with you, thus potentially infecting you or others.

Good hygienic habits are easy to begin and maintain. Starting with a few of these ideas will help you start on your way to developing good hygiene for both you and your family.
## LESSON PLAN # 2

### THEME: SEXUALITY AND SEXUAL HEALTH

<table>
<thead>
<tr>
<th>CONTENT STANDARD 1:</th>
<th>Demonstrate an understanding of the concept of human sexuality as an integral part of the total person that finds expression throughout the life cycle.</th>
</tr>
</thead>
<tbody>
<tr>
<td>CORE OUTCOME 1:</td>
<td>Differentiate between appropriate and inappropriate forms of touching and identify feelings associated with appropriate and inappropriate touching. Demonstrate the use of relevant skills to avoid bad touches</td>
</tr>
</tbody>
</table>

### Title
- **Good Touch bad touch**
- HFLE Curriculum Pgs. 42 & 43 (2.5)

### Class
- Infant 2

### Time
- 30 – 35 minutes

### Purpose
- To help students differentiate between good and bad touches and to provide them with basic skills to avoid sexual abuse.

### Overview (Include Concepts)
*In this lesson students will be discussing touches and feelings they get from touches. They will identify good touches and bad touches and they will practice different ways to refuse bad touches.*

### Specific Objectives
- Students will be able to:
  4. Identify various types of touches and feelings associated with touches.
  5. Use critical thinking skills to differentiate between good touches and bad touches.
  6. Apply assertiveness skills to refuse bad touches.

### Resources and Materials
- Teacher resource information sheet, pictures of good and bad touches, scenarios describing good and bad touches from the teacher resource section.

### Methods and Strategies
- Role playing, discussion, individual worksheets

### PROCEDURE

**Step I**

**Introduction: Feelings**
- Explain to children that in today’s lesson they will learn about touches and feelings. Tell students that you will show some cards with feelings and you want...
### Step II
#### Skill development and reinforcement:

**Touches and feelings**

Invite two members of the class to come forward. Touch their shoulders, nose and head. Elicit from students the word touch to describe what you are doing. Explain to students that there are many types of touches some can be good and some can be bad. Tell students that a good touch for you is a touch on the shoulder or on the head. Share pictures of adults touching children and ask students if they think these are good touches. Why? (Both people in the pictures are happy and seem to be comfortable with the touch) Ask students to name other touches that can be pleasant. Establish that a good touch is a touch that does not hurt and does not make us feel sad, embarrassed, or afraid. Explain to students that sometimes what starts out as a good touch can end up becoming a bad touch. All touches give us feelings. Good touches make us feel happy but bad touches can make us feel sad, afraid or embarrassed. Ask students to raise their hands if they like to be tickled. Present a picture of a boy being tickled. Ask students if the boy appears to be enjoying the touch. (Yes) How can they tell? (By the look on his face) Ask class the following questions: If we like to be tickled can it be fun? Is it a good touch? (Yes) But suppose we are being tickled too long and too hard? Is it still fun? (No) Suppose it starts hurting and you are telling the person to stop and they don’t is it still fun? (No) Display a picture of a boy being tickled and not enjoying it. Ask students if they think it is a good touch. (No) How can you tell? (By the look on the boy’s face) Does he seem to be having a good time? (No)

Ask students to say who should decide if a touch is good or bad, the person giving the touch or the person being touched? (The person being touched) Ask students to imagine that the person giving the touch says it’s okay or it’s fun but they don’t like it. What kind of touch is it? (A bad touch)

Read aloud a list of scenarios to students and ask them give a thumbs up for those that describe a good touch and thumbs down for those that describe a bad touch.

---

#### Teacher Tip:

Many students are not accustomed to exploring their feelings at this age. Students may confuse feelings. It is important for teacher to spend the necessary time to clarify and help students identify feelings being described.

---

<table>
<thead>
<tr>
<th>Time</th>
<th>Activity</th>
</tr>
</thead>
<tbody>
<tr>
<td>5 min</td>
<td>Them to name those feelings. Display cards with faces depicting sad, angry, embarrassed, afraid and ashamed. Have students identify each feeling and discuss what each feeling means. Ask students to share an example of times when they may experience these feelings.</td>
</tr>
</tbody>
</table>
| **Step III Conclusion** | Ask students to imagine that someone is giving them a touch they do not like. What would they do? Have students suggest as many responses as possible. Explain to students that they have a right to say no to bad touches. They must say no in a big voice, run away and tell a grown up immediately.

Step III Conclusion

| **Assessment** | Act out several scenarios of an adult approaching children and giving them a bad touch such as tickling them under the arm, pulling their hair lightly or pinching them lightly and have students demonstrate some ways they would respond to these bad touches.

Assessment

| **Assessment** | Have students draw and colour pictures of faces that reflect feelings they get with good touches or bad touches. Have them share pictures with classmates and then display them on the classroom wall. Use rubric to establish criteria and assess students drawing based on student’s depiction of feelings.

Assessment |
Faces with emotions

Happy

Sad

Angry
| LESSON PLAN # 3  
| ---  
| THEME: SEXUALITY AND SEXUAL HEALTH  
| CONTENT STANDARD 1:  
| Demonstrate an understanding of the concept of human sexuality as an integral part of the total person that finds expression throughout the life cycle  
| CORE OUTCOME 1:  
| Differentiate between appropriate and inappropriate forms of touching and identify feelings associated with appropriate and inappropriate touching. Identify inappropriate touching of private body parts. Demonstrate the use of relevant skills to avoid bad touches.  
| Title:  
| Good Touch, Bad Touch (Part 2)  
| HFLE Curriculum pgs. 42 & 43 2.6  
| Class  
| Infant Two  
| Time  
| 30-35 minutes  
| Purpose  
| To help students develop an understanding of parts of the body that are considered private parts and to differentiate between good and bad touches as it relates to their private body parts. Students will also practice applying basic skills to avoid sexual abuse.  
| Overview (Include Concepts)  
| In this lesson students will be introduced to the proper names for their private body parts. They will identify good touches and bad touches as it relates to their private parts and practice skills to refuse bad touches.  
| Specific Objectives  
| Students will be able to:  
| 4. Identify private body parts and use the proper names to describe them.  
| 5. Use critical thinking skills to differentiate between good touches and bad touches of their private body parts.  
| 6. Apply assertiveness skills to refuse bad touches to their private body parts.  
| Resources and Materials  
| Story from resource page (STOP! Uncle Ernest!), Pictures of children in swimsuits, Pictures depicting good and bad touches from teacher resource page  
| Methods and Strategies  
| Story telling, discussion, individual worksheets  

Health and Family Life Education: Empowering Children and adolescents in Belize with the knowledge and skills for Health Living, July 2006
Adapted from HFLE Draft Teacher Training Manual, June 2006
<table>
<thead>
<tr>
<th>Procedure</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Step I Introduction</strong></td>
<td>Review the concept of good and bad touches by reading the story &quot;STOP! Uncle Ernest!&quot; from teacher resource pages to class. Ask students questions based on the story to reinforce what a good touch is, how a good touch can become a bad touch, ways they can respond to a bad touch etc.</td>
</tr>
<tr>
<td><strong>Step II</strong></td>
<td>Introduce the word private to students and have students brainstorm for the meaning of the word private. Establish that private means that it belongs to you, it is your own and it is special to you. Explain to students that we have many body parts. Have students name some. Explain that some of these body parts are private. Ask students if they can tell which body parts are private. Present a picture of a boy and a girl in a bathing suit and ask students to describe the picture. (See teacher resource pages) Explain to students that they can always remember their private body parts; they are the parts of the body that are covered by a swimming suit if they are going swimming. Elicit from students the private parts for boys (penis), for girls (breast and vagina), and for both girls and boys (bottoms).</td>
</tr>
</tbody>
</table>

**Teacher Tip:**
Many students might not be accustomed to using the proper names for their private body parts. Be sure to take enough time to explain that there are several names for their private body parts but it is best to use the proper names. Students may even be asked to give some names they have heard or that they use and the teacher can use this opportunity to have students point out the proper names for the terms regularly used. Have students practice using the proper names whenever the opportunity presents itself and eventually students will develop a level of comfort using the proper terms.

Ask students to suggest why they think these parts are called private. Establish that they are called private because they are our own, they belong to us and they are special to us.

Explain to students that it is especially important that they know when they are receiving a bad touch to their private parts. Present pictures of parents changing a child diapers and a doctor giving a child a check up (see teacher resource pages) and ask students to describe the pictures. Ask students why it appears that the parent and the doctor are touching the person's private parts. (The parent is changing the child, the doctor is giving a check up)

Explain to students that it is only okay for an adult to touch your private parts in the following situations: A parent giving a child a bath, helping them to change, or checking for infection, cuts, bruises etc. A doctor can also touch their private part if they are getting a check up.

Remind children that even though the trusted adult is allowed to touch them under those circumstances, if they feel it is a bad touch or if the adult start touching them in a way they do not like they must ask them to stop.
### Step III Conclusion

Provide students with several scenarios of good touch and bad touch of their private parts and have students identify them as good or bad touches. Explain to students that it is always good to remember the touching rule. Review the rule with class (if someone is touching you in a way that you do not like then you must ask them to stop in a big voice then run and tell someone).

### Assessment

Read the two scenarios provided in the teacher resource pages aloud to students and have students suggest how the children in the scenarios should respond based on the safety rule.

