

DOCUMENT RESUME

ED 325 653

CE 056 212

TITLE Successful Life Skills Curriculum: Single Parents and Homemakers. Facilitator's Guide.

INSTITUTION Mid Michigan Community Coll., Harrison.; Wayne County Intermediate School District, Detroit, Mich.

SPONS AGENCY Office of Postsecondary Education (ED), Washington, DC.

PUB DATE 89

NOTE 584p.; Document contains colored paper.

AVAILABLE FROM Michigan Vocational Education Resource Center, 133 Erickson Hall, Michigan State University, East Lansing, MI 48824 (\$25.00).

PUB TYPE Guides - Classroom Use - Guides (For Teachers) (052)

EDRS PRICE MF03/PC24 Plus Postage.

DESCRIPTORS Adult Education; Citations (References); Classroom Techniques; Communication Skills; *Daily Living Skills; *Displaced Homemakers; Females; Health Education; *Individual Power; Interpersonal Relationship; Learning Activities; Lesson Plans; Money Management; *One Parent Family; Parent Education; Postsecondary Education; *Self Actualization; *Self Concept; Self Esteem; Teaching Methods; Time Management; Transparencies

ABSTRACT

This guide is intended to aid service providers as they provide support services to single parents and displaced homemakers to help them achieve the goal of economic self-sufficiency. The handbook provides learning activities, divided into seven critical life skills areas. Activities are arranged in lesson plans that include objective area(s), materials needed, age group, reading level, time needed, purpose, a bibliography, and directions for facilitating the activity. Each activity includes materials that may be used as transparency masters or duplicated for handouts. The seven areas covered by the units are as follows: (1) self-awareness; (2) communication skills; (3) health and wellness; (4) resource management; (5) parenting; (6) relationships; and (7) personal power. Self-awareness is the heart of the curriculum and personal power is the overall goal of all the units. (KC)

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SUCCESSFUL LIFE SKILLS CURRICULUM

SINGLE PARENTS AND HOMEMAKERS

FACILITATOR'S GUIDE

ED325653



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**Self-Awareness is the heart of the curriculum,
and Personal Power is the overall goal of the curriculum.**

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**Successful Life Skills Curriculum
Single Parents and Homemakers
Facilitator's Guide**

**Developed by NETWORK Project of
Wayne County Intermediate School District
with funds from
Carl D. Perkins Vocational
Education Act of 1984**

and

**The Title III Life Skills Program at
Mid Michigan Community College
for the U.S. Department of Education
Office of Post Secondary Education**

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Single Parent Curriculum
Facilitator's Guide
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Introduction

In 1984, the Carl D. Perkins Vocational Education Act was passed. This new authorization for federal funding of vocational education contained some new initiatives. One of those new initiatives was to set aside a portion of the dollars available to the state for the purpose of supporting a special population identified as single parents and homemakers. Of particular emphasis under the title of homemakers was the displaced homemaker.

To implement this program in Michigan, a full service program was designed to assure that these single parents and homemakers would successfully complete vocational training and attain a job for the ultimate goal of becoming economically independent. The program was designed around ten components, which were seen as essential to meet the particular needs of the parents and homemakers who were to be served. The ten components and a brief description of each component are provided below.

1. **Outreach and Promotion.** The goal of outreach is to reach those who are in need of, but who would ordinarily not access, the services. Promotion is to assure reaching out into the community to reach the single parent or homemaker.
2. **Assessment of Aptitude, Interests, and Special Needs.** Each eligible single parent or homemaker is to be tested for their aptitude, interests, and special needs. This procedure results in appropriate counseling, identification of the services needed, and results in an individual educational plan.
3. **Career Guidance and Personal Counseling.** This component is designed to include career exploration and guidance as well as counseling for self-concept improvement and the improvement of family relationships.
4. **Independent Living Skills.** Independent living skills are defined as those skills necessary to manage day-to-day living, including but not necessarily limited to: 1) identification and management of resources (money, time, energy, etc); 2) building support systems, 3) decision-making; 4) social skills focused at employer/employee relationships; and 5) communication skills.
5. **Vocational/Occupational Skills Training.** In all cases, the provision of job training is to be the keystone of the program. This component includes the provision for tuition assistance where necessary to assure access to training, as well as to support services once they are placed in a training program to assure successful completion.
6. **Transportation and Child Care.** Where needed by the single parent or homemaker, child care and transportation are provided.
7. **Job Placement.** Job placement services are provided and could include job readiness skills training including resume development, interviewing, and job search skills. In addition, job development for this population is to be provided to assure placement upon the completion of training.
8. **Evaluation and Follow-Up.** This component includes the evaluation of participants in progress as well as those that exit the program.
9. **Advocacy Committee.** An Advocacy committee is to provide planning, operation, and evaluation input to improve program performance. This group is also seen as being key to assisting with the coordination of services to the participants.

- 10. Cooperative/Coordinated Efforts.** It is very clear in the Carl D. Perkins Vocational Education Act of 1984, that the purpose of the program for single parents and homemakers is to coordinate the already existing services, and then to provide those not available, yet needed. Therefore, it is required that an analysis of the existing services for this population within the organization and in the community be completed.

The product herein is a guide for the delivery of the services described in Number Four. In the first year of implementation, the persons who were delivering the services to single parents and homemakers expressed desire for assistance and direction for the provision of Independent Living Skills, therefore, during the 1986-88 years, these materials have been developed. It is our intent that this document be, in fact, a guide and a help to the service providers as they provide the support services to achieve the goal of economic self-sufficiency.

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NOTES TO THE FACILITATOR

We are pleased to offer you this Successful Life Skills for Single Parents and Homemakers Curriculum Facilitator's Guide. Our goal is to assist students to become more self empowering. This book, coupled with skillful facilitating, will help students to understand themselves better, support successful behaviors, try on new behaviors and examine the consequences.

INSTRUCTIONAL UNITS

The book has seven units - 1) Self Awareness 2) Communication Skills 3) Health and Wellness 4) Resource Management 5) Parenting 6) Relationships and 7) Personal Power. As illustrated on the front page, Self Awareness is the heart of the curriculum and Personal Power is the overall goal of all of the units. The curriculum does not have to be followed in any order with the exception of the Self Awareness and the Personal Power units. We suggest you first begin with Self Awareness and conclude with Personal Power. Most of the Personal Power unit's objectives have been met throughout the book, so we have designed Personal Power to integrate material from the whole curriculum and to provide an appropriate closure for the course. You may choose to do the other five units in an order that best fits the needs of your class. You will note in our sample course syllabus, we allow students to select the units that will be most helpful to them. We then proceed in that order. If the course allows enough time, we will complete all of the units. If the course does not allow enough time, we complete what we can and finish with the Personal Power unit. You may also use units of this book for a mini course or as an additional resource for courses that you are already doing. The curriculum, including the objectives, have been put together primarily for use as a single course.

STRATEGIES AND PURPOSE

Successful Life Skills emphasizes self examination and understanding, exploration, skill building, instruction, decision making and goal setting through the following primary strategies:

- 1) Action and experience. This is not a typical course where the teacher lectures. Our aim is to teach through participation in structured exercises.
- 2) Individual activities which encourage self examination. The learning process is mostly internal, with the facilitator, material, and fellow students acting as the stimulant to have each student evaluate himself/herself in relationship to the successful life skills illustrated. These activities focus on the student as his/her own teacher.
- 3) Interaction among students and outside resources. Students share knowledge, experience and personal reaction with one another. They provide a learning, participatory lab and also act as peer tutors. The facilitator also acts as a participant, where appropriate, as well as acting as the facilitator.
- 4) Introductions of Key Successful Life Skill concepts. Many exercises aim to instruct students in a particular concept, such as active listening or goal setting. Exercises may open with some instruction on the concept and follow with an activity to illustrate or practice it. Other exercises that aim to instruct may begin with an activity and follow through with the instruction after the participants have analyzed what they learned.
- 5) Analysis and synthesis of problems that relate to Successful Life Skills objectives. The ability to analyze and synthesize is a Successful Life Skill. Many of the exercises have been designed to have students practice those skills. Effective decision making, which is emphasized throughout this book, utilizes analysis and synthesis.

HOW TO USE THIS MANUAL

We would like to express appreciation to the fine group of people who have worked together to create this group of learning activities which reflect the concerns of single parents and homemakers and are offered in a format that is both easy and effective to use for a variety of groups.

It was our goal to create experiential activities which would elicit active and interested participation and would help participants become more aware of their own life skills and set goals for behavior changes where changes could increase their likelihood of success in educational and career endeavors.

These learning activities are divided into the seven critical life skills areas identified by our advisory committee and are cross referenced because we often find that there is overlap in terms of learning that will occur in more than one area. We suggest that facilitators review the objectives and index before selecting activities they wish to use. Activities are designed to stand alone or to be used as a series for an entire course or mini course in Successful Life Skills for Single Parents and Homemakers. Each Activity includes directions for facilitators and attached materials which you may either duplicate for participants, read aloud, or project on a screen.

We believe that improved proficiency in life skills increases likelihood that single parents and homemakers will be able to be successfully trained and proficient in their chosen vocational fields.

We wish you success.

ACKNOWLEDGEMENTS

We would like to acknowledge and thank the following people for taking time to review and give us valuable suggestions for revisions.

ELLI ANDREWS

HENRY L CADE

GLORIA CONN

HILDA PATRICIA CURRAN

VIVIAN FAHLE

NANCY HAAS

GINGER HENTZ

TOM KAGE

RADWAN KHOURY

DON LEVERENZ

AMETHYST LUCIUS

JAMES MAHRT

CONNIE MARIN

MARILYN MARSHALL

RICARDO MEDINA

JEAN MOON

IRIS PARLANGELI

LINDA PHILLIPS

RENA SOIFER

PAT SOLOMON

PAULA STARK

JUDY TOMLINSON

DON VAN EVERY

Special thanks go to the people who typed, retyped, and corrected this manual through several versions - especially to Jan Hindman of Mid Michigan Community College and Kim Kaminski of the Wayne County Intermediate School District.

EDUCATIONAL GROUP PROCESS

This curriculum was designed to be used in an educational group. An educational group focuses on the individual's experience in order to present a concept. Students are asked to participate and evaluate themselves continually. The facilitator assists the students with their evaluations and analysis and keeps referring back to the educational principles that are being presented. In an educational group students see themselves as being responsible, in part, for the success of the class. Students maintain better interest in the class if they are constantly involved in the process. While the facilitator is always in charge of the direction of the group, students perceive themselves as leading and having ownership of the group. Students acting as leaders are illustrative of self empowering activities.

This curriculum was not designed to be used as group therapy. Group therapy focuses on the individual seeking solutions with the assistance of both the group and the therapist. Certain individuals in the group may be in need of therapy with a trained therapist. The Successful Life Skills group gives the facilitator the opportunity to suggest privately to an individual participant that additional help may be desirable.

FACILITATOR'S TRAINING

This curriculum is being released to only those who participate in the Successful Life Skills Facilitator's Training. Research and our experience support that effective materials are only as good as the facilitator's skills and knowledge of the program's purposes and means of implementation. The Successful Life Skills curriculum needs a skilled facilitator. "The group leader or trainer is not responsible for all that happens in a group. However, at least 75% of the effectiveness of the group can be attributed to the trainer." (Napier and Gershenfeld, Making Groups Work - A Guide for Group Leaders). The curriculum presupposes that those who wish to be facilitators already have some group facilitation training before they begin the Successful Life Skills Facilitator's Training. The Successful Life Skills Facilitator's training introduces facilitators to the curriculum, refocuses on effective group facilitation principles and offers new strategies that may be particularly helpful with this curriculum.

Because of the varied people and populations that may participate in a Successful Life Skills group, it is imperative that a facilitator know what is appropriate to deal with in the group and what is appropriate to refer to an outside professional. Our experience shows that this educational group may be the first time that an individual has had an opportunity to participate in a group. Some of the participants have been very isolated. Sometimes an individual's participation in an activity has revealed he/she is struggling with some very disturbing life situations. There may be issues or problems in your classes that should be dealt with privately or by a different type of professional. Before beginning a Successful Life Skills class, develop a list of helping professionals that participants can call on. Honor your students and your professionalism by knowing when it is appropriate to make referrals.

The role of the facilitator is to complete certain tasks while creating and supporting the norms of the group. Group norms are informal standards of what is expected, appropriate, acceptable or valued by the members of the group. You need to determine what your class norms are before you begin. Norms are set very early in the group process so it is important that the facilitator knows before the class what norms he/she wants established. An example of some norms that you may want to establish include be on time, be prepared, no put downs and respect fellow student's space. Norms setting also includes a clear explanation of the grading procedure if you are in a grading situation.

We have included Mid Michigan Community College's course syllabus and guidelines as a sample syllabus as well as illustrating some of the norms that are used in all of our Successful Life Skills classes. It has been included to demonstrate one way of carrying out this curriculum. You may want to use some of our ideas or design a syllabus that best suits your needs. It is important that you provide students with a syllabus, outline and grading procedure (if grades are used).

MODULE COMPONENTS

We suggest that you read the entire book before proceeding with the course. You will have a complete overview and a feel for the direction that you will be leading your group.

Each of the seven units follow the same design. Each unit begins with a color-coded page that lists objectives for that unit. All of the facilitator's directions are printed on the same color sheets throughout the unit. There is at least one exercise to support each objective and in some cases more than one exercise to support one objective. The Personal Power unit does not have an exercise for each objective. Personal Power's objectives are met throughout the book and, as mentioned, the focus of Personal Power is to have students integrate learned material and to provide closure.

Each unit is organized so that the activities build upon one another. While the order is not totally inclusive, they have been ordered to address the growing and learning process. You will also note that some principles such as the "I message" are used throughout the entire curriculum. Successful Life Skills asks participants to try on some life skills over and over.

Each activity lists:

The facilitator's directions and materials for the activity itself. All of the facilitator's notes are on colored paper while the students copies are on white. This makes it easy for the facilitator to make copies for students. You can give students activity sheets as the need arises or collate all activities into a student workbook. If you give out the activity sheets individually, it would be most helpful to require or provide a small notebook so that all Successful Life Skills material is organized as one course.

The primary objective area and a cross-referenced area. We found that each exercise could be cross referenced to another unit and sometimes more than one unit. The cross-referenced area can allow you to use the exercise in a different unit or assist you in integrating the material with what the participants have already done.

All material needed. Some exercises have included materials that can be used as transparencies. The materials section will list an overhead projector. If the facilitator does not have an overhead projector or does not want to use transparencies, he/she may choose to give students copies of the material as an alternative. Transparencies can be a means to focus the class as a group.

Age group: Most of the exercises are designed for teens and up. While the book is called the Single Parents and Homemakers' Guide, it is used at Mid Michigan Community College with all people, regardless of marital status. Successful Life Skills does not need to be limited to Single Parents and Homemakers.

Reading level: Reading levels are listed as basic, intermediate and mature. We have included this to let the Facilitator know how much he/she needs to adapt. If the reading level is low among some participants, the Facilitator may want to get volunteers to take turns reading a paragraph or two out loud. This not only takes the pressure off the poorer readers but also provides group building.

Group size: An ideal group is twelve to fifteen participants. However, not everyone has the luxury of controlling group size due to transient populations or organizational needs. A significant number of our exercises will break the group into smaller subgroups or dyads to facilitate communication.

Time needed: Time need is approximate. It will vary depending on each unique group, its dynamics and the facilitator's style.

Purpose: We have listed the major objectives for each exercise. We suggest that you list or read these objectives to the class before you begin. Writing them on newsprint before class and tacking them up serves as a visual illustration of the exercise's goal and people are able to refer to it at any time.

Each unit ends with a Bibliography. We listed some of the major books and articles used to compose or be used as resource for Successful Life Skills.

GROUP FACILITATION TIPS

Insist that participants sit in a circle for all classes. If it means rearranging the classroom for each session, do so. We like to insist that students take responsibility for the classroom arrangement.

Give students the right to pass and state it periodically throughout the course. Provide an atmosphere of respect and privacy for the individual as one means to develop trust and group cohesion.

Always maintain confidentiality in the class. You may also want to consider allowing participants to keep some exercises private. We have found that some students may feel freer to write what they feel if they know the instructor will not be scrutinizing. In order to prove that they have done the work, you can ask them to show you the paper without collecting it. Of course, you are unable to assign a qualitative grade but you can assign points for completion.

You may also want to examine if you will assign qualitative grades to student's homework. It may facilitate more genuine exploration and analysis if you only assign points for the exercise completed or pass/fail. It is imperative that you require assignments to be completed in a timely manner.

Invest in group building activities right from the start. This might include saying hello to all participants as they come to the course or providing food for the first day. Make sure that all participants feel included. Ask quieter members what they think every once in awhile or involve them in small talk during breaks. Let members lead the class whenever possible. Avoid doing all of the talking. The "Goodness of Fit" exercise points out that parents and children communicate with one another well when the window that each of them uses to look out into the world is open. Your class is ready to explore and learn when their windows are open. One of your roles as a facilitator is to learn what makes each person open their window. When their windows are open to one another and you, your class will function as a cohesive and trusting group.

You may want to open each class with a follow up from the previous class. You might say "I'm wondering if anyone has questions or concerns from yesterday's session on....." This gives participants an opportunity to continue or clarify.

We have not included warm ups or energizers in the Successful Life Skills book. It is strongly suggested that you have prepared different, short warm-up exercises to start out some sessions on the right foot. We also suggest that you inject short energizer exercises in the group when the members are particularly tired or slow.

Give students opportunities to try on behaviors suggested throughout the book, if appropriate. Ask them what happened when they tried using the I message, etc. Assist participants in integrating the material. Many of our exercises ask participants to try on behaviors in the form of homework. When students have a long-term assignment, check in with them periodically to see if they are having any difficulty. This provides them with the opportunity to remind them that you expect they complete their homework in a timely fashion.

Assist your students in integrating the material at the close of each session. You might want to recap the basic principles that the group explored. Or you might want to share with the group what you observed happened in the session. Or you might like to have participants close with "Today I learned..." or complete the "Talk to me" form found in the Communication section. The key factor is that you assist students in understanding the material personally.

Make sure that you have prepared your group for closure and that you close well. Groups that develop cohesiveness may have difficulty separating. You will start to hear people saying "Gee, I am going to miss everyone" or "What will my days be like when I can't get together with all of you?" Start providing opportunities to talk about what the end of the group will mean. Take every opportunity to point out what participants have gained and how they might use those new strengths once they have left. The Personal Power exercises will help provide closure.

After you have facilitated a Successful Life Skills' group, let us know how it went. We wish you success in assisting individuals to become more self-empowering.

- Patricia Alford

SAMPLE COURSE SYLLABUS

I. COURSE IDENTIFICATION -- Successful Life Skills

Instructor:

Office:

Phone:

Office Hours:

Course Number: SSC 107

Credits: Three (3)

Course Title: Successful Life Skills

II. PURPOSE OF THE COURSE

Our overall goal is to assist you in becoming more aware and efficient at mastering some of the seven objectives (Self-Awareness, Communication, Health/Wellness, Resource Management, Parenting, Relationships and Personal Power) listed in the book. The 7th unit (Personal Power) will be conducted as an experiential evaluation of your progress in the entire course. We would like to:

- 1. Assist you in becoming more self-aware.**
- 2. Reinforce those successful behaviors that work well for you in the 7 objective areas.**
- 3. Suggest/Practice new solutions for those attitudes/thoughts/behaviors that interfere with your ability to be successful at whatever you want to do.**

III. COURSE GUIDELINES/PROCEDURES

- 1. Participation is a must. Without your energy and thoughts, the class will become dominated by a few talkers. We are looking at some successful life skills and how you understand and practice them. Seldom is there a right answer. If you would describe yourself as shy or quiet, this is a safe environment where you can try on a new style.**
- 2. Each class member must maintain the confidentiality of the class. What you hear, learn or observe about a fellow classmate in class stays in our room. You would not appreciate people talking to others about you, so please respect your classmates' privacy.**
- 3. We ask that you do all of the exercises. However, there may be a time you are too uncomfortable with a topic and do not want to participate orally. Ask to "pass" and we will honor your request.**
- 4. Think in terms of providing support to one another. Generally the energy one puts out comes back to him or her at some time or another.**

5. In the event of a conflict between two members, we will ask you to:

- Talk to each other,
- Use active listening to iron it out.

Conflicts may happen in an exploration process. We understand that, but we want to work toward resolution.

6. Your feedback and feelings regarding this curriculum is important as changes in the course are partially made on what we learn from you. Provide us with feedback to help us and future students.
7. We may not be able to cover all 7 units. We will begin the class with the "Self Awareness" unit and complete it with the "Personal Power" unit. We would like you to look over the other 5 units and see which ones would be most beneficial to you. We will then take a class vote and begin the most popular units as time permits.

IV. COURSE OUTLINE

1. Self Awareness Objective Area Activities
2. Communication Objective Area Activities
3. Health/Wellness Objective Area Activities
4. Resource Management Objective Area Activities
5. Parenting Objective Area Activities
6. Relationships Objective Area Activities
7. Personal Power Objective Area Activities

Order to be determined in class. It could be possible not to complete all seven sections.

Suggested Class Guidelines:

1. Be prepared
2. Be on time
3. No put downs
4. Respect other's space

V. GRADING CRITERIA

Your grade in this class will be based on:

Completion of Exercises = 30% of final grade
Your Participation = 40% of final grade
Attendance = 30% of final grade

Everyone begins with an A. The right to make any necessary adjustments are reserved by the instructor.

A	=	94%	-	4.0
A-	=	92%	-	3.7
B+	=	90%	-	3.3
B	=	88%	-	3.0
B-	=	86%	-	2.7
C+	=	84%	-	2.3
C	=	82%	-	2.0
C-	=	80%	-	1.7
D+	=	78%	-	1.3
D	=	76%	-	1.0
D-	=	74%	-	.7

SUCCESSFUL LIFE SKILLS
SECTION 1
OBJECTIVE: SELF AWARENESS

UPON COMPLETION PARTICIPANTS WILL BE ABLE TO ANALYZE HOW THE INFLUENCES OF PERSONAL CHARACTERISTICS AND CONDITIONS AFFECT THEIR SELF-ESTEEM AND SATISFACTION WITH LIFE.

Supporting Objectives: Participants will be able to:

- **Understand and compare values, beliefs, role expectations and life goals.**
- **Examine sources of personal beliefs, role expectations, values and goals.**
- **Describe their perceptions of their personal characteristics, strengths and weaknesses.**
- **Examine values and lifestyles of different ethnic populations.**
- **Consider the influence of the media on the development of self-image and personal goals.**
- **Evaluate weaknesses and strengths of their functioning in different life roles (family, friends, school, work).**
- **Compare self-defeating behavior patterns with their own behaviors.**
- **Examine positive and negative ways of dealing with change in their lives.**
- **Define past, present and future life goals.**
- **Discover personal behaviors that increase self-confidence and self-esteem.**

PRIMARY OBJECTIVE AREA: Self Awareness

SECONDARY OBJECTIVE AREA(S): Personal Power/Relationships

NAME OF ACTIVITY: Personal Coat of Arms

MATERIALS NEEDED: Copies of Handout, Felt Tip Pens/Pencils

AGE GROUP: Teen - Adult

READING LEVEL: Basic

GROUP SIZE: Any

TIME NEEDED: 30 Minutes or more

PURPOSE

1. Build self confidence and self esteem.
2. Clarify values, beliefs, role expectations and life goals.
3. Identify barriers to behavior change.

By gaining knowledge and awareness of personal behaviors, we learn more about ourselves and are better able to control our behaviors. The "Personal Coat of Arms" activity will help increase awareness of personal behaviors which do the above.

DIRECTIONS FOR ACTIVITY:

1. Give each participant a copy of the worksheet. Explain history of "Coat of Arms." It is a collection of symbols that shows from where one came. Explain that the Coat of Arms used to hang in homes to describe the family's origin. The Coat of Arms is rooted in European history. Ask participants if they know what other cultures might use in place of a Coat of Arms.
2. Choose six questions from below (a - h) to be answered in the Coat of Arms. (Add your own if you choose.)
3. Read the 6 questions aloud and write them on newsprint.
 - a. What do you think is your greatest personal achievement to date?
 - b. What do you like most about your family?
 - c. What do you value most in life?
 - d. List three things you are good at.
 - e. What is one thing you would like to improve about yourself?
 - f. If you died today, for what would you most like to be remembered?
 - g. What material possession would you save if your house caught on fire?
 - h. What do members of the opposite sex like most about you?
4. Ask the participants to answer each question by drawing a picture, design, symbol, or word in the appropriate area. (The top left space corresponds to question a.)

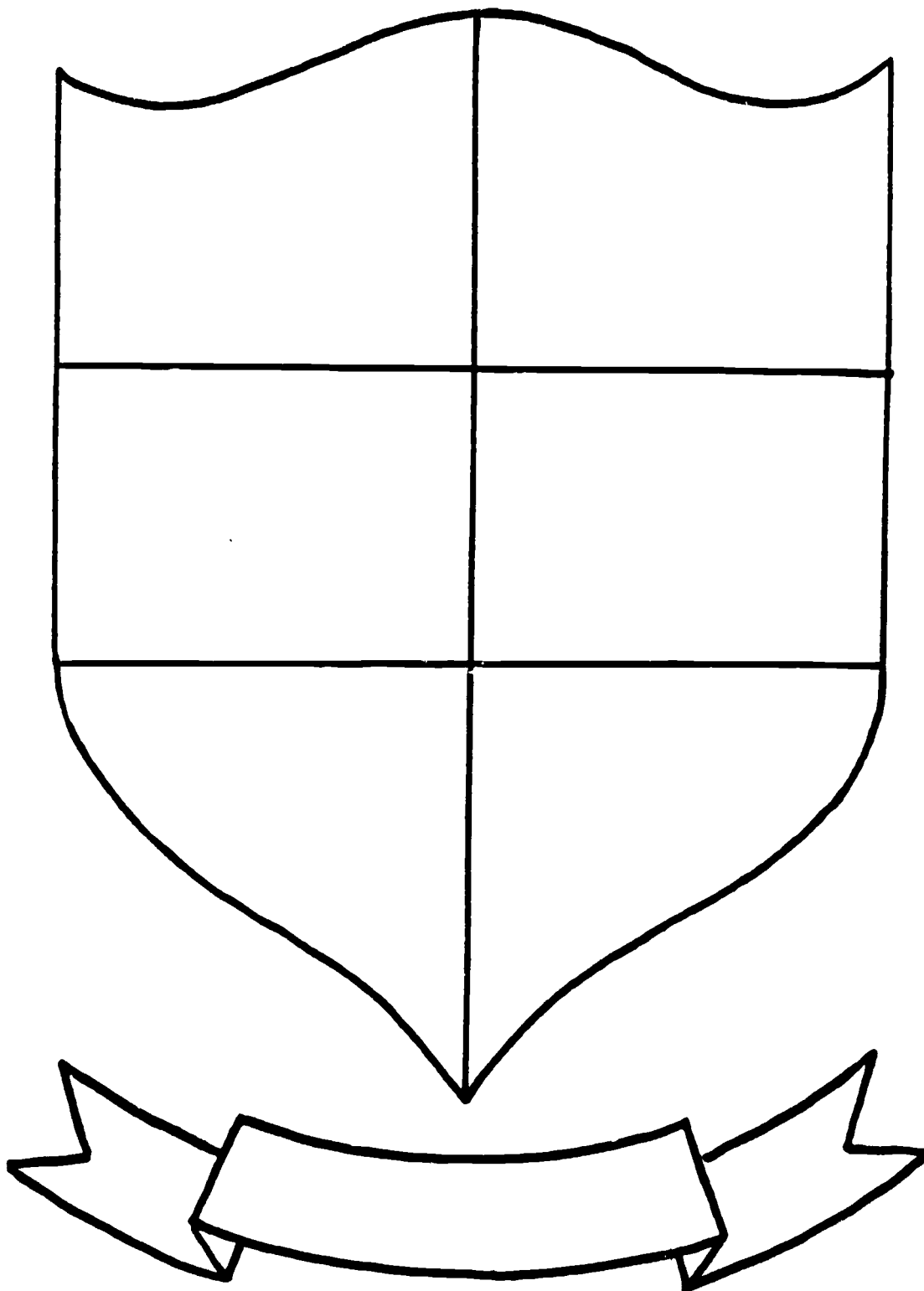
PURPOSE

DIRECTIONS FOR ACTIVITY:

For example, in space #1 which asks for personal achievement, a person who has been successful in music might draw a picture of a musical instrument. Explain that you are not concerned with their artistic abilities, but you would like them to use their imagination.

5. After the group members have completed their drawings, etc., ask them to form small groups of 2 to 4 to share their drawings, then reconvene the larger group for discussion.
 - a. What was it like to tell others about your strengths and weaknesses?
 - b. What did you learn about yourself?
 - c. What were the similarities and/or differences in your responses?
6. Suggest that each person come up with a title and write it in the "ribbon" space at the bottom.

PERSONAL COAT OF ARMS



Materials From: The Center for
Population Options, 2031 Florida Ave
Washington D.C. 20009

PRIMARY OBJECTIVE AREA: Self Awareness

AGE GROUP: Teen and Adult

SECONDARY OBJECTIVE AREA(s): Relationships

READING LEVEL: Intermediate

NAME OF ACTIVITY: Understanding Our Own Values

GROUP SIZE: Any

MATERIALS NEEDED: Handout Nos. 1 and 2, Chalkboard-Chalk
(Overhead projector if you make handout #1 into a transparency)

TIME NEEDED: 1/2 - 1 Hour

PURPOSE

1. To increase self awareness.
2. To learn more about other's values.
3. To practice self disclosure.

Everyone has their own set of values. Sometimes it is helpful to identify values in order to make decisions based on an understanding of what we believe and why we believe it.

This activity can be used to allow participants to understand their own values better and to see how they share common values with others. It can be used as a follow-up to the activity "Future Life Styles" to further clarify life goals or precede it.

While it's important to point out to participants that acting on values that are different than society's norms can bring unpleasant results, it is also important that the facilitator not pass judgement on the person who has different values. This can be done by avoiding language with "Good" or "Bad" connotations and using language that discusses behavior in terms of results--"Payoffs and Losses."

DIRECTIONS FOR ACTIVITY:

1. Facilitator can begin activity by stating purpose and stress importance of values, and that our values become the basis for our actions. Every action brings an outcome either positive or negative.
2. Write "Value" on board and have group name some of their values (list them on board).
3. Pass out "Definition of Values" handout and read through it with group or make the "Definition of Values" into a transparency.
4. Pass out "Clarification of Personal Values" handout and have group fill it out individually. Encourage honesty and gut reactions.
5. Divide group into twos or several groups. Have participants share three of their answers with each other. Reiterate they may disclose what they like.
6. Bring group together--ask and write on chalkboard:
 - A. What did you learn about yourselves?
 - B. Does the way you live reflect your top three values?
 - C. Were your top three values easy to pick after you answered the other questions? Why?

DEFINITION OF VALUES

Values govern our lifestyle choices every day of our life. Values give our life meaning, relevance and direction. Values are the rudder that we use in making life decisions. If we understand our values, then our ability to decide -- particularly in career choices -- is enhanced greatly.

Values researchers Raths, Harmin and Merrill (Values Clarification) define a value as something that is:

1. prized and cherished
2. publicly affirmed
3. chosen freely
4. chosen from alternatives
5. chosen after consideration of consequences
6. acted upon
7. acted upon repeatedly and consistently to form a definite pattern

CLARIFICATION OF PERSONAL VALUES

All of us have values; personal characteristics we feel are worthwhile. Our values are important because we make choices which are guided by them. We live by our value system, but sometimes that system is not clear. Sometimes our values are clearer to others than to ourselves.

When you are aware of your values, you make conscious decisions based upon them and feel you are directing the course of your own life.