### Evaluation:

See Lesson logging form
What is sexual abuse?
Child sexual abuse includes a wide range of sexual behaviors that take place between a child and an older person. These sexual behaviors are intended to erotically arouse the older person, generally without consideration for the reactions or choices of the child and without consideration for the effects of the behavior upon the child. Behaviors that are sexually abusive often involve bodily contact, such as in the case of sexual kissing, touching, fondling of genitals, and oral, anal, or vaginal intercourse. However, behaviors may be sexually abusive even if they don’t involve contact, such as in the case of genital exposure (“flashing”), verbal pressure for sex, and sexual exploitation for purposes of prostitution or pornography.

Child sexual abuse can take place within the family, by a parent, step-parent, sibling or other relative; or outside the home, for example, by a friend, neighbor, child care person, teacher, or stranger. When sexual abuse has occurred, a child can develop a variety of distressing feelings, thoughts and behaviors.

No child is psychologically prepared to cope with repeated sexual stimulation. Even a two or three year old, who cannot know the sexual activity is wrong, will develop problems resulting from the inability to cope with the overstimulation.

The child of five or older who knows and cares for the abuser becomes trapped between affection or loyalty for the person, and the sense that the sexual activities are terribly wrong. If the child tries to break away from the sexual relationship, the abuser may threaten the child with violence or loss of love. When sexual abuse occurs within the family, the child may fear the anger, jealousy or shame of other family members, or be afraid the family will break up if the secret is told.

A child who is the victim of prolonged sexual abuse usually develops low self-esteem, a feeling of worthlessness and an abnormal or distorted view of sex. The child may become withdrawn and mistrustful of adults, and can become suicidal.

Some children who have been sexually abused have difficulty relating to others except on sexual terms. Some sexually abused children become child abusers or prostitutes, or have other serious problems when they reach adulthood.

Often there are no obvious physical signs of child sexual abuse. Some signs can only be detected on physical exam by a physician.

Sexually abused children may develop the following:

- unusual interest in or avoidance of all things of a sexual nature
- sleep problems or nightmares
- depression or withdrawal from friends or family
- seductiveness

Health and Family Life Education: Empowering Children and adolescents in Belize with the knowledge and skills for Health Living, July 2006
Adapted from HFLE Draft Teacher Training Manual, June 2006
• statements that their bodies are dirty or damaged, or fear that there is something wrong with them in the genital area
• refusal to go to school
• delinquency/conduct problems
• secretiveness
• aspects of sexual molestation in drawings, games, fantasies
• unusual aggressiveness, or
• suicidal behavior

Child sexual abusers can make the child extremely fearful of telling, and only when a special effort has helped the child to feel safe, can the child talk freely. If a child says that he or she has been molested, parents should try to remain calm and reassure the child that what happened was not their fault.

**Important information to reinforce in lessons on sexual abuse**

You can decide who can touch you, who can kiss you, or who can give you a hug. You have the right to say, "no."

**What do you do when someone touches you inappropriately?**

- Say no! Tell the person that you don’t like it and you don’t want to be touched.
- Get away fast! Run away from the person whose touch you don’t like. Never stay alone with that person ever again.
- Call for help. You can scream.
- Believe in yourself. You did nothing wrong.

If someone touches you inappropriately, tell someone you trust what has happened. Don’t let threats scare you into running away or keeping quiet.

When a person touches you and asks you to keep it a secret between the two of you, ask yourself, "Do I feel comfortable about keeping this secret? Does the secret bother me?"

Don’t keep secrets that make you feel uncomfortable. Go to a person you trust—e.g., a parent, a relative, a teacher, or your doctor. If the person you go to doesn’t believe you, go to someone else you trust until someone believes you and helps you.

Do everything you can to stay away from the threatening and intimidating person. Don’t stay alone with a person who touches you in a way that makes you uncomfortable or makes you feel unsafe.

**Good Touch**

It feels good to be hugged and kissed by the people you love. For example:

- When Mommy gives you a hug and kiss after you wake up.
- When Daddy gives you a good-night hug and kiss.
- When Grandma and Grandpa come to visit and everyone gets hugs and kisses.
Bad Touch

Touches that make you feel uncomfortable are usually bad touches. You don’t have to keep a secret when someone gives you bad touch. Don’t feel that you are bad. Whoever gives you a bad touch is the one who is bad, not you. Your body belongs to you. Nobody should touch you if you don’t want to be touched.

Do you know what a bad touch is?

- It is a bad touch if it hurts you.
- It is a bad touch if someone touches you on your body where you don’t want to be touched.
- It is a bad touch if a person touches you in a way that makes you feel uncomfortable.
- It is a bad touch if that touch makes you feel scared and nervous.
- It is a bad touch if a person forces you to touch him or her.
- It is a bad touch if a person asks you not to tell anyone.
- It is a bad touch if a person threatens to hurt you if you tell.

Unfortunately, some adults may abuse the trust you give them. The person who touches you in a way you don’t like is the person who is doing something wrong, not you. Sexual abuse is always the fault of the bigger, older, or stronger person. Do not blame yourself and don’t allow anyone to blame you.
Activities for Students

Scenarios for Lesson # 1

1. Read the list of good touches and bad touches and have students give thumbs up when they hear a good touch mentioned and thumbs down when they hear a bad touch mentioned.

   7. Your mother gives you a hug when you wake up.
   8. Your father gives you a kiss on the cheek when you go to bed.
   9. A classmate pushes you to the ground.
  10. Someone is tickling you and it hurts.
  11. Your brother pulls you by the ear and does not want to let go of your ear.
  12. The next door neighbor wants to kiss you on your lips.

2. Story for Lesson # 2: STOP! Uncle Ernest!

Stop! Uncle Ernest!

Shera is six years old. She lives with her mother in Corozal Town. Shera’s favourite uncle is Uncle Ernest. Shera likes Uncle Ernest because whenever he visits he brings her chocolate, sweets, ice cream, and cake. Shera likes to sit on Uncle Ernest’s lap and listen to Anansi stories. She laughs loudly when Uncle Ernest tells her how Brer Anansi tricks Brer Tiger. One day, as she was laughing, Uncle Ernest began to tickle her on her side. She began to laugh even louder. Then he began to tickle her under the arm. Shera wanted him to stop because it was beginning to hurt and she did not feel like laughing anymore. At first she did not want to say anything because she did not want to make Uncle Ernest mad but she remember what her teacher had said in class about a bad touch. Her teacher had told the class that if someone is touching you in a way that you do not like you should say no and ask them to stop.

So Shera said in a big voice “Stop tickling me like that Uncle Ernest. It hurts.” Uncle Ernest stopped tickling Shera. He was soory. He told Shera that he did not mean to hurt her and that he would never tickle her in that way again. Shera gave Uncle Ernest a big hug. She was happy that he listened to her when she asked him to stop.

Remember it’s your body and you have a right to tell someone no if you are getting a bad touch.

3. Scenarios for Lesson # 2

1. One evening Melissa was at home with her older brother. They were sitting on the sofa watching TV when he stretched over and gave her a hug. Melissa hugged him back but when she tried to let go he kept hugging her and he began to touch her hair. Melissa loved her brother but she did not
like the way he was touching her. If you were Melissa what would you do? If you ask him to stop in a big voice and he does not stop what should you do?

2. Jerry is six years old. One day his mother sent him to borrow some sugar from his uncle who lives close by. His uncle told him to come in and wait in the living room while he went to get the sugar. Soon his uncle came back with a chocolate and two shiny dollar coin. He told Jerry that he could have the chocolate and the two shiny dollar coins if he took off his clothes and allowed him to touch his private parts. If you were Jerry what would you do?

4. Pictures for Step both lessons # 1 and 2 attached overleaf
<table>
<thead>
<tr>
<th>STRAND: Self and interpersonal relationships</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>REGIONAL STANDARD 1:</strong></td>
</tr>
<tr>
<td><strong>CORE OUTCOME 1:</strong></td>
</tr>
</tbody>
</table>

**Title** | It's Okay to Be Different |
**Age Level** | Infant 2 |
**Time** | 25-30 minutes |
**Purpose** | To help students recognize differences and similarities in families and to learn acceptance of others |

**Overview (Include Concepts)**
In this lesson, students will learn about diversity and will develop acceptance and empathy for others.

**Specific Objectives**
At the end of this lesson, students will be able to:
- Gain knowledge by learning what the term diversity means
- Identify similarities and differences in families

**Resources and Materials**
Crayons / coloured pencils, pictures of various family types

**Methods and Strategies**
Brainstorming, group work, individual work.

**PROCEDURE**

**Step I Introduction (5 min)**
Introduce the topic of diversity by drawing attention to their differences and similarities. You can present four or five criteria statements for the class to consider and ask students to stand up in groups. Some examples of criteria statements are:
- All the 6 year olds
- Everyone wearing tennis shoes
- If you like baseball / basketball etc.
- clips or other types of hair accessories

Ask student if they can think of other differences that the criteria didn’t address. Why is it important to share these differences? What can they help us to understand about each other?
| Step II | Write the word diversity on the board and ask students if they know what it means. Jot down their responses working toward the following definition: Being different from each other.

Explain to students that the same way there is diversity in the classroom, there is diversity in families. List off the types of families that could be found in a community:
- single parent
- nuclear
- extended

Explain each one (use pictures to illustrate) Ask students what they can tell is different about each family. Let them know that there are more types families in any community (step families, foster), and that all types of families need to be treated in a good way. Not because a family is different means that they should be treated badly.

Have students get into groups. Give out samples of the types of families (two different samples for each group - samples may be repeated). Have students say which type of family is being represented in each sample picture and to say what the similarities and differences are).

Have groups share with class. Ask students how they would feel if someone stoned their house, or of their family was chased out of their house. (Add different scenarios if necessary) Discuss with students the need to be accepting.

Close lesson by highlighting the fact that diversity in families is okay and that all families should be accepted.