ANSWER THE FOLLOWING QUESTIONS IN THE SPACE PROVIDED.

1. Indicate two decisions you made in the last two weeks:

2. List two or three activities you participated in this week:

3. Cite three or four experiences of happiness, satisfaction, achievement, and success you have had recently, or from the past:

4. What three experiences or situations always make you feel angry?

5. If you could have three wishes granted, what would they be (no extra wishes)?

6. Happiness is . . .

7. When you die, what three things would you most want people to remember about your life?

8. Write your five top values.

PRIMARY OBJECTIVE AREA: Self-Awareness

SECONDARY OBJECTIVE AREA(s): Relationships

TYPE OF ACTIVITY: Problem Solving and Decision-Making

MATERIALS NEEDED: Handout (may substitute one of your own) pens/pencils

AGE GROUP: Young Adult/Adult

READING LEVEL: Intermediate/
Mature

GROUP SIZE: Any

TIME NEEDED: 45 Minutes

PURPOSE

DIRECTIONS FOR ACTIVITY:

- | | |
|---|---|
| <ol style="list-style-type: none">1. To have participants become aware of the role of values in decision-making.2. To have participants state their values to one another.3. To increase sensitivities toward each other's value systems reflected in decision.4. To participate in group problem-solving. | <ol style="list-style-type: none">1. Read aloud or ask participants to read the story on the Handout.2. Ask them to rank order #1, Most at fault; #2, Second most at fault; etc. Note that there are no keyed right or wrong answers - participants must make their own moral choices.3. Break them into groups of 5 to 7 and ask them to come to a consensus as to who is #1, #2, etc. Indicate that they are to select a group spokesperson who will later participate in this exercise with other group spokespeople. Give them a 15 to 20 minute time limit.4. Fishbowl--Arrange chairs in a circle. Ask the spokespeople to sit next to each other and leave one empty chair next to them. Indicate to the leaders that they have 15 minutes to come to a consensus as to who is #1, #2, etc. Tell the remaining members that they are to observe what happens in the group process and can only participate when they sit in the empty chair.5. Process what happened--example: Who changes their mind and why? Did they vote, etc... Discuss how our values determine how we voted. There is no "right" or "wrong" values key in this story. Our values determine our decisions in the story. Decisions will often be different from each others. Do our decisions match our values? |
|---|---|

YOUNG LOVE LOST

Kim, who is sixteen, falls in love with Jeff who is seventeen. They both attend a local high school even though they are bored in school and have never felt accepted by the popular kids.

Kim comes from a loving family. Jeff's home life is not so good. His father who is an alcoholic is abusive to both Jeff and his brother. Jeff can't wait until he moves away from home. He hopes to get a scholarship to college and leave when he is eighteen.

Kim discovers that she is pregnant and is pressured by her parents to have an abortion. She isn't sure she wants to marry Jeff, but she feels it is a better alternative than an abortion. Her parents consent. She and Jeff marry and they have a baby girl named Jennifer.

Jeff quits school to work at a local factory. He makes \$4.50 an hour with no opportunity for promotion. He hates the work. The most fun he has every week is when he and the boys go out drinking. He and Kim barely have enough money to live on.

Kim feels very lonely at home with Jennifer. Jennifer cries a lot during the day. Kim's mother helps her whenever she isn't working. Kim's friends think that Jennifer is cute. However, Kim doesn't see them much, because they are involved in school activities. Kim is trying her best to make a good home for Jeff, Jennifer and herself.

Two years after they are married, Jeff tells Kim he is leaving. He has begun to see Renee, Kim's ex-best friend. When Kim yells that it isn't fair, Jeff says "Hey it's not my fault. I never wanted to get married. I hate working in the factory. I wanted to go to college. You wanted the baby. You keep her."

(Now determine who is most at fault. Kim, Jeff, Jeff's parents, Jeff's friends or Renee. Rank them #1, most at fault; #2, second most at fault, etc.)

PRIMARY OBJECTIVE AREA: Self Awareness

SECONDARY OBJECTIVE AREA(s): Relationships, Personal Power

TOPIC OF ACTIVITY: Sex Role Beliefs

MATERIALS NEEDED: Copies of Handouts #1 & #2, Pens or Pencils

AGE GROUP: Teen/Adult

READING LEVEL: Intermediate

GROUP SIZE: Any

TIME NEEDED: One hour or less

PURPOSE

1. To enable participants to clarify their attitudes and examine relevant information about sex roles, as those attitudes affect career choices.

Often single parents are in a position where it is very important for them to earn a good income to support themselves and their children. Single parents make up the largest percentage of low income heads of households in this country.

If sex role attitudes keep women or men from considering a vocational program where they will succeed, enjoy their work, and/or earn good pay, then the sex role attitudes are hurting those involved.

2. This activity can be useful in helping participants examine and possibly change misconceived opinions which could open more options for them in terms of vocational choice. It can also support and reinforce attitudes that broaden options.

DIRECTIONS FOR ACTIVITY:

1. Explain to participants that they are taking a test which is not a graded test, but a way for them to test their own values about sex roles. Answers will be private and discussion will be voluntary. It's interesting for us to think about how we feel on certain subjects, to see if our thinking matches information and if our thinking helps us personally achieve our goals in life or careers.
2. Distribute test and give them time to complete.
3. When everyone has finished, ask participants to discuss answers in small groups and try to reach a consensus (group agrees on answers).
4. Ask groups if any items were hard to agree about? If any items brought out especially strong feelings? If they want to discuss any items in particular?
5. Either distribute and/or read through with participants the background and information sheet. Highlight information on items they discussed more.
6. If the reading level is too difficult, an option may be to read through the entire test as a group and have them write their answers on a sheet of paper.
7. Ask participants to think about how their sex role values affect their success in work, school, and/or relationships.

SEX ROLE BELIEFS TEST

NAME:

SCHOOL:

I am a Student _____ Teacher _____ Other _____

SEX: Male _____ Female _____

Directions: Please circle the answer you think is correct or that best describes your opinion.

1. Some jobs are naturally "women's" work and other jobs are naturally "men's" work.
 - a. Strongly agree
 - b. Agree
 - c. Disagree
 - d. Strongly disagree
2. It is more important for a male than a female to think in terms of life-long careers.
 - a. Strongly agree
 - b. Agree
 - c. Disagree
 - d. Strongly disagree
3. It is more important for females than for males to learn to be good homemakers and parents.
 - a. Strongly agree
 - b. Agree
 - c. Disagree
 - d. Strongly disagree
4. Exploring career areas usually identified with the other sex will make boys less "masculine" and girls less "feminine".
 - a. Strongly agree
 - b. Agree
 - c. Disagree
 - d. Strongly disagree
5. I wouldn't take a class if more students in the class were the other sex.
 - a. Strongly agree
 - b. Agree
 - c. Disagree
 - d. Strongly disagree
6. For every \$1.00 that a full-time male worker makes, a full-time female worker makes:
 - a. \$1.00
 - b. .94
 - c. .64
 - d. .50
7. _____% of all teenage marriages end in divorce.
 - a. 90%
 - b. 75%
 - c. 60%
 - d. 45%

8. Men who fit the traditional "macho" image tend to have the highest test scores in ____.
- a. Achievement b. Anxiety c. Mathematics
9. Which of the following vocational areas will grow well and have openings for the next ten years:
- a. nursing c. vehicle mechanics
b. electronics d. all of the above
10. How many American families fit the "traditional" model of a working father, stay-at-home mother, and one or more children?
- a. 52% c. 34%
b. 45% d. 7%

SEX ROLE BELIEFS BACKGROUND INFORMATION

1. There are very few jobs which cannot be done by both males and females. As long ago as 1977, the U.S. Department of Labor estimated that only 34 of over 27,000 jobs would require more physical strength than the "average" woman possesses. When one considers the recent effects of automation and the increasing use of "power assists" as well as the fact that women possess more strength than some men, the relative strength advantage of men over women does not play a significant role in qualifying for jobs. Further, economic conditions and the trend toward equality have challenged traditional male and female roles both at home and at work.
2. Increasingly, both females and males are spending a more equal amount of time in the workplace. According to the U.S. Department of Labor, married women hold jobs outside the home for an average of 25 years. If you are a single woman, the average stay in the workforce is 42 years, about the same number of years that men work. Also, several occupations (like education, government service, and automobile manufacturing) have 30 year and out pension programs. If people work that long, it's important that they have jobs they like and that reward them financially.
3. As more and more women (and parents) move into the work force, males will be called upon to play a more important role as homemakers and parents. Over 60% of married women are in the work force and 50% of married couples with children at home have both parents working. Another trend which necessitates males being more involved and capable at home tasks is the trend of both males and females remaining single for longer periods of time. In fact, "singles" are the U.S.A.'s fastest growing family unit and comprise approximately 30% of all family units (U.S. Census Bureau, 1980).
4. Students of both sexes should explore all careers. The reason?
 1. Many times students are interested in nontraditional jobs but do not explore them because of peer pressure.
 2. Job opportunities tend to be more open for both males and females seeking nontraditional jobs.
 3. More and more jobs will be shared by both females and males.
 4. Many nontraditional jobs pay more than traditional jobs (especially for females).
5. It is quite natural for all of us to be influenced by what others may think of us, and particularly if they think we might not be as feminine or masculine as we might be. We are particularly uncomfortable when we may be the only one of our sex in a group. However, when it is desirable or necessary to take a class in which most of the students are of the other sex we must realize that our interest is obtaining knowledge and skills, not obtaining approval. What usually happens is that after some beginning discomfort, the other sex accepts us for what we are and the awkwardness disappears quickly. In fact, we may even learn to enjoy our uniqueness in nontraditional classes.

6. Answer: c. \$.64. Several studies support the fact that women earn only about 64 cents for every dollar taken home by men. This gap has remained constant for the past 25 years, even when such factors as education, skills, and productivity are the same for both sexes.

Source: "Women, Work, and Wages", National Research Council
(report prepared for Equal Employment Opportunity Commission), 1986.

When only full-time male and female workers are compared, full-time working women earn a medium income of \$11,287, or 59.7% of the medium income full-time working men. (\$18,910).

7. Answer: b. 75%. For the first time in three decades, the overall divorce rate in America has shown a slight decline. However, the overall rate is still in excess of 40% for all marriages and an alarming 75% for all teenage marriages. Even second marriages are likely to end in divorce. When there are children involved, they also are affected, as many of you or your friends may have been. Presently, over 40% of all children in America will spend part of their childhood in a single-parent household. To compound these situations, the number of teenage pregnancies have increased throughout the 70s and 80s. Of all U.S. births, 20+ percent are to teens aged 15 to 19. These statistics do not include pregnancies that are terminated. Overall, teenage marriage and child-rearing is a low percentage proposition.

Source: Voc. Ed. "The Class Where Fairytale Are Left Behind," April, 1980.

8. Answer: b. Anxiety. Males who fit the traditional "macho" image actually score higher on anxiety tests rather than achievement or mathematics' tests. Boys are stereotyped much earlier and more harshly than girls are. The expectations for their roles are more rigid than girls, which gives them less flexibility. Trying to meet all the expectations to be tough, strong, intelligent and decisive can cause anxieties for males who don't quite measure up to the deal.

Source: "Why Do Women Live Longer Than Men?", Journal of Human Stress,
Vol. 2, 1976.

9. Answer: e. All of the above. High school vocational programs leading to future employment in growing, well-paying occupations include the Health Occupations/Nursing programs-for future jobs in the health care field, Electronics-which prepared students for future jobs as electrical/electronics technicians and engineers; Accounting/Bookkeeping-to become bookkeepers, accounting clerks, accountants and auditors, and Auto Mechanics-to become skilled vehicle mechanics, technicians and engineers.

These are technical jobs which will require training beyond high school for above-average salaries. But the forecasts indicate that most jobs first require entry-level skills -- which is the goal of our high school vocational education programs. Between 1982-1996, Nursing will experience a growth rate of nearly 50%, Accounting and Auto Mechanics nearly 40% and the Electronics field broadly 60%+.

It's important for both males and females to explore vocational areas considered nontraditional for their sex (such as females in Auto Mechanics or males in Health Occupations) if they are to succeed in finding jobs in well-paying fields.

Source: "Occupational Outlook Quarterly," Spring 1983, U.S. Department of Labor. Also the Voc. Ed. Journal, May 1984.

10. Answer: d. 7%. According to a December, 1980 Detroit Free Press article, only 7% of American families fit the traditional model of a working father, stay-at-home mother and one or more children. In fact, when polled about family pattern preferences, Americans chose family patterns other than the traditional pattern by a 71 - 79% margin. 63% chose an "equal marriage of shared responsibility" in which the husband and wife cooperate on work, homemaking and raising children. 5% favored remaining single and 3% favored living with someone.

Sources: Detroit Free Press, December 10, 1980-Original source of data was U. S. Department of Labor. Also Public Opinion Magazine, September, 1981.

PRIMARY OBJECTIVE AREA: Self Awareness

SECONDARY OBJECTIVE AREA(s): Relationships

NAME OF ACTIVITY: Understanding Needs

MATERIALS NEEDED: Handouts 1, 2, 3, and 4, Overhead Projector

AGE GROUP: Teen - Adult

READING LEVEL: Intermediate

GROUP SIZE: Any

TIME NEEDED: 1/2 hour to 1 hour

PURPOSE

DIRECTIONS FOR ACTIVITY:

1. To examine Maslow's Hierarchy of Needs.
 2. To analyze varying needs in relation to Maslow's system.
 3. To assess how well one's needs are presently being met.
1. Make Handout #3 into a transparency before class. You can reproduce Handout #3 if you are unable to make it into a transparency.
 2. Explain to the class, that the purpose of today's activity is to learn what a need is and how it is fulfilled.
 3. Ask students to give definitions of need. Write them on the board.
 4. Break into groups of 4 to 5. Pass out Handout #1. Ask each group to complete the sheet. Tell them to strive for consensus.
 5. Reconvene to the larger group. Go through Handout #1 to see if any groups differ in their responses. Encourage participants to support their beliefs.
 6. Read out loud, as a class, Handout #2. Let different volunteers read a paragraph or two. Have the class answer questions as you proceed with the reading. Clarify key concepts for students. Put Handout #3 up on the overhead projector while you are reading. Complete this reading, by explaining Handout #3.
 7. Ask participants to fill out "Assessment of My Needs" (Handout #4) privately. Note that this exercise will not be followed by a group discussion to allow the participants to feel freer to answer honestly.

WHAT DOES A PERSON NEED MORE?

Select the most pressing need a person must fulfill. If you believe two needs are equal, check both.

1. Does she need a drink ___ or food? ___
2. Does he need a job ___ or a house? ___
3. Does she need to feel safe ___ or respected by others? ___
4. Does he need friendship ___ or to feel like he has achieved his potential? ___
5. Does she need sexual gratification ___ or shelter? ___
6. Does he need self respect ___ or emotional security? ___
7. Does she need relationships with people ___ or recognition? ___
8. Does he need food and water ___ or personal growth? ___
9. Does she need freedom from fear ___ or recognition? ___
10. Does he need physical warmth (heat) ___ or a place in a group or family? ___

ABRAHAM MASLOW'S NEEDS SYSTEM

Abraham Maslow was a research psychologist who found that people have patterns of need which make behavior predictable. In other words, he said that if we know what a person's needs are, we can predict what their behavior will be. An example of this is when you are hungry. Hunger is your need and most likely, you will begin the behavior of seeking out food. Another example of this is when a person has a need to have friends because he/she has none. He/she will go to great lengths to get friends - the behavior of seeking out friends. Maslow saw needs as producing a state of inner tension or discomfort which motivates the individual to satisfy that need. Do you agree with Maslow?

Maslow divided needs into five basic systems - Physical, Security, Social, Self Respect and Worth and Self Actualization.

Physical needs are our most basic needs. They include the need for physical comfort, food, and water, shelter, warmth, sexual gratification and other bodily needs. Unsatisfied basic needs are the primary sources of motivation in life.

Security needs include having a feeling of being safe from both emotional and physical harm, economic security, and prevention from injury.

Social needs include the need for friendship, belonging with someone else, giving and receiving love, affection, relationships with people, a place in a group or family, intimacy and acceptance.

Self Respect and Worth needs include self respect and esteem of others. These include demonstrating competency and mastery, advancement, recognition, self confidence, independence and freedom, status, sense of self worth, adequacy and feeling responsible.

Self Actualization or needs for Self Fulfillment are the highest order or needs. They include self-fulfillment, achieving one's full potential, desire to know and understand, improving skills, personal growth, meaning in life and work, satisfaction through doing, continuous learning, making a contribution and realization of the self.

Maslow said that there is a natural tendency to progress from the lower level need system to the higher level need system. "Types of Human Needs" illustrates this well (Handout 3). A person becomes aware of a higher order need system only when a lower order need system has been essentially satisfied. An example of this might be that a person who is fearful for her own life is not very motivated to find a job. He also said that should the satisfaction of a basic lower order need be blocked, a person will not become aware of or motivated by a higher order need system. Have you found this to be true?

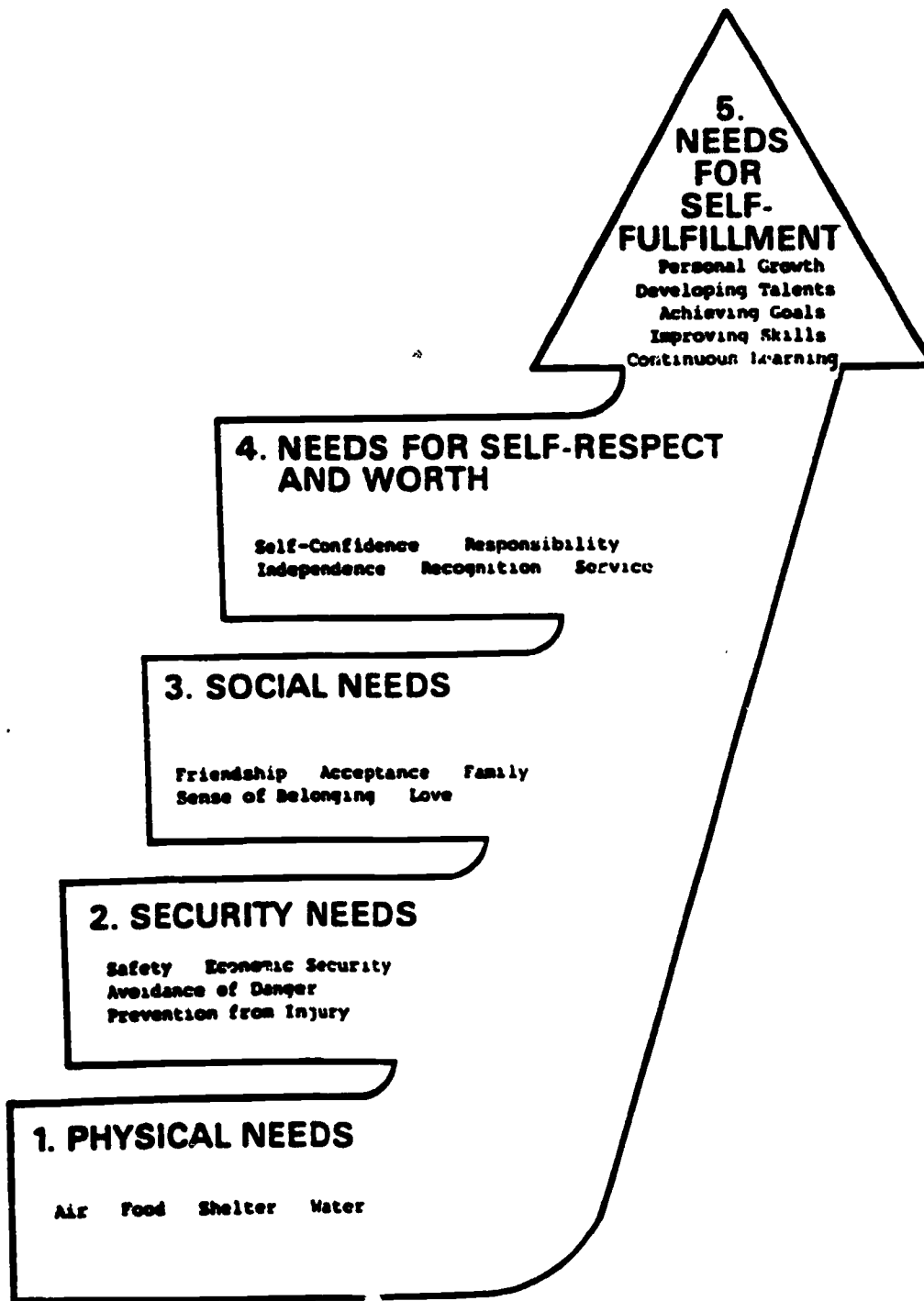
While no need is ever totally satisfied, there is some level of satisfaction at which a particular basic need ceases to be a major discomfort in life. One is then not motivated by the lower level need and he/she can go on to a higher level. An example of this might be that it is easier for you to study when you are not tired. As our lower level needs are met, we seek to satisfy higher level needs.

Living at the highest level of needs is healthier and more satisfying than living at the lower levels.

Look at Handout 3 and give some examples of how people behave based on the Maslow need system. If you do not agree with it, give some examples to demonstrate how it does not follow.

<u>Maslow's Five Needs</u>	<u>Actions Needed to fulfill needs</u>
1. Physical Needs	1. _____ _____ _____
2. Security Needs	2. _____ _____ _____
3. Social Needs	3. _____ _____ _____
4. Needs for Self Respect and Worth	4. _____ _____ _____
5. Needs for Self Fulfillment (Self Actualized)	5. _____ _____ _____

TYPES OF HUMAN NEEDS



Material From: METHODS AND MATERIALS FOR TEACHING OCCUPATIONAL SURVIVAL SKILLS.
Illinois State Board of Education, Department of Adult, Vocational, and Technical Education, 1978.

ASSESSMENT OF MY NEEDS

- I. My physiological needs (physical comfort, food, shelter, water, sleep, sexual fulfillment and other bodily needs).

/ _____ / _____ / _____ /

Never Fulfilled Somewhat Fulfilled Needs Fully Met

If a certain need is not met, how might you fulfill it?

- II. My safety needs (physical safety including security, stability, dependency and protection and emotional safety including freedom from fear, anxiety, disorder).

/ _____ / _____ / _____ /

Never Fulfilled Somewhat Fulfilled Needs Fully Met

If a certain need is not met, how might you fulfill it?

- III. My belongingness and love need (involve hunger for affection and belonging to a group).

/ _____ / _____ / _____ /

Never Fulfilled Somewhat Fulfilled Needs Fully Met

If a certain need is not met, how might you fulfill it?

- IV. My esteem needs (involves self respect and esteem of others).

/ _____ / _____ / _____ /

Never Fulfilled Somewhat Fulfilled Needs Fully Met

If a certain need is not met, how might you fulfill it?

LEARNING OBJECTIVE AREA: Self-Awareness

AGE GROUP: Any

LEARNING OBJECTIVE AREA(s): Personal Power, Communication

READING LEVEL: Any

NAME OF ACTIVITY: My Success Record

GROUP SIZE: Small to medium
10-25 is best.

MATERIALS NEEDED: Copies of Handout, Pens, Pencils, extra paper

TIME NEEDED: 1/2 Hour to 45 Min. for
two separate meetings.

PURPOSE

Self-Esteem building is the goal.

1. This activity encourages group members to give themselves credit for accomplishments whether they are minor or major.
2. It forces participants to see that they do in fact accomplish many successes everyday and to relate this fact to positive self-esteem.
3. It helps students focus on the positives and down play negatives by having to come up with an actual list of successes each day.
4. It also helps participants feel good about themselves and each other as they give praise to themselves and each other. This is an important communication skill.

DIRECTIONS FOR ACTIVITY:

1. Facilitator introduces activity by saying that we all do "successful" things everyday, but we often don't give ourselves credit for success as easily as we give ourselves blame for things we feel are failures. The purpose of this activity is to force us to give ourselves positive reinforcement and support so we can feel good about ourselves.
2. Ask group members to share examples of things they have accomplished recently. Explain that they can use small or large successes--the important thing is to begin giving ourselves credit or "self-praise." Facilitator may give her/his own examples to get group started such as cleaned my closet, listened to a friend who was upset, finished a paper for class, took care of a child, paid a bill, etc.
3. Distribute, "My Success Record" Forms and tell group to write down several examples for 5-10 minutes and then they will have a chance to share examples in pairs.
4. Congratulate group after 5-10 minutes for listing several examples. Ask them to share some items from list with a partner and to praise each other for successes.
5. After members have shared success records ask them how they felt doing this activity--was it difficult to get started? Did they feel silly or funny like they were "bragging?" How did they feel about partners responses? How did they feel giving each other "praise?"

PURPOSE

DIRECTIONS FOR ACTIVITY:

6. Ask group members to take a few minutes each day for the next week and list their successes for that day. Tell them you would like them to bring this "Success Record" to the class meeting in a week. They can again share feelings about successes and talk about whether it has made them feel different or better about themselves to have a habit of listing (and thus giving credit for) their successes for a whole week. (A warm-up exercise for each class for the next week might be to open the session by having each participant list a success they recorded. This also gives the facilitator an opportunity to assist group members who are having difficulty with this exercise.)
7. At the meeting in a week, ask members to bring out their "Success Records." Congratulate them for keeping a record and go through sharing and discussing their feelings about activities again using directions above. (Ask them how it feels to focus on successes only.)
8. Congratulate the group for their successes and tell them we're a wonderful group of successful people with many accomplishments to our collective credit—maybe you'll want to give praise statements to ourselves or each other.

Example: I think it's great that I _____, or, I think it's really good that you _____. Maybe you'll want group members to devise rewards for themselves or each other or maybe give "prizes" such as refreshments, chance to go for a walk outside, or other ideas.

PRIMARY OBJECTIVE AREA: Self Awareness

CROSS REFERENCE OBJECTIVE AREA(s): Relationships

NAME OF ACTIVITY: An Example Of How Media Influences Us

MATERIALS NEEDED: VCR, Blank tape, Handout 1, pens/pencils

AGE GROUP: Teen and up

READING LEVEL: Basic

GROUP SIZE: Any

TIME NEEDED: One to 1 1/2 Hours

PURPOSE

1. To examine the influence of the media on the development of self-image and personal goals.
2. To practice critical thinking.

DIRECTIONS FOR ACTIVITY:

1. Prior to class, tape 15 minutes of a soap opera and 15 minutes of a sporting event. Do not cut advertising out of the tape. Depending on your educational setting, you may want to preview the soap opera. You may choose instead to use two video tapes from the resource center (1-800-292-1606): "Killing Us Softly" and "Stale Roles and Tight Buns".
2. Ask how many people in the class watch television? Beginning with yourself, round robin and have everyone list their favorite television shows. Ask people what they like about their favorite shows. See if the class can devise a list of ways the media has influenced their lives.
3. Tell students that you are going to show them two 15-minute segments of two television shows. Ask that they watch the shows with a critical eye as to how shows and advertising influence our images of:
men
women
who we are
4. After the viewing is over, break the class into two groups. Have the first group complete Handout #1 looking at how the tape presented men. Have group 2 complete Handout #1 looking at how the tape presented women. Tell participants to recall both the shows and advertisements and list ways they saw each sex presented. Students will select a spokesperson to read their list in the larger group.

PURPOSE

DIRECTIONS FOR ACTIVITY:

5. Reconvene to the larger group. Ask a spokesperson for each group to read his/her list.
6. Process what students may have observed. Ask them: Do they believe that the media influences how our culture acts? Does the media influence children? If so, how? Does the media give us an ideal image of a family, women or men? If so, what's it like? Speaking of other medias, ask if: Radio, movies, newspapers, magazines or music impact our image of who we are?
7. Ask students to tune into how the media influences them this week.

Name of TV Show: 1. _____
2. _____

TV Show 1. _____
tells me that (wo)men are:

- 1.
- 2.
- 3.
- 4.
- 5.
- 6.
- 7.
- 8.
- 9.
- 10.

TV Show 2. _____
tells me that (wo)men are:

- 1.
- 2.
- 3.
- 4.
- 5.
- 6.
- 7.
- 8.
- 9.
- 10.

EMOTIONAL OBJECTIVE AREA: Self Awareness

COGNITIVE OBJECTIVE AREA(s): Personal Power

TYPE OF ACTIVITY: My Self Esteem

MATERIALS NEEDED: Copies of Handout, Pencils or Pens

AGE GROUP: Teen-Adult

READING LEVEL: Intermediate

GROUP SIZE: Any

TIME NEEDED: 20 - 30 Minutes

PURPOSE

1. Have participants look at themselves
as:
 - A) They see themselves.
 - B) How others see them.
 - C) They would like to be.
2. Practice self disclosure.
3. Ask participants to begin to analyze what healthy self esteem means.

DIRECTIONS FOR ACTIVITIES:

1. Give each participant a copy of the worksheet "Who Is The Real You?" Ask them to fill in the answers, noting that they do not have to share all of their responses.
2. Pair the participants and ask them to share one, two or three of their answers with each other. Ask each partner to listen intently.
3. Resume with the whole group and process what just took place. (Do not ask them to repeat what they heard) Questions to ask might include: How did it feel to share your answers? Are there some answers that you wouldn't share? Do you feel there are three identities? Has it changed since you matured? Can two or three identities become the same, etc.?
4. Write the words, self esteem, on the board. Ask participants to define, and write their definitions on the board. Discuss and list various ways we can achieve healthy self-esteem.

WHO IS THE REAL YOU?

In some ways we have three different identities. First, the way others see you. This is called your **perceived self**. This is how others perceive your behavior, your personality and even your **appearance**. It may be quite different from the way you see yourself. Then comes your **idealized self**. This is how you would like to see yourself, as well as have others see you. In some ways this is the self that helps set goals to work toward. The only time the idealized self becomes a problem is when you set your goals too high and expect perfection from the ideal self. And finally there is the **actual or real self**. This is the real you, the way you act, feel, think and look at this moment. We often get confused about these different selves. We often believe or hope that what people see is our ideal self, the one we'd like to be, when in fact they're simply seeing you as you really are (which in most cases is pretty good).

1. How do you think your friends see you? _____

2. Describe your real self. _____

3. Describe the ideal self you'd like to be. _____

From: The Dynamics of Relationships
By Patricia Kramer, Equal Partners
11348 Connecticut Ave., Kensington,
Maryland 20895

© 1

EMOTIONAL OBJECTIVE AREA: Self Awareness

LANGUAGE OBJECTIVE AREA: Communication

NAME OF ACTIVITY: Throwing Away "Put Downs"

MATERIALS NEEDED: Large piece of newspaper, markers

AGE GROUP: Any

READING LEVEL: Basic

GROUP SIZE: Any

TIME NEEDED: 1 Hour

PURPOSE

1. To understand how negative statements or put downs affect a person's self esteem.
2. To examine why others need to be critical of others.
3. To participate in a class environment where put downs are not allowed.

DIRECTIONS FOR ACTIVITY:

1. Tell the students that this activity will focus on put downs or killer statements.
2. Ask for a volunteer to have his/her body traced on the newspaper.
3. Tack the traced body up on the wall. Write one put down on it. Examples might include: "You are a nerd, stupid, fat etc." Ask for volunteers to come up and write their favorite put downs. Have them pass the marker to someone else. Let everyone write as many as they like. When the writing has stopped, ask someone to read the whole list out loud.
4. Write the word "feelings" on the blackboard. Ask students "If you were this person, how would you feel?" Write all of their feelings on the board. Use this as an opportunity for the class to share their own feelings when they are put down. You may want to share a time when you felt put down and how you felt. Allow plenty of time for students to hear one another.
5. Write "why" on the board. Ask students to give you reasons why people have the need to put others down. List the reasons under "why."
6. Tell students "Wouldn't it be nice if we lived in an environment that was free of put downs - that was totally safe from put downs?" Tear the traced body off of the wall, crumple it up and throw it in the basket. "From now on in our class, we will have a put down free environment."