Assessment | Have students describe their family. They may include illustrations. |
<table>
<thead>
<tr>
<th>REGIONAL STANDARD:</th>
<th>Examine the nature of self, family, school and community in order to build strong healthy relationships</th>
</tr>
</thead>
<tbody>
<tr>
<td>CORE OUTCOME:</td>
<td>Discuss the importance of showing respect through good manners.</td>
</tr>
<tr>
<td><strong>Title</strong></td>
<td>Good Manners</td>
</tr>
<tr>
<td><strong>Age Level</strong></td>
<td>Infant 2</td>
</tr>
<tr>
<td><strong>Time</strong></td>
<td>25- 30 minutes</td>
</tr>
<tr>
<td><strong>Purpose</strong></td>
<td>To help students understand that good manners are important in showing respect.</td>
</tr>
<tr>
<td><strong>Overview</strong></td>
<td>In this lesson, students will learn that having good manners shows respect.</td>
</tr>
<tr>
<td><strong>Specific Objectives</strong></td>
<td>At the end of this lesson, students will be able to:</td>
</tr>
<tr>
<td></td>
<td>8. demonstrate good manners</td>
</tr>
<tr>
<td></td>
<td>9. differentiate between what is respectful and disrespectful</td>
</tr>
<tr>
<td><strong>Resources and Materials</strong></td>
<td>Miss Bea polite doll ( instructions for making one are included), (paper plates, markers/ crayons)</td>
</tr>
<tr>
<td><strong>Methods and Strategies</strong></td>
<td>Brainstorming, group work, individual work.</td>
</tr>
</tbody>
</table>

**PROCEDURE**

**Step I**

**Introduction**

(5 min)

Begin lesson by modeling your most appropriate manners introduce Miss Bea to each child by saying,

“Miss Bea, the is (child’s name).
(Name), this is Miss Bea Polite.

Encourage each child to respond by saying,

“It’s nice to meet you!”

**Step II**

**Making the Connection**

(5 min)

Explain that your honored guest has arrived so that your class can learn about manners. Ask volunteers to explain what they think it means to be polite and have them give examples of good manners. Tell them that good manners show that they have respect for others.

Respect is:

- being obedient
- showing admiration for someone or something
- honouring someone
**Step III Practicing**

<table>
<thead>
<tr>
<th>Time</th>
<th>Activity Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>(15 mins.)</td>
<td><em>Being disrespectful is the opposite of being respectful.</em> Have each child make a Miss Bea bee puppet. To make one, draw a smiling face on one yellow paper plate and a frowning face on a second plate. Color two craft stick black. But two small circles from black construction paper; then glue a circle to one end of each craft stick to represent antennae. To the back of one plate, tape the craft stick antennae at the top of the plate. Tape another craft stick to the bottom of the plate for a handle. Glue the backs of both plates together. When each child has made a puppet, have him use his puppet during this group time activity. <strong>This can be done in a previous lesson or during art class.</strong> Using each of following suggestion, describe a situation in which proper or improper manners were used. Direct each child to display either the happy or sad expression on his puppet to indicate if Miss Bea Polite would approve or disapprove of the behavior: 1. Beatrice Butterfly said, &quot;Pass the flowers, please&quot; 2. Gracie Grasshopper said, &quot;thank you,&quot; when she was given a treat. 3. Bobby Bumblebee bumped his brother off the beehive. 4. Arnie Ant waited his turn in line. 5. Carl Caterpillar crunched quietly. 6. Chrysy Caterpillar chatted with her mouth full. 7. Sammy Spider played with his food. 8. Christopher Cricket chirped while another cricket was chirping. 9. Casy Cricket chirped, &quot;Excuse me,&quot; before interrupting. 10. Lucy Ladybug borrowed a leaf without asking.</td>
</tr>
<tr>
<td>Conclusion</td>
<td><em>Conclude by reminding the children that Miss Bea will be using her eyes and antennae to watch and listen for good manners in your classroom. When she does indeed observe politeness, allow her to buzz a word of praise in that child’s ear.</em></td>
</tr>
<tr>
<td>Assessment</td>
<td><em>Give additional scenarios for students’ to determine whether the actions are examples of good manners which show respect.</em></td>
</tr>
</tbody>
</table>
Making a Miss Bea Polite doll

- nine inch orange foam ball
- a straw hat,
- two black pipe cleaners
- two golf-sized balls
- black and pink fabric paints.

To make Miss Bea's antennae, paint golf balls black. Fold each pipe cleaner in half and twist it. Insert one end of each pipe cleaner into a golf ball, and the other end into the top of the straw hat. Paint facial features on the foam ball. When the paint is dry, gently press the ball into the hat.
Raising Your Child to Have Good Manners

Adapted From: *Parenting For Dummies, 2nd Edition*

Don’t underestimate the importance of good manners. Your children will grow up to be kinder and more considerate of others if you teach them how to be that way when they’re young. You can do that by setting a good example. You must always say "please" and "thank you" to your kids. Even when you are saying, "Please get your bicycle off my foot," or "Thank you for the dead slug."

And don’t forget good table manners. Everyone tends to be a little too relaxed at the dinner table when it comes to proper behavior. Teach your kids what you think is acceptable and what isn’t acceptable, and then make sure that you’re consistent about the rules.

*Good manners that you can teach your children include not interrupting people while they talk and not shoving their way in front of others to always be first, two things that kids are infamous for doing.*

*Other manners you can teach your children include how to:*

- Write thank-you notes
- Make get-well cards for sick relatives
- Say please and thank you
- Acknowledge when someone is talking
- Say good-bye to someone who is leaving
- Share cookies with a friend

A growing problem in schools is the lack of good manners from children. Children don’t treat teachers, staff, or classmates with respect.
### STRAND: Self and interpersonal relationships

<table>
<thead>
<tr>
<th>REGIONAL STANDARD 1:</th>
<th>Examine the nature of self, family, school and community in order to build strong, healthy relationships</th>
</tr>
</thead>
<tbody>
<tr>
<td>CORE OUTCOME 1:</td>
<td>Identify and demonstrate appropriate ways to resolve conflicts with friends.</td>
</tr>
</tbody>
</table>

**Title**

**Getting Along**

**Age Level**

Infant II

**Time**

25-30 minutes

**Purpose**

To help students to learn how to resolve conflicts that occur among friends.

**Overview (Include Concepts)**

In this lesson, students will discuss conflict and a three step method to dealing with conflict. They will also act out a poem that is about conflict between friends.

**Specific Objectives**

At the end of this lesson, students will be able to:

4. explain what conflict is
5. explain the three step method for conflict resolution

**Resources and Materials**

Student handouts - “Getting Along”

**Methods and Strategies**

Brainstorming; individual work, class sharing

**PROCEDURE**

**Step I Introduction (5 min)**

Ask students if they have ever had an argument with a friend. Ask them to explain what it was they were fighting about - for each time there is an example, write the word conflict on the board. (Use different lettering for size and shape). Ask students if they were able to become friends again.

**Teacher Tip:**

This is a brainstorming activity, so it is important to gather many answers in a short amount of time. Although a number of students may want to provide answers to your question, this exercise should last only 5 minutes. You may not be able to get answers from all the students. Tell students after 5 minutes that they will have many other opportunities to provide answers. Also, give students positive feedback on their answers.
<table>
<thead>
<tr>
<th>Step II</th>
<th>Making the Connection (10 min)</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Ask students why the word conflict was written on the board each time an example was given. After a few responses, explain that all their stories were examples of conflict happens all the time, even among friends and family, but there are ways to dealing with it. Also, that it should never be allowed to cause friends from not being friends anymore. Conflict resolution is what is done to ensure that people don’t stay angry at each other forever. Explain that there are ways to deal with conflict. (Have prepared on a chart) One method has three steps:</td>
</tr>
<tr>
<td></td>
<td><strong>Step 1: COOL DOWN.</strong> Cooling down before trying to solve a problem. Methods for cooling down include taking deep breaths, counting backward, and taking a walk. Emphasize that cooling down doesn’t mean you’re giving up your point of view. <strong>Step 2: TALK ABOUT IT</strong> - talking about feelings - after you’ve cooled down, they can tell the other person how they felt and how what they did made them feel. <strong>Step 3: FIND SOLUTIONS</strong> - finding solutions - students can talk about what can be done to make sure that they are friends again.</td>
</tr>
<tr>
<td></td>
<td><strong>Step III Practicing (20 mins.)</strong></td>
</tr>
<tr>
<td></td>
<td>Use the poem “Getting Along” as a mini-play that can be acted out by two children. After the first poem is done ask students about what they saw. Then read the second poem and have students explain what steps of the conflict resolution took place. Have prepared “Conflict Cards” describing a problem between two children and place them facedown in a stack. Have partners choose a card and then brainstorm solutions to the conflict. Ask them to share their ideas with the class. (Conflicts may include: cutting in line, damaging someone’s work or property inside or outside the room, refusing to share, tripping someone by mistake, and leaving out someone in a social situation.)</td>
</tr>
<tr>
<td></td>
<td><strong>Step IV Conclusion (5 mins.)</strong></td>
</tr>
<tr>
<td></td>
<td>Summarize the lesson by reminding students that conflict is a part of life, but that there are ways to deal with it. It is important that it is resolved so that everyone can be happy.</td>
</tr>
<tr>
<td></td>
<td><strong>Assessment</strong></td>
</tr>
<tr>
<td></td>
<td>Have students list the three steps to conflict resolution. Ask them to say why the steps are important.</td>
</tr>
<tr>
<td></td>
<td>HOMEWORK</td>
</tr>
<tr>
<td></td>
<td>Have students share with their parents the three steps, and ask them if they would use it in their own lives.</td>
</tr>
</tbody>
</table>
GETTING ALONG