LEARNING OBJECTIVE AREA: Self Awareness

LEARNING OBJECTIVE AREA(s): Relationships

NAME OF ACTIVITY: Shoulds and Wants and Life Goals

MATERIALS NEEDED: Handouts #1, 2, 3, and 4, Pens/Pencils

AGE GROUP: Teen-Adult

READING LEVEL: Intermediate

GROUP SIZE: Any

TIME NEEDED: 1 Hour

PURPOSE

1. To examine what each person really "wants" in life.
2. To examine what each person feels they "should" do in life.
3. To analyze the difference between "shoulds" and "wants" and their relationship to life goals.

DIRECTIONS FOR ACTIVITY:

1. Facilitator begins by relating differences between "shoulds" and "wants," encouraging feedback from group. (Use Facilitator Information Sheet.)
2. Brainstorm on board a list of general "shoulds." The Facilitator should feel free to list his/her own "shoulds."
3. Distribute Handout #1. Have participants make a list of their "shoulds."
4. Distribute Handout #2. Have participants make a list of their "wants."
5. Have participants make a list of 10 wants. Distribute Handout #3 and have them prioritize list of wants.
6. Go through questions for "Developing Life Goals From Wants." Have participants do this exercise and then discuss them as a group. (Handout #4)

SHOULD AND WANTS INFORMATION SHEET

Life Goals and Career-Planning Process

The most effective method of career selection is the taking-charge method. This method requires that you decide how you want to live your life prior to selecting a career and choosing a job. This involves creating life goals and using them as a foundation for your career choice. In this way, your career choice would be compatible with your chosen life goals.

For your life goals to be meaningful, you must have good understanding about who you are, what you can do, and what you want out of life. By assessing your skills, personality style, interests, needs and values, you have obtained at least some clarity about who you are and what you can do. The following exercises will help you identify your top priority wants in life.

Clarifying What You Want in Life

Knowing what you really want in life makes the task of developing a life goal a simple one. Clarifying your wants, however, may not be so easy. Wants are often hidden beneath our "shoulds." "Shoulds" are beliefs about what you ought to do, be, or have and are usually strongly influenced by the thinking of others; your parents, the media, public opinion, current popular values, etc., conspire to convince you of what you should do, have, or be. You should always eat everything on your plate, according to parental reminders. Television commercials bombard you with the message that to avoid bad breath you must use a particular brand of toothpaste or mouthwash. On election day you are constantly reminded that it is your public duty to vote and that you should vote for the candidate of your choice. These and other "shoulds" have left their imprint upon us. Often they lie just below the level of our awareness and serve a nagging reminder of what we are "supposed" to do.

"Wants," on the other hand, are expressions of what you really desire to have, do, or be. They reflect those things that attract your interest or enthusiasm, those things that grow from your wishes, dreams, aspirations, and fantasies. They reflect the inner you--the real you.

People's wants are often overshadowed by their "shoulds". "Shoulds" can prevent you from being in touch with your true wants. For this reason, it is important to clearly separate your wants from your "shoulds". Life goals that are created out of "shoulds" do not work because they are too much like New Year's resolutions, full of good intentions, but in the end, usually resisted. Life goals developed out of true wants, however, enlist our full energy and provide a winning combination. The following exercises are designed to assist you in identifying your "shoulds" for the purpose of uncovering your wants.

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Borchard et al: YOUR CAREER: Choices, Chances, Changes.
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IDENTIFYING YOUR "SHOULD"

Listen to the echoes of your parents "should" messages. Tune in to the obviously manipulative messages from the media. Recall the things your friends and acquaintances said you should do. Reflect on the compelling popular values of our time. Then identify and list below as many as you can of the "shoulds" that influence your thinking or behavior.

Examples:

I should lose about ten pounds so I can fit into my bathing suit.

In order to be popular with women, I should have dark wavy hair, a sleek but muscular body, and sports car with bucket seats.

Life is too short. I should work less and have more fun.

MY LIST OF "SHOULD"

IDENTIFYING YOUR "WANTS"

Now that you have identified your "shoulds," you are freer to distinguish your "wants." As you identify your "wants", don't list the petty little things such as telling off your boss, or taking a sledgehammer to your neighbor's stereo. Instead, list those *big* things in life that you really want to do, be, or have. Think *BIG*. Use your creativity, and don't be limited by your current self-concept (I never could be, have, or do that). Think beyond what you believe are your limitations and consider what is possible for you. Include your wildest fantasies, your innermost desires and longings, and your most fervent wishes. List as many wants as you can think of --go for 40 or more.

Examples:

1. I want to develop my interpersonal communication skills by attending personal growth workshops led by the world's foremost authorities.
2. I want to become an astronaut and explore space.
3. I want to invent solutions to the world's environmental problems.
4. I want to play the piano before audiences all over the world.
5. I want to help disadvantaged children learn how to read proficiently.

MY LIST OF "WANTS"

PRIORITIZING YOUR "WANTS"

Go over your list of wants and circle the ten that excite you the most and then prioritize them below in order.

- 1.
- 2.
- 3.
- 4.
- 5.
- 6.
- 7.
- 8.
- 9.
- 10.

DEVELOPING LIFE GOALS FROM "WANTS"

Now that you have identified and prioritized your top ten current wants, the next step is to translate your wants into life goals. For your top five wants on your prioritized listing above, create at least one corresponding life goal as in the following examples:

1. **Life Goal A:** I will continue to search out, discover, and develop my communication and listening skills.

Life Goal B: I will remain open and flexible to new and innovative ideas, concepts, and programs for becoming a more effective communicator.

2. **Life Goal A:** I will become and stay knowledgeable about the sciences related to space travel, physics, astronomy, mathematics, etc.

Life Goal B: I will pursue a career as an astronaut with the NASA space exploration team.

3. **Life Goal A:** I will learn as much as possible about the causes of and cures for environmental problems.

Life Goal B: I will have my own environmental consultant firm or be an administrator with a government, U.N. or private firm that is devoted to eliminating the world's environmental problems.

PRIMARY OBJECTIVE AREA: Self-Awareness

SECONDARY OBJECTIVE AREA(S): Personal Power

NAME OF ACTIVITY: Self-Awareness Inventory

MATERIALS NEEDED: Self-Evaluation Inventory, Pens, Pencils, Chalkboard

AGE GROUP: Teen & Up

READING LEVEL: Intermediate

GROUP SIZE: Any

TIME NEEDED: 1 Hour or more

PURPOSE

DIRECTIONS FOR ACTIVITY:

1. Identify five areas to improve upon.
2. Identify barriers to behavior change that they may be experiencing.
3. Seek solutions to problems with problem solving strategies while supporting behavior changes of other group members.

It is important to know ourselves; to be aware of our strengths and weaknesses; our values. The more information we possess about ourselves the better we are able to take control of and manage our lives. The following activity offers a way to make self-evaluations based on the participant's understanding of their personal characteristics, strengths and weaknesses.

1. Leader talks about the importance of change and risks involved; the need to want to change. It could be a change in one's style, preference, and appearances, etc.
2. Have group select a behavior example they would want to change; write it on the chalkboard. Examples might be: eating less, being more talkative, comfortable at parties, etc.
3. Discuss risks and probable losses involved in changing this behavior; write them on board in two columns under payoffs and losses.
4. Pass out Self-Awareness Inventory and have them circle either Y, N or M. Continue with "Further Instructions," on the handout.
5. Have each one select 5 items from the list that they want to change now.
6. Divide group into two or more and have them share the 2 or 3 items from their lists with the group. (Leader should circulate among groups to encourage members to be supportive, rather than rejecting.) Ask group members to share problem solving strategies with each other.
7. Ask for volunteers to share their "problem solving." Get additional feedback from group.

AM I SOMEONE WHO... ?

(An exercise in self-discovery)

Yes No Maybe

I am someone who . . .

	Yes	No	Maybe
1. Enjoys being with people			
2. Judges others by their accomplishments			
3. Will put things off			
4. Is hard to satisfy			
5. Is capable of handling opinions different than my own			
6. Enjoys leisure time and creative development			
7. Finds it hard to "get going"			
8. Has high ethical standards			
9. Is very conscious of my appearance			
10. Is able to take risks without too much anxiety			
11. Considers failure a bad thing			
12. Is inclined to blame others when experiencing failure			
13. Is inclined to take all the credit when experiencing success			
14. Appreciates compliments and recognition			
15. Expects others to like and value what I like and value			
16. Would like some changes in my life			
17. Values close friends and relationships			
18. Is well organized			
19. Enjoys listening to people			
20. Appreciates beautiful things			
21. Likes to watch what other people are doing			
22. Encourages people to do and be their best			
23. Is able to share with others			

**Self Awareness
Self Awareness Inventory
Handout 1 - Page 2**

	yes	no	maybe
24. Sets goals that are not impossible to reach			
25. Rewards myself for reaching one of my goals			
26. Isn't afraid to ask questions			
27. Sets priorities and deadlines			
28. Doesn't give up			
29. Knows what my values are			
30. Enjoys a good laugh			

Further Instruction:

-Now read over each item again and decide whether you would like to change this particular characteristic. If you are satisfied to continue as you are with this item, leave your answer as marked.

-If you'd like to change by having the item become more true of you than it is now, place a PLUS (+) next to your answer.

-When you have finished, count the total number of + items and enter this total at the bottom of the page.

-Finally, pick out the five items you strongly desire to change right now and circle the entire statement.

-In pairs and/or with the entire group share 2 to 3 of these 5 items; how you feel about these items.

-Have others share their impression and perhaps make suggestions that might be helpful

LEARNING OBJECTIVE AREA: Self-Awareness

LEARNING OBJECTIVE AREA(s): Personal Power

NAME OF ACTIVITY: Future Lifestyles

MATERIALS NEEDED: Newsclips, Magazines or Newspapers, Papers
Scissors and Glue

AGE GROUP: Teen-Adult

READING LEVEL: Basic

GROUP SIZE: Any

TIME NEEDED: 30 - 45 mins

PURPOSE

1. Examine past life goals or patterns.
2. Dream about future life goals.

Being able to establish goals, whether they are day to day or long term, is very helpful in setting a course or direction for your life. This exercise will help participants improve their goal-setting abilities.

DIRECTIONS FOR ACTIVITY:

1. Have each person take a minute to dream about what they would like to have or want to be.

Discuss how fantasy is sometimes a clue to what we want or want to be.
2. Take a look through newspapers and magazines to find photographs or news stories which depict a variety of lifestyles. Select one or a combination of pictures which particularly appeals to you, one you would like to be a part of. You may choose to make a collage (collection of pictures), or if you are unable to find a picture to fit any aspect of what you would like to be, draw one. This can also be assigned as homework.
3. Divide group into small groups or as one large group and discuss what they have selected. Why and for what? Ask participants to explain their picture of their future lifestyles.
4. Bring class back together to discuss:
 - a. Was the exercise helpful or enjoyable?
 - b. What did you learn from it?
 - c. Is this only a dream or could it become a reality?
 - d. What did you learn about other people?

PURPOSE

DIRECTIONS FOR ACTIVITY:

5. The lifestyles exercise expressed some of your dreams and your values. By looking back at "Understanding Our Own Values," contained in this unit, you will examine your values closer and share them with others who may have the same or different values than you have.
6. Pass out Goal Setting worksheet and have participants fill it in. (May be used as homework assignment.)
7. Discuss how these goals relate to the values we have defined in the previous activity. This could be done in pairs or as a whole group. Ask for specific examples from group.

GOAL SETTING WORKSHEET

What do I want to be doing tomorrow?

How can I accomplish this?

What do I want to be doing next week?

How can I accomplish this?

What do I want to be doing at the end of the month?

How can I accomplish it?

What do I want to be doing at the end of this year?

How can I accomplish it?

What do I want to be doing in 5 years?

How can I accomplish it?

If you are unable to set any of these goals, write three reasons why you are unable to do so.

1. _____

2. _____

3. _____

PRIMARY OBJECTIVE AREA: Self Awareness

CROSS REFERENCE OBJECTIVE AREA: —

NAME OF ACTIVITY: Evaluation

MATERIALS NEEDED: Paper, Pencil, Envelopes, Stamps

AGE GROUP: Teens and Up

READING LEVEL: Intermediate

GROUP SIZE: Any

TIME NEEDED: 15 min. to 30 min.

PURPOSE

1. To evaluate material covered in each unit.
2. To provide an opportunity to do self assessment.
3. To practice written communication skills.
4. To help develop and reinforce long term goals.

DIRECTIONS FOR ACTIVITY:

1. At the end of each unit, have students compose a letter to themselves. In the first unit covered (usually Self Awareness), have students address an envelope to themselves. Collect the envelopes to send with the letters upon completion of the whole course.
2. Explain to students that they will have an opportunity to evaluate what they have learned. They will be writing an on-going letter to themselves about what they have learned or experienced as a result of each unit. (The length of the letter is up to the facilitator.) The facilitator should stress this letter allows them to look back, evaluate and maybe even write down goals for the future. The facilitator may want to provide a sample letter for the unit that has just been completed.
3. Have students write the letters while in class. The facilitator should circulate among the students to assist anyone who may have difficulty.
4. Collect letters. Read them. At the end of each unit, return student letters so that they may write additional evaluations.
5. When the course is complete, send the letters to each student.

Self Awareness Bibliography

A partial listing of books, articles, and curriculums which our writers and editors recommend. For additional help in selecting relevant reading or audio-visual materials, please call the Michigan Vocational Education Resource Center at Michigan State University: 1-800-292-1606.

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SUCCESSFUL LIFE SKILLS

SECTION 2

OBJECTIVE: COMMUNICATION SKILLS

UPON COMPLETION PARTICIPANTS WILL BE ABLE TO BUILD COMMUNICATION SKILLS THAT FOSTER POSITIVE RELATIONSHIPS AND SELF-EXPRESSION.

Supporting Objectives: Participants will be able to:

- Identify their own and other's verbal and non-verbal communication blocks.
- Practice listening behaviors that promote clear communication and utilize empathic listening skills.
- Experience sending and receiving messages using active listening skills.
- Experience giving and receiving feedback.
- Practice using assertive communication skills to state personal needs and thoughts.
- Develop appropriate ways of handling conflict.
- Describe appropriate communication patterns for the workplace.

CONTENT AREA: Communication Skills

AGE GROUP: Teen - Adult

LEARNING OBJECTIVE AREA: Personal Power, Self Awareness

READING LEVEL: Basic

SKILLS: Verbal and Non-verbal Communications

GROUP SIZE: Any

EQUIPMENT: Overhead Projector

TIME NEEDED: 30 Minutes

PURPOSE

1. To be aware of verbal and non-verbal communications.
2. To deliver messages in various ways to observe the effect of tone and body language.
3. To realize that non-verbal cues are as important as the words you say.

DIRECTIONS FOR ACTIVITY:

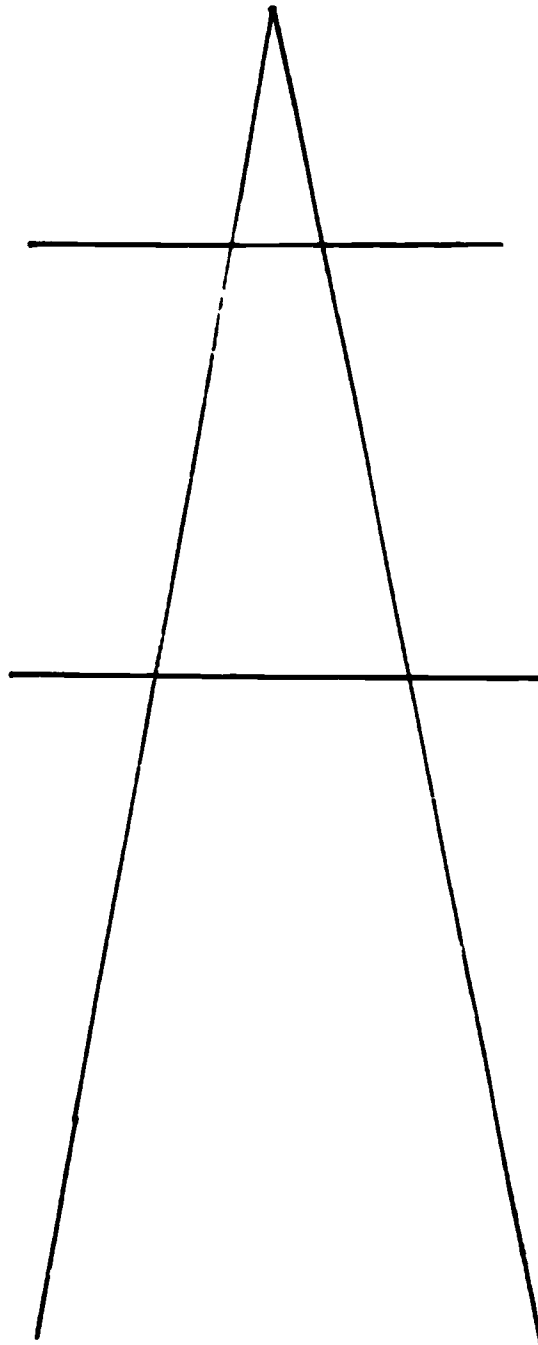
1. Introduce concept of communication with overhead on "Communication Is Like An Iceberg." Point out that words are only a small portion of our messages.
2. Put the statement "I'm mad" on the board. Say the statement with many different tones, inflections and nonverbal cues. Ask students to look at what conveys a stronger message. Words or actions? Select a few of the following statements and ask volunteers to read them in different ways (loud, soft, angry, with fear, contempt, emphasis on different words, impatience, satisfaction, smiling, frowning, laid back, nervous, etc.)
 - o No I'm not mad.
 - o I love you.
 - o Clean up your room.
 - o I'm all right.Ask participants how they felt when the message changed.
3. Non-verbal messages can account for 93% of the communication. Ask participants to think about how powerful non-verbal communications are. (Put transparency up again. Explain it.)
4. Make a "T" chart of positive and negative non-verbal behaviors.

Positive	Negative
Eye contact	Tapping of fingers on table

Discuss how these affect the speaker and the communications process.

Role play some of the behaviors for further clarification. You may want to have volunteers do the role playing.

COMMUNICATION IS LIKE AN ICEBERG



7% = words

**most visible but accounts
for least amount.**

23% = non-verbal

**Facial expressions
Gestures
Tone of Voice/Body
Language**

70% = Behavior

Adapted from: Ellis, Lankowitz, Maisey
Ireland: Master Student

PRIMARY OBJECTIVE AREA: Communication Skills

AGE GROUP: Teen - Adult

SECONDARY OBJECTIVE AREA(s): Self Awareness, Relationships,
Personal Power

READING LEVEL: Basic

MODE OF ACTIVITY: Body Language

GROUP SIZE: Any

MATERIALS NEEDED: Large Room, Chairs

TIME NEEDED: 30 Minutes

PURPOSE

1. Sometimes physical barriers can get in the way of effective communication leading to "blocks" in the communication.
2. By having participants experience a real life activity using non-verbal communication, they will develop an awareness of the importance of sending and receiving clear, unhindered messages.

DIRECTIONS FOR ACTIVITY:

1. Have participants choose a partner.
2. Participants will arrange their chairs so that they are back-to-back -- about 18 inches apart.
3. Have each partner sit down with their backs to each other and carry on a conversation about something they are interested in (something in class; an activity they attended, or something that happened with their children, etc.)
4. After 2 minutes have participants move 16 feet apart remaining back-to-back, and continue to talk for another 3 minutes.
5. The facilitator will lead a discussion:
 - A. How did you feel when you were unable to look at your partner?
 - B. Were you physically uncomfortable in trying to talk?
 - C. What were your feelings when you moved further apart?
 - D. Does this experience tell you why some people prefer not to talk on the phone?
 - E. Do you often communicate this way with others in family?
 - F. How important are gestures and eye contact in communication?
 - G. What can you do to improve situations when these things happen to you?

PRIMARY OBJECTIVE AREA: Communication Skills
SECONDARY OBJECTIVE AREA: Personal Power
NAME OF ACTIVITY: Talk to Me
MATERIALS NEEDED: Handout or Plain Paper

AGE GROUP: Teen - Adult
READING LEVEL: Basic
GROUP SIZE: Any
TIME NEEDED: 15 Minutes

PURPOSE

1. Practice written communication skills.
2. Allow participants to express themselves in an alternative manner to communicate concerns to the Facilitator.

DIRECTIONS FOR ACTIVITIES :

1. Tell participants that you are beginning a practice that they can do it whenever they like throughout the course. (You can furnish them with multiple copies of the form or let them use their own paper.) Stress that they can use this exercise whenever they want to communicate with you privately via paper.
2. Give participants permission to write you their concerns. Tell them that all material is confidential and you will respond.
3. Give students an opportunity to practice this at the close of the class (10 minutes) to tell you how they felt about what happened in class today. Return the form to students with comments at the next class meeting.
4. Periodically (throughout the course) point out that participants can hand in their concerns.
5. You may also want to use this as a closing exercise on days when the group seems particularly sluggish or resistant.

TALK TO ME

DATE: _____

SIGNED: _____
or anonymous

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CONTENT AREA: Communication Skills
CONTENT OBJECTIVE AREA(s): Relationships
ACTIVITY: Communicating Spoken Instructions
MATERIALS NEEDED: Two Handouts, Paper, Pen

AGE GROUP: Teen - Adult
READING LEVEL: Intermediate
GROUP SIZE: Any
TIME NEEDED: 30 to 45 Minutes

PURPOSE

1. Recognize that there are varied ways to communicate.
2. Understand the impact of giving and receiving instructions in the workplace.
3. Practice giving and receiving spoken instructions.
4. To examine ways communication breaks down in the workplace.

Note: Directions and worksheet #1 & #2 are from Methods & Materials for Teaching Occupational Survival Skills - Illinois State Board of Education & Dept. of Adult, Voc. and Tech. Ed. - August 1978, pp. 15 - 19...

DIRECTIONS FOR ACTIVITIES:

1. Tell students that in this activity they will use their skills in a) listening to job instructions and b) communicating job instructions correctly to someone else.
2. Explain that a team of three to five students will leave the main classroom. As they are brought back into the room, one at a time, they will be given a set of instructions.
3. Explain that you will read the instructions aloud to the first team member coming back into the room. This first member will try to remember the instructions so that he or she can communicate these instructions to the next student coming into the main classroom.
4. In turn, each of the five team members will hear the instructions and then attempt to repeat them to the next member. This procedure will be repeated until all five students have participated. The fifth team member will repeat the instructions to the entire class.
5. The person receiving the instructions may not ask questions. The person giving the instructions may not repeat the instructions.
6. Distribute Student Worksheet #1 - Pick-up Truck Instructions. Students not participating in the passing of information will listen as each person repeats the instructions, noting any mistakes.

PURPOSE

DIRECTIONS FOR ACTIVITIES:

FOLLOW UP:

1. After the activity is completed, have the students use their work-sheets to answer the following questions:
 - o How did the instructions change as they were passed from person to person? What was added or left out?
 - o What effect could mistakes in the instructions have on the way the job is done?
 - o (To team members): How could you improve the giving and receiving of instructions?

Examples: asking questions
repeating the instructions
writing the instructions down
 - o (To team members): Do you think that asking questions and repeating the instructions would improve accuracy? Why or why not?
 - o Suggest that the class give the participants a hand for volunteering.

2. Select another team of three to five class members and repeat the procedure using Student Worksheet #2 - Supply Room Instructions. This time, allow team members to ask questions, repeat instructions or take notes.

Examples: take written notes
ask questions
repeat instructions
pay close attention

PURPOSE

DIRECTIONS FOR ACTIVITIES:

FOLLOW-UP:

- o How can we improve our skills in giving spoken instructions?

Examples: State instructions simply
Ask if there are any questions
State instructions slowly

- o List additional ways of making sure we give and receive instructions correctly.

Examples: Assign numbers or steps to each part of the instructions.
When giving instructions, tell the reason for doing a task.
Don't trust your memory. You may be given additional information, which may confuse you or cause you to forget.

STUDENT WORKSHEET #1 PICK-UP TRUCK INSTRUCTIONS

Ask Jim Richards for the key to the blue pick-up truck. Drive the truck to the automotive shop in Building B. Tell the mechanic to change the right front tire. Ask the mechanic to leave the ignition key under the left sun visor. Tell Rupert to go to the shop tomorrow morning and drive the truck back here.

TEAM MEMBER

MISTAKES

#1

#2

#3

#4

#5

STUDENT WORKSHEET #2 SUPPLY ROOM INSTRUCTIONS

Go to the supply room at the west end of the ground floor of the building. Ask for three small packages for Linda Ames. The clerk will give you two copies of the invoice. Check the invoice with the clerk. Sign the white copy and deliver the three packages and the yellow copy to Linda Ames in the Accounting Office.

TEAM MEMBER	MISTAKES Column A	How did the person make sure he/she understood the instructions? Column B
#1		
#2		
#3		
#4		
#5		

Worksheet #1 & #2 are from Methods & Materials for Teaching Occupational Survival Skills - Illinois State Board of Education & Dept. of Adult, Voc. and Tech. Ed. - August 1978, pp. 15 - 19...

PRIMARY OBJECTIVE AREA: Communication Skills

AGE GROUP: Teen and Adult

CROSS REFERENCE OBJECTIVE AREA(s): Personal Power, Self-Awareness, Parenting, and Relationships

READING LEVEL: Intermediate

TYPE OF ACTIVITY: Steps for Listening Process, Avoiding the Roadblocks to Listening

GROUP SIZE: Any

MATERIALS NEEDED: Handouts #1, 2, 3, - Facilitator's Activity Directions

TIME NEEDED: 45 minutes to 1 hour

PURPOSE

DIRECTIONS FOR ACTIVITY:

1. Develop understanding of ten effective techniques for listening,
2. Practice and/or observe effective listening skills/techniques and
3. Gain more understanding of what interferes with our listening and discuss ways to overcome barriers to listening.
4. Experience a roadblock to communication and feel the effect it has on communication and emotions.

Imagine a world where nobody listens... Listening skills are important in the communication process. Improving our listening helps us to understand other's messages and react appropriately at work and in school and helps us to understand other people so we can improve our relationships.

1. Introduce listening activity by saying we've all had experiences where we felt we weren't being listened to and probably had times when other people felt we didn't listen. (Allow for sharing if group wishes.) Effective listening makes us feel good. Let's work with our Steps for Listening handout and see how it can help us listen better. (Distribute handout.)
2. Reads aloud while group looks at handout Steps 1 through 10 and demonstrate or act out examples of steps with volunteers from group.

Example for No. 1: Refer to self as "listener" and sit with back to "volunteer" as though looking through files while she/he talks. Ask how volunteer feels about your "listening style." Then have volunteer tell you a story while you face them attentively. Ask for feedback again.

Use similar illustrations or demonstrations for all ten steps encouraging discussion of feelings about each "role play" of the techniques.

3. Divide into pairs and ask that they take turns speaking and listening (any topic). Tell "listeners" to interrupt constantly. Have pairs take turns being "listeners" and ask pairs how they felt doing this exercise. Next have pairs use good listening techniques that have been discussed and ask for discussion of reactions.

PURPOSE

DIRECTIONS FOR ACTIVITY:

4. Read through "Roadblocks to Communication" section of Handout No. 1 and perhaps go over Handout No. 2 with the group, pointing out that Handout No. 2 relates more to listening in a classroom or learning situation.
5. Have students participate in the activity, Trying Out A Roadblock. Let eight volunteers experience a roadblock and then the class processes it according to the facilitator's activity sheet.
6. Close activity by asking participants to review in their own words what they've learned about listening and put these on the board. Ask them to review handouts and practice techniques on their own.

TRYING OUT A ROADBLOCK

1. Place class in a circle. Explain that today we are going to experience a roadblock and see what it does to our feelings. As we proceed with the exercise, think about things people have said to you and how you felt. We will discuss these feelings following the exercise.

Facilitator asks for eight volunteers to say in different ways, "I just broke up with my boyfriend." Then the Facilitator uses the following roadblocks. Be sure to ask the group to keep track of their feelings and identify them.

2. After the student states the following, respond with the roadblocks:

- a. Ordering - "Forget him, you must get on with your life."
- b. Warning - "I told you he was no good. You know you can't trust him."
- c. Preaching - "Well, you had no business dating him anyway."
- d. Advising - "Just try to forget him, get involved in something else."
- e. Judging - "You can do better than him, he is a no-good."
- f. Name-calling - "He is just a jerk, bag him."
- g. Interpreting - "It never would have worked, you are too different in your backgrounds."
- h. Teaching - "You can learn from this, next time date someone who is more mature."

3. Now have students process their feelings:

- a. What were you feeling with the roadblocks?
- b. What happened to your desire to discuss the issue?
- c. What did you need instead of the above comments?

4. Facilitator Comment:

Be sure to get the following message across to the students - when you know what the roadblocks do to the feelings of people, try and avoid them in your relationships.

STEPS FOR LISTENING

Practice these techniques next time you listen:

- PHYSICAL:**
- (1) Sit facing the other person
 - (2) Maintain eye contact
 - (3) Be aware of your distracting mannerisms
 - (4) Establish a comfortable distance from the other person
 - (5) Physically demonstrate concentration
 - (6) Relax
- MENTAL:**
- (7) Focus mentally, shutting out own thoughts and distractions
 - (8) Suspend judgement
 - (9) Wait to respond - really listen first before thinking of your answer
- VERBAL:**
- (10) Repeat content back to speaker

Even when we use the above techniques to strengthen listening skills, our minds can wander.

Roadblocks to Communications

Some behaviors or non-verbals block the communications process. Some words also stop our ability to communicate. These words are called roadblocks and here are eight examples.

1. Ordering, directing, commanding
"Clean the house by this afternoon."
"Take this over to John's."
2. Warning, threatening
"If you do that, I'll slap your face."
"I told you, now you've had it."
3. Preaching, moralizing
"You really shouldn't go out on dates with a young baby at home."
"I never did the things you do."
4. Advising
"You really need to dress the baby in heavier clothes."
"How about starting your homework now, so it won't be late."
5. Judging, criticizing, blaming
"I was sure you would do better than you have."
"Look at this, you caused me to be late."
6. Name calling, ridiculing, shaming
"You dummy jerk."
"Shame on you, I can't believe you did that."
7. Interpreting, psychoanalyzing
"Why are you so sensitive?"
"I know why you said that, you are just getting back at me."
8. Teaching, instructing
"Would you like someone talking like that to you?"
"Boy, do you know how much this will cost just to fix up your carelessness?"

Roadblocks do not open communication. They hurt feelings and close people to further talking or communication.

Adapted from Thomas Gordon, Parent Effectiveness Training.
By: Lynette Boylen, Godwin Heights Public Schools

TEN KEYS TO EFFECTIVE LISTENING

1. **LISTEN FOR IDEAS, NOT FACTS.** (Start relating the facts to ideas as soon as you receive them)
2. **JUDGE CONTENT, NOT DELIVERY.** (Listen carefully to what people say, not their delivery. A person speaking with the air of authority could be dead wrong.)
3. **LISTEN OPTIMISTICALLY.** (Make the conscious effort to be interested. The new material may be enjoyable.)
4. **DON'T JUMP TO CONCLUSIONS.** (By assuming we know what is coming next we can seriously damage our understanding of what is being said. Clear your head of your own ideas and listen to the speaker's.)
5. **ADJUST YOUR NOTE-TAKING TO THE SPEAKER.** (Try to figure out as soon as you can how the speaker is organizing his/her ideas, and suit your note-taking to his/her style.)
6. **CONCENTRATE.** (Focus on the speaker. Give him/her your attention and thought. Become aware of what interferes with your concentration and fight it.)
7. **WE CAN THINK FOUR TIMES FASTER THAN A SPEAKER CAN TALK.** (Use this "space gap" to summarize and interpret, evaluate and respond.)
8. **WORK AT AND PRACTICE LISTENING.** (Effective listening is hard work. Responding and giving feedback shows interest. Intensive listening will even increase the heart rate and sometimes cause perspiration.)
9. **KEEP AN OPEN MIND AND HOLD YOUR EMOTIONS IN CHECK.** (Be aware that each person has their own set of emotion-laden words or situations that trigger thoughts, feelings and memories; deal with these and go on.)
10. **EXERCISE YOUR MIND.** (Only by handling difficult material do we gain confidence in our mental capacities, and stretch those capacities.)