Part 1: The Problem

I’m very mad at Johnny Trout. I want to hit and scream and shout. But if I let myself cool down, then maybe we can work it out.
GETTING ALONG

Part 2: Working It Out

You wrecked my nice, big castle when you just came running by.
I worked so hard to build it – it used to be this high

I didn’t mean to do it
And you called me nasty names.
But I could build it up again and make it look the same

And I could say
I’m sorry that I called you all those names!
STANDARD ONE LESSON PLANS
# LESSON PLAN # 1

## THEME: SEXUALITY AND SEXUAL HEALTH

<table>
<thead>
<tr>
<th>CONTENT STANDARD:</th>
<th>Develop action competencies to reduce vulnerability to priority problems including sexual abuse, HIV/AIDS, cervical cancer</th>
</tr>
</thead>
<tbody>
<tr>
<td>LEARNING OUTCOME:</td>
<td>Determine the signs, methods and consequences of various types of sexual abuse</td>
</tr>
</tbody>
</table>

### Title

Different types of sexual abuse  
HFLE Curriculum pgs. 72 & 73 (2.1)

### Class

Standard one

### Time

40 - 45 minutes

### Purpose

To help students understand the various forms of sexual abuse

### Overview (Include Concepts)

Students will engage in discussions, brainstorming activities and scenarios to identify the various forms of sexual abuse and to identify and discuss some ways to prevent sexual abuse

### Specific Objectives

Students will be able to:

1. Explain what is meant by the term sexual abuse
2. Discuss various forms of sexual abuse
3. Identify situations related to various forms of sexual abuse
4. Identify sources of support for sexual abuse

### Resources and Materials

Teacher resource information on abuse, flash cards with various types of touches, Story "Meagan and the Shop Keeper", scenarios for group work.

### Methods and Strategies

Discussion, group work, scenarios, brainstorming, story telling

### PROCEDURE

**Step 1 Introduction:**

Post the following titles on the wall: Good Touch, Bad Touch, Confusing Touch  
Distribute the touchy situation cards (one per child) or have students take a card from a pile. Have students place each card under the title that best fits the touchy situation outlined. As a class discuss the card placements and make the necessary changes. Be sure to emphasize that appropriate touch depends on the student's feelings and that it can depend on the situation whether the touch is inappropriate or not. Bad touch is anything that makes you feel uncomfortable immediately or eventually.

### Teacher Tip:

At this time it is not necessary to name the various forms of abuse. It is more important for students to establish an understanding of the concept of abuse and the various forms it may take.
### Step II
**Skill development and reinforcement:**

- Place the term "abuse" on the chalkboard. Ask students to brainstorm for ideas that come to mind when they think of the term abuse. Have students share their ideas. Define the term abuse for students and explain to students that there are many forms of abuse. Provide some examples of various forms of abuse (physical abuse, emotional abuse, neglect and sexual abuse). See teacher resource page. Share a story of Meagan and the Shop Keeper with class (see teacher resource page). Ask students to describe what happened in the story. Have students share their feelings about the man, the girl, the girl's teacher. Ask students to suggest some possible reasons why Mr. Jones invited Meagan into his house.
- Place the term sexual abuse on chalkboard and explain the concept of sexual abuse using the story as a basis for explanation.

### Step III
**Conclusion**

- Emphasize to students that sexual abuse is a very common occurrence at this time. Ask students to suggest what they would do if they were in the situation mentioned in the story.
- Ask students to recall some of the bad touches that were mentioned in the previous activity. Guide students in a discussion on responding appropriately to bad touches by asking the following question: what would you do if a person touched you in a bad or confusing way? (tell the person that you do not like it, leave the situation, try to avoid being with the person, speak to an adult you trust, keep telling until you get help)

### Assessment

- Place students in groups and provide each group with a scenario describing a potentially dangerous situation involving an adult and a child. If students cannot read independently, read the scenario for each group. Have students discuss in their group how they would respond if they were in the situation. Have groups share responses with class.

### Evaluation

See Lesson Logging Form
Teacher Resource Page

Lesson # 1

Child abuse is both shocking and commonplace. Child abusers inflict physical, sexual, and emotional trauma on defenseless children every day. The scars can be deep and long-lasting. Unfortunately, the more subtle forms of child abuse such as neglect and emotional abuse can be just as traumatizing as violent physical abuse. Focused support can help both the victims of child abuse and the child abusers themselves.

What is the definition of child abuse?

Child abuse consists of any act or failure to act that endangers a child’s physical or emotional health and development. A person caring for a child is abusive if he or she fails to nurture the child, physically injures the child, or relates sexually to the child.

What are the types of child abuse?

The four major types of child abuse are:

- Physical abuse
- Sexual abuse
- Emotional abuse
- Neglect

Another type of abuse is child exploitation (distinct from sexual exploitation). This is the use of a child in work or other activities for the benefit of others. Child labor is an example of child exploitation for commercial reasons. Using a child in this way detracts from their own physical, mental, and social development.

What is physical abuse?

Physical abuse is any non-accidental physical injury to a child. Even if the parent or caretaker who inflicts the injury might not have intended to hurt the child, the injury is not considered an accident if the caretaker’s actions were intentional. This injury may be the result of any assault on a child’s body, such as:

- beating, whipping, paddling, punching, slapping, or hitting
- pushing, shoving, shaking, kicking or throwing
- pinching, biting, choking, or hair-pulling
- burning with cigarettes, scalding water, or other hot objects.
- severe physical punishment that is inappropriate to child’s age.

Corporal (physical) punishment is distinguished from physical abuse in that physical punishment is the use of physical force with the intent of inflicting bodily pain, but not injury, for the purpose of correction or control. Physical abuse is an injury that results from physical aggression. However,
physical punishment easily gets out of control and can become physical abuse. In many families, physical punishment is the norm.

Hundreds of children are physically abused each year by someone close to them, and many children die from the injuries. For those who survive, the emotional scars are deeper than the physical scars.

**What is sexual abuse?**

Sexual abuse of a child is any sexual act between an adult and a child. This includes:

- fondling, touching, or kissing a child’s genitals
- making the child fondle the adult’s genitals
- penetration, intercourse, incest, rape, oral sex or sodomy
- exposing the child to adult sexuality in other forms (showing sex organs to a child, forced observation of sexual acts, showing pornographic material, telling “dirty” stories, group sex including a child)
- other privacy violations (forcing the child to undress, spying on a child in the bathroom or bedroom)
- sexual exploitation
- enticing children to pornographic sites or material on the Internet
- luring children through the Internet to meet for sexual liaisons
- exposing children to pornographic movies or magazines
- child prostitution
- using a child in the production of pornography, such as a film or magazine

The above acts are considered child abuse when they are committed by a relative or by a caretaker, such as a parent, babysitter, or daycare provider, whether inside the home or apart from the home. (If a stranger commits the act, it is called sexual assault.)

The legal age of consent for two people to have sexual relations in Belize is sixteen. It is against the law to have sex with a person younger than the legal age of consent. Even if the two parties agree to the sexual relationship, it is still against the law. The laws of Belize are very specific as to its laws about sex with minors.

Sexual abuse is especially complicated because of the power differential between the adult and child, because of the negotiations that must occur between adult and child, and because the child has no way to assimilate the experience into a mature understanding of intimacy. Regardless of the child’s behavior or reactions, it is the responsibility of the adult not to engage in sexual acts with children. Sexual abuse is never the child’s fault.

Sexual abusers can be:

- parents, siblings, or other relatives
- childcare professionals
- clergy, teachers, or athletic coaches
- neighbors or friends
• strangers

What is emotional abuse?

Emotional abuse is any attitude, behavior, or failure to act on the part of the caregiver that interferes with a child’s mental health or social development.

Other names for emotional abuse are:

• verbal abuse
• mental abuse
• psychological maltreatment or abuse

Emotional abuse can range from a simple verbal insult to an extreme form of punishment. The following are examples of emotional abuse:

• ignoring, withdrawal of attention, or rejection
• lack of physical affection such as hugs
• lack of praise, positive reinforcement, or saying "I love you"
• yelling or screaming
• threatening or frightening
• negative comparisons to others
• belittling; telling the child he or she is "no good," "worthless," "bad," or "a mistake"
• using derogatory terms to describe the child, name-calling
• shaming or humiliating
• habitual scapegoating or blaming
• using extreme or bizarre forms of punishment, such as confinement to a closet or dark room, tying to a chair for long periods of time, or terrorizing a child
• parental child abduction

Emotional abuse is almost always present when another form of abuse is found. Some overlap exists between the definitions of emotional abuse and emotional neglect; regardless, they are both child abuse.

Emotional abuse of children can come from adults or from other children:

• parents or caregivers
• teachers or athletic coaches
• siblings
• bullies at school
• middle- and high-school girls in social cliques

What is neglect?

Neglect is a failure to provide for the child’s basic needs. The types of neglect are:

• physical
- educational
- emotional

Physical neglect

Physical neglect is not providing for a child’s physical needs, including:

- inadequate provision of food, housing, or clothing appropriate for season or weather
- lack of supervision
- expulsion from the home or refusal to allow a runaway to return home
- abandonment
- denial or delay of medical care
- inadequate hygiene

Educational neglect

Educational neglect is the failure to enroll a child of mandatory school age in school or to provide necessary special education. This includes allowing excessive truancies from school.

Emotional (psychological) neglect

Emotional neglect is a lack of emotional support and love, such as:

- not attending to the child’s needs, including need for affection
- failure to provide necessary psychological care
- domestic violence in the child’s presence, such as spousal or partner abuse
- drug and alcohol abuse in the presence of the child, or allowing the child to participate in drug and alcohol use

When authorities examine emotional neglect, they take into consideration cultural values and standards of care, as well as the level of family income, which may interfere with proper care.

Some overlap exists between the definitions of emotional abuse and emotional neglect; regardless, they are both child abuse.

What are the signs and symptoms of child abuse?

If you suspect child abuse, but aren’t sure, look for clusters of the following physical and behavioral signs.

Some signs of physical abuse

- Unexplained burns, cuts, bruises, or welts in the shape of an object
- Bite marks
- Anti-social behavior

Health and Family Life Education: Empowering Children and adolescents in Belize with the knowledge and skills for Health Living, July 2006
Adapted from HFLE Draft Teacher Training Manual, June 2006
• Problems in school
• Fear of adults
• Drug or alcohol abuse
• Self-destructive or suicidal behavior
• Depression or poor self-image

Some signs of emotional abuse

• Apathy
• Depression
• Hostility
• Lack of concentration
• Eating disorders

Some signs of sexual abuse

• Inappropriate interest in or knowledge of sexual acts
• Seductiveness
• Avoidance of things related to sexuality, or rejection of own genitals or bodies
• Nightmares and bed wetting
• Drastic changes in appetite
• Over compliance or excessive aggression
• Fear of a particular person or family member
• Withdrawal, secretiveness, or depression
• Suicidal behavior
• Eating disorders
• Self-injury

Sometimes there are no obvious physical signs of sexual abuse, and a physician must examine the child to confirm the abuse.

Some signs of neglect

• Unsuitable clothing for weather
• Being dirty
• Extreme hunger
• Apparent lack of supervision

What are the causes of child abuse?

Why would someone abuse a child? What kind of person abuses a child? Not all abuse is deliberate or intended. Several factors in a person’s life may combine to move them toward abusing a child:

• general stress
• the stress of having children in the family, when one didn’t have children before
• dealing with a child who has a disability or difficult behaviors
• the stress of caring for someone besides oneself
• a personal history of being abused (childhood trauma)
• alcohol or drug use
• marital conflict
• unemployment

No one has been able to predict which of these factors will cause someone to abuse a child. A significant factor is that abuse tends to be intergenerational - those who were abused as children are more likely to repeat the act when they become parents or caretakers.

In addition, many forms of abuse arise from ignorance, isolation, or benign neglect. Sometimes a cultural tradition leads to abuse, for example, such beliefs as:

• children are property
• parents (especially males) have the right to control their children in any way they wish
• children need to be toughened up to face the hardships of life
• girls need to be genitally mutilated to assure virginity and later marriage.

What are the results of child abuse?

Child abuse can have the following dire consequences:

• Your child may become someone who lies, resents, fears, and retaliates, rather than loves, trusts, and listens.
• Your child may become reclusive, and alienated from you and from the rest of your family.
• Your child will have low self-esteem, and is likely to engage in self-destructive behaviors.
• Your child’s psychological development and social behavior will be impaired.
• As an adult, your child may abuse his or her own children, who are your grandchildren.
• As an adult, your child may exclude you, including from celebrations and family gatherings. You may not be permitted to spend time with your grandchildren.

The results of being abused as a child vary according to the severity of the abuse and the surrounding environment of the child. If the social environment of the family or school is nurturing and supportive, the child will probably have a better outcome.

Results of physical abuse

Physical abuse may result in:

• difficulty establishing intimate personal relationships
• difficulty in adulthood with physical closeness, touching, intimacy, or trust
• high levels of anxiety, depression, substance abuse, medical illness, or problems at school or work
• becoming an abusive parent or caregiver

Results of emotional abuse

Emotional abuse can result in serious behavioral, cognitive, emotional, or mental disorders.

Health and Family Life Education: Empowering Children and adolescents in Belize with the knowledge and skills for Health Living, July 2006
Adapted from HFLE Draft Teacher Training Manual, June 2006
Results of sexual abuse

Some results of prolonged sexual abuse are:

- low self-esteem
- a feeling of worthlessness
- an abnormal or distorted view of sex
- personality disorders
- difficulty relating to others except on sexual terms
- tendency to become child abusers or prostitutes
- other serious problems in adulthood
Teacher Resource Page
Lesson # 1

Scenarios for flash cards
Touchy Situations

A friend of the opposite sex hugs you

Your teacher gives you a kiss for doing a good job

A family friend shakes your hand

Your grandmother kisses you “hello”

Your uncle asks you to sit on his lap at a family gathering

Your mother’s boyfriend holds your hand

Your teacher rubs your leg during homework help

Your mother pats you on the behind
Your older brother tickles you
Your doctor examines you when you are completely undressed

A family friend pats your head

A family friend touches your breast

Your best friend sleeps in the same bed as you during a sleepover

Your friend links arms with you

Your mom hugs you

The shopkeeper rubs his hand through your hair when you go to buy sweets.

Your brother’s friend kisses you on the lips
Lesson # 1

Story:

Meagan and the Shopkeeper

Meagan is eight years old. She attends Mayflower Primary School. Meagan likes to go to school. She likes her teacher, Mrs. Brown, who is very kind. Meagan’s best friend is Amber. She sits besides Amber in class. Every evening, when school is over, Meagan and Amber walk home together. They usually stop at Mr. Jones shop to buy chips and biscuits to eat on the way home. They share the chips and biscuits with each other.

One day Amber was sick and she did not come to school. Meagan walked home alone. When she stopped to buy chips and biscuit at Mr. Jones's shop, he asked her where her friend was. “She is sick today.” said Meagan. “So you are all alone?” asked Mr. Jones.

“Yes” Meagan said.

Then Mr. Jones told Meagan to come inside the shop and pick put her own chips and biscuit. While Meagan was inside picking out the chips and biscuit, Mr. Jones touched her on her hand and asked her to come inside the house with her.

Meagan was very sacred. She remembered what her teacher had taught her about bad touches. “I will not come inside your house” Meagan said. She ran outside the shop and back to school to tell the teacher what had happened. The teacher was happy. She told Meagan that she did the right thing by running away and telling an adult who could help.

The teacher told the principal and the principal told all the students the next day that they should not visit Mr. Jones shop alone because it was not a safe place.
<table>
<thead>
<tr>
<th>LESSON PLAN # 2</th>
</tr>
</thead>
<tbody>
<tr>
<td>THEME: SEXUALITY AND SEXUAL HEALTH</td>
</tr>
</tbody>
</table>

| CONTENT STANDARD 5: | Develop an understanding of the concept of human sexuality as an integral part of the total person that finds expression throughout the life cycle Analyze the influence of socio-cultural and economic factors as well as a person's beliefs on expression of sexuality and sexual choices. |
| LEARNING OUTCOME | Explore personal experiences, attitudes and feelings about roles that boys and girls are expected to play |

<table>
<thead>
<tr>
<th>Title:</th>
<th>Gender: How girls and boys are socialized</th>
</tr>
</thead>
<tbody>
<tr>
<td>Class</td>
<td>Standard One</td>
</tr>
<tr>
<td>Time</td>
<td>40- 45 minutes</td>
</tr>
<tr>
<td>Purpose</td>
<td>To explore and challenge socialization processes for boys and girls</td>
</tr>
</tbody>
</table>

| Overview (Include Concepts) | In this lesson students will use critical thinking skills to identify and discuss societal expectations for boys and girls. Students will understand how these expectations shape and eventually determine what roles are adapted by males and females when they become adults. |

<table>
<thead>
<tr>
<th>Specific Objectives</th>
<th>Students will be able to:</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>1. Identify traditional roles for boys and girls</td>
</tr>
<tr>
<td></td>
<td>2. Discuss some roles that can be performed by both gender</td>
</tr>
<tr>
<td></td>
<td>3. Explore attitudes/discomforts in performing non traditional roles</td>
</tr>
</tbody>
</table>

| Resources and Materials | Discussions, scenarios, group worksheets |

| Methods and Strategies | |

| PROCEDURE |
| Step I Introduction | Place a collage of pictures depicting boys and girls engaged in various activities (playing, school work, house chores etc.) Ask students to describe what they see in the picture. Explain to students that boys and girls are usually brought up differently. They are brought up to think differently and do different activities. Ask students if they think that there are some things that boys or girls can't or shouldn't do. Have them name some if they say yes. Place three large circles constructed from Bristol board on the chalkboard or draw three large circles on the board. Label one circle boys, one circle girls and the other circle both girls and boys. Provide students with flash cards listing a number of activities that boys, girls, or both gender traditionally engage in. Have students place their flash cards in the appropriate circle. |

| |

Health and Family Life Education: Empowering Children and adolescents in Belize with the knowledge and skills for Health Living, July 2006

Adapted from HFLE Draft Teacher Training Manual, June 2006
| Step II  
Skill development and reinforcement | Explain to students that most of our ideas are based on the way we are socialized (brought up). However, it is important to understand that there are several roles that both boys and girls can play. (Use the chart on chalkboard to illustrate this point). Have students think of some other things that both genders can do.  
**Activity: I wouldn't do that!**  
Place all the activities that students said were activities for boys under the label "girls" and all the activities that students said were for girls under the label "boys". Ask the boys to read the list of activities now under their column and say which activity they would feel comfortable doing and which activity they would not do. Have students suggest why. Do the same for girls. |
|---|---|
| Step III  
Conclusion | Read scenario from resource page "let's all play together" and ask students to answer the following questions.  
1. Why did the boys tease Jose?  
2. How did Jose feel when he was teased?  
3. What did Jose say to them?  
4. Is it okay for Jose to play with dolls? |
| Assessment | Divide students into groups. Provide each group with a scenario describing a person engaged in an activity (cleaning the house, driving the car, playing football, taking the children to church, etc.). Have students read the scenarios and decide whether the scenario is depicting a male or female. Ask them to justify their answer. |
| Evaluation: | See Lesson logging form |
Teacher Resource Page

Lesson # 2

One of the key questions a teacher needs to ask is what the distinction between sex and gender is. This question often poses some difficulty since there are those who believe there is no difference. The fact is, however, that 'sex' and 'gender' refers to two entirely different concepts and it is important that teachers know how to differentiate one from the other.