LEARNING OBJECTIVE AREA: Communication Skills

AGE GROUP: Teen - Adult

CORE REFERENCE OBJECTIVE AREA(s): Personal Power, Self-Awareness, Parenting, and Relationships

READING LEVEL: Intermediate

MODE OF ACTIVITY: Active Listening Process

GROUP SIZE: Any

MATERIALS NEEDED: Blackboard, Handout

TIME NEEDED: 1 - 2 Hours

PURPOSE

DIRECTIONS FOR ACTIVITY:

1. Develop a skill for listening when another person has a problem.
 2. Practice the skill of active listening in a classroom situation.
 3. Practice listening behaviors that promote clear communication and utilize empathic listening skills.
 4. Identify verbal communication blocks in the active listening process.
 5. Experience giving and receiving feedback.
1. Point out that there are times when we need a more advanced skill in listening called active listening. We use active listening when the speaker has a problem and needs to be listened to. This helps us learn to give feedback and help others in solving their problems.
 2. Use the Instructions for Teaching Active Listening (Facilitator Resource #1) with the class. Proceed through the instruction sheet.
 - a. Define active listening and why we use it.
 - b. Role play the active listening dialogue.
 - c. Discuss the active listening guidelines.
 - d. Place the active listening beginning statements on the board and give examples.
 3. Using Section 7 of the Facilitator's Resource #1, explain to students this process can also clarify what another person is saying. If you don't understand the intent of another's message, you may paraphrase and active listen for clarification. This is especially helpful in a conflict situation. It serves to clarify and also to calm the parties down. It is an excellent way to be sure you are communicating and hearing each other.

PURPOSE

DIRECTIONS FOR ACTIVITY

4. Pass out Handout #1 as a follow through to active listening.
5. Tell the group that you will ask them to do active listening with another in the class whenever you feel they are having difficulty understanding another person's message. From this point on, you are establishing active listening as a class norm.

INSTRUCTIONS FOR TEACHING ACTIVE LISTENING

1. What is Active Listening?

Active listening is a process you use when someone you care about has a problem and needs to talk and be listened to. It is not a time to give advice, but only to reflect back to the person what he/she is saying. This enables the person to sort out his/her feelings and come to a personal conclusion of problem solving.

It is not the responsibility of the listener to solve the other person's problem. This is a must to get across to the students. Please have them guard against this. Have them recall how the advice giving in the roadblock exercise made them feel.

2. Active listening is a skill which must be developed. One needs to learn to listen for the feelings of the other person and reflect these feelings back by paraphrasing. (the following dialogue is excellent to role play.)

Examples:

Speaker: "I don't know what to do with the baby."

Feedback: "You are having a tough time making a decision."

Speaker: "Yes, everyone is giving me advice."

Feedback: "Lots of people think they know what is right for you."

Speaker: "Ya, I am tired of Mom saying I should stay home and not date on Saturday night. She won't even help by babysitting."

Feedback: "Mom makes you feel guilty about going out by not wanting to babysit."

Speaker: "Ya, I am too young to just sit home all the time, but I know I should be with the baby."

Feedback: "You wish you could spend more time at home with the baby, but you want to go out too."

Speaker: "I guess I am just pressured by all the work of the baby."

Feedback: "Having a baby takes a lot of your energy and you don't have time for yourself."

Speaker: "Yes, I just wish I could have some time away. I know I love my baby, but I am really having a hard time right now. I guess I just needed to talk. Thanks for listening."

3. You only let the person vent their feelings. You cannot solve their problem. You are a friend just by allowing them to talk and hearing them.

4. Active listening guidelines:

- a. Paraphrase what the speaker said to be sure you heard his/her words and intent.
- b. Don't repeat verbatim in a monotone voice or get defensive or correct. This is like a put-down.
- c. Your task is to clarify what the speaker is feeling and feed back the feelings to the speaker.
- d. Stay with the feelings of the speaker. Do not give your own opinions.

5. Some active listening beginning statements:

- a. "You feel _____."
- b. "Seems like _____."
- c. "When that happens you _____."
- d. Sometimes silence and a nod of the head.
- e. If a person is really emotional and crying - a hug.
- f. Sometimes just an uh-huh (any expression of understanding).

6. Active listening exercises:

a. Group active listening process:

In this activity, the Facilitator must share a problem that she is having or has had. You tell the class that you need to be listened to, and you are going to allow them to practice the active listening process with you before they begin their group practice sessions.

The rules are:

1) As the Facilitator shares the problem he/she uses hand signals to tell the group a response is needed. You may simply bring your hand towards yourself as if motioning someone to come towards you. Anyone in the group may respond. When they respond give a nod if it is a good response and go on. If it needs to be restated, hold your hand up as if to signal stop. Continue the process until several group members have had an opportunity to respond or until the problem is solved or worked through by the speaker. Be sure to watch for the roadblocks.

2) Process this when finished:

How did this feel to you?

Was it hard not to give advice? Why?

Would this process be helpful if you had a problem?

- b. Divide group into three's with the following:
one speaker, one listener, and one observer.

1) The tasks are:

- speaker shares a problem of his/her choice
- listener role plays the other person in a situation
- observer gives feedback on the process at the end of the dialogue
- each person gets a chance to play each role
- participants may choose any problem or issue to discuss which they have strong feelings about. The listener plays the part of the teacher, spouse, child, or whomever is involved.

2) Process following the activity:

- was the feedback appropriate and not a roadblock?
- did you experience any problems with the process?
- how did the process feel for the speaker, listener, and the observer?
- would you like a friend to use this skill with you when you have a problem?

- c. Other active listening activities may be used, but encourage students to practice this skill whenever they have an opportunity. It is one of the most helpful friendship skills they can acquire.

7. Using Active Listening to clarify and further understand:

- a. Use active listening to summarize directions given to you by a job supervisor.
- b. In general conversation, use active listening to get feedback from speaker to confirm your understanding of the intent of their message.
- c. Use active listening when dealing with an angry person to calm them down and clarify.

Use the same process of listening and reflecting as you would when another person has a problem. This type of listening increases the level of understanding in the communication process.

Student Activity - Have students recall times in their experiences when it may have been helpful to receive clarification from the speaker before they responded.

FEEDBACK

FEEDBACK SHOULD BE HELPFUL TO THE PERSON RECEIVING IT

**TO BE HELPFUL, THE PERSON -
MUST BE ABLE TO UNDERSTAND THE INFORMATION
MUST BE ABLE TO ACCEPT THE INFORMATION
MUST BE ABLE TO DO SOMETHING WITH THE INFORMATION**

Certain types of **FEEDBACK** serve only the needs of the person giving it and not the needs of the person receiving it. For instance, it would be unrealistic to think that kicking the computer would effectively change its behavior. Rather, what the programmer does is input new information concerning the machine's behavior, new data, so that a new response can be generated. Similarly, when dealing with human beings, **FEEDBACK** should aid in finding new responses.

HOW TO GIVE FEEDBACK

1. Perceptions, reactions and opinions should be presented as such and not as facts.
2. Feedback should refer to the relevant performance, behavior, or outcome; not to the individual as a person.
3. Feedback should be in terms of specific observable behavior--not general.
4. When feedback has to be evaluative rather than purely descriptive, it should be in terms of established criteria, possible outcomes or possible improvement rather than "good" or "bad".
5. Feedback should include a complete discussion of all things which are reacted to positively as well as negatively.
6. In discussing problem areas, suggestions should be made regarding possible means of improving performance.
7. Feedback should avoid "loaded" terms which produce emotional reactions and raise defenses.
8. Feedback should be concerned with areas in which the persons can demonstrate some control over their behavior and/or be given ways in which it can be used for improvement or planning alternative actions.
9. When encountering rising defenses or emotional reactions, the person giving feedback should deal with these reactions rather than trying to convince, reason or supply additional information.
10. Feedback should be given in a manner which communicates acceptance of the receiver as a worthwhile person and of his/her right to be different.

HOW TO RECEIVE FEEDBACK

Feedback received is always about past behavior--not present or future behavior--and receiving feedback always offers the possibility of learning something extremely valuable which can serve as a basis for future improvement. The following steps in receiving feedback can increase its value for the receiver.

1. Listen carefully.
2. Try not to let differences build, but to mentally note questions or disagreements.
3. Paraphrase what you think you heard to check your perception.
4. Ask questions for clarification and examples in those areas which are unclear or in which disagreement exists. Paraphrase answers again.
5. Carefully evaluate the accuracy and potential value of what you have heard.
6. Gather additional information from other sources or by observing your own behavior and other persons' reactions.
7. Do not over-react to feedback, but where desired, modify your behavior in suggested directions and re-evaluate the outcomes produced. Control your emotions.

PRIMARY OBJECTIVE AREA: Communication Skills

AGE GROUP: Teen and Adult

CROSS REFERENCE OBJECTIVE AREA: Personal Power, Self Awareness,
Parenting, and Relationships

READING LEVEL: Basic

NAME OF ACTIVITY: I - Messages

GROUP SIZE: Any

MATERIALS NEEDED: Blackboard, Handout #1, pens, pencils

TIME NEEDED: 1 to 2 Hours

PURPOSE

DIRECTIONS FOR ACTIVITY:

1. Develop a skill to communicate the participant's feelings accurately and assertively.
2. Practice writing and sending I - messages.
3. Develop a problem-solving process by using the skills of active listening and the sending of I - messages.

1. Introduce the concept of I - messages using the instructions for Teaching the I - Message teacher resource.
 - a. Be specific and point out differences between I - Messages and You Messages.
 - b. Discuss what I - Messages will and will not do.
 - c. Really emphasize disguised You Messages.
 - d. Complete activities.
2. Discuss adopting the class norm of using I-messages and I-statements as mentioned in teacher resource.
3. Allow students to complete activity 4 on page 2 of Facilitator's Resource and spend time processing the messages they write.
4. Have students complete the worksheet on problem solving using communication skills. (Handout #1)

INSTRUCTIONS FOR TEACHING THE I - MESSAGE

1. What is an I - Message?

An I - Message is a method of stating your opinion, thoughts, or feelings on a subject with a sentence starting with I.

Some examples of this might be:

I think ... I feel ... In my experience ...

We send an I - Message when we have a need to communicate our feelings and want to avoid labeling or judging another person.

Sometimes when people are not familiar with this type of communication they send "You - Messages." These tend to be blaming, judging, and labeling messages which hurt another's feelings or cause relationship problems.

Some examples of You - Messages are:

You are dumb. You can't do anything right.

You drive me crazy. You never show your love for me.

When we send You - Messages, we put people on the defensive. What we really want to do is to let people know how their behavior makes us feel. When we respond to our children with, "You drive me crazy." We may really be saying, "I would like to play with you right now, but I must do my homework for class. I will play with you when I finish reading this. I need you to play outside now until I finish."

If we can use the I - Message to communicate with our children we will help them to feel better about themselves by not putting them down. This will help their self-esteem and communicate our real feelings.

2. Learning to send an I - Message

a. An I - Message may have many purposes:

1. You can express your feelings.
2. You can tell another how their behavior is affecting you.
3. You can let another person know you need help.
4. You can communicate without blaming or putting another person down.
5. The message opens communication and builds relationships.
6. The message can (but does not always) lead to a behavior change in the other person to solve a problem.

3. Examples of types of I - Messages

a. I - Messages expressing feelings and behavior:

1. I am really proud of you for the way you put your toys away so nicely.
2. I am disappointed when you leave your toys on the floor.

b. I - Messages expressing feelings, behavior, and the effects on the speaker:

1. I am really proud of you for the way you put your toys away so nicely, because it keeps the house so neat.
2. I am disappointed when you leave your toys on the floor, because people can trip and fall on them.

4. The following forms can be used for students to practice writing I - Messages about feelings they have and would like to share (putting these forms on the board will help students to organize their thoughts for writing the messages).

a. Two part I - Messages:

I feel _____ when you _____.
feeling you have behavior of other

b. Three part I - Message:

I feel _____ when you _____ because _____.
feeling you have behavior of other efforts on you from their behavior

5. Errors in sending I - Messages

a. Avoid disguised You - Messages when sending an I - Message:

1. Watch for I - Messages which are just and "I" followed by a put-down, criticism, or a blaming message.
2. These messages will harm a relationship and stop the communication process.

b. Examples of disguised You - Messages:

1. I feel you are lazy when you don't clean your room.
2. I need you to stop acting like a jerk and really embarrassing me.
3. I think you are really acting immaturity when you cry about not having time for yourself.

6. Further tips for sending I - Messages

- a. Be honest:**
 - 1. Don't explain yourself away - be direct.
 - 2. Don't exaggerate.
- b. Focus on issues, not a person, when describing opinions and feelings:**
 - 1. Be specific.
 - 2. Describe the behavior involved or the issue.
- c. Use appropriate non-verbal behaviors:**
 - 1. Show intensity of feelings (without losing control in terms of how you express them).
 - 2. Look the other person in the eye.
 - 3. Speak up clearly without hesitation.
 - 4. Look toward the other person.

7. Activities for I - Message reinforcement

a. Have the class adopt a behavior norm or speaking from this I - mode. Explain that in order to learn this communication skill, it must be practiced. Have the class monitor one another, themselves, and the facilitator. Whenever anyone slips and uses a You - Message or generalizes, stop one another and discuss a better way to state your opinion or feelings. Use this practice throughout the entire class, not just this unit.

b. Have students take situations in their own life and write I - Message responses to make another person aware of their feelings. Then read these messages in class and be sure they are correct and free of disguised You - Messages.

c. Have the class follow-up these activities with the worksheet activity on problem solving with good communication skills. This activity lies in the I - Messages and the Active Listening Skills.

WORKSHEET COMMUNICATING TO SOLVE PROBLEMS

We are practicing communicating to solve problems using active listening and I - messages. We want to begin using these skills to solve problems in our lives.

Sometimes it is necessary to use these two skills together to send a message and then listen to what the other person heard or is having difficulty with understanding. We call this gear shifting. You can also use this skill when another person is angry to help them to cool down. A dialogue may go like this:

- ___ Mom: "I feel upset when I get a call from school saying that you failed your math test when you told me you had studied."
___ Son: "But I am tired of you picking on me about school grades, I don't care if I get bad grades."
___ Mom: "You don't care about school."
___ Son: "No, I just can't get everything done with working at the gas station."
___ Mom: "Your job is taking too much of your time."
___ Son: "Ya, I am too tired to study when I come home from work."
___ Mom: "I feel school needs to come before work if you are to graduate."
___ Son: "I want to graduate."
___ Mom: "I will be so proud of you when you get through school and get your diploma. I also need you to work to help pay some of the bills while you are in school."
___ Son: "I know you need my help Mom. Maybe I can take my books to work and study when I am not busy rather than watch T.V. I don't think my boss would mind."
___ Mom: "That would be good if you could check it out; I would sure like to see you raise your grades."

- * Now on the line provided, place an AL if it is an active listening response or an IM if it is an I- Message. Read carefully to observe how the problem is solved by talking to one another with caring I - Messages and then listening to what the other person has to say.

Tips for using the gear-shifting skill:

1. Talk about the situation, behavior, or action and not the person (ex: discuss the report from school, not you are a failure because you are flunking math).
2. Tell exactly what the effects are on you of the other person's behavior (ex: upset when told the son studied).
3. Be specific in your feelings, express them calmly, and stay with the exact offending behavior not the person (ex: feeling of school being more important than work).
4. If you must ask for a behavior change - give specific need.
5. Let the other person give ideas on solving the problem and listen.
6. Use the clarifying and active listening to be sure you have heard the other person.
7. Agree on the results of the problem solving.

Now take a problem you are having with another person and write a conversation between the two of you with the gear-shifting technique.

1. Give a brief description of the problem and then write down the conversation like the above example.
2. You may use the back of this paper.
3. Share your example with the class and discuss it.

CONTENT AREA: Communication

AGE GROUP: Teen - Adult

TOPIC AREA: Self Awareness, Personal Power

READING LEVEL: Intermediate

TITLE: "Stopping Self-Defeating Behaviors in Interpersonal Communication"

GROUP SIZE: Any

MATERIALS: Handout (1), pens, pencils

TIME NEEDED: 35 - 45 Minutes

PURPOSE

We defeat ourselves in winning others' support for our good by not taking responsibility for being understood and understanding others.

DIRECTIONS FOR ACTIVITY:

1. Distribute the handout and read over the list of 10 techniques, encouraging input and discussion. This can be done by using questions such as:
 - a. Can you think of an example of a positive or negative communication experience from your own life?
 - b. With whom? Why did it go well or why was it not productive?
 - c. Which technique seems like the most difficult for you to do? Why? With whom?
 - d. Which technique do you feel you need to work on in particular? Why and with whom?
 - e. How do these techniques affect the attainment of personal goals?

Note: These questions can be put on the board and the group divided into diads or triads to respond to these questions rather than doing it in the larger group.

2. Explain that one goal we can accomplish is trying to change one of our self-defeating behaviors in communication. Students then:
 - a. Select one behavior they continually use
 - b. Brainstorm ways they can change the behavior
ex: Behavior = I put myself down
Goal = to stop this
Plan = Listen to my self-talk, reverse the self-talk into a positive statement. Ask people (best friend) to monitor and give feedback.
 - c. Develop a plan to begin to change this.

AVOIDING SELF-DEFEATING BEHAVIORS IN COMMUNICATION

Written by Andrea Belkins, Lansing Community College

Things to Do

1. If you are wondering what someone's thinking, ASK!
You could be wrong.

Example: Someone seems to be treating you differently than usual. You don't know if it's you or something else on the person's mind. You say, "Have I done something that upset you?"

2. Be open about what's on your mind even when it seems "silly." (Express fears, questions, wishes, hurt feelings, etc.)

Example: "I feel afraid to try new things because they might not work out."

3. Be direct about your self-doubts. Everyone has them. Expressing self-doubts can help you manage them.

Example: "I wish I could lose some weight more easily" vs "I would scare somebody on the beach if I put on a bathing suit!"

4. Be direct about what you want or need from others.

Example: "I need a hug right now" vs. "I wish you were more affectionate once in a while."

5. Begin your sentences with "I"

Example: "I feel hurt when you don't notice something special I've done" vs. "you should notice more."

Things to Avoid

Don't assume you know what someone else is thinking.

Don't judge your thoughts or feelings. It is OK to think and feel and to express yourself when some people may not understand.

Avoid Self-Putdowns.

DON'T manipulate others by secretly trying to get them to give you what you want/need.

Beginning sentences with "you" can make people feel that they have to defend themselves.

6. Be willing to look at weaknesses as well as strength in yourself and own them. Express what you like about yourself and your strengths.

Example: "I know that I have a tendency to jump to conclusions and I am working on it."

7. Apologize when you feel like doing so (and not when you don't feel like doing so).

Example: "After I thought about our conversation, I realized that I was not fair to you. I am sorry."

8. When talking with someone about an emotional subject, try to keep emotions under control by stating how you feel rather than showing it with shouting, etc.

Example: I feel hurt and angry right now, and I will try to explain why.

9. Check it out with the other person when you are not sure you understand what they had said.

Example: "I am not sure I understand what you said - I could take it one or two ways. Would you clarify it for me?"

10. Be willing to hear both positive and negative from people.

Example: "It is hard for me to hear you say that about me, but I will think about it," or "Thank you for saying that, it makes me feel good."

DON'T defend your particular weaknesses. Everyone has both strengths and weaknesses.

Apologies, when they are sincere, are a responsible way to show ourselves and others that we do make mistakes and can rectify them. We are not perfect - neither is anyone else.

Avoid overreacting or withdrawing from emotional subjects. Nothing will be accomplished

It is OK to ASK for clarification from another person about what they said.

DON'T expect all positive or all negative from people.

PRIMARY OBJECTIVE AREA: Communication Skills

AGE GROUP: Teen - Adult

CROSS REFERENCE OBJECTIVE AREA(S): Self Awareness, Parenting,
Relationships, Personal Power

READING LEVEL: Intermediate

MODE OF ACTIVITY: Communication and Discussion Questionnaire

GROUP SIZE: Any

MATERIALS NEEDED: Handouts #1 and #2, Paper and Pencil

TIME NEEDED: 30-45 Minutes

PURPOSE

DIRECTIONS FOR ACTIVITY:

Being a confident communicator is very important in establishing relationships that are based on respect. This activity is designed to help participants assess whether they respond assertively, non-assertively or aggressively and the results of how they respond.

1. Read through "The Components of Assertive Behavior" with participants paraphrasing, demonstrating, or giving examples of each component.
2. Have participants complete "Communications and Discussion..." situations as explained in directions.
3. Divide participants into groups of 4 or 5.
4. Have each group elect a "recorder" and discuss the situations. The "recorder" can record total number for each plus other appropriate responses.
5. Each group will report the outcome for their group. Have the total group discuss outcomes.

THE COMPONENTS OF ASSERTIVE BEHAVIOR

- EYE CONTACT:** Looking directly at another person when you are speaking to them is an effective way of declaring that you are sincere about what you are saying, and that it is directed to them.
- BODY POSTURE:** The "weight" of your messages to others will be increased if you face the person, stand or sit appropriately close to them, lean toward them, hold your head erect.
- GESTURES:** A message accented with appropriate gestures takes on an added emphasis (over-enthusiastic gesturing can be a distraction).
- FACIAL EXPRESSION:** Ever see someone trying to express anger while smiling or laughing? It just doesn't come across. Effective assertions require an expression that agrees with the message.
- VOICE TONE, INFLECTION, VOLUME:** A whispered monotone will seldom convince another person that you mean business, while a shouted epithet will bring their defenses into the path of communication. A level, well-modulated conversational statement is convincing without intimidating.
- TIMING:** Spontaneous expression will generally be your goal since hesitation may diminish the effect of an assertion. Judgement is necessary, however, to select an appropriate occasion; for example, such as speaking to your boss in the privacy of the office, rather than in front of a group of subordinates, where the boss may need to respond defensively.
- CONTENT:** We save this obvious dimension of assertiveness for last to emphasize that, although what we say is clearly important, it is often less important than most of us generally believe. We encourage a fundamental honesty in interpersonal communication, and spontaneity of expression. In our view, that means saying forcefully, "I'm damn mad about what you just did..." rather than "You're a S.O.B...." People who have hesitated for years because they "didn't know what to say" have found the practice of saying something, to express their feelings at the time, to be a valuable step toward greater spontaneous assertiveness. One further word about content. We do encourage you to express your own feelings--and to accept responsibility for them. Notice example above. It is not necessary to put the other person down in order to express yourself, honestly and spontaneously, in a manner that is right for you.

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COMMUNICATION AND DISCUSSION SITUATIONS

Directions: Fill in the blanks either Assertive (A), Non-Assertive (NA), or Aggressive (AG) behaviors. Refer to the definitions for Assertive, Non-Assertive and Aggressive found in Handout 2 of the Assertive activity later in this section. Each is an expression of yourself. How would you change the response to be assertive if it's not?

<u>Situation</u>	<u>Response</u>	<u>Type of Response</u>
1. Your special companion gets silent, instead of saying what's on his/her mind. You say,	"I guess you are uncomfortable talking about what's bothering you. I think we can work it out if you tell me what is irritating you."	_____
2. Friends have asked you for the second time in a week to babysit for their child while they run errands. You have no children of your own and respond,	"You are taking advantage of me and I won't stand for it! It's your responsibility to look after your own child."	_____
3. An attendant at a gas station you frequently stop at for gas neglected to replace your gas cap. You noticed this and return to inquire about it and say,	"One of you people here forgot to put my gas cap back on! I want it found now or you'll buy me a new one."	_____
4. You'd like a raise and say,	"Do you think, ah, you could see your way clear to giving me a raise?"	_____
5. Someone asks for a ride home and it is inconvenient because you're late, have a few errands, and the drive will take you out of your way. You say,	"I am pressed for time today and can take you to a convenient bus stop, but I won't be able to take you home."	_____

6. A student enjoyed the teacher's class and says, "You make the material interesting. I like the way you teach the class." _____
7. Your special companion promised to talk to your daughter about her behavior at school. The promise has not been carried out. You say, "I thought we agreed last Tuesday that you would have a talk with Barb about her behavior at school. So far there has been no action on your part. I still think you should talk to her soon. I'd prefer sometime tonight." _____
8. A committee meeting is being established. The times are set when it will be next to impossible for you to attend regularly. When asked about the time you say, "Well, I guess it's okay. I'm not going to be able to attend very much but it fits everyone else's schedule." _____
9. In a conversation, someone suddenly says, "What do you women libbers want anyway?" Woman responds, "Fairness and equality." _____
10. You've been talking for a while with a friend on the telephone. You would like to end the conversation and you say, "I'm terribly sorry but my supper's burning and I have to get off the phone. I hope you don't mind." _____
11. A married person persists in asking you out for a date saying, "Come on honey, what harm can it do to go to lunch with me just this once?" You respond, "I like our relationship the way it is. I wouldn't feel comfortable with any kind of dating relationship, and that includes lunch." _____
12. At a meeting one person often interrupts you when you're speaking. You say, "Excuse me. I would like to finish my statement." _____

13. You are in a hard-sell camera store, and you have been pressured to purchase an item. You say, _____
"Well, okay, I guess that's pretty much what I was looking for. Yes, I suppose I'll get it."
14. A blind person comes up and asks you to purchase some materials. You respond, _____
"You people think that just because you are blind, people have to buy stuff from you. Well I'm certainly not going to."
15. A teenager is asked to do the laundry. As the child puts the laundry in the washer, the parent says, _____
"Don't forget to balance the load. Make sure you push the right buttons. You never do things right!"
16. You have been pestered several times this week by a caller who has repeatedly tried to sell you magazines. The caller contacts you again with the same magazine proposition. You say, _____
"This is the third time I've been disturbed and each time I've told you that I'm not interested in subscribing to any magazine. If you call again, I'll simply have to report this to the Better Business Bureau."
17. Kids upstairs are making a lot of noise. You bang on the ceiling and yell, _____
"Hey you! Knock off the noise!"
18. An acquaintance has asked to borrow your car for the evening. You say, _____
"I don't know...Well, it's not worth getting into a fuss about it. You can borrow it, but I should warn you that I've been having trouble with the brakes."
19. Wife tells husband she'd like to return to school. He doesn't want her to do this and says, _____
"Why would you want to do that? You know you're not capable enough to handle the extra work load."
20. An employee makes a lot of mistakes at work. You say, _____
"You're a lazy and sloppy worker."

21. Special companion expects dinner on table when arriving home from work and gets angry when it is not there immediately. You say,

"I know you are tired and hungry and would like to have dinner immediately, but I have been doing some sculpting which is important to me. I will have dinner ready soon."

22. You've taken a suit to the cleaners that you plan to wear for a coming special occasion. When you go to pick it up, you find that there's a hole in it. You say,

"I planned to wear that tonight. Aren't you people responsible enough to do something about it?"

23. You are having trouble writing a paper and don't know exactly what further information you need. You say,

"I really must be dumb but I don't know where to begin on this paper."

24. Your roommate, about to leave for work tells you that their friend needs a ride that afternoon and he/she has volunteered your services. You say,

"You've got your nerve committing me without asking first! There's no way I'm going to the airport today. Let your friend take a cab like everybody else does."

25. A friend promised to come to a special party and then failed to show up. You call and after a few minutes of social conversation, you say,

"I understood that you were coming to my party but you didn't come. I feel bad about not having you here... What happened to you?"

PRIMARY OBJECTIVE AREA: Communication Skills

AGE GROUP: Teen-Adult

SECONDARY OBJECTIVE AREA(s): Relationships/Personal Power

READING LEVEL: Intermediate

NAME OF ACTIVITY: Assertiveness

GROUP SIZE: Any

MATERIALS NEEDED: Handout #1 - 5, Pencils

TIME NEEDED: 1-2 Hours

PURPOSE

DIRECTIONS FOR ACTIVITY:

1. Introduce participants to assertive behavior definitions and understanding.
2. Enable participants to assess their own level of confidence in being assertive.
3. Offer participants effective methods to choose for communicating their wishes assertively.
4. Offer participants rationale and support for communicating assertively.
5. Evaluate when assertive behavior is beneficial and when it is not.

1. Write assertiveness on chalkboard (top-middle). Ask students for their reaction when someone says "you need to be more assertive." What do they mean by assertive? Write on board under assertive the words or phrases that are given. Dictionary meaning of assertive = confidence or self-confident. Explain that being assertive is a way to communicate confidence and respect for self and others with behavior and words.
2. Pass out Assertiveness Behavior Questionnaire, Handout No. 1, and have students fill it out. Discuss scoring in these ways:
 - A. Complete score total - reflects overall confidence.
 - B. Score average for each topic heading - reflects confidence level in that subject (assertive behaviors, your body image, etc.) This can be obtained by adding up numbers of statements in the category and dividing by number of items to get topic area average.

Interpretation of Total

Scoring:

- C. 100-135 = High Confidence Level Overall
75 -100 = Middle Level of Confidence (Sometimes high, sometimes low).
Below 75 = Generally low confidence level.

PURPOSE

DIRECTIONS FOR ACTIVITY:

3. Write non-assertive on the board (top left). Ask for meaning of non-assertive and write on board.
4. Write aggressive on the board (top right). Ask for meaning of aggressive and write on board.
5. Give Handout No. 2 to group members to further define. Go over together.
6. Ask participants "When Is It Appropriate To Be":
Non-assertive? (When a person comes in with a gun, etc.)
Aggressive? (When a child runs in front of a car, etc.)
7. Pass out Handout No. 3, Non-Assertive Behavior and Aggressive Behavior. Compare the three types of behavior and discuss. You may want to read together aloud and give examples.
8. Pass out Basic Tenets of Assertive Philosophy, Handout No. 4. Read together and discuss feelings & reactions.
9. Distribute Handout No. 5 and go over together giving examples. Divide group into triads and have them role play situations of their own choosing where they could try several types of assertive responses. Discuss role plays and reactions as a group.
10. Encourage students to strive for the assertive mode as often as possible. Assertive is where they are most often effective in dealing with situations.

PURPOSE

DIRECTIONS FOR ACTIVITY:

11. Because some students come from homes and backgrounds where assertive behavior may not be welcome, we must help participants become aware of consequences. Take a scenario from participants and put it through a wins/losses T chart.

Example: Father orders me around and I don't like it.
But I must live at home.

Wins:	Losses
I would feel good standing up to Dad.	I may be told to leave my h.o.m.

Discuss and process. Be sure to point out choice is yours and you must evaluate all aspects.

ASSERTIVE BEHAVIOR QUESTIONNAIRE

USE THE SCALE BELOW TO INDICATE HOW COMFORTABLE YOU ARE WITH EACH ITEM:

- 0 - I would never do this
- 1 - Makes me very uncomfortable
- 2 - I feel moderately uncomfortable
- 3 - I feel OK
- 4 - I am usually comfortable with this
- 5 - I am very comfortable with this

There may be some situations which are not relevant to you nor to your particular lifestyle; in such cases, try to imagine how comfortable you might feel if you were involved in the situation.