**SEX:** the biological features e.g. hormones, chromosomes, anatomy, physiology, which determine whether a person is male or female.

**GENDER:** has a social and psychological connotation. It represents the behaviours and attitudes associated with being male or female. These behaviours and attitudes are learned through a thorough process of socialization.

<table>
<thead>
<tr>
<th>SEX</th>
<th>GENDER</th>
</tr>
</thead>
<tbody>
<tr>
<td>universal</td>
<td>differs within/between cultures</td>
</tr>
<tr>
<td>biologically determined</td>
<td>socially constructed</td>
</tr>
<tr>
<td>permanent</td>
<td>dynamic, changes over time</td>
</tr>
<tr>
<td></td>
<td>influenced by a wide range of factors</td>
</tr>
</tbody>
</table>

From these definitions you are able to see that sex is a biological characteristic that is determined when the human fetus is conceived and is evident at birth. The child is either male or female. A person's sex is therefore natural and fixed for life. Gender, on the other hand, refers to differences between men and women that are learned. In any given society, different roles and responsibilities take on different meaning so different attitudes, behaviors and assumptions arise about what it means to be a boy, woman or man.

Many attitudes and behaviours, which shape our choices are linked to assumptions that male and females are born to perform different roles and with different abilities. For example, society historically has assigned and identified the female with the role of nurturing/caring for the family. The male, on the other hand, is ascribed the role of provider, and is associated with occupations that give him power in society.

'To further help you to make the distinction between sex and gender look at the following statements and see if you are able to determine whether they are referring to sex or rather to gender:

1 Boys are rough, girls are soft.
2 Girls menstruate, boys do not.
3 Women give birth to babies, men don't.
4 Women breastfeed babies, men can bottle feed babies.

Health and Family Life Education: Empowering Children and adolescents in Belize with the knowledge and skills for Health Living, July 2006
Adapted from HFLE Draft Teacher Training Manual, June 2006
GENDER ROLES

Gender roles are learned and vary among cultures and often among social groups within the same culture, according to class and ethnicity. Factors such as education, technology, economics, and sudden crises cause gender roles to change. Although gender roles limit both women and men, they generally have had a more repressive impact on women and have restricted their participation in the development process.

Men and women have been educated for too long according to many discriminatory concepts that support a patriarchal ideology and belief that men and women are not equals because women are biologically inferior. This assumption that women are weak and will always be so is one that has caused major problems for our society. The patriarchal ideology teaches boys to be chauvinist. They are forced to assume the 'macho' role since they see few images of men showing their potentiality to be tender and loving. This ancient concept that men are superior, strong by nature and born to provide for their family and that women are born with the necessary physical characteristics that will enable them to provide care for their family, has been engraved in our Belizean society.

Boys and girls are therefore, socialized differently. This differential socialization may have implications for learning and performance in school, on the job, and in various societal roles. It is suggested that the ways in which girls are socialized causes them to develop a sense of responsibility, discipline, and a sense of process in getting things done. Such qualities, it is argued, make girls more disposed to adjusting to institutional requirements, such as those of the school. Gender roles are particularly evident in the division of labor in families. Although gender roles and responsibilities differ widely among cultures, women typically have the major responsibility for tasks in the family related to reproduction, such as child rearing and household maintenance. The gender divisions in the household are often contrasted as light work against heavy work. Hence the idea that light work is female work and that a girl should be trained to do such tasks as washing dishes, sweeping, and cleaning, hard work is associated with male work.
Lesson # 2

Story: Let's all play together

Sandy brought her beautiful new doll and tea set to school. Her aunt gave her the set for her birthday. All her friends loved the new toys that Sandy brought to school. During break time, Sandy and her friends sat under a mango tree playing with the toys. They brought snacks and shared them in the new tea set and pretended to be playing house. Jose passed by on his way from buying a snack and the girls shouted “Jose, come and play with us.”

Jose joined the girls and they all began to play house. Jose picked up the new doll and was admiring the doll. Orlando, another boy in the class passed by just as Jose picked up the doll. “Look” shouted Orlando “Jose is playing with a doll.” The other boys who were playing football stopped their game. They ran to the mango tree and started to tease Jose. They told him that only girls play with dolls so Jose must be a girl. Jose felt very ashamed at first and he hung his head. Then he remembered what the teacher had said. There is nothing wrong with boys playing with dolls or girls playing marbles or football. It was all a part of growing up and deciding what you liked.

Jose stood up tall and said to the boys “sometimes I feel like playing football but today I don’t feel like running around and getting all sweaty. I am enjoying myself playing house with the girls. You can tease me if you like but I do not care.”

The other boys looked at Jose and all the nice snacks that were in the tea set. “Let’s all play house together” said Orlando and then later the girls can play football with us.”

1. Why did the boys tease Jose?
2. How did Jose feel when he was teased?
3. What did Jose say to them?
4. Is it okay for Jose to play with dolls?
## LESSON PLAN # 3

### THEME: SEXUALITY AND SEXUAL HEALTH

| CONTENT STANDARD 3 & 4: | Build capacity to recognize the basic criteria and conditions for optimal reproductive health  
| | Develop action competence to reduce vulnerability to priority problems, including HIV/AIDS, cervical cancer, and STIs. |
| Learning Outcomes: | Distinguish between poor and proper hygiene practices  
| | Apply proper hygiene practices  
| | Identify and describe store bought and local products utilized for various grooming practices |

### Title:
“A clean and healthy me: Practicing good personal hygiene”

| Class | Standard one |
| Time | 35-40 minutes |

### Purpose
To help students develop and appreciation for good personal hygiene practices in themselves and other as well as discuss risky hygiene practices without discrimination.

### Overview (Include Concepts)
Students will engage in several participatory methods including singing and open discussion to explore common hygiene practices and to evaluate these practices as good or bad practices. Students will establish that hygiene is important because poor hygiene practices can lead to diseases and infections.

### Specific Objectives
Students will be able to:
- Define good grooming.
- Identify different parts of the body.
- Tell how common diseases are spread through poor personal hygiene practices.

### Resources and Materials
Water, soap, local alternatives to soap where available, commercial toothbrush, nail cutter, comb, toothpaste, flash cards, strips of paper, beans or seeds.

### Methods and Strategies
Singing, miming, Games, discussion

### PROCEDURE

#### Step I Introduction
Prepare a song for young children that will allow them to mime specific habits of personal hygiene. For example:
“This is the way we wash our face…we wash our face…we wash our face. This is the way we wash our face…early in the morning. This is the way we comb our hair, etc. Brush our teeth …Cut our nails,” etc. until all personal hygiene activities have been covered.

Encourage children, in open discussion, to describe their personal hygiene habits.

Teach the children to sing the first couplet of the song. Encourage the children to come up with their own examples of hygiene.

Invite children one by one to sing and mime what they have done before coming to school. Sing about and mime one practice with them and then ask them to suggest the next practice.

**Teacher Tip:**

In conducting lessons on hygiene, there is the risk of discriminating against children who are less hygienic for reasons of poverty and/or other problems at home. Quality teachers are aware of such problems and encourage and praise them for practicing good personal hygiene with simple means. They also stimulate understanding and social consciousness among the other children. The teacher discreetly helps children with specific problems instead of pointing out their negative practices publicly.

**Step II: Skill Development and Reinforcement**

After singing, stimulate a group discussion on, for example,

a) why each practice is important;

b) what you need for it;

c) What else you can use, e.g. ashes for soap; foam from certain plans for toothpaste.

Ask children to draw on paper or slates, implements used for personal hygiene. Alternatively, bring some real implements; including some used locally such ashes.

- Ask the children to form pairs and match the pictures or the implement with the parts of their body on which they will use them.
- Ask them to explain to each other how they are used and why.
<table>
<thead>
<tr>
<th>Step III: Conclusion</th>
</tr>
</thead>
</table>
| Ask children to prepare a real live demonstration of good and bad personal hygiene habits. They can use actual materials or act the habits, using mime.  
| • Ask them to give an explanation of what they show and the reasons why this is good or bad practice, or to use mime to demonstrate in silence.  
| • Ask the other children to explain what they have seen and why the practice was good or bad.  
| Put drawings of equipment or real equipment into a box or basket for younger children. Ask them to pick one in turn and explain their use and benefits.  
| As a home assignment, ask children to list which simple items of personal hygiene are present in their homes, such as a comb, soap, a nailbrush, a nail cutter, etc.  
| • In class, ask the children to give the name of the first item, write it on the board (or let the children do this) and then tally, or let them tally how many children have the item at home.  
| • Do the same with the next item, until all items have been listed.  
| • Use this information to let the children do some numerical exercises, such as counting the tallies and writing the totals in figures behind them, ordering the items from most to least present.  
| • Finally, help them analyze what the findings tell them about strengths and weaknesses of personal hygiene.  
| • Discuss where and how improvements can be made.  

<table>
<thead>
<tr>
<th>Assessment</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
</tr>
</tbody>
</table>

| Evaluation | See lesson logging form  

Lesson adapted from The Joy of Learning: Participatory Lesson Plans on hygiene, sanitation, water, health and the environment. International Water and Sanitation Centre, 2005
Lesson # 3

Good Personal Hygiene

Good hygiene is important in taking care of yourself physically as well as emotionally. People often have infections because they don’t take good care of themselves physically, which can lead to emotional difficulties as well. To avoid physical problems associated with poor hygiene, consider the following ideas to keep yourself clean:

Hair Care

Washing Your Hair. It’s so important to keep your hair clean and conditioned to ensure it stays healthy and strong. Washing your hair at least every other day is important to keeping your hair healthy and in good shape. If you wash it too frequently, your hair will become brittle and dry, making it difficult to grow and keep strong. If you wash it too infrequently, it will become greasy and will also stunt its growth.

Washing your hair too frequently also strips it of necessary nutrients required to keep it strong and healthy. Conditioning your hair is critical to keeping the nutrients within your hair intact. Use a “leave-in” conditioner every time you wash your hair. The long-lasting conditioning agents will rebuild your hair every time you use it.

Cutting Your Hair. Getting your hair cut frequently is critical to healthy hair. The longer you wait to get your hair cut, the more frail and brittle your hair can become, especially if it is longer.

The length of your hair will determine how often you get your hair cut. If you are male, or a female with a very short hairstyle, getting your hair cut every six weeks is best in order to keep it trim and neat, while keeping it healthy as well. If you have longer hair, you can go as long as 10 weeks without a haircut, but try to get your hair cut at least every 10 weeks. This will help keep your hair strong, and if you are trying to grow your hair, will enable your hair to grow more quickly, because you will get rid of the dead, dry ends and will enable the healthy part to grow more effectively.

Dental Care

Going to the Dentist. The mouth is the area of the body most prone to collecting harmful bacteria and generating infections. In order to have and maintain good oral hygiene, it is critical to visit your dentist at least every six months. In some cases, your dentist may recommend every four months, depending on how much tartar builds up on your teeth and how often you need to have it removed. To keep your teeth free from tartar build-up and tooth decay, make sure you visit your dentist as frequently as he or she recommends. This will ensure your teeth and your mouth stay healthy and strong.

Brushing Your Teeth. Make sure you brush your teeth at least two times per day, if not after every meal. This will help minimize the amount of bacteria in your mouth which leads to tooth decay, and will help you maintain a healthy, happy smile.

Flossing Your Teeth. In addition to regular brushing, it is critical to floss your teeth at least once a day, usually before you go to bed. This will enable you to reduce plaque in the more difficult to
reach places—between teeth and at the back of your molars. Flossing also keeps your gums healthy and strong, and will help protect your mouth from a variety of diseases that could eventually cost you your teeth.

Physical Care

Cleanliness of Your Body. Taking a bath or shower once daily is very important to ensuring your body stays clean. Cleaning your body is also important to ensure your skin rejuvenates itself, as the scrubbing of your arms, legs, and torso will slough off dead, dry skin and help your skin stay healthy and refreshed.

Shaving. In some cultures it is important to remember that shaving is a critical part of cleanliness. For men, shaving the face enables it to stay cleaner and is a more acceptable hygienic practice, especially for those who work in public offices. For women, shaving the legs and under the arms also keeps the body cleaner, with less places for bacteria to grow. It is important to be sensitive to student’s culture since some will belong to cultures that do not practice shaving. Explain to them that once the beard is kept clean then this is acceptable.

Washing Your Face. It is important to wash your face at least once a day to remove all dirt and grime that you have come in contact with during the course of the day. This will keep your face freer from wrinkles and pimples, which are the result of clogged pores. Using some sort of moisturizer will also ensure your face stays rejuvenated and fresh.

Trimming Your Nails. Keeping your nails trimmed and in good shape is also important in maintaining good health. Going to a professional to learn proper nail care will help you get on the right track to trimming your fingernails as well as toenails. Proper trimming techniques will also help you avoid hangnails and infected nail beds.

Washing Your Hands

Before Meals. It’s important to have clean hands before you sit down to eat. Washing with hot water and soap will clean your hands so that they do not carry bacteria to your family and friends as you pass the bread!

After Restroom Use. To ensure you don’t carry fecal or other bacteria to other parts of the body or to other individuals, you will want to wash your hands after every time you use the restroom. Make sure you wash your hands immediately afterward—don’t touch your nose or mouth to avoid unnecessary illness.

Before Preparing Food. Washing your hands before you prepare food is very important to ensure you don’t spread bacteria to your food. Wash them with hot, soapy water for at least 2 minutes before you begin working with food, particularly poultry or red meat. This will keep your food free from bacteria, and will ensure your food is healthy to serve once it’s cooked!

After Preparing Food. Again, washing your hands for at least 2 minutes with hot, soapy water after you have prepared food (and before serving) will ensure you don’t carry bacteria with you, thus potentially infecting you or others.
Good hygienic habits are easy to begin and maintain. Starting with a few of these ideas will help you start on your way to developing good hygiene for both you and your family.
### STRAND: Self and interpersonal relationships

<table>
<thead>
<tr>
<th>REGIONAL STANDARD 1:</th>
<th>Examine the nature of self, family, school and community in order to build strong, healthy relationships</th>
</tr>
</thead>
<tbody>
<tr>
<td>CORE OUTCOME 1:</td>
<td>Identify and describe special skills and abilities.</td>
</tr>
</tbody>
</table>

### Title

Opening Our Treasure Chest of Talents

### Age Level

Standard I

### Time

25-30 minutes

### Purpose

To increase students' awareness of their unique skills and talents.

### Overview (Include Concepts)

In this lesson, students will develop a word cluster for "skills and talents". They will interview a partner to discover his/her skills or talents.

### Specific Objectives

At the end of this lesson, students will be able to:

6. define "skill" and "talent"
7. name some of his or her own skills and talents and those of others

### Resources and Materials

Student handouts

### Methods and Strategies

Brainstorming; individual work, class sharing

### PROCEDURE

#### Step 1

**Introduction (5 min)**

Write the words "skill" and "talents" on the board or on shop paper and ask students to think of some examples of these. Encourage a wide range of responses and record them as a word cluster. Eg:

```
SKILLS AND TALENTS
```

- Making good decisions
- Being a good friend
- Drawing
- Singing
Teacher Tip:
This is a brainstorming activity, so it is important to gather many answers in a short amount of time. Although a number of students may want to provide answers to your question, **this exercise should last only 5 minutes**. You may not be able to get answers from all the students. Tell students after 5 minutes that they will have many other opportunities to provide answers. Also, give students positive feedback on their answers.

Step II
Making the Connection (10 min)

1. Explain that skills and talents describe things we do well. Talents are potential abilities we’re born with – such as having a beautiful singing voice or being able to run fast. A skill is something we learn to do, such as write a story, read a map or make a wise decision. Both talents and skills require study and practice. Some talented people never develop their abilities because they may not be interested in their talent or they don’t have the opportunity. Many other people develop their skills and music schools, theatre groups such as athletic organizations, music schools, theatre, or writing clubs.

2. Tell the class about something you do especially well. If possible, bring in pictures or examples of your skill or talent, such as something you’ve made. (Your talent or skill might also be something less concrete, such as the ability to make friends easily or to be a good listener). Explain how you have developed you skill or talent and how you use it. Emphasize that developing skills and talents is a process that takes time and practice.

3. Ask students to think about the skills and talents of people they know or people they have read or heard about. Add these to the cluster.

Step III
Practicing (20 mins.)

Place students in pairs. Give everyone a copy of the Skill and Talent Interview Form. Have them take turns interviewing each other by asking the questions on the sheet. They don’t have to write the answers in complete sentences - a few words will do. They will the only ones reading the information they write. Tell the students to keep their interview forms.

Ask the partners to take turns telling each other:
- Something they learned about their partners that they didn’t know before
- Something their partners said that was interesting to them
- Something else they’d like to know about their partners’ skills or talents.
| Step IV Conclusion (5 mins.) | Ask the class:  
- What did you think about today's activity? (call on volunteers)  
- Can you think of a way the information you learned today might be useful? Raise your hand if you have an idea. |
<table>
<thead>
<tr>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>Assessment</td>
<td>Give students the &quot;Do you agree?&quot; Handout. Ask students to explain their responses.</td>
</tr>
<tr>
<td>HOMEWORK</td>
<td>Have students each bring in small boxes (such as shoe boxes) and decorate the insides with drawings and pictures that tell something about their talents and qualities. Then have them make shapes from scraps of fabric, string, and other material that symbolize their talents. They can glue these shapes into their boxes. Stack the boxes so their insides show to make a giant class “Talent Treasure Box”</td>
</tr>
</tbody>
</table>
| Evaluation                  | 1. Was the lesson effective?  
2. Was the activity effective?  
3. What modifications/ follow up need to be done? |
Skill and Talent Interview Form

Partner’s Name: ________________________________________________

Interviewer’s Name: ____________________________________________

Questions to ask:

1. What talent or skill do you have?
   __________________________________________________________
   __________________________________________________________
   __________________________________________________________

2. How did you learn this?
   __________________________________________________________
   __________________________________________________________
   __________________________________________________________

3. How does this skill or talent help you? How does it help other people?
   __________________________________________________________
   __________________________________________________________
   __________________________________________________________
   __________________________________________________________
   __________________________________________________________
Do you Agree? Why?