Assertive Behaviors

- Speaking up and asking questions at a meeting 1. _____
- Commenting directly to the person about being interrupted at the moment you are interrupted. 2. _____
- Stating your views to an authority figure (e.g., boss, minister, therapist, parent) 3. _____
- Attempting to offer solutions and elaborating on them when there are people of the opposite sex present. 4. _____

Body Language

- Entering and exiting a room where people of the opposite sex are present. 5. _____
- Speaking in front of a group. 6. _____
- Maintaining eye contact, keeping your head upright, and leaning forward when in a personal conversation. 7. _____

Your Confidence Level

- Going out with a group of friends when you are the only one without a "date." 8. _____
- Being especially competent, using your authority and/or power without labeling yourself as "bitchy, impolite, bossy, aggressive, or parental." 9. _____

Requesting expected service when you haven't received it (e.g., in a restaurant or a store). 10. _____

Apology

Being expected to apologize for something and not apologizing since you are right. 11. _____

Requesting the return of borrowed items without being apologetic. 12. _____

Compliments, Criticism, and Rejection

Receiving a compliment by saying something assertive to acknowledge that you agree with person complimenting you. 13. _____

Accepting a rejection. 14. _____

Not getting the approval of significant male/female in your life. 15. _____

Discussing another person's criticism of you openly with that person. 16. _____

Telling someone that she/he is doing something that is bothering you. 17. _____

Saying "NO"

Refusing to get coffee or to take notes at a meeting where it appears you are chosen to do so because you are a female/male. 18. _____

Saying "NO" - refusing to do a favor when you really don't feel like it. 19. _____

Turning down a request for a meeting or date. 20. _____

Manipulation and Counter-Manipulation

Telling a person when you think she/he is manipulating you. 21. _____

Commenting to a male/female who has made a patronizing remark to you (e.g., "you have a good job for a woman," "you're not flighty, emotional, stupid, or hysterical like most women," "you're very sensitive for a man.") 22. _____

Anger

Expressing anger directly and honestly when you feel angry. 23. _____

Arguing with another person 24. _____

Children

Disciplining your own children 25. _____

Disciplining others' children 26. _____

Explaining the facts of life or your divorce to your child. 27. _____

A COMPARISON OF NONASSERTIVE, ASSERTIVE, AND AGGRESSIVE BEHAVIOR

	NONASSERTIVE	ASSERTIVE	AGGRESSIVE
Characteristics of the Behavior	Does not express wants, ideas, and feelings or expresses them in self-deprecating way.	Expresses wants, ideas, and feelings in direct and appropriate ways.	Expresses wants, ideas and feelings at the expense of others
Your feelings when you act this way:	Anxious, disappointed with yourself. Often angry and resentful	Confident, feel good about yourself at the time and later.	Self-righteous, superior. Sometimes embarrassed later.
Other people's feelings about themselves when you act this way:	Guilty or superior	Respected, valued	Humiliated, hurt
Other people's feelings about you when you act this way:	Irritation, pity, disgust	Usually respect	Angry, vengeful
Outcome:	Don't get what you want; anger builds up.	Often get what you want.	Often get what you want at the expense of others. Often feel justified at "getting even."
Payoff:	Avoids unpleasant situation, avoids conflict, tension, confrontation.	Feels good; respected by others. Improved self-confidence. Relationships are improved.	Vents anger, feels superior.

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NON-ASSERTIVE BEHAVIOR

I. Reasons Why People Act Non-Assertively.

A. Mistaking firm assertion for aggression.

To many individuals, firm assertive behavior sounds like aggression. Their own unique learning backgrounds have caused them to equate any show of assertive firmness or anger with aggression. Furthermore, the culture at large has not sufficiently distinguished between assertion and aggression.

B. Mistaking non-assertion for politeness.

Many people act non-assertively under the mistaken notion that such behavior is really being polite and considerate.

C. Failure to accept personal rights.

A third major reason why people act non-assertively is that they do not fully accept their personal rights; in other words, they do not believe they have the right to express their reactions, to stand up for themselves, to take care of their own emotional needs.

D. Anxiety about negative consequences.

A fourth major reason why people act non-assertively concerns their anxiety about what would happen as a result of any assertive behavior. Common fears are that they will lose other people's affection or approval, that other people will think they are foolish, stupid, or selfish, that they will become angry or rejected.

E. Mistaking non-assertion for being helpful.

A fifth cause of non-assertion is the belief that one's non-assertion actually helps the other person. In reality such behavior involves "rescuing" the other person. Rescuing is giving help the other person actually does not need and sacrificing one's own needs.

F. Deficient skills.

A last major reason for non-assertion is that people may simply not know how to act otherwise. They may not have learned assertive skills because they lacked opportunities to vicariously acquire such skills by watching how other people have handled similar situations.

II. Consequences of Acting Non-Assertively.

- A. Loss of self-esteem--this occurs as a result of appeasing others and avoiding conflict at any cost.
- B. Internal tension--when one's needs and wants are constantly suppressed, somatic problems may develop, such as headache, ulcers, backaches and sometimes even general depression.
- C. Losing or failing to establish close relationships--people may initially feel sorry for the non-assertive person, however their pity often turns into irritation, and finally disgust and lack of respect.

AGGRESSIVE BEHAVIOR

I. Reasons Why People Act Aggressively

- A. Powerlessness and threat.

A general cause of aggression is the feeling of being vulnerable to an anticipated or actual attack by another person. The resulting aggressive overreaction is instigated by threat and a sense of powerlessness.

- B. Prior non-assertion.

Aggression can occur when a person has been non-assertive for a period of time, allowing rights and feelings to be violated, with the result that hurt and anger build to the point that the person finally feels justified in expressing these feelings and aggressively standing up for rights.

- C. Over-reaction due to past emotional experiences.

Thirdly, aggression may be due to a person's over-reacting to a current situation because of some past unresolved emotional experience.

- D. Beliefs about aggression.

Fourthly, aggression may result from the belief that aggression is the only way to get through to the other person. A related cause of aggression is the belief that the world is hostile and one must be aggressive in order to survive.

- E. Reinforcement about aggression.

The fifth cause of aggression is that individuals may simply have received positive reinforcement for this behavior in their home or subculture. Also, individuals may react aggressively, because they have not acquired the needed assertive skills which would be appropriate for a particular situation.

II. Consequences of Acting Aggressively.

A. Immediate positive results:

1. An emotional release
2. A sense of power
3. Goals and needs met without experiencing negative reactions from others.

B. Long-term negative results:

1. Loss of self-esteem--aggressive people eventually feel deeply misunderstood, unloved and unlovable.
2. Internal tension--headaches, ulcers, high blood pressure, backaches, general depression, etc.
3. Losing or failing to establish close relationships -- often aggressive people maintain a constant vigilance against attack from others.
4. Others may retaliate in direct or indirect ways--work slowdowns, property damage, deliberate mistakes, backbiting, etc.

Adapted by permission from: Responsible Assertive Behavior,
Lange, Arthur J., and Jakubowski, Patricia, Research Press,
Champaign, Ill. © 1976 by the Authors.

THE BASIC TENETS OF AN ASSERTIVE PHILOSOPHY

By standing up for our rights, we show we respect ourselves and achieve respect from other people.

By trying to govern our lives so as to never hurt anyone, we end up by hurting ourselves and other people.

Sacrificing our rights usually results in destroying relationships or preventing ones from forming.

Not letting others know how we feel and what we think is a form of selfishness.

Sacrificing our rights usually results in training other people to mistreat us.

If we don't tell other people how their behavior negatively affects us, we are denying them an opportunity to change their behavior.

We can decide what's important to us; we do not have to suffer from the tyranny of the should and should not.

When we do what we think is right for us, we feel better about ourselves and have more authentic and satisfying relationships with others.

We all have a natural right to courtesy and respect.

We all have a right to express ourselves as long as we don't violate the rights of others.

There is more to be gained from life by being free and able to stand up for ourselves and from honoring the same rights of other people.

When we are assertive, everyone involved usually benefits.

Materials from: Jakusowski-Spector,
"Self Assertive Training Procedures for Women",
1974 Courtesy of Charles C. Thomas, Pub. Springfield, ILL

TYPES OF ASSERTIVE RESPONSES

1. **Simple:** State the facts in as few words as possible.

Examples:
 - a. "I believe I was here first."
 - b. "No, I cannot lend you my car today."

2. **Empathic:** Recognize the feelings of the other person, then state your own needs.

Examples:
 - a. "I can see that you really need help with that project, but I have decided to spend my weekend working on a term paper. I could help you with your project next weekend."
 - b. "I know you want to help me, but you could help me more now by allowing me to make this decision on my own."

3. **Sharing Your Feeling:** Briefly state your feeling at the moment, then state your need. You may want to elaborate on what the other person may have done to bring out your present feeling.

Examples:
 - a. "I feel really irritated when you answer me without looking at me. I need to have your full attention when we talk."
 - b. "I feel really good when you tell me how you're feeling at the moment. I'd really like to share our experiences and feelings more often."

4. **Escalated Broken Record:** Begin with stating your feelings or recognizing the other person's feelings. Then state your own needs. If the other person objects to your statement, you can continue simply stating your needs.

Example: "I realize that this is not your regular procedure, but I want a refund for this defective merchandise." "Who else can I speak to about a refund for this defective merchandise?" "I will not leave until I have a refund."

5. **Confrontation:** Point out discrepancies in the other person's statements or behavior. Then state your own needs.

Examples:
 - a. "You say you're not taking advantage of my driving you, but this is the third time you asked me this week."
 - b. "You say that you are going to concentrate more on your studies, yet I haven't seen you open your books all week."

6. **Persuasive:** State your need or request. Repeat your statement with additional supporting statements about why your request might benefit the other person, another party or yourself.

Example: "I'd really like you to quit smoking."
"If you quit smoking, you will be in better health and probably live longer."
"I'd like you to quit smoking, so I can breathe cleaner air."
"You quitting smoking would be a good example for the kids."

7. **Fogging:** Agree in principle; agree with the truth in the other person's statement about you (positive or negative). Then state your need. You are agreeing with the content without being hooked by the feelings expressed.

Examples: a. "I know I usually lend you my car, but I cannot lend it to you today."
b. "I realize that you usually handle complaints yourself, but I want to talk to the manager."

8. **Inquiry:** Prompt more information about statements that are made. You are now stopping your assertive responses in order to further explore the situations.

Examples: a. "You're saying that I'm treating you unfairly. Can you explain why you feel this way?"
b. "You're saying that this job isn't up to my usual good performance. I'm not sure what you mean."

PRIMARY OBJECTIVE AREA: Communication Skills

AGE GROUP: Any

CROSS REFERENCE OBJECTIVE AREA(s): Personal Power/Relationships

READING LEVEL: Intermediate or Higher

NAME OF ACTIVITY: Handling Conflict

GROUP SIZE: Any size

MATERIALS NEEDED: Handouts #1, 2, and 3, chalkboard or newsprint easel

TIME NEEDED: 1-1/2 to 2 Hours

PURPOSE

DIRECTIONS FOR ACTIVITY:

1. Identify and understand their own and other people's "typical" way to handle conflict.
2. Identify some other choices of ways to act in conflict situations which may be more effective in getting results they want in that situation.
3. Help participants to be less afraid of conflict situations, by seeing them as opportunities to communicate, make decisions, and resolve problem issues.

1. Introduce activity with an informal discussion of participants' feelings about conflict. List these answers on board or newsprint: What is conflict? How do you feel when you are in a conflict situation?
2. Explain that they will be taking a short inventory or self assessment to learn more about how they typically handle conflict. There are no "right" answers - people are different in styles and preferences. Go over instructions at top of Handout #1.
3. When group has completed inventory and scoring, go over different styles on the scoring sheet and discuss definitions and write on board or newsprint an agreed-upon definition for each style category. Refer to and go over Handout No. 2 to help explain why different styles or strategies could be more or less appropriate in different situations. Ask the group for examples of situations and how to handle using different style strategies.
4. Explain that conflict itself is not "good" or "bad" and need not have a loser to have a winner. Conflict means there are two or more different opinions, desires, or options in terms of how to handle a given situation or solve a problem.

PURPOSE

DIRECTIONS FOR ACTIVITY:

Putting all opinions or alternatives on the table for open and honest discussion can lead to creative solutions that will enable everyone to win or achieve their goals.

5. Go over Handout No. 3 which explains a process to handle conflict in a confrontational mode that aims at solving problems in a win/win manner. Practice this process in role play situations using conflict problems that are relevant to the group.
6. In conclusion, point out that conflict is part of life and we now, hopefully, have a good awareness of how we can and do handle conflict ourselves. Suggest they may want to read: Getting To Yes, by Roger Fisher and William Ury, Houghton - Mifflin Co., Boston, 1981.

HOW I ACT IN CONFLICTS

Directions: Read each statement carefully. Using the scale given below, indicate how typical each statement is of your actions in a conflict. Record your numbers on score sheet when you have completed this self-inventory.

- 5 - Very typical of the way I act or think in a conflict.
- 4 - Frequently typical of the way I act or think in a conflict.
- 3 - Sometimes typical of the way I act or think in a conflict.
- 2 - Seldom typical of the way I act or think in a conflict.
- 1 - Never typical of the way I act or think in a conflict.
- ___ 1. It is easier to not get into a fight in the first place, than to get out of a fight once it starts.
- ___ 2. If you cannot make a person believe like you do, make him or her do what you tell him or her to do anyway.
- ___ 3. Saying it nicely is more likely to convince people your way.
- ___ 4. If you do something good for me, I'll return the favor.
- ___ 5. Let's all talk it over and be reasonable.
- ___ 6. When two people argue, the person who quiets down first is the one I admire.
- ___ 7. Stronger or more forceful people win even if they are wrong.
- ___ 8. Using the right words can keep things peaceful.
- ___ 9. It's better to get some of what you want than nothing at all of what you want.
- ___ 10. The smartest way is not always the way most people think is smart.
- ___ 11. The one who walks away from a fight is less likely to get hurt.
- ___ 12. You win the battle if you get the other person to walk away (or run).
- ___ 13. Sometimes being nice can upset people more than being unkind, so you can win and they can actually lose when you are nice in this circumstance.
- ___ 14. If you get or give what's fair, you don't need or want to fight.
- ___ 15. No person has all the answers, but every person has something to contribute.
- ___ 16. Stay away from people who disagree with you.

- 17. Winners are those who believe in and keep trying to win.
- 18. Kind words are valuable and easy to say.
- 19. Fairness is when I do for you what you do for me - good or bad.
- 20. Only the person who is willing to give up his or her stubbornness and listen, can ever learn from other people.
- 21. Avoid people who are looking for a fight as they will only make your life miserable.
- 22. If you stand your ground, others will be afraid or backdown.
- 23. Being nice makes us all get along well.
- 24. Giving to others wins them as friends.
- 25. Bring your conflicts into the open and discuss them honestly; only then will the best solution be discovered.
- 26. The best way of handling conflicts is to avoid them.
- 27. Put your foot down and stick to your opinions.
- 28. Kindness will win over anger.
- 29. Getting part of what you want is better than not getting anything at all.
- 30. Saying what you think honestly and trusting others to be honest will solve most big problems.
- 31. There are two kinds of people in the world, the winners and the losers.
- 32. There is nothing important enough to get into a fight over it.
- 33. When someone hits you or tries to hurt you, surprise them and take them off guard with kindness in return.
- 34. When both people give in half-way, a fair settlement is achieved.
- 35. If we keep talking and trying, we will find the right answers.

SCORING: HOW I ACT IN CONFLICTS

Directions: Copy your numbers from each item in the blanks beside correct item numbers below.

Withdraw (Leave, Don't deal with)	Force my ways (Push others)	Smooth things (Give in to keep peace)	Compromise (Both give some)	Confront (Face it and work on it)
___ 1.	___ 2.	___ 3.	___ 4.	___ 5.
___ 6.	___ 7.	___ 8.	___ 9.	___ 10.
___ 11.	___ 12.	___ 13.	___ 14.	___ 15.
___ 16.	___ 17.	___ 18.	___ 19.	___ 20.
___ 21.	___ 22.	___ 23.	___ 24.	___ 25.
___ 26.	___ 27.	___ 28.	___ 29.	___ 30.
___ 31.	___ 32.	___ 33.	___ 34.	___ 35.
___ Total	___ Total	___ Total	___ Total	___ Total

Higher score in an area indicates that you prefer to, or are more comfortable, using this type of behavior in conflict situations.

CONFLICT RESOLUTION STRATEGIES

CONFLICT STRATEGIES	- WHEN THESE STRATEGIES MAY BE APPROPRIATE
Withdrawal	- Neither the goal nor the relationship is important - you withdraw from any discussion.
Forcing	- The job or goal is important but not the relationship with this person - you use all your energy to get the task done and don't worry about feelings.
Smoothing	- The relationship is more important than the job or goal. You want to be liked and accepted in this group or by this person.
Compromise	- Both goal and relationship are important but there is a lack of time. You both gain something and lose something.
Confrontation	- Both job or goal and relationship are equally important. You use the conflict as a problem-solving situation.

CONFLICT RESOLUTION PROCESS

STEP 1: Define Problem(s) and Issue(s)

- a. Describe the other's behavior - don't label or accuse or insult personally.
- b. Define the conflict as a mutual problem which needs a solution or decision.
- c. Agree on a definition of the problem and write it down.

STEP 2: Discuss Relevant Personal and/or Mutual Goals

- a. Use "I" statements to explain wants or needs in this situation.
- b. Encourage other person to express wants or needs.
- c. Agree on outcome(s) both want and write it down.

STEP 3: List and Negotiate Options

- a. Don't "hit and run". Initiate process when there is adequate time to explain, listen, clarify, and negotiate.
- b. Put yourself in the other person's situation to better understand their point of view.
- c. Be objective and fair as you brainstorm multiple options or ways to handle situation and make a list of options to discuss.
- d. Introduce information that supports various options and weighs all pros and cons of selecting various options for handling this situation.

STEP 4: Select the Best Solution(s) From Options or Choices Listed Above

- a. Remember no one strategy works well in every situation. Personalities and circumstances affect best choice of strategy and solution.
- b. Select option that best matches your goals (wants and needs) and those of the other person. If goals are listed it is easier to look at which ones are best accomplished through selection of a particular option.
- c. Use objective criteria, such as mutually agreed-upon goals, for selection of option.

STEP 5: Plan How to Implement Solution

- a. List who is going to do what and when.
- b. Do it.

PRIMARY OBJECTIVE AREA: Communication Skills

AGE GROUP: Teens and Up

CROSS REFERENCE OBJECTIVE AREA: —

READING LEVEL: Intermediate

NAME OF ACTIVITY: Evaluation

GROUP SIZE: Any

MATERIALS NEEDED: Paper, Pencil, Envelopes, Stamps

TIME NEEDED: 15 min. to 30 min.

P U R P O S E

D I R E C T I O N S F O R A C T I V I T Y :

- | | |
|--|---|
| <ol style="list-style-type: none">1. To evaluate material covered in each unit.2. To provide an opportunity to do self assessment.3. To practice written communication skills.4. To help develop and reinforce long term goals. | <ol style="list-style-type: none">1. At the end of each unit, have students compose a letter themselves. In the first unit covered (usually Self Awareness), have students address an envelope to themselves. Collect the envelopes to send with the letters upon completion of the whole course.2. Explain to students that they will have an opportunity to evaluate what they have learned. They will be writing an ongoing letter to themselves about what they have learned or experienced as a result of each unit. (The length of the letter is up to the facilitator.) The facilitator should stress that this letter allows them to look back, evaluate and maybe even write down goals for the future. The facilitator may want to provide a sample letter for the unit that has just been completed.3. Have students write the letters while in class. The facilitator should circulate among the students to assist anyone who may have difficulty.4. Collect letters. Read them. At the end of each unit, return student letters so that they may write additional evaluations.5. When the course is complete, send the letters to each student. |
|--|---|

Communication Skills Bibliography

A partial listing of books, articles, and curriculums which our writers and editors recommend. For additional help in selecting relevant reading or audio-visual materials, please call the Michigan Vocational Education Resource Center at Michigan State University:
1-800-292-1606

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SUCCESSFUL LIFE SKILLS

SECTION 3

OBJECTIVE: HEALTH/WELLNESS

Upon completion, participants will be able to practice behavior that fosters improved physical and mental health.

Supporting Objectives: Participants will be able to:

- **Associate good nutrition and exercise habits with a healthier mind and body.**
- **Realize the rights and responsibilities they have to take charge of the health of their bodies.**
- **Formulate realistic plans to alter their personal appearance (weight, clothing, makeup, etc.)**
- **Explore their feelings, beliefs and behaviors of both contraception and pregnancy.**
- **Develop skills to manage the stress in their lives.**
- **Examine common emotional defense mechanisms.**
- **Identify coping strategies and sources of help for emotional problems such as depression, substance abuse, fear, etc.**
- **Explore the causes and management of substance abuse.**
- **Identify sources of medical help for self and family members.**
- **Analyze action/reaction patterns of abusive relationships, including sexual harassment.**

PRIMARY OBJECTIVE AREA: Health and Wellness

AGE GROUP: All

CROSS REFERENCE OBJECTIVE AREA: Personal Power

READING LEVEL: Basic

NAME OF ACTIVITY: Controlling Body - Controlling Life

GROUP SIZE: Any

MATERIALS NEEDED: Samples of Women's Magazines covering exercise and fitness.
Library books, audio tapes, videotapes, or records on exercise.

TIME NEEDED: 20 Minutes

PURPOSE

1. Illustrate how good physical fitness can improve mental, physical health and self concept.
2. Allow students to set a goal for self improvement on a follow through for increased self esteem.

DIRECTIONS FOR ACTIVITY:

1. Introduce concept of improving health, attitude, and self esteem by planning a physical fitness routine for the entire Health and Wellness unit. Begin one class or more each week with a brief physical fitness workout. Point out that control over one's body assists in getting control over one's life. Ask participants to list ways that they regularly exercise.
2. Bring in an exercise audio tape, video tape, or record and show a simple workout. Have students bring exercise clothing and lead group exercise.

*should consist of:
 stretching warm-up
 short workout
 cool down and stretching
3. Have students review the exercise period and fitness materials. Choose one area of the body: hips, stomach, thighs, arms, etc. to concentrate on for the entire Health Unit. Raise awareness that change can take place.
4. Plan for extra credit:
 Have student develop a personal plan for themselves to work on one area of their body.

PURPOSE

DIRECTIONS FOR ACTIVITY:

Plan must include:

- Pre and post measuring
- Spot reduction exercise
- Plan for when it will be done
- Weekly progress chart for comments on attitude and feeling changes with exercise.

Suggestions:

You may want to devote a portion of one day per week to exercise.

Try to set aside a progress day, ex: Friday to share weekly progress on goals. This allows for positive comments from instructor and group sharing.

Build in a reward for the person who has the most change during the unit.

Example:

Bring in hairdresser for a free haircut and set.

Do a facial and make-up in class on person who changed the most.

Reward all with the "Be the Best" buttons or some visible booster.

PRIMARY OBJECTIVE AREA: Health/Wellness

AGE GROUP: All

CROSS REFERENCE OBJECTIVE AREA: Personal Power

READING LEVEL: Intermediate

NAME OF ACTIVITY: Healthstyle: A Self Test

GROUP SIZE: Any

MATERIALS NEEDED: Healthstyle Self-Test; pencils/pens

TIME NEEDED: 20 - 30 Minutes

PURPOSE

DIRECTIONS FOR ACTIVITIES:

1. Identify areas of strengths and weaknesses in the following health related areas: Cigarette Smoking; Alcohol and Drugs; Eating Habits; Exercise/Fitness, Stress Control and Safety.
2. Provide the opportunity for discussion of good health/bad health behavior.
3. Encourage behavior toward good health goals.

1. Pass out test and read directions carefully to participants before they begin. (If the reading level of the group is really low - read the test to them as they take it.)
2. When the tests are completed, read aloud over the last page "What Your Scores Mean To You". Be sure they understand the meaning of their scores.
3. Lead the group in discussion of what contributes to good health/bad health behavior. (This leads nicely into many of the activities in this Health/Wellness section and one or more can be used at this time with this activity or in subsequent sessions.)
4. A desirable result of the group discussion would be some goal setting toward good health behavior.

HEALTHSTYLE - A SELF TEST

All of us want to be healthy, but many of us don't know how. This brief test, developed by the Public Health Service, will tell you how well you are doing to stay healthy. The behaviors covered in the test are recommended for most people.

Directions:

Circle the number under one of the three answers that best fit your behavior for each numbered statement.

Add up the numbers that you circled in each lettered section and write the total on the Score Line for that section.

	Almost Always	Some- times	Almost Never
A. CIGARETTE SMOKING (If you don't smoke, enter a score of 10 for this section).			
1. I avoid smoking cigarettes	2	1	0
2. I smoke only low tar and nicotine cigarettes, a pipe or cigars.	2	1	0
SMOKING SCORE _____			
B. ALCOHOL AND DRUGS			
1. I avoid drinking alcoholic beverages or I drink no more than 1 to 2 drinks per month.	4	1	0
2. I avoid using alcohol or other drugs (especially illegal drugs) as a way of handling stressful situations or the problems in my life.	2	1	0
3. I am careful not to drink alcohol when taking certain medicines (for example: medicines for sleeping, pain, colds and allergies) or when pregnant.	2	1	0
4. I read and follow the label directions when using prescribed and over-the-counter drugs.	2	1	0
ALCOHOL AND DRUGS SCORE _____			
C. EATING HABITS			
1. I eat a variety of foods each day, such as fruits, vegetables, whole grain breads and cereals, lean meats, dairy products, dry peas and beans and nuts and seeds.	4	1	0
2. I limit the amount of fat, saturated fat and cholesterol I eat including fat on meats, eggs, butter, cream, shortenings and organ meats such as liver.	2	1	0

	Almost Always	Some-times	Almost Never
3. I limit the amount of salt I eat by cooking with only small amounts, not adding salt at the table and avoiding salty snacks.	2	1	0
4. I avoid eating too much sugar (especially frequent snacks of sticky candy or soft drinks).	2	1	0

EATING HABITS SCORE_____

D. EXERCISE/FITNESS

1. I maintain a desired weight, avoiding overweight and underweight.	3	1	0
2. I do vigorous exercise for 15-30 minutes at least 3 times a week (examples include running, swimming and brisk walking).	3	1	0
3. I do exercises that enhance my muscle tone for 15-30 minutes at least 3 times a week (examples include yoga and calisthenics).	2	1	0
4. I use part of my leisure time participating in individual, family or team activities that increase my level of fitness (such as gardening, bowling, golf or baseball).	2	1	0

EXERCISE/FITNESS SCORE_____

E. STRESS CONTROL

1. I have a job to do other than work that I enjoy.	3	1	0
2. I find it easy to relax and express my feelings freely.	3	1	0
3. I recognize early, and prepare for events or situations likely to be stressful for me.	2	1	0
4. I participate in group activities (such as church or community organizations) or hobbies that I enjoy.	2	1	0

STRESS CONTROL SCORE_____

F. SAFETY

1. I wear a seatbelt when riding in a car.	2	1	0
2. I avoid driving while under the influence of alcohol or other drugs.	2	1	0
3. I obey traffic rules and the speed limit when driving.	2	1	0
4. I am careful when using potentially harmful products or substances (such as household cleaners, poisons, and electrical devices).	2	1	0
5. I avoid smoking in bed.	2	1	0

SAFETY SCORE_____

WHAT YOUR SCORES MEAN TO YOU

SCORES OF 9 AND 10---EXCELLENT! Your answers show that you are aware of the importance of this area of your health, and are putting your knowledge to work for you by practicing good health habits. As long as you continue to do so, this area should not pose a serious health risk.

SCORES OF 6 TO 8---GOOD. But there is room for improvement. Look again at the items you answered with a "sometimes" or "almost never". What changes can you make to improve your score?

SCORES OF 3 TO 6---YOUR HEALTH RISKS ARE SHOWING! You might need more information about the risks you are facing and why it is important for you to change these behaviors.

SCORES OF 0 TO 2---YOU MAY BE TAKING SERIOUS AND UNNECESSARY RISKS WITH YOUR HEALTH! If you are not aware of the risks and what to do about them, you can easily get the information and help you need in order to improve.

IF YOU SCORED LOW in one or more areas of the test, decide what changes you want to make for improvement. You might pick that aspect of your lifestyle where you feel you have the best chance for success and tackle that one first. Once you have improved your score, go on to another area.

PRIMARY OBJECTIVE AREA: Health and Wellness

CROSS REFERENCE OBJECTIVE AREA: Personal Power

NAME OF ACTIVITY: Weekly Health Check-Up

MATERIALS NEEDED: Handouts #1, 2, and 3 and two charts; pens/pencils;
file cards (optional)

AGE GROUP: Teen and Up

READING LEVEL: Basic and Up

GROUP SIZE: Individual to
Large

TIME NEEDED: 20 Minutes
5 to 10 minutes a day for month

PURPOSE

DIRECTIONS FOR ACTIVITY:

1. Determine strengths and weaknesses in participants' current diet through a nutrition self-assessment questionnaire
2. Develop, on a daily basis, good nutrition, exercise and other health habits for a healthier mind and body.
3. Formulate realistic plans to alter their weight.
4. Increase independent behavior through decision making and goal setting.

1. Using the Nutrition Self-Assessment Questionnaire (Handout 1) have participants identify strengths and weaknesses in their present diet.
2. Explain what amounts of the food groups, exercise, medications and rest/sleep are necessary to maintain good health for the individual's life situation. (Use Handout 2)
3. Distribute the two charts (Handout 3 - page 1 and 2) and explain how to use them to reflect their daily food intake, exercise, medications and rest/sleep.
4. Explain the "patterns" box on the Weekly Health Check-Up chart. (page 2 of Handout 3). This will demonstrate how well they are doing with balanced meals.
5. Have them transfer the information from their "Record of Foods During One Week" to the "Weekly Health Check-Up" chart either daily or at the end of each week.
6. Encourage the use of the charts for a period of 2 to 3 months to give them a good idea of their eating, exercise and rest patterns.
7. Keep a file card for each participant with the weekly results recorded on it. This gives both the facilitator and user an overall view and provides information for suitable rewards and counseling.

(Note: The Nutrition Self-Assessment Questionnaire and portions of Handout 2 focus on pregnant teens. If your class population includes others, you may want to alter the exercise or substitute parts of it.)

NUTRITION SELF-ASSESSMENT QUESTIONNAIRE

This questionnaire will help you to identify the strengths and weaknesses in your diet.

Please circle the symbol (● ▲ □) under your response to each question.

1. Do you eat a wide variety of foods - including selections of (a) fruits and vegetables (b) milk products (c) whole grain products and (d) meats, poultry, fish, eggs, dried beans, and peas?

Wide Variety	Some Variety	Little Variety
●	▲	□
2. Were you overweight or underweight at the time you became pregnant?

Less than 5 pounds	5-19 pounds	20 pounds or more
●	▲	□
3. How often do you eat breakfast?

5-7 times per week	3-4 times per week	1-2 times per week
●	▲	□
4. Do you eat foods high in dietary fiber (like bran, whole grains, fresh fruits, and vegetables)?

Daily	4-6 times per week	Less than 3 times per week
●	▲	□
5. Do you eat a lot of sweet or salty snack food?

Rarely	Occasionally	Frequently
●	▲	□
6. Which list of foods best describes your total fat intake?

A	B
<ul style="list-style-type: none"> oSkim or lowfat milk and dairy products oBaked, broiled, steamed foods oSmall amounts of polyunsaturated vegetable oils (i.e. soy, corn, safflower) oFew bakery products oUse more poultry, fish; limit meat 	<ul style="list-style-type: none"> oWhole milk, cream, butter oCheeses (especially those high in fat, that is, cream cheese, cheddar, roquefort) oMore than 8 ounces of any meat per day oLuncheon meats, bacon, sausage oFried foods
7. How many times a week do you eat out?

List A	Moderate Amounts of Both Groups	List B
●	▲	□
0-2 times per week	3-4 times per week	5 or more times per week
●	▲	□
8. How many cups of coffee, tea, or cola do you drink per day?

0-1 cup per week	2-3 cups per day	4 or more cups per day
●	▲	□
9. How many alcoholic beverages do you have a week (one 12-ounce can of beer is equal to one 4-ounce glass of wine OR 1-ounce distilled liquor - scotch, gin, vodka, whiskey, etc.?)

None	1-7 per week	8 or more per week
●	▲	□
10. Do you take time for leisurely, relaxing meals?

Always	Sometimes	Never
●	▲	□

HOW TO CALCULATE YOUR SCORE: Count the total number of

Score 3 points for each ● _____

Score 2 points for each ▲ _____

Score 1 point for each □ _____

Total Score: _____

The nutritionist will help you to interpret your score and will provide some helpful hints to improve your diet.

Nutrition Self-Assessment Questionnaire Interpretation Sheet

If your **Total Score** is between:

21-30 Points Your rating is *GOOD*. Congratulations! "Good" indicates that you have commendable eating habits and awareness of the importance of nutrition in keeping healthy. Keep up the good work and maintain (or better yet, improve) this rating.

12-20 Points Your rating is *FAIR*. You are practicing some of the principles of good nutrition, but by following some of the recommended guidelines as discussed with a nutritionist, you can increase your eating to "GOOD." In doing so, you can improve your nutritional status and your health.

6-11 Points Your rating is *POOR*. You are taking unnecessary risks with your health. Your eating habits need to be changed if potential health problems are to be avoided. Start your improvements by discussing your habits with a nutritionist and choose one or more to improve upon.

Now that you've scored your eating habits, you know what you're doing right, and you may have discovered some areas that you need to improve upon. You may feel that you want to change many habits right away, but our advice is to take your time. Food preferences take years to develop so it will take time to change these habits. The best way is to make changes gradually - one or two at a time. The direction of your efforts should be aimed toward those actions that are above the circles in each question.

Adapted from Kaiser Permanente Medical Center, Vallejo, CA

HEALTH/WELLNESS

WEEKLY HEALTH CHECK-UP

Directions: This activity is designed to "learn by doing". There are two charts: Record of Foods Eaten During One Week and Weekly Health Check-Up. The first chart is to be used at home, the second is filled out in class and kept at the class site. Actual foods and the amounts are recorded on the first chart. Each unit/serving as described below, from chart one, gets a check (✓) on the Weekly Health Check-Up.

FOOD GROUP	SIZE OF SERVING	NUMBER OF SERVINGS
1. Milk and Dairy Products	Milk: 8 ozs. or 1 cup Cheese: 2 ozs. or 2 slices	4 - teens 5 - pregnant teens 6 - lactating
2. Fruits and Vegetables	Fruits and Vegetables - 1/2 cup Fruit and Vegetable juice - 1/2 cup	4 - teens 4 or more - pregnant teens 4 or more - lactating
3. Bread and Grain Products	Bread = 1 slice (1 bun = 2 breads) Cereal = 1 cup Saltine crackers = 4 Graham crackers = 2 Rice, pasta = 1 cup	4 - teens 4 or more - pregnant teens 4 or more - lactating
4. Meat and Protein	Cooked meat - 3 ozs. Hot dogs - 2 Eggs - 2 Lunch meat - 2 slices thin 1 slice thick Peanut butter - 4 tbsp. Baked beans - 1 cup	2 - teens 4 - pregnant teens 4 - lactating
5. Optional Foods	Fat Sugars (candy) Liquids (pop)	Student set own goals - usually related to weight control.

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WEEKLY HEALTH CHECK-UP (CONT)

MEDICATIONS

1. As prescribed: includes prenatal vitamins.
-

SLEEP/REST

1. Put a check under the number of hours of sleep/rest you had for each 24 hour period, may include naps. Have the students set their own goals, deciding how much sleep/rest they need to feel rested each day.
-

BALANCED MEAL PATTERNS/SNACKS

1. Put appropriate checks in the "patterns" box for breakfast, lunch, dinner and nutritious snacks, quickly showing how well they are doing with balanced meals.
-

EXERCISE

1. Put a check in the appropriate box each day that you have some concentrated physical exercise. Your total exercise should include 60 minutes of aerobic exercise (walking, biking, swimming) for 20 minutes three times per week.
-

At the end of each week that the charts are used, rewards such as colored stars can be placed by each of the food groups, medications, exercise and sleep/rest boxes. In some cases counseling may be required.

Designed by Roberta Ackley, teacher for the Young Parent Program, Ann Arbor Public Schools, Ann Arbor, Michigan

RECORD OF FOODS EATEN DURING ONE WEEK

Breakfast

Lunch

Dinner

Snacks

Sunday

Monday

Tuesday

Wednesday

Thursday

Friday

Saturday

170

WEEKLY HEALTH CHECK-UP

Milk and Dairy Products

	1	2	3	4	5	6
S						
M						
T						
W						
T						
F						
S						

Meat and Protein

	1	2	3	4
S				
M				
T				
W				
T				
F				
S				

Fruits and Vegetables

	1	2	3	4	5	6
S						
M						
T						
W						
T						
F						
S						

Optional Foods

	1	2	3	4
S				
M				
T				
W				
T				
F				
S				

Bread and Grain Products

	1	2	3	4	5	6
S						
M						
T						
W						
T						
F						
S						

Balanced Meal Patterns and Snacks

	B	L	D	S
S				
M				
T				
W				
T				
F				
S				

Breakfast, Lunch, Dinner, Snacks

Prescribed Medications, Vitamins, Iron Pills, Etc.

	1	2	3
S			
M			
T			
W			
T			
F			
S			

Daily Exercise, Walking, Etc.

	1	2	3
S			
M			
T			
W			
T			
F			
S			

Hours

Rest and Sleep

	1	2	3	4	5	6	7	8
S								
M								
T								
W								
T								
F								
S								

PRIMARY OBJECTIVE AREA: Health/Wellness

AGE GROUP: Teens & Up

CROSS REFERENCE OBJECTIVE AREA(s): Personal Power

READING LEVEL: Intermediate

NAME OF ACTIVITY: My Self Image

GROUP SIZE: Any

MATERIALS NEEDED: Play Dough or Modeling Clay For All;
Handouts #1, 2 and 3; Booklet: "Food-For
Your Figure and Physique" (Optional Resource);
Pencils/Pens.

TIME NEEDED: Two Sessions, 40
Minutes Each

PURPOSE

DIRECTIONS FOR ACTIVITY:

Assess their image and what they think others think of them.

Determine if change is really needed.

To Emphasize During Discussions:

Many people are unhappy with the way they look. Often things that some people think are extremely noticeable flaws aren't even seen by others. When you don't feel good about the way you look, it's usually because you don't measure up to how you think you ought to look or would like to look. This idea about what you should look like is called Beauty Ideal. The beauty ideal is different for different people. It depends on where you live and who you are. When a lot of people who live in one area of the country have the same idea about what is good looking, this is called the "Cultural Beauty Ideal." In many areas of the United States, 'thin is in' and for some this means the extreme in trying to lose weight. Many feel they are grossly overweight, unattractive and need to lose a great deal of weight before they are acceptable to others.

Many people have large bony structures and heavy muscle development from active sports and/or are tall for their age. They should realistically decide what is a reasonable body weight and size for them. No amount of dieting or exercising will turn a large framed 5'7", 14 year old girl into a 5'1" girl who wears a size 7.

6785 5
14 2:18 110826
130011P\MS110622

PURPOSE

DIRECTIONS FOR ACTIVITY

Session I

1. Divide into groups of twos and threes.
2. Give each person play dough or clay and have them form a mold that represents what they look like ahead of time that they will be explaining to the people in small groups so as to encourage them to be serious about this activity.
3. Encourage each person to explain the models they made to others in their group.
4. Ask for volunteers to explain their models to the entire group. Only do this if people appear comfortable and not reserved about doing this activity.

Session II

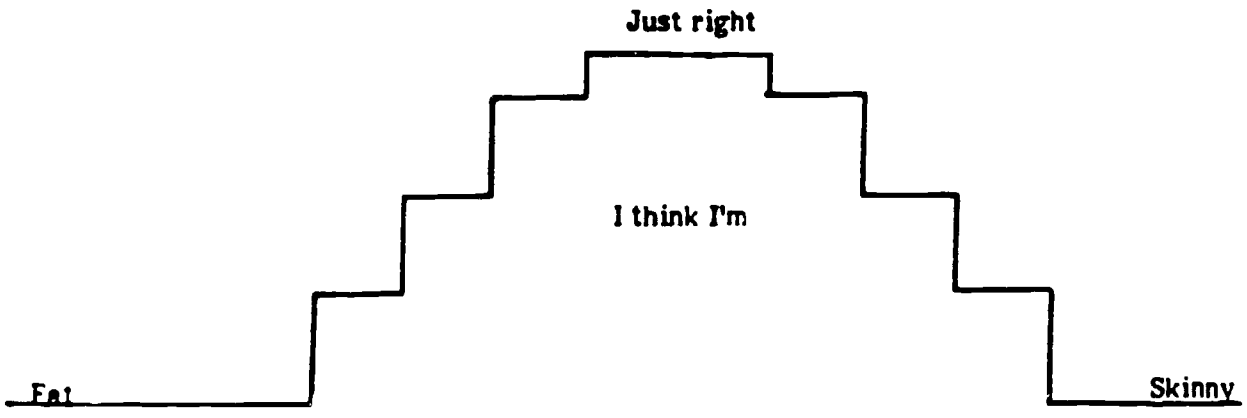
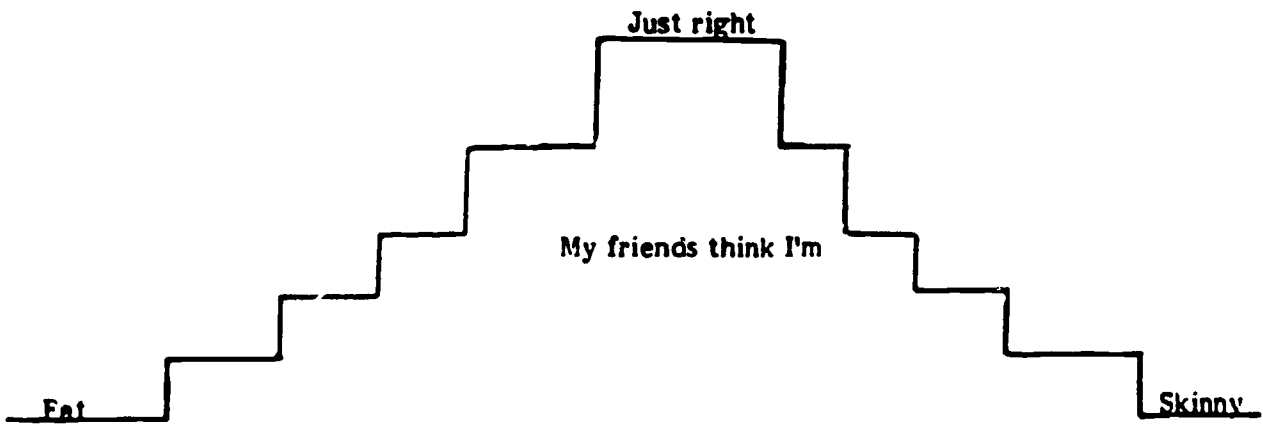
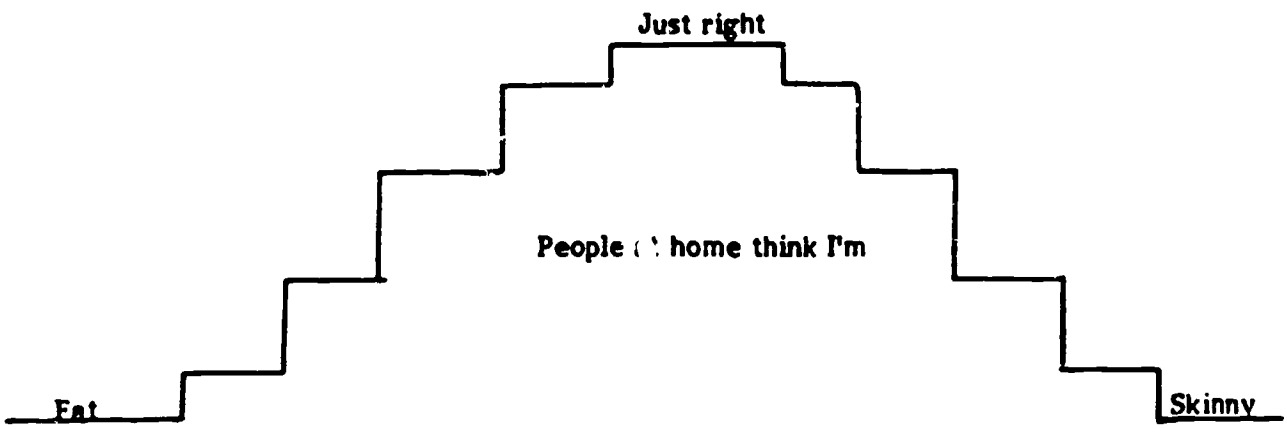
1. Give each person a copy of "My Self Image" (Handout #1, two pages).
2. The steps on this handout help each person to describe how they think they look to the people at home, to their friends, and themselves. Have each person put a stick figure (X) on the step of each ladder that best describes them.
3. Discuss:
 - .Are there differences in the way people at home, your friends and you look at your body build?
 - .What are those differences? Are you sure people/family feel that way about you?

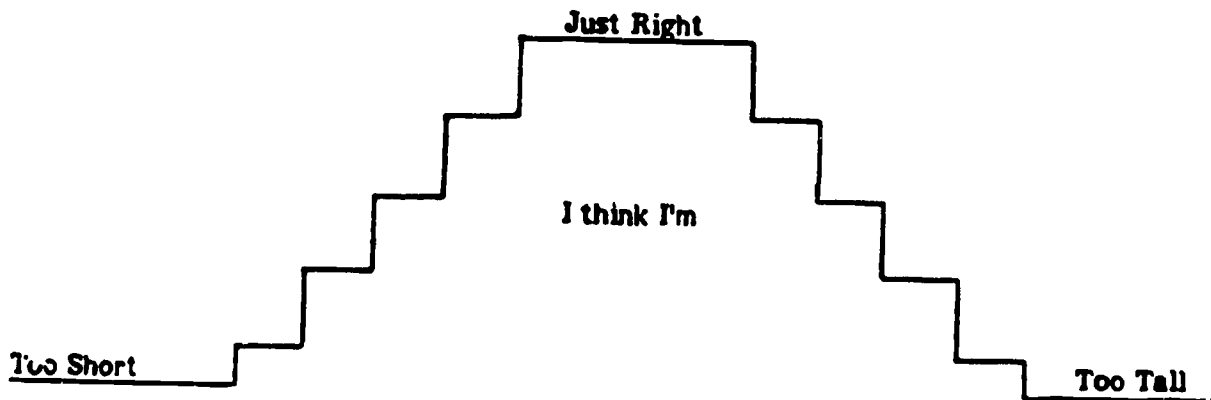
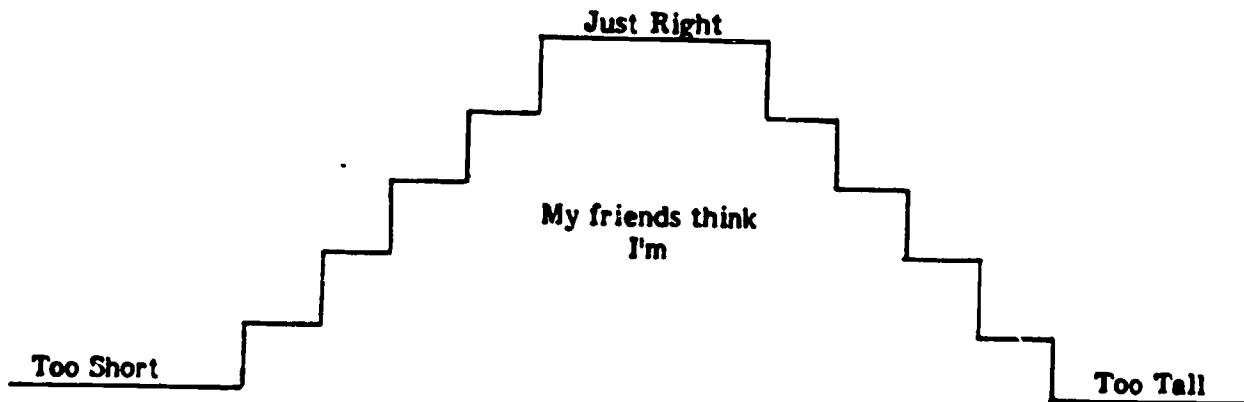
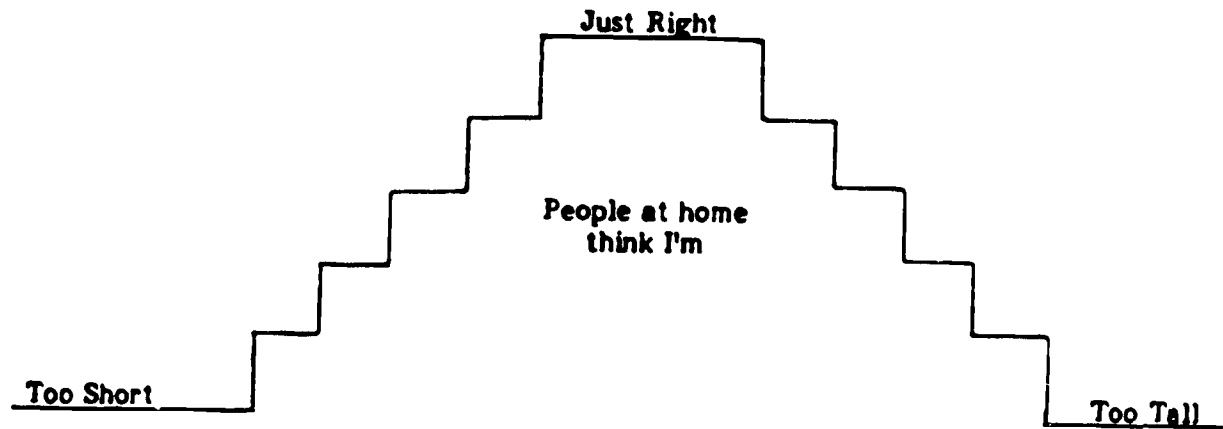
PURPOSE

DIRECTIONS FOR ACTIVITY:

- .Do you agree with those differences? Why or why not?
 - .Where would you like to be on each of the ladders? Mark those spots with an "X". Is there a difference between where you are now and where you would like to be?
4. Follow this activity with "My Body Shape."
- A. Give each person a copy of "My Body Shape:" (Handout #2) to fill out.
 - B. Discuss responses. Points to emphasize are:
 - .We inherit our body builds and cannot change them. Some builds carry more weight than others.
 - .Setting a goal to maintain weight is more realistic than one to lose weight in most cases. Growing heavy and big are part of growing up. Maturation will bring about change. For most girls this occurs around 16. For boys around 18. The important point is to maintain and not gain.
 - .Most importantly, regardless of body build and weight the best way to feel good about yourself is to:
 - 1) Be physically fit, which means you don't have to be an athlete, but you do need to be able to join in the fun.
 - 2) Get needed nutrients and avoid fad diets.
 - 3) Get enough rest.
5. Distribute Handout #3 as a resource for participants.

MY SELF IMAGE





It's Your Move! Body Image, Exercise, and Food

4-H Teen Nutrition Education Program

Cornell Cooperative Extension
Division of Nutritional Sciences
Cornell University
Ithaca, New York 14853

Cornell Cooperative Extension
provides equal opportunity and
affirmative action in programs
and employment.

MY BODY SHAPE

AGE: _____

SEX: _____

BODY BUILD: _____ Endomorph (round and soft)
_____ Mesomorph (muscular)
_____ Ectomorph (slender)
_____ Combination of _____ and _____

HEIGHT: _____ SHORT _____ MEDIUM _____ TALL _____

WEIGHT: _____ Too light
_____ Too heavy
_____ Ideal
_____ Plump

Do you wish you were:

_____ Lighter
_____ Heavier
_____ The same

How do you feel about the way you look?

In five years how do you want to look?

Are you trying to change the way you look?

_____ Yes _____ No

If yes, how?

What is your favorite way to exercise? How often do you do it?

Do you have enough coordination and strength to do and enjoy things?

Are you sick a lot?

Is your body condition

_____ Excellent?
_____ Good?
_____ Poor?

I would like to take better care of my body by:

AGE/WEIGHT CHART

**DESIRABLE WEIGHTS FOR MEN AND WOMEN
AGES 25 AND OVER**

Weight in Indoor Clothing

Height (shoes with 1" heels)		Small Frame	Medium Frame	Large Frame
WOMEN				
<u>Feet</u>	<u>Inches</u>	<u>Pounds</u>	<u>Pounds</u>	<u>Pounds</u>
4	10	102-111	109-121	118-131
4	11	103-113	111-123	120-134
5	0	104-115	113-126	122-137
5	1	106-118	115-129	125-140
5	2	108-121	118-132	128-143
5	3	111-124	121-135	131-147
5	4	114-127	124-138	134-151
5	5	117-130	127-141	137-155
5	6	120-133	130-144	140-159
5	7	123-136	133-147	143-163
5	8	126-139	136-150	146-167
5	9	129-142	139-153	149-170
5	10	132-145	142-156	152-173
5	11	135-148	145-159	155-176
6	0	138-151	148-162	158-179
MEN				
<u>Feet</u>	<u>Inches</u>	<u>Pounds</u>	<u>Pounds</u>	<u>Pounds</u>
5	2	128-134	131-141	138-150
5	3	130-136	133-143	140-153
5	4	132-138	135-145	142-156
5	5	134-140	137-148	144-160
5	6	136-142	139-151	146-164
5	7	138-145	142-154	149-168
5	8	140-148	145-157	152-172
5	9	142-151	148-160	155-176
5	10	144-154	151-163	158-180
5	11	146-157	154-166	161-184
6	0	149-160	157-170	164-188
6	1	152-164	160-174	168-192
6	2	155-168	164-178	172-197
6	3	158-172	167-182	176-202
6	4	162-176	171-187	181-207

Washtenaw County Cooperative Extension Service 1986

NOTE: FOR WOMEN UNDER AGE 25 SUBTRACT ONE POUND FOR EACH YEAR.

PRIMARY OBJECTIVE AREA: Health and Wellness

AGE GROUP: Teen and Up

CROSS REFERENCE OBJECTIVE AREA: Personal Power

READING LEVEL: Intermediate

NAME OF ACTIVITY: Health Issues: Over the Years

GROUP SIZE: Any

MATERIALS NEEDED: Copies of selected Handouts #1 - 8, paper and pens

TIME NEEDED: 1 - 3 Hours

PURPOSE

DIRECTIONS FOR ACTIVITY:

1. Understand more about the changes that occur during puberty.
2. Better understand the four phases of the menstrual cycle and connected issues.
3. Briefly examine possible medical problems and their causes: cramps, lack of menstrual flow, uterine bleeding, vaginal discharge, Toxic Shock Syndrome, PMS, pregnancy after thirty, osteoporosis, hysterectomy, menopause, and breast self-examination.
4. Allay superstitions and myths surrounding these health issues and identify coping strategies/sources of help.

Note: This unit covers a wide age span. Select the materials to be covered by the appropriateness to the group you will be working with.

1. Pass out FACTS AND FABLES. (Handout #1). Have students complete. Then discuss facts and myths regarding puberty and menstruation. (Sample pre/post test may be given at this time.) Note: This handout is designed for younger groups.

Questions for processing:

- Where did you learn about sexuality?
- How would you like your children to learn about sexuality?
- What myths still affect us today?
- Where do you go to learn the facts?

2. Review male and female reproduction. Pass out the handouts on female and male reproductive system (Handout #3 and 4). Review changes of puberty and terms. Have students complete activity. *Instructor may want to use overhead samples of reproductive system for clarification and discussion.
3. Menstrual Cycle Review. Handout #5 and explain the functioning and phases of the menstrual cycle. Then have students complete the activity charting the cycles of the sample.
4. Use Being a Woman (Handout #6) if there is any need to clarify:

.Phases of Cycle
.Ovulation timing

Questions regarding
"safe days"

PURPOSE

DIRECTION FOR ACTIVITY:

5. Introduce the Premenstrual Syndrome concept.

Use Introductory questions:

Do you have any special feelings or symptoms before your period?

Do your emotions vary at this time?

Does your family notice any changes in you during this time?

List these comments on the board. Then pass out Handout 5 and discuss.

"For those who have severe PMS symptoms, you may want to have them use some of the management techniques and report back.

6. Order "Approaching the Menopausal Years" ahead of time. (See Facilitator's Resource) and discuss questions with students.
7. Review handouts on Breast Self-Examination (Handout #9). Discuss and answer questions. You may obtain a film or visual on Breast Self-Examination from health department.
8. On a sheet of paper have participants identify health problems they experience and how to get help with them. (If they do not know, try to provide such information or arrange for a health professional resource person to be a guest speaker.

APPROACHING THE MENOPAUSAL YEARS

An excellent pamphlet can be ordered, free of charge,
which answers the following questions:

1. What is menopause and when does it occur?
2. How will I know I'm approaching the menopausal years?
3. Will my emotions be affected?
4. Is menopause part of the "change of life"?
5. Is there any way to control these symptoms?
6. Does having a hysterectomy affect the menopause?
7. What symptoms might I experience following the menopause?
8. Is it important to see a doctor regularly after menopause?
9. Do men experience menopausal symptoms?
10. Will I be able to continue sexual relations during and following the menopausal years?

Order Form	
Telling Your Daughter About Menstruation <i>for parents</i> <input type="checkbox"/> English <input type="checkbox"/> Spanish <input type="checkbox"/> 50 copies <input type="checkbox"/> 100 copies <input type="checkbox"/> 150 copies	Your Body After Childbirth <i>for new mothers</i> Currently available in English only. <input type="checkbox"/> 50 copies <input type="checkbox"/> 100 copies <input type="checkbox"/> 150 copies
Your Teenage Menstrual Cycle <i>for girls 13-18</i> <input type="checkbox"/> English <input type="checkbox"/> Spanish <input type="checkbox"/> 50 copies <input type="checkbox"/> 100 copies <input type="checkbox"/> 150 copies	Approaching The Menopausal Years <i>for premenopausal women</i> Currently available in English only. <input type="checkbox"/> 50 copies <input type="checkbox"/> 100 copies <input type="checkbox"/> 150 copies
The Menstrual Cycle...More Than Your Period <i>for women 18-35</i> <input type="checkbox"/> English <input type="checkbox"/> Spanish <input type="checkbox"/> 50 copies <input type="checkbox"/> 100 copies <input type="checkbox"/> 150 copies	
Please indicate the pamphlets you wish to receive by checking the appropriate boxes. All quantities are available free-of-charge. Please mail this form to Personal Products, Box VOC88, Milltown, New Jersey 08850	
NAME (Please Print) _____	
ORGANIZATION _____	
ADDRESS _____	
CITY _____	STATE _____ ZIP _____


Personal Products
Box VOC88
Milltown, New Jersey 08850

FACTS AND FABLES

We undergo many changes in our lives - some planned for, others unexpected. One time of change for everyone comes in the early teen years, when our bodies change and our goals, expectations and views of life take new shape. What do you feel and know about the physical changes that occur at puberty? Below are 23 statements about puberty, menstruation and menstrual protection. Find out how you feel about these topics by putting a check in the appropriate box.

	True	False	Don't Know
1. I already know all I need to about puberty and menstruation.	_____	_____	_____
2. All females have menstrual cramps during their period.	_____	_____	_____
3. Boys don't undergo changes at puberty.	_____	_____	_____
4. Menstruation should have no effect on a female's ability to work.	_____	_____	_____
5. I don't like the changes that are happening to my body now.	_____	_____	_____
6. Males should know about menstruation.	_____	_____	_____
7. You can't go swimming when you have your period.	_____	_____	_____
8. Eating a nutritious, well-balanced diet can help prevent some menstrual discomforts.	_____	_____	_____
9. Young girls can use menstrual tampons.	_____	_____	_____
10. Females shouldn't exercise during their menstrual period.	_____	_____	_____
11. I'm embarrassed to talk with my parents about the changes I am experiencing.	_____	_____	_____
12. Females are more emotional during their period.	_____	_____	_____
13. I have already learned about all the changes that take place during puberty.	_____	_____	_____
14. During puberty, boys and girls can become parents.	_____	_____	_____
15. Boys undergo puberty at a different age from girls.	_____	_____	_____
16. There is nothing you can do for menstrual discomfort.	_____	_____	_____
17. Having your period keeps you from doing the things you like to do.	_____	_____	_____
18. Boys can tell when a girl has her period.	_____	_____	_____
19. Careful, thorough cleansing of your face can help prevent skin blemishes.	_____	_____	_____

	True	False	Don't Know
20. All boys have nocturnal emissions.	_____	_____	_____
21. I have talked with my friends about the changes in our bodies.	_____	_____	_____
22. Tampons are comfortable to use.	_____	_____	_____
23. People shouldn't talk about menstruation.	_____	_____	_____

MALE AND FEMALE REPRODUCTION

PRE & POST TEST

- | | |
|--------------------------|--|
| _____ Pituitary Gland | 1. Gland at base of brain, controls production of eggs and sperms. |
| _____ Hypothalamus | 2. Sac holding testes. |
| _____ Scrotum | 3. Organ which produces sperm. |
| _____ Prostate | 4. Tubes which carry sperm. |
| _____ Testes (testicles) | 5. Gland which produces fluid (semen). |
| _____ Urethra | 6. Tube which passes urine and semen. |
| _____ Penis | 7. Organ through which urine and semen pass from body. |
| _____ Vas deferens | 8. A thick fluid containing sperm. |
| _____ Semen | 9. Control pituitary gland. |
| _____ Seminal Vesicles | 10. Two sacs that produce a thick fluid that carries the sperm. |

- | | | |
|-------|----------------------------------|--|
| _____ | Endometrium | 11. Organ which produces egg. |
| _____ | Uterus | 12. Tubes through which egg travels to uterus. |
| _____ | Ovary | 13. Organ where baby develops. |
| _____ | Vagina | 14. Lining of the uterus. |
| _____ | Menstruation | 15. Passage way to outside of female body. |
| _____ | Fallopian tubes | 16. Process of shedding lining of uterus. |
| _____ | Hymen | 17. Flexible tissue at entrance of vagina. |
| _____ | Cervix | 18. Lower portion of uterus which dilates for birth. |
| _____ | Menopause | 19. Nausea, cramps, dizziness around menstruation. |
| _____ | Premenstrual syndrome | 20. Lack of menstrual flow. |
| _____ | Dysfunctional uterine bleeding | 21. Temporary weight gain, sore breasts, tiredness, depression, irritability, headaches, bloating. |
| _____ | Hysterectomy | 22. Excessive bleeding between or during periods. |
| _____ | Symptoms of Toxic Shock Syndrome | 23. Yellow or colored discharge from vagina causing burning or itching. |
| _____ | Amenorrhea | 24. High fever, vomiting, diarrhea dizziness. |
| _____ | Abnormal vaginal discharge | 25. Surgical removal of uterus. |
| _____ | Dysmenorrhea | 26. Permanent ending of menstrual cycle. |
| _____ | Osteoporosis | 27. Thinning and deterioration of bone due to age and loss of estrogen. |

MALE AND FEMALE REPRODUCTION

PRE & POST TEST

- | | | | |
|----|--------------------|-----|---|
| 1 | Pituitary Gland | 1. | Gland at base of brain, controls production of eggs and sperms. |
| 9 | Hypothalamus | 2. | Sac holding testes. |
| 2 | Scrotum | 3. | Organ which produces sperm. |
| 5 | Prostate | 4. | Tubes which carry sperm. |
| 3 | Testes (testicles) | 5. | Gland which produces fluid (semen) |
| 6 | Urethra | 6. | Tube which passes urine and semen. |
| 7 | Penis | 7. | Organ through which urine and semen pass through body. |
| 4 | Vas deferens | 8. | A thick fluid containing sperm. |
| 8 | Semen | 9. | Control pituitary gland. |
| 10 | Seminal Vesicles | 10. | Two sacs that produce a thick fluid that carries the sperm. |

- | | | | |
|----|----------------------------------|-----|--|
| 14 | Endometrium | 11. | Organ which produces egg. |
| 13 | Uterus | 12. | Tubes through which egg travels to uterus. |
| 11 | Ovary | 13. | Organ where baby develops. |
| 15 | Vagina | 14. | Lining of the uterus. |
| 16 | Menstruation | 15. | Passage way to outside of female body. |
| 12 | Fallopian tubes | 16. | Process of shedding lining of uterus. |
| 17 | Hymen | 17. | Flexible tissue at entrance of vagina. |
| 18 | Cervix | 18. | Lower portion of uterus which dilates for birth. |
| 26 | Menopause | 19. | Nausea, cramps, dizziness around menstruation. |
| 21 | Premenstrual syndrome | 20. | Lack of menstrual flow. |
| 22 | Dysfunctional uterine bleeding | 21. | Temporary weight gain, sore breasts, tiredness, depression, irritability, headaches, bloating. |
| 25 | Hysterectomy | 22. | Excessive bleeding between or during periods. |
| 24 | Symptoms of Toxic Shock Syndrome | 23. | Yellow or colored discharge from vagina causing burning or itching. |
| 20 | Amenorrhea | 24. | High fever, vomiting, diarrhea, dizziness |
| 23 | Abnormal vaginal discharge | 25. | Surgical removal of uterus. |
| 19 | Dysmenorrhea | 26. | Permanent ending of menstrual cycle. |
| 27 | Osteoporosis | 27. | Thinning and deterioration of bone due to age and loss of estrogen. |

FEMALE REPRODUCTIVE SYSTEM

In girls, puberty usually occurs between the ages of 9 and 16. Changes that occur include:

1. increased growth
2. broadening of hips
3. breast development
4. growth of pubic and underarm hair
5. development of reproductive organs
6. capability of reproduction - menstruation begins

Match the following terms with the diagram to the right:

FEMALE REPRODUCTIVE ORGANS

Pituitary gland. This gland, controlled by the hypothalamus, is located at the base of the brain and produces hormones related to growth and reproduction. One of these hormones causes an egg to ripen in an ovary.