1. Everyone has talents and skills
2. Anyone can become a great musician or artist or dancer if he or she tries hard enough.
3. Most talents and skills take time and practice to develop.
4. Talents and skills can always be improved.
5. People learning a new skill are likely to make a lot of mistakes.
6. As you get older, you seldom develop new talents or skills.
7. You have to be willing to try in order to develop a talent or skill.
<table>
<thead>
<tr>
<th>STRAND: Self and interpersonal relationships</th>
</tr>
</thead>
<tbody>
<tr>
<td>REGIONAL STANDARD 1: Examine the nature of self, family, school and community in order to build strong healthy relationships</td>
</tr>
<tr>
<td>CORE OUTCOME 1: Identify and discuss common situations of conflict in the classroom. Apply conflict resolution skills in a variety of given scenarios.</td>
</tr>
</tbody>
</table>

**Title**
Resolving Conflicts in the Classroom

**Age Level**
Standard 1

**Time**
25-30 minutes

**Purpose**
To provide students with the tools to resolve conflicts in the classroom.

**Overview (Include Concepts)**
In this lesson, students will learn that when conflicts occur, there are ways to resolve them.

**Specific Objectives**
At the end of this lesson, students will be able to:
10. understand the meaning of conflict
11. demonstrate ways to solve problems

**Resources and Materials**
Chalk, puppets, handout.

**Methods and Strategies**
Brainstorming, group work, individual work.

**PROCEDURE**

**Step I Introduction (5 min)**
Using puppets, perform the following skit: The puppets are excited about a new playground slide. The puppets approach the slide together and argue about who gets to go first. End the skit as the argument gets heated.

**Step II Making the Connection (5min)**
Ask your students: What happened in the skit? How did the puppets feel about the situation? What did they want? How could this situation end? Explain that there are always solutions to conflicts, although sometimes not everyone is happy - this does not have to be the case, though, as there can be ways to make sure that both parties are satisfied with the outcome.

Try to elicit a lose-lose situation, a lose-win situation, and two win-win situations. Dramatize each and discuss.
- Lose-lose - neither person gets a satisfactory solution
- Lose-win - one person is satisfied (win), the other is not (lose)
- Win-win - both parties are satisfied with the solutions.
<table>
<thead>
<tr>
<th>Step III</th>
<th>Practicing (15 mins.)</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td><strong>Group students. Assign one example from the handout to each group. Have each group discuss the conflict and how to deal with it. Students share their information with the rest of the class. Students may role play their examples.</strong></td>
</tr>
<tr>
<td>Conclusion (5 mins.)</td>
<td>Conclude by reminding students that although conflicts arise, it is always best to resolve them.</td>
</tr>
<tr>
<td>Assessment</td>
<td>Have students write about a conflict they've had in the classroom and how they've dealt with it.</td>
</tr>
</tbody>
</table>
RESOLVE THOSE CLASSROOM CONFLICTS!

Read the situations below. What advice would you give these kids to help them solve their problems? Write your ideas on the lines below.

1. Roger, Hector and Jack are working on a class project together. They can't decide on a topic or how to divide up the work. What is one solution to this problem?

2. Edson and Juan both want to take care of the class fish for the week. Edson starts to argue with Juan. Edson says he knows more about how to care for fish than Juan does. What is one solution to this problem?

3. Elizabeth is upset because two girls in her class are calling her names. The class rules say that name-calling is not acceptable classroom behavior. What is one solution to this problem?

4. In the school hallway, Sarah accuses Lisa of spreading a rumor about her. Lisa begins to explain but Sarah walks away. What is one solution to this problem?

5. Dominique and Paul are in an afterschool club working on a mural when a bottle of paint is spilled. They start shouting and accusing each other of causing the spill. What is one solution to this problem?

6. Josh pushes Denise as they are leaving school. He says she pushed him earlier in the day. What is one solution to this problem?

BONUS: How do you think kids should treat each other in school? Write your ideas on the back of this page.
<table>
<thead>
<tr>
<th><strong>STRAND:</strong> Self and interpersonal relationships</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>REGIONAL STANDARD 1:</strong></td>
</tr>
<tr>
<td><strong>CORE OUTCOME 1:</strong></td>
</tr>
</tbody>
</table>

**Title**  
Respecting the Property of Others

**Age Level**  
Standard 1

**Time**  
25-30 minutes

**Purpose**  
To help students understand the need to respect other's property.

**Overview (Include Concepts)**  
In this lesson, students will discuss what it means to respect property, and to highlight the fact that damaging others' property by accident can be just as disrespectful.

**Specific Objectives**  
At the end of this lesson, students will be able to:
12. understand that people's property needs to be respected  
13. acknowledge that the use of property involves responsibility

**Resources and Materials**  
Story which speaks to damage done to property. Teacher made thermometer, questionnaire

**Methods and Strategies**  
Brainstorming, group work, individual work.

**PROCEDURE**

**Step I**  
**Introduction**  
(5 min)

Introduce lesson by reading the story _________  
Discuss story. Have children identify the personal property damaged in the story. Were there consequences as a result of damaged property? What could have happened to those characters that damaged the property?

**Step II**  
**Making the Connection**  
(5 min)

Have students brainstorm the names of objects in the classroom or on school grounds that belong to themselves, classmates, teacher, and school (everybody).

Discuss the following questions: Does damage done to property "by accident" or "on purpose" make a difference? Does it make a difference on who damages the property? Personal property damaged by owner? Personal property damaged by another individual? Public (school or community) property damaged by individual(s)?
| Step III | Practicing (15 mins.) | With each child or pair of children having access to a teacher-made thermometer, students will listen to scenarios read by the teacher and rank the severity of the situation. 0 degrees, with no red showing indicates not very severe (not very bad) and 100 degrees (all-red showing) indicates very severe (very bad). |
| Conclusion (5 mins.) | Students will summarize main ideas of ownership of property and respect and responsibility towards property by answering key questions asked by the teacher. |
| Assessment | Students’ understanding will be evaluated throughout the lesson by teacher’s observations during the brainstorming and question and answer (discussion) period. Observation of the ranking students give will also indicate students’ feelings and understanding. |
INSTRUCTIONS FOR CONSTRUCTING THERMOMETERS

These hand-made thermometers are great teaching tools for any value or scale ranking activity as well as a mathematics tool.

MATERIALS:

Poster board
Red permanent marker
Black permanent marker
Bias tape or seam binding tape
Glue

PROCEDURE:

1. Cut poster board into 4" x 18" size.

2. Cut bias tape or seam binding tape into 33" length.

3. Darken 16" of bias or seam binding tape with red permanent marker.

4. Make 2 holes with hole punch approximately 1" from each end of poster board.

5. Thread bias or seam binding tape through holes making sure it lies flat.

6. Glue ends of bias or binding tape together.

7. With black marker, write multiples of 10 to 100 (beginning with zero) alongside tape on poster board to indicate degrees.

8. Slide red section of tape to level or degree you wish to indicate. (At 0 degrees, all red tape will be on backside of thermometer; at 50 degrees half of the red tape will be showing; at 100 degrees all of the red tape will be showing on the front side with none on the back.)
QUESTIONNAIRE ON PROPERTY

Consider the following situations. Rank each incident according to severity. Any consistent ranking scale may be used. For example numbering each incident using a number 1-10 may be used or multiples of ten could be used. 0 indicates not at all severe while 10 (or 100 as the multiple of 10) indicates most severe.

1. Scribbling on the school hallways with crayon.
2. Smashing several jack-o-lanterns on a neighborhood street.
3. Writing your name on a paperback book that belongs to you.
4. Cutting your classmate's hair with school scissors.
5. While turning a page of a library book that you checked out, you rip it.
6. Throwing rocks through the windows of parked cars.
7. Pouring milk onto your neighbor's lunch tray while he/she is eating.
8. Trampling your neighbor's flower garden on a short-cut home.
9. Writing swear words with permanent marker on the bathroom walls in school.
10. Slashing school bus seats with a sharp object.
11. Breaking a teammate's bat after hitting a ball that was pitched to you during a recess softball game.
12. Carving one's initials with a jack-knife on a picnic table in a city park.
13. Climbing through an open library window after school hours and throwing all the books off the shelves as well as destroying some.
14. Breaking a friend's pencil lead on the pencil that he/she lent you.
15. Cutting a picture out of the school's encyclopedia for your book report.
Dennis the Destroyer

The students in the Standard One class didn’t like to share with Dennis. He was a funny boy, who always had lots of jokes to tell and made everybody laugh. But his classmates did not like the way he treated things that he borrowed from them. Mrs. Edwards’, the class teacher, wanted to know why the class was behaving so unusual when she asked if anyone had an extra ruler to lend Dennis.

Anna, the girl who sat next to him in class, explained that she used to lend Dennis a pencil everyday. Dennis promised to give it back when school was over, and he always did return the pencil, except that it was no longer the same pencil that Anna had lent him in the morning. Many of her bright yellow pencils with the heart shaped erasers and balloon designs were transformed into stubby, chewed – up stumps that had been sharpened so much that it was impossible to write with them.

It was the same thing with Brian. He told Mrs. Edwards that he had lent Dennis his bicycle one evening when they were going home from school. Dennis had promised to ride down the road and come right back; he had jumped on the bicycle and had ridden away, leaving Brian walking home. Brian had reached home and had already taken his bath and was doing his homework when he heard a clatter outside. He had looked out and had seen his bicycle lying at foot of the stairs. Dennis was outside standing by the bicycle, waiting to explain to Brian what had happened to the bicycle. Brian could not believe his eyes, as what used to be his shiny, new bicycle, had turned into a twisted piece of junk. Dennis had told him that he was doing stunts on the bike and that was how it got bent out of shape. Brian’s parents had been very upset, and told him that they would not buy him another bike.

There were many more stories from students in the class who had had the same experience with Dennis. They liked him as a friend, but did not like the way he destroyed everything he borrowed. Mrs. Edwards then spoke to the class, thanking them for their honesty, and also mentioning that they should not stop being Dennis’ friends because she would have a talk with Dennis about his behavior.