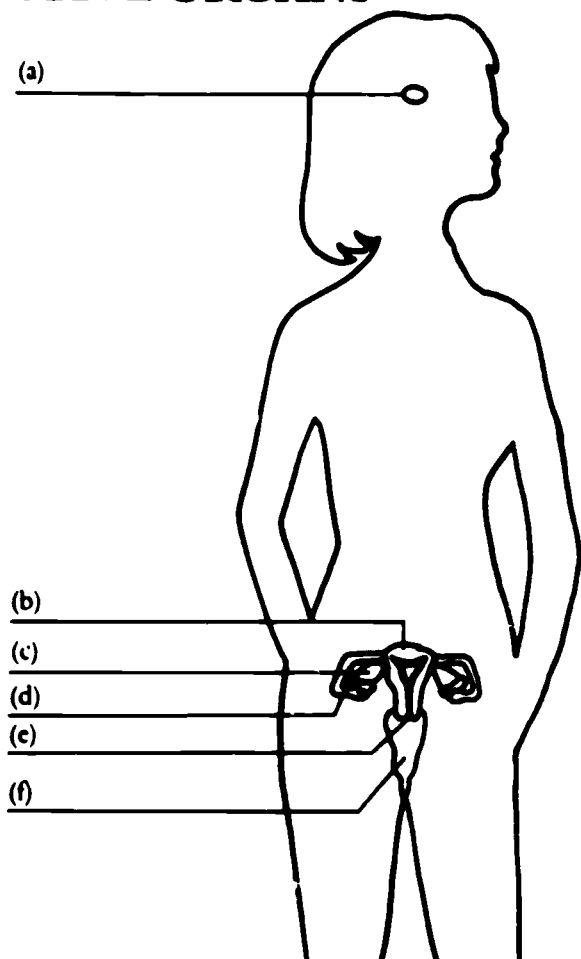
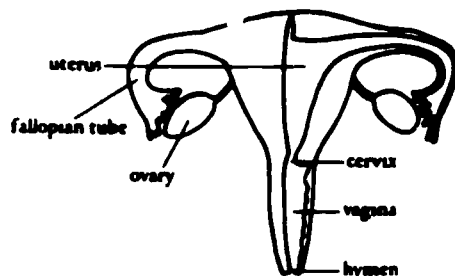
Ovaries: Two glands that contain thousands of immature egg cells or ova. Each month an egg or ovum ripens and breaks out of its sac, a process called ovulation.

Fallopian tubes: Two tubes attached on either side of the uterus through which the ripened egg travels toward the uterus.

Uterus. The organ in which a fertilized egg can develop into a baby. It has a lining called the endometrium. If the ripened egg is not fertilized, the lining of the uterus is shed. This is called menstruation.

Cervix: The lower portion of the uterus, which protrudes into the vagina.

Vagina: The passageway from the uterus to the outside of the body through which the menstrual flow leaves the body. The opening to the vagina is covered by delicate folds of skin and may be partially covered by a flexible fold of tissue called the hymen.



MALE REPRODUCTIVE SYSTEM

In boys, puberty usually occurs between the ages of 13 and 15. Changes that occur include:

1. increased growth
2. broadening of the shoulders
3. deepening of voice
4. growth of facial and body hair
5. development of the reproductive organs
6. capability to reproduce children

Match the following terms with the diagram to the right :

MALE REPRODUCTIVE ORGANS

Pituitary gland: This gland, controlled by the hypothalamus, is located at the base of the brain. It produces growth and reproduction hormones. One of these hormones causes the testes to produce sperm.

Testes or testicles: Two glands that produce the male reproductive cells or sperm. Sperm cells are necessary to fertilize a female egg cell.

Scrotum: Soft external sac containing the testes.

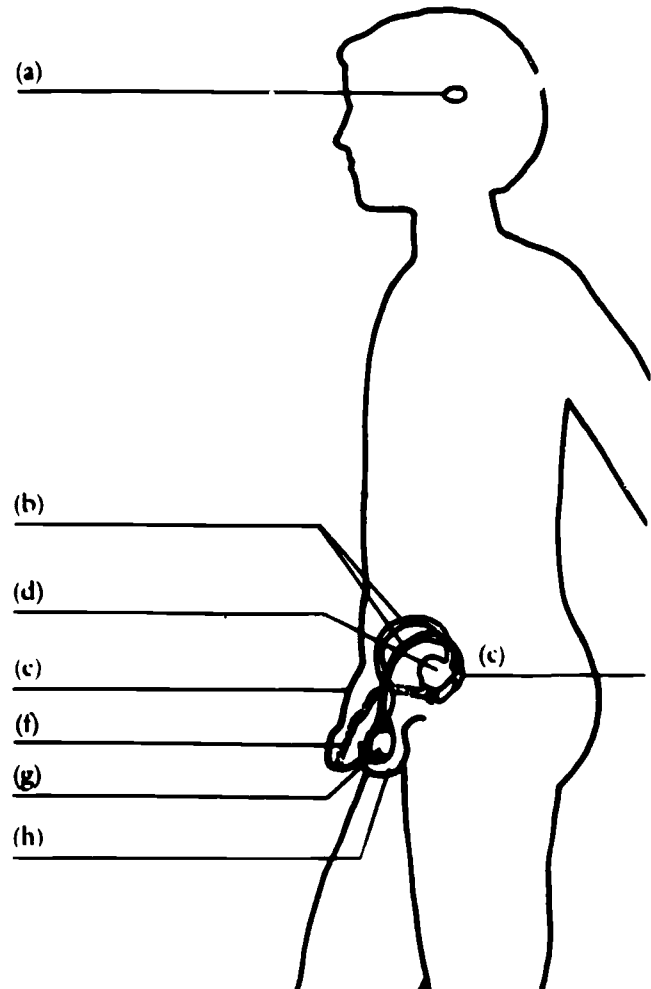
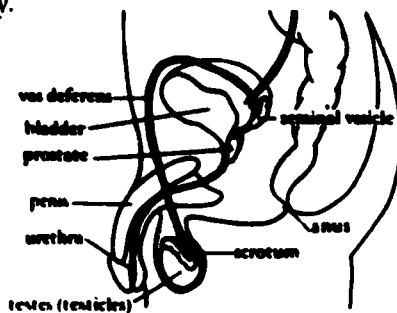
Vas deferens: Narrow tubes that carry sperm from the testes to the seminal vesicles

Seminal vesicle: One of the two sacs which produce a thick fluid that carries the sperm.

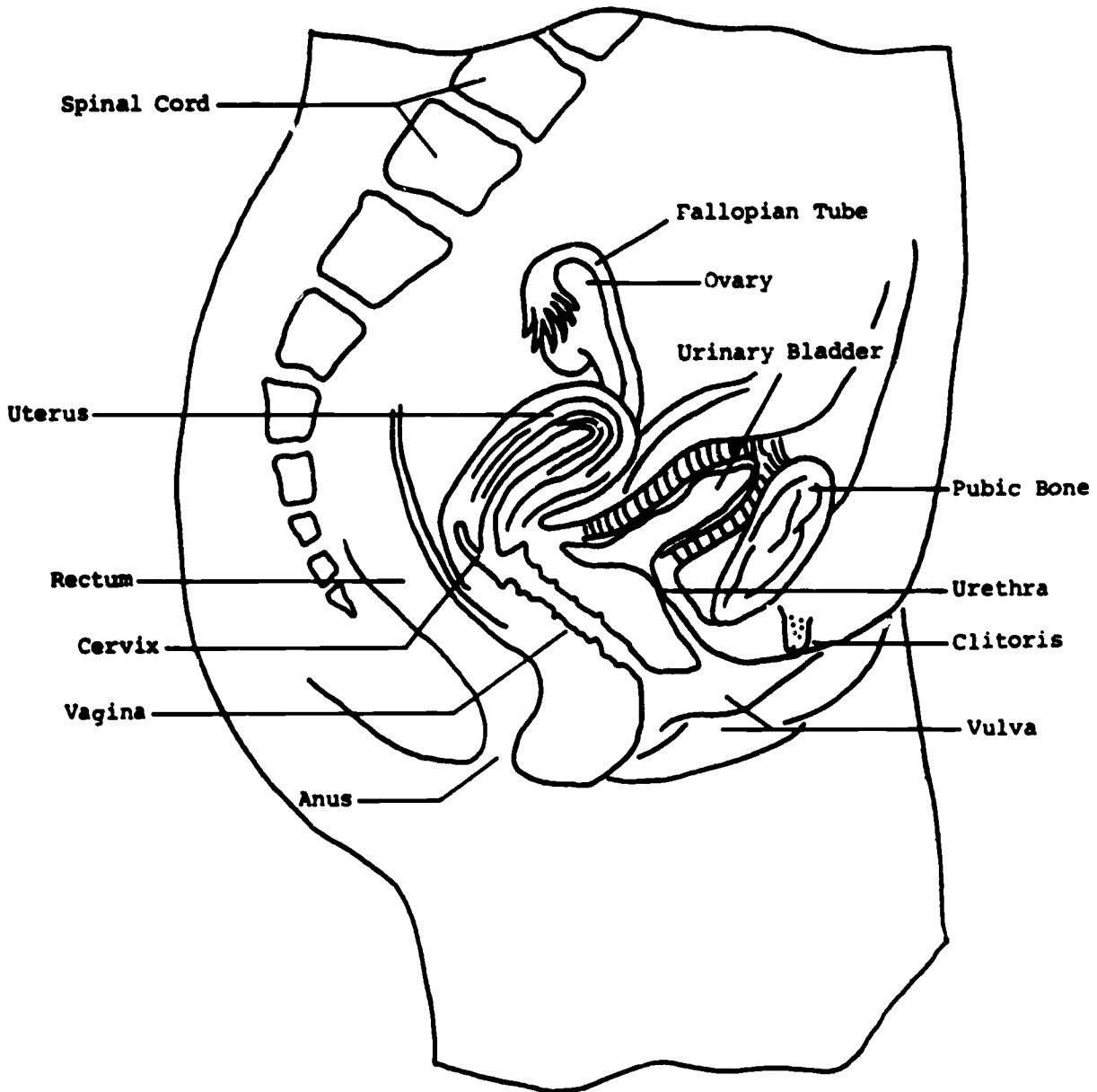
Prostate: A gland which produces a fluid that becomes part of the semen.

Urethra: A narrow tube that runs from the bladder through the penis. This provides a passageway to the outside of the body for urine or semen.

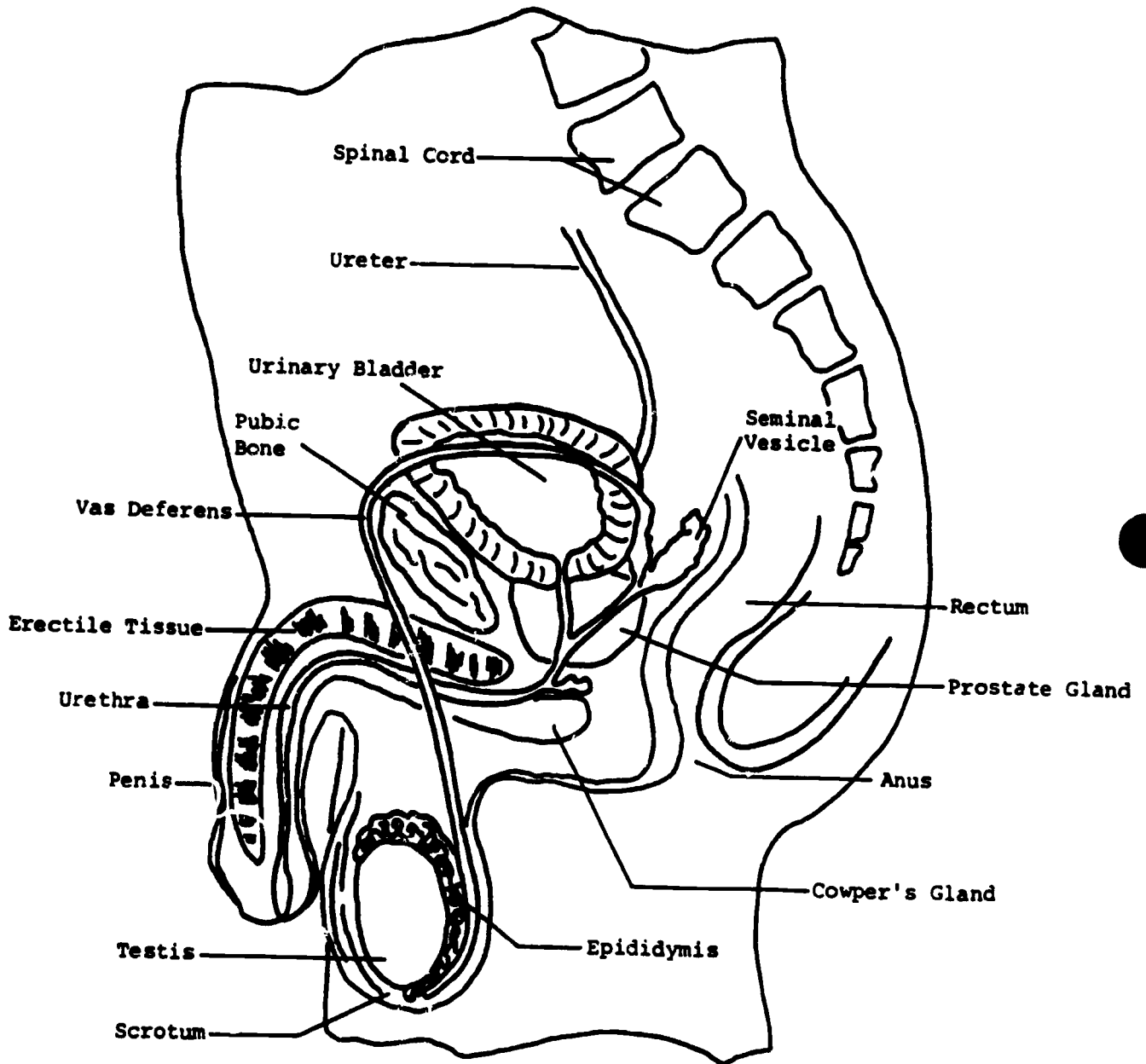
Penis: External male organ through which semen or urine leaves the body.



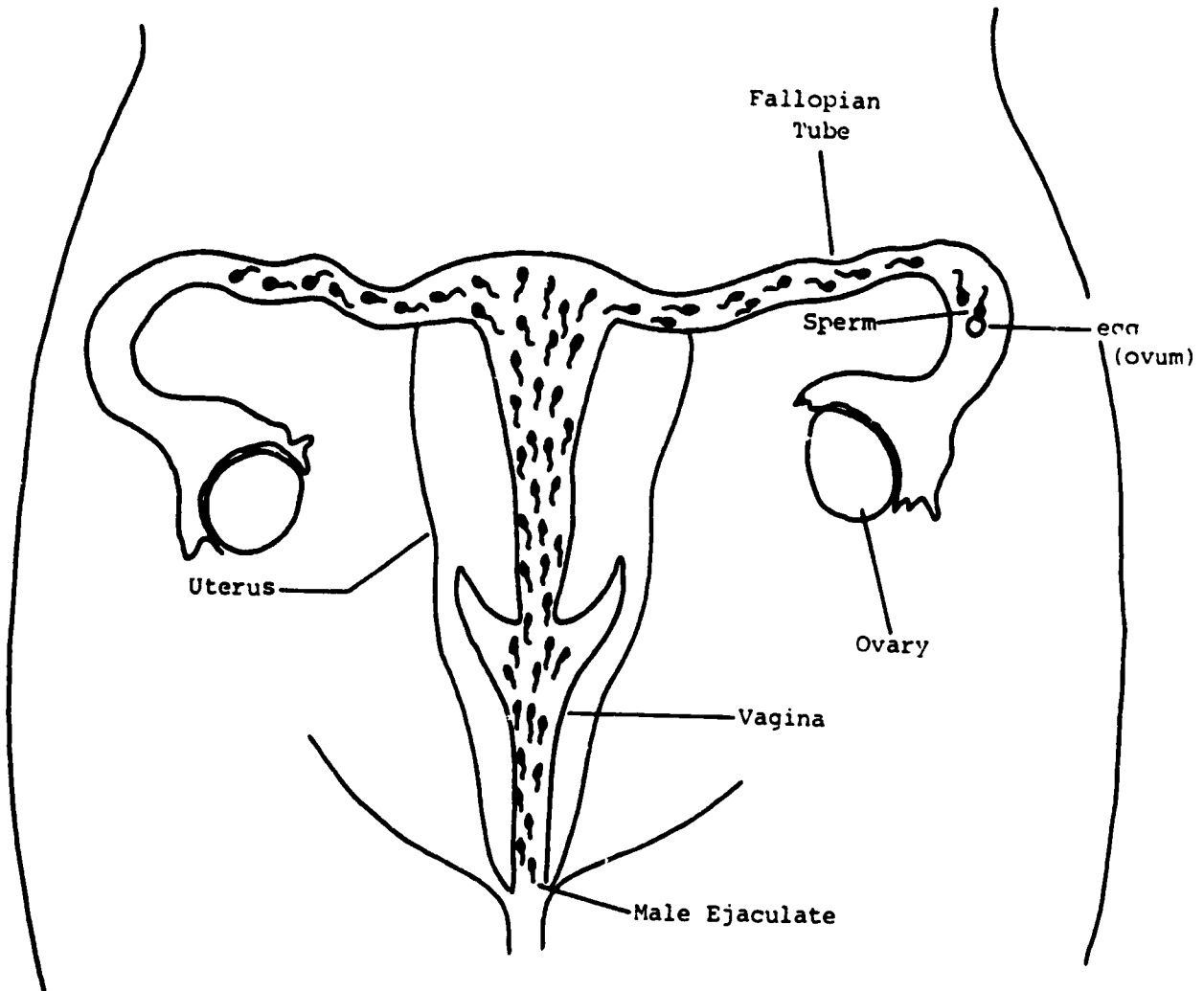
FEMALE REPRODUCTIVE SYSTEM



MALE REPRODUCTIVE SYSTEM



FERTILIZATION



THE MENSTRUAL CYCLE

About every 28 days a new menstrual cycle begins in the female body. The cycle begins with the shedding of the lining of the uterus. This is called **MENSTRUATION** and takes about four or five days. For the next several days, the lining or endometrium is very thin and an egg cell in an ovary begins to ripen. The lining starts to thicken and by the fourteenth day a ripened egg is released into a fallopian tube. This is called **OVULATION**. The endometrium continues to thicken as the egg moves toward the uterus. If the egg is fertilized, it settles in the thickened lining of the uterus and a baby develops. If the egg is not fertilized, it disintegrates and menstruation takes place, signaling the beginning of a new cycle.

Below is a diagram showing a 28-day menstrual cycle. Put the letter of each phase on the blank spaces of the diagram in the correct order. Then indicate on the circle when **OVULATION** usually takes place, and when **MENSTRUATION** takes place.

START HERE

A. Menstruation takes place.
B. Uterus lining is very thin.
C. Uterus lining begins thickening and ovulation takes place.
D. Lining becomes thicker as egg travels toward uterus.

Complete the following activity:

The 28-day menstrual cycle described is average. The actual length of the menstrual cycle may vary from 17 to 35 days and still be normal. A cycle is counted from the first day of one menstrual period until the first day of the next menstrual period. A woman's cycle may be irregular for the first year or so, but after this it should become regular. The length of each period also varies. Some women menstruate for only three days, some for as long as seven. But most have a menstrual period of about 4 to 5 days.

Once you start to menstruate, one way to learn about your cycle is to keep a menstrual calendar. As an example of how to do this, use the calendar below to record the cycles described for a woman who has an average 28-day cycle and a 4-day period. We have circled when she menstruated during the month of April and when she will begin again. Record her cycles for the next few months, as described.

Early on April 30 her next period began. For one day her flow was moderate, then it became heavier. She menstruated for four days. On May 3 she had only light flow and her period stopped. Her next cycle began on May 28. For two days her flow was moderate. Then it became light and on May 31 her period ended.

Then on June 25 her next period began. The first day the flow was moderate, but the next day it was heavy. On June 28, her flow was light and her period ended.

Can you now circle the day she will probably begin to menstruate in July?

April

1	2	3	4	5	6	7
8	9	10	11	12	13	14
15	16	17	18	19	20	21
22	23	24	25	26	27	28
29	30					

May

1	2	3	4	5	6	7
8	9	10	11	12	13	14
15	16	17	18	19	20	21
22	23	24	25	26	27	28
29	30	31				

June

1	2	3	4	5	6	7
8	9	10	11	12	13	14
15	16	17	18	19	20	21
22	23	24	25	26	27	28
29	30					

July

1	2	3	4	5	6	7
8	9	10	11	12	13	14
15	16	17	18	19	20	21
22	23	24	25	26	27	28
29	30	31				

BEING A WOMAN

Knowing how your body functions gives you a better understanding and makes you more confident. The following activities will help you chart your cycle and ovulation.

Phases of Menstrual Cycle

*Functions during a 28-day cycle:

Day 1	Day 5	**Day 15	Day 28
Start period 1st day of cycle.		Build up of new lining to prepare for ovulation.	Further building of lining for nourishment of egg. If egg not fertilized, period occurs.
		** Ovulation (release of egg)	Next Period

Ovulation always occurs 14 days before the next period. (Not all cycles are 28 days)

Use the following chart to follow your cycles and ovulation. Mark the first day of your period and continue until a pattern is established, which usually takes three to five months. Then count 14 days back to establish when you ovulated: Examples:

	(Ovulation Day 8)
20 day cycle: _____	X
	(Day 14)
28 day cycle: _____	X
	(Day 18)
32 day cycle: _____	X
	(Day 28)
38 day cycle: _____	X

(PLEASE NOTE DIFFICULTY IN USING SAFE DAYS FOR BIRTH CONTROL METHOD WITH VARIATIONS OF CYCLE LENGTH. ALSO NOTE, SPERM CAN LIVE IN FEMALE BODY FOR SEVEN DAYS.)

Now chart your cycles after the examples:

P = 1st day of period

I = End of period

O = Ovulation

P = Next period (Count 14 days back from second P to determine ovulation.)

	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22	23	24	25	26	27	28	29	30	31	
Jan.																																
Feb.																																
Mar.																																
Apr.																																
May																																
June																																
July																																
Aug.																																
Sept.																																
Oct.																																
Nov.																																
Dec.																																

1. Can you count on this as a reliable method of birth control?
2. Knowing the sperm live 7 days in the female body, can you predict your safe days if you are not absolutely regular?
3. Do you have any body signs to tell you when you are about to ovulate or have your period?

WHAT IS PREMENSTRUAL SYNDROME?

Premenstrual Syndrome is a term used to refer to a variety of symptoms that women can experience one to ten days before their menses (period) begins.

150 symptoms have been identified. We can divide the most common ones into four groups:

1. Nervous Tension
Irritability
Anxiety
Mood Swings
2. Weight Gain
Swelling of Extremities
Breast Tenderness
Abdominal Bloating
3. Headache
Craving for Sweets (Especially chocolate)
Increased Appetite
Heart Pounding
Fatigue
Dizziness/Fainting
4. Depression
Forgetfulness
Crying
Confusion
Insomnia

Other symptoms that have been documented are : lack of coordination, lack of concentration, loss of sex drive, acne, lethargy and constipation.

Menstrual cramps are not a part of PMS. Menstrual cramps usually occur once the period has already started and have a different cause and treatment. PMS occurs before a woman's period begins and improves once the period has started.

NOW THAT I KNOW WHAT IT IS, WHAT CAN I DO?

Acknowledge to yourself and to those close to you that PMS is a physical condition that has both physical and emotional symptoms.

Involve and educate your partner and/or children in your attempt to eliminate PMS from your life and from interfering with your relationships. Ask for support during this time.

Evaluate the stress in your life and try to minimize stress-causing situations during the time you have PMS. If possible, schedule your most trying tasks at work and home for the early part of your cycle when PMS symptoms subside.

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1984, Santa Cruz, CA

Eliminate or cut down your intake of refined sugar and other processed food. It is thought that continued consumption of these foods may cause a decrease in the liver's storage capacity of the B vitamins and magnesium.

Limit intake of salt and refined sugar if weight gain and bloating happen to you.

Increase your intake of foods high in B vitamins and magnesium.

Magnesium

Buckwheat
Millet
Cashews
Almonds
Peanuts
Spinach
Carrots
Wheat Bran

B-6 (Raw foods contain more than cooked)

Brewers Yeast	Cantaloupe
Bananas	Cabbage
Avocados	Egg Yolks
Wheat Germ	Liver
Soy Beans	Green Leafy Vegetable
Walnuts	Pecans
Green Peppers	Peanuts

If the above measures don't help, or if your symptoms are moderate to severe, you might find relief by daily supplements of 200-800 mg. of B-6, and up to 250 mg. of magnesium depending on the severity symptoms.

Develop a plan for regular outdoor exercise-at least walking at a fast pace in fresh air every day. Brisk walking especially helps relieve anxiety and nervous tension. It also provides your body with natural vitamin D.

A treatment currently being used is progesterone therapy. Both natural and synthetic versions of this hormone are available. There is a difference of opinion among physicians as to their relative effectiveness.

Management of PMS may involve a combination of the approaches mentioned above.

Chart and document your symptoms before starting any course of treatment. Seek further information on PMS and options for its management. If you have questions about your treatment, be sure to ask or seek a second opinion. Always document your progress as you are being treated.

Believe in yourself. Don't lose sight of all your good qualities and how you operate when you don't have PMS. Believe that you can overcome PMS.

HOW DO I KNOW WHETHER I HAVE PMS?

Because there are a variety of symptoms associated with PMS, one standard, accepted definition has not been established. Since PMS involves a group of symptoms, one way to evaluate it is by keeping a daily log or chart throughout your entire menstrual cycle. Note on the chart which symptoms you have and whether they are mild, moderate or severe. Generally, you have PMS if there is an increased score of symptoms during the week before your period and improvement of symptoms once your period has started. It is best to consult with a clinician or health educator who is familiar with syndrome. Ask her/him to follow your progress and advise you of any laboratory tests that might be needed.

WHAT CAUSES PMS?

Although this syndrome was identified 50 years ago, it is still a relatively new field in medical research. Preliminary studies have shown that it is caused by nutritional deficiencies which lower the threshold of stress and create hormonal imbalances. A deficiency in the B vitamins (especially B-6) and the mineral magnesium is thought to create an imbalance of the hormones which control the menstrual cycle. One result of this imbalance is the variety of symptoms we call Premenstrual Syndrome.

IS PMS COMMON?

It depends upon who you ask. A not-so-old myth was that all of these symptoms were "just part of being a woman" - the theory being that women are erratic and unpredictable. In otherwise normal women, the reported incidence between 1934 and 1965 varied between 21 to 36%. This would mean one out of every three to five women in the United States experienced some degree of PMS. A more recent study documents 54% of the women surveyed had PMS.

FACTORS THAT INCREASE THE INCIDENCE AND SEVERITY OF PMS.

Childbirth	The more births, the more severe the PMS.
Marital Status	Married women complain of PMS more than single women.
Age	PMS increases with age. Women in their 30s are most prone to PMS.
Stress	Exposure to stress worsens PMS.
Diet	High intake of refined sugar and salt, and poor eating habits worsen PMS.
Physical Activity	Lack of outdoor exercise worsens PMS.

QUESTIONS AND ANSWERS ABOUT BREAST LUMPS

If you are like most women, you will be alarmed should you find a lump in either of your breasts. Your immediate thoughts will probably be of cancer. Perhaps you will call a doctor at once. Or, you might be afraid of confirming your fears and delay making the appointment.

It is normal for you only to feel anxious or upset if you find a lump in your breast. However, you should know that 8 out of 10 breast lumps are NOT cancerous. But only a doctor can tell for sure which is benign (noncancerous).

A woman's breasts change throughout her life. Factors such as age, monthly menstrual cycle, pregnancy, breast feeding, birth control or other hormone pills, menopause, or a bruise or blow to the breast can cause these changes. In addition, breasts vary in size, shape, and texture. Because 90 percent of all breast lumps are found by women themselves, you should learn how to examine your breasts monthly. As you do this, you will develop more confidence in knowing how your breasts normally feel and will be able to recognize any changes. If you do find a change, don't let fear keep you from seeing your doctor.

We don't know what causes breast lumps or why women get them, but the facts about breast lumps are very reassuring. This handout describes some of the most common noncancerous breast lumps and what can be done about them.

What do breasts normally feel like?

The breast is made up of ducts, lobes, fat, and underlying bone. Therefore, it is normal for the breasts to feel lumpy or uneven. Before your menstrual period begins, and sometimes during your period, you can have some tenderness, pain, or lumps in your breasts because extra fluid collects in the breast tissue. This is normal. If the lumps do not disappear before your next period begins, see your doctor soon.

How do I know if I have an unusual breast lump?

The first sign of a breast problem is often a lump that a woman finds herself. By practicing monthly breast self-examination (BSE - as described at the end of this handout), you will get used to the normal feel of your breasts.

After you learn what is normal for you, you can notice changes. A lump is unusual if it has not been felt during earlier breast exams, and it now stands out against the normal feel of your breast. Should you find a new lump in your breast, see your doctor right away. If you have already been diagnosed as having benign lumps in your breasts, BSE will help you get used to them as part of the normal feel of your breasts. That way you will be able to notice new lumps should they occur.

If you feel something in one breast that appears unusual or different from before, check to see if it is present in your other breast. If the same structure is in the same place in both breasts, the chances are good that your breasts are normal. If you find a lump a few days before or during your menstrual period, reexamine your breasts when your period ends. Often a lump found at this time may be due to the normal collection of fluid during your period.

What kind of doctor should I see if I have a breast lump?

You should consult your gynecologist, family doctor, or general practitioner. Your doctor might refer you to a surgeon if he or she thinks you should have a biopsy. If you do not have a doctor of your own, your local medical society or regional Cancer Information Service (CIS) office may have suggestions to help you find a doctor in your area. Toll-free telephone numbers appear at the end of this handout.

How is a breast lump evaluated?

Your doctor can evaluate a lump in a variety of ways:

1. **Palpation is much like BSE.** The doctor uses his or her hands to thoroughly examine each breast in order to feel the tissue. The doctor can usually tell whether a lump is due to menstrual changes or is just a part of a woman's normal breast makeup.
2. **Aspiration allows the doctor to know immediately whether a lump is fluid-filled or is a solid mass.** This procedure can be done in a doctor's office under local anesthesia. The doctor inserts a needle into the lump and, if it is a cyst, withdraws the fluid and collapses the cyst. If the lump is a solid mass, the doctor may be able to obtain a sample of cells, which is then analyzed in a laboratory.
3. **Thermography measures the heat patterns in the breast.** It uses no x-rays. Certain patterns can indicate abnormal conditions in the breast. Thermography is not now reliable enough to be used alone, but it can be helpful when combined with other evaluation methods.
4. **Mammography is an x-ray technique using relatively low levels of radiation to create an image or picture of the breast on film or paper.** It can be helpful in determining whether a lump is benign or cancerous. The benefit of mammography, to any woman with a symptom of breast cancer, outweighs any small possible risk involved in exposure to radiation.
5. **Biopsy is the only definitive way to diagnose a lump.** The biopsy procedure is usually done in a hospital using local or general anesthesia. The surgeon removes a small piece of tissue from the lump and sends it for microscopic analysis by a pathologist. The entire lump might be removed, especially if it is small.

Your doctor can select any one or more of these procedures to evaluate a lump. He or she may also choose to "wait and watch" the lump before suggesting biopsy. As mentioned before, many lumps are due to normal hormonal changes.

What are the most common kinds of benign breast lumps?

1. **Cystic disease (also called fibrocystic breast disease or chronic cystic mastitis) is the most common condition associated with benign breast lumps.** These lumps or cysts are fluid-filled sacs that often enlarge and become tender and painful just before the menstrual period. Cystic disease usually occurs in women 35 to 50 years of age. It tends to involve both breasts; multiple cysts of many sizes are common. Cysts most commonly develop in the portion of the breast closest to the armpit, and they are movable. The cysts feel round and firm, as if you were feeling your eyeball through a closed lid. After menopause this cystic condition becomes less noticeable and often disappears.

2. Lipomas most often develop in older women as single painless lumps. They are slow-growing, soft, and movable. They can vary in size from a dime to a quarter. Lipomas consist of fatty tissue and are commonly found elsewhere in the body.
3. Traumatic fat necrosis appears in some older women and in women with very large breasts. The condition can result from a bruise or blow to the breast, although the woman might not remember the specific injury. The injury causes the fat in the breast to form lumps, which are painless, round, and firm. Sometimes the skin around them looks red or bruised.
4. Fibroadenomas appear most often in young women between 15 and 30 years of age. They occur twice as often in black women as in others. These breast lumps are usually painless. They are also firm, rubbery, movable, and often oval-shaped.

A word of caution: If you find a lump, do not try to diagnose it yourself based on these descriptions. There is no substitute for a doctor's evaluation.

How are benign lumps treated?

Benign breast lumps are usually treated by aspiration and/or surgical removal. Aspiration withdraws the fluid from the lump with a hypodermic needle, and the cyst collapses. If the lump does not disappear after it has been aspirated, the doctor might want to remove the lump surgically. Some benign lumps need no treatment, but your doctor will probably want to check them frequently.

A method that is being studied for women who have severe fibrocystic disease, who have had multiple biopsies, or who are at a higher risk of developing breast cancer is subcutaneous mastectomy. In this surgical procedure, the breast tissue is removed, but the skin and nipple are left intact. A breast implant can then be placed under the skin to recreate the woman's breast shape.

What does pain in the breast signify?

Many women have tender, painful, or lumpier-than-usual breasts about a week before their periods. This is associated with normal hormonal changes. This discomfort usually disappears after the menstrual period.

A cystic condition is often accompanied by pain. Cancerous lumps, however, are usually not painful. If you have persistent pain in your breasts, ask your doctor what might be causing it.

What should I do if I notice a discharge from the nipple?

If you are not breast feeding and you notice some fluid (clear or bloody) coming from the nipple, you should see your doctor right away. Some of the fluid can be smeared on a slide and analyzed in a laboratory to determine what is causing the discharge. Your doctor can then recommend how this discharge should be treated.

Do lumps change?

Sometimes lumps change in hardness, location, or size. For instance, you might find that a lump you noticed before your period has grown softer and smaller after your period. This is normal. If you have a cystic condition, the lumps might disappear altogether after menopause. Female hormones which change during menstrual periods and menopause are partly responsible for producing these changes in your breasts. This fluctuation is why doctors do not always remove a lump immediately but, instead, watch it for a few months.

Should I be concerned if I have lumps during pregnancy?

During pregnancy, the milk-producing glands become swollen so that the breasts might feel lumpier than usual. It is difficult to examine your breasts when you are pregnant, but you should continue to do so. If you are concerned about the way your breasts feel, ask your doctor to check them for you.

I have had lumps for a long time. How often should a biopsy be done?

Lumps that do not disappear after your menstrual period or that you have questions about should be brought to the attention of your doctor. Your medical history will determine how often biopsy is necessary. If you have questions about the necessity for a biopsy, you should talk with your doctor or consult with another doctor for a second opinion.

Do benign lumps turn into cancerous lumps?

Benign lumps do not change into cancerous lumps. Cancerous lumps, however, can develop near benign lumps.

If I have cystic lumps, will this condition increase my chance of developing breast cancer?

Women with cystic lumps have a somewhat higher risk of developing breast cancer. The reason for the increased risk is believed to be due to breast changes accompanying the cysts, not to the lumps themselves. Research is under way to provide more complete answers to this question.

Which women have the greatest risk of developing breast cancer?

Those women who appear to have the greater risk of developing breast cancer include: women over 50 years of age, those who have already had cancer in one breast, and those whose mother or sister(s) have had breast cancer. It is important to discuss your family history with your doctor and let him or her teach you how to practice BSE. The combination of BSE and regular medical examinations will help detect a problem. If a lump is detected and treated early, the chances for cure are best.

Are there any ways to prevent cystic disease?

Presently there is no proven method for preventing cystic disease, but some preliminary research suggests ways to treat the symptoms. One study indicates that if you reduce intake of caffeine from coffee, tea, cola drinks, and chocolate, you decrease the symptoms of cystic breast disease. Another study indicates that taking vitamin E could help reduce the symptoms. Until further research is done to confirm these observations, you should check with your doctor to find out what would be best for you.

GLOSSARY

- Anesthesia:** Entire or partial loss of feeling or sensation from the giving of drugs or gases
- Aspiration:** Withdrawal of fluid from a cyst with a hypodermic needle
- Benign:** Not cancerous
- Biopsy:** The removal and microscopic examination of cells or tissues for purposes of diagnosis
- Breast implant:** A special type of plastic bag filled with silicone-gel or saline that is placed under the skin to replace a natural breast
- Discharge:** Clear, milky, or bloody fluid coming from the nipple
- Duct:** A pathway in the breast through which milk passes from lobes to the nipple
- Fat:** Tissue that helps give shape to the breast; similar to fat in other parts of the body.
- Lobes:** Group of glands in the breast that produce milk
- Lump:** Any kind of mass in the breast or elsewhere in the body
- Mammography:** X-ray examination of the breast used to detect breast problems
- Menopause:** The time of a woman's life when her monthly menstrual period stops, sometimes called "change of life"
- Palpation:** Feeling the breast for any abnormalities
- Pathologist:** A doctor with special training in diagnosing disease from samples of tissue
- Subcutaneous mastectomy:** A surgical procedure that removes the breast tissue, but leaves muscle, skin, and nipple
- Thermography:** Technique that measures heat patterns in the breast without x-rays.

Questions to ask your doctor

We hope that this handout has answered your questions about noncancerous breast lumps. However, no booklet can take the place of talking with your doctor. You should feel free to ask him or her any questions you have.

It is helpful to write down questions as you think of them. The ones below are some of the most common questions women have. You may have others. Jot them down, and take this list with you when you see your doctor.

1. Will you teach me how to do BSE?
2. What should I look for when I do BSE?
3. How can I distinguish lumps from other parts of my breast?
4. What kind of lumps do I have?
5. Do you think I need to have a biopsy?
6. How often should I make an appointment to see you?

PRIMARY OBJECTIVE AREA: Health/Wellness

AGE GROUP: Teens & Up

CROSS REFERENCE OBJECTIVE AREA(s): Personal Power

READING LEVEL: Intermediate (can be read aloud)

NAME OF ACTIVITY: When You're Pregnant: Be Good To Yourself
And Your Baby

GROUP SIZE: Individual to Large

MATERIALS NEEDED: Handouts #1, 2, 3, 4 and 5;
Copies Of Informative Material (if useful);
WIC Information

TIME NEEDED: 1-3 Hours; 5-10 Minutes
Once A Week For Weight Check.

PURPOSE

DIRECTIONS FOR ACTIVITY:

1. Learn about proper care during pregnancy.
2. Determine one's own appropriate weight range and monitor weight changes during pregnancy.
3. Answer some common questions about life activities during pregnancy. (Feelings and beliefs)
4. Increase independent behaviors by taking charge of their physical and mental health and practicing good health principles during pregnancy.

Note: The enclosed weight chart should be considered as an example. If you have material you are more comfortable with and is from a recent and reliable source, then use that for this activity. It also might be good if the participants got this kind of information from their doctor or clinic where they go for their check-ups.

1. Explain how to use a scale.
2. Pass out Weight Chart (Handout #1) and Weight Graph. (Handout #2.)
3. Explain the use of the Weight Chart and Weight Graph.
 - a) Participants record their weight on a weekly basis starting at the bottom of graph.
 - b) Each block on the Weight Graph is worth one pound, each line up worth one week.
 - c) Draw a line connecting the blocks to get a graph.
4. Participants should compare their weekly weight with recommended weight guidelines (from Weight Chart used).
5. Discuss the article (Included) "How Does Your Baby Grow?" (Handout 3) with special attention to the over/under weight --In relation to their own weight and fetus growth: 1st trimester, 2nd trimester and 3rd trimester.
6. Pass out "Be Good To Your Baby" (Handout #4) and other materials included in the section as you use them.

**Health and Wellness
When You're Pregnant
Page 2**

PURPOSE

DIRECTIONS FOR ACTIVITY:

7. Read them aloud with participants. Ask them to raise questions/problems they have as you go through the materials.
8. Encourage DISCUSSION.
9. Invite an outside speaker for any or all the topics (depending on available time).

SUGGESTED BODY WEIGHTS

Height	Range of Acceptable Weights	30# Limit Pregnancy Weights
4'10	92 - 110	122 - 149
4'11	94 - 122	124 - 152
5'0	96 - 125	126 - 155
5'1	99 - 128	129 - 158
5'2	102 - 131	132 - 161
5'3	105 - 134	135 - 164
5'4	108 - 138	138 - 168
5'5	111 - 142	141 - 172
5'6	114 - 146	144 - 176
5'7	118 - 150	148 - 180
5'8	122 - 154	152 - 184
5'9	126 - 158	156 - 188
5'10	130 - 163	160 - 193
5'11	134 - 168	164 - 198
6'0	138 - 173	168 - 203

Without shoes and clothes

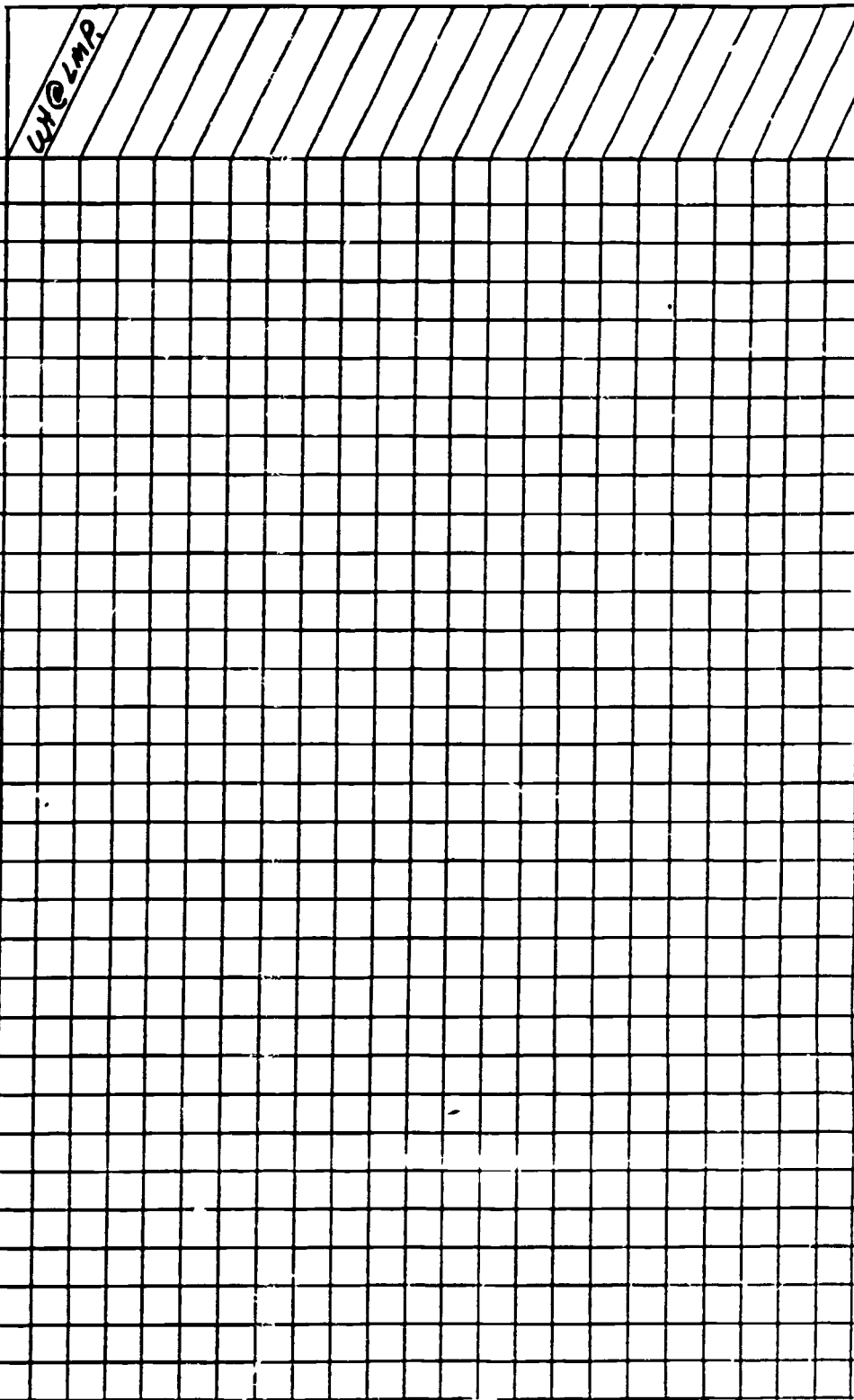
1st Trimester	2 - 6#
2nd Trimester	9 - 16#
3rd Trimester	11 - 18#

WEIGHT GRAPH
(Each block is worth one pound)

*

Name:

Date:



* Weight at last menstrual period

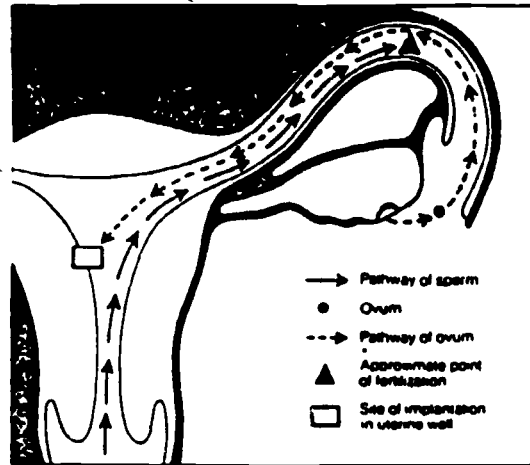
HOW DOES YOUR BABY GROW?

Nobody can tell exactly when your baby was conceived. But fertilization usually occurs about two weeks after the beginning of your last menstrual cycle.

Within a few hours after the egg is penetrated by the sperm in the fallopian tube, the egg begins to divide. In the next three to five days, a cluster of up to 50 cells floats down the fallopian tube to the uterus, where it continues to develop. By the tenth day, the ovum is firmly implanted in the uterine wall and begins the miraculous growth that will make it a real, live baby.



Second Week After Fertilization



As the cluster of cells begins to elongate, a water-tight sac forms around it, gradually filling with fluid. This will serve to cushion the growing life from shocks. Next to this, a tiny yolk sac forms, preparing to produce little blood vessels. Now the placenta - the round, flat membrane that will lie inside the uterine wall - begins to develop. Joined to the umbilical cord, it will bring food, water and minerals from the maternal blood to the fetus, and carry fetal waste to the maternal blood.

Third Week

The cell cluster is now a hollow structure filled with fluid, measuring only about 1/100 of an inch in diameter (the thickness of a heavy pencil dot). But already there are primitive lung buds--a tube that will be your baby's heart...and a thickening that is the beginning of a central nervous system. The cluster begins to curl up now so that it will fit in its compact home as it grows.

Fourth Week

A primitive face is taking form, with large dark circles where eyes will appear. The mouth, lower jaw and throat are developing. Little tubules foreshadow internal organs such as the gallbladder, liver and stomach. Blood corpuscles are taking shape, and the circulation is beginning. That tiny "heart" tube will be beating 65 times a minute by the end of this week. The *embryo*, as it is now called, will be 3/16 of an inch in length by the end of the week. In one month, the single fertilized egg has grown 10,000 times bigger than when it started.

Fifth Week

By the end of this week, ears begin to develop from two folds of tissue, buds emerge that will become arms and legs, and your baby's eye lenses begin taking form. There is a tiny depression where the nose will be and an equally tiny thickening that will be the tongue. Eight to ten vertebrae of the backbone have been laid down. The brain, spinal cord and nervous system are well established. Your baby's primitive blood vessels have begun to function.

Sixth Week

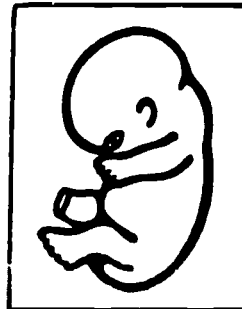
By now the beating heart can be seen with special instruments. It is still outside the baby's body, but its four chambers are beginning to form. The mouth is still closed, but the digestive tract is developing downward from the mouth cavity. By the end of the sixth week, hollows appear where eyes and ears will form; the beginnings of testes or ovaries have appeared; the brain is growing rapidly; and the entire backbone has been laid down. There is even a skeleton, though it is mostly made up of cartilage, not yet real bone. A "tail" extends from the spinal cord; at this stage, the human embryo resembles that of a pig, rabbit or elephant. It is now 1/4 of an inch in length.

Seventh Week

The embryo has become a *fetus*. Its heart is now within its chest cavity. The tail has all but disappeared. Nasal openings are breaking through. Eyes can now be perceived through closed lids. Little buds signal the beginning of fingers and toes and delicate little muscle fibers are starting. The fetus is 1/2 an inch long and weighs 1/1000 of an ounce.

Eighth Week

Human facial features, particularly the jaws, are becoming well defined. Teeth are being formed. Fingers and toes are present, and external ears form elevations on either side of the head. In boys the penis begins to appear. The fetus is now 7/8 of an inch long and weighs 1/30 of an ounce.



Ninth Week

The baby's face is now completely formed. The clitoris appears in girls. Your baby now resembles a miniature human, slightly more than one inch in length, weighing 1/5 of an ounce.

Tenth Week

Your baby's eyes have moved from the sides of its head, where they were originally, to the front. In males, the scrotum appears. Major blood vessels have almost reached final form. The heart waves are similar to those of an adult. The baby looks top-heavy, for the head is almost half its entire size.

End of Third Month

Upper and lower eyelids have met and fused and tear glands are starting to appear. Primitive hair follicles are forming and so are the beginnings of vocal cords. Fingernails are already present and your baby can close his fingers to make tiny fists. He can also open his mouth, purse his lips and squint up his face. He is now three inches long, and weighs about one ounce.

End of Third Month



Fourth Month

Your baby's heartbeat is now audible to the doctor's stethoscope. Its brain looks like a miniature adult brain. Sweat glands are forming on palms and soles, and the skin is thickening into various layers. Your baby now has eyebrows and eyelashes, has grown to six ounces, and is 8 1/2 inches in length. It is at this time that many babies start to suck their thumbs.

Fifth Month

Your baby's muscles are active now, and by the midpoint of pregnancy, 20 weeks, you will probably have felt "quickenings" - the baby's movements. There is hair on his head. He is skinny, but fat is beginning to be deposited under his translucent skin. Twelve inches in length, he weighs about one pound.

Sixth Month

Your baby's skin is wrinkled and has developed a cheese-like protective material called "vernix" which will remain right through birth. The eyes are open and will soon be sensitive to light (although color and form won't be perceived until long after birth). Your baby can now hear sounds. And wonder of wonders - with skin ridges fully formed on palms and soles, your baby now has finger- and footprints. Length, 14 inches. Weight, 2 pounds.

Seventh Month

Fine downy hair covers your baby's body. Taste buds have developed. The male's testicles have descended into the scrotum. By the end of this month, your baby is about 16 inches long, and 3 1/2 pounds in weight. Its organ systems are now adequately well developed so that even if born prematurely, it could probably survive. But the next two months will be periods of growth and maturation to ensure a healthy entry into the world.

Eighth Month

Baby is getting plumper and plumper, and the skin is somewhat less wrinkled as fat takes up the slack. He may now weigh more than five pounds, and may be some 18 inches in length. His fingernails are long, extending beyond the fingertips.

Ninth Month

The baby's skin is red but smooth; it looks polished. The only downy hair remaining now is on arms and shoulders. On the head, the hair is about one inch long. By the end of this month, what was begun from your egg cell measuring 1/200 of an inch in diameter, and your husband's sperm cell, only 1/80,000 the size of the egg, will emerge as a bouncy little infant some 20 inches in length, and weighing an average of 7 pounds.



BE GOOD TO YOUR BABY

Pregnancy is a very special time, an adventure lies ahead that will bring about changes in your body and your life during the next nine months.

It is important for you and for the health and well-being of your baby that you take proper care of yourself during pregnancy.

This handout can serve as a guide in the months ahead. But remember, this is only a supplement to the advice and care of your physician, nurse, or other health professional. If any questions or problems concerning your pregnancy arise, do not hesitate to consult your doctor or nurse.

Following the advice in this handout and that of your doctor, nurse, or other health professional, can benefit your baby for its entire life. You can also improve your own well-being during and after pregnancy.

The earlier and more regularly you seek prenatal care, the better it is for you and your baby. Even before you suspect you are pregnant, your baby is forming with amazing speed. At six weeks it is only a quarter of an inch long, but its spine, brain and heart are already developing.

Go to your doctor, maternity clinic, a hospital or public health clinic as soon as you think you may be pregnant. Don't put off the first visit or any subsequent appointments.

A doctor or nurse will ask a number of questions about your past health, your parents' and your partner's health, your occupation, what happened in previous pregnancies, and many others.

You will be weighed, have your blood pressure measured and samples of urine and blood taken.

After the preliminaries, the doctor will perform a physical examination. Your eyes, ears, nose, throat and teeth will be checked for signs of infection or other problems. The doctor will examine the thyroid gland, chest, breast, abdomen and legs. A pelvic examination will follow. It should include a Papanicolaou (Pap) smear - a test for cancer of the cervix - and a culture for gonorrhea. By feeling your uterus, the doctor can learn about its size, shape, position and how long you've been pregnant.

After the examination, the doctor or nurse will discuss the general care for your health during pregnancy; proper diet, need for rest, weight, care of your teeth, your work, exercise and recreation.

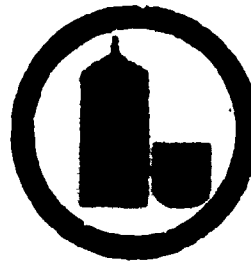
Your baby lives on what you eat. It has to depend on you. Eating properly is a necessity - it will allow you to have a more comfortable pregnancy, deliver a healthier baby and be ready with a good supply of milk if you choose to breast-feed.

Eating a variety of good food each day is the best way to make certain you both are getting all the nutrients needed. This helps your own health and provides the baby with the protein, calories, vitamins and minerals it needs for growth and development. It is best to eat three meals a day. When it comes to seasoning food, there is no need to change your habits during pregnancy unless you have a condition that requires it. Moderate use of salt is necessary.

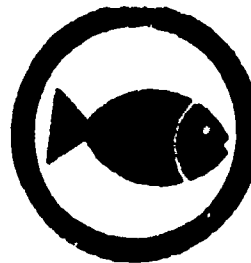
Use iodized salt for cooking and at the table. If you have high blood pressure, the doctor will want to discuss the use of salt in your diet.

Drink several glasses of water daily. It helps your baby and your body use the nutrients obtained from food. It also helps carry waste from both your bodies and regulates body temperature.

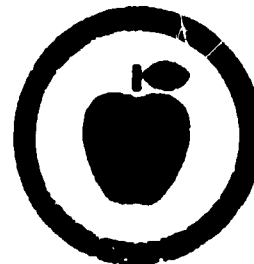
A pregnant woman needs these foods every day.



Milk...four servings for the pregnant woman and five servings for the breast-feeding woman. These provide calcium, protein and other nutrients to help build strong bones and teeth for your baby. Cheese or other milk products, such as yogurt, soybean milk and cottage cheese, can be substituted for the milk requirement.



Protein foods...four servings (two animal and two vegetable) for both the pregnant and breast-feeding women. Lean meat, fish, beans and other protein-rich foods help build body tissues for the two of you.



Fruits and vegetables...four or more servings for both the pregnant and breast-feeding woman. (One Vitamin C-rich and one Vitamin A-rich). Vitamin C-rich fruits and vegetables supply ascorbic acid. Leafy green vegetables, supply Vitamin A and other vitamins and minerals.



Grain products...four or more servings for both pregnant and breast-feeding women. Grain provides vitamins and minerals as well as energy needed by your baby.

If you should gain a lot of weight suddenly this may be a warning sign. See the doctor as soon as possible.

Never try to lose weight during pregnancy. After the baby, which may weigh about 7 1/2 pounds, is born, you will lose another 12 to 14 pounds. This weight loss is attributed to the fat and water (6 to 10 pounds) in your tissues during pregnancy, as well as the placenta and amniotic fluid (about 6 1/2 pounds) which cushioned the baby. With proper eating and moderate exercise, the remaining few pounds will probably be gone within three to six months after delivery.

After the baby is born, you may decide to breast-feed. Breast milk is more than just food. It contains substances to build the baby's resistance to infection. Breast-feeding also helps the uterus to return to its normal size more quickly.

To make sure your milk is good and plentiful, get enough of the right foods. Continue the diet followed during pregnancy, but have one more glass of milk or equivalent each day. Remember that many drugs you take may enter your milk. Take only those drugs approved by the doctor.

If you have a cold or rash while you are pregnant, or if you have been near a person with rubella, or someone who was coming down with it, see the doctor. Some infections that hardly bother you may damage your baby. Rubella may cause a baby to be born blind, deaf, or retarded. The danger can be prevented by vaccination before or between pregnancies, if you aren't already immune. (The vaccine is not used during pregnancy because it may harm the unborn baby.)

Also it is not a good idea to eat raw or undercooked meat during pregnancy. Undercooked meat may contain an organism which can cause toxoplasmosis. It also may be present in cat feces. Toxoplasmosis is a mild infectious disease which you may not be aware of, but it can cause birth defects. If you have a cat, get someone else to empty its litter box.

Let your doctor know if you or your partner have had genital herpes, chlamydia, gonorrhea, or other sexually transmitted disease (STD). Be sure to report any flare-up of an STD. An active case at the time of delivery may cause blindness, pneumonia, and brain or spine infection in a newborn, unless preventive steps are taken.



Smoking is harmful at any time in life, but especially during pregnancy. If you smoke, now is the perfect time to quit. Mothers who smoke have higher rates of miscarriage and greater chances of having babies born too small or too soon. These dangerous effects are directly linked to the number of cigarettes smoked daily - so the fewer, the better. For help in kicking the habit, ask your doctor, your clinic or one of the many no-smoking clinics. This will be one of the first and best gifts you can give your baby.

When you take any medicine, your baby does too.

Before taking any medication, whether over-the-counter preparations or prescribed drugs that you may have been taking before pregnancy, check with your doctor. Stay away from all street drugs.



Doctors do not know how much alcohol is too much, so the wisest choice is to avoid beer, wine, and hard liquors during pregnancy.



Caffeine is found in tea, coffee, colas and chocolate. Some studies done on animals given large amounts of caffeine show an increase in birth defects in their litters. But there is no evidence that moderate consumption of caffeine is harmful to the unborn human baby.

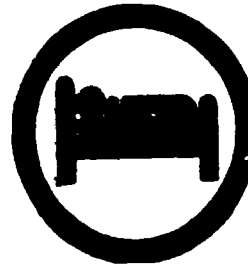
Be sure to tell any doctor or dentist who prescribes X-rays that you are pregnant. Abdominal, pelvic and back X-rays during early pregnancy may possibly damage the baby. Medically necessary X-rays of chest, head, teeth and legs or arms will not harm the baby, if they are done carefully with proper protection for the abdominal area.

See your dentist early in pregnancy. If you have cavities, the earlier they are filled, the better. Be sure to tell him you're pregnant so he can protect the baby with a lead apron if it is necessary to X-ray your teeth.



Unless your doctor advises against it, any form of moderate, non-competitive exercise is good for you throughout pregnancy - swimming is an example.

Today more than ever, many women work throughout their pregnancies.



Whether you work or stay at home, proper rest is a necessity. Eight hours of sleep at night and rest periods or naps during the day are recommended.

Most women can work during pregnancy. However, fatigue is a common problem, especially during the early and late weeks of pregnancy. Keep in mind that pregnancy requires physical and emotional energy. So be prepared to delegate tasks and eliminate unnecessary commitments, at home as well as in the office. You may want to discuss any special demands or possible hazards of your job with your doctor.

If you experience any of the following common problems that may appear during pregnancy, call the doctor or nurse for advice. Better still, ask about them on one of your prenatal care visits.

- o Nausea
- o Constipation
- o Muscle Cramps
- o Backache
- o Vaginal Discharge
- o Urinary Frequency
- o Hemorrhoids
- o Varicose Veins
- o Dizzy Spells

Call your doctor if the following signs appear:

- o Sudden increase in vaginal discharge
- o Bleeding from the vagina
- o Pelvic pressure
- o Sudden continued or intermittent abdominal pain or cramping
- o Sudden gush of water from the vagina with subsequent leakage
- o Fainting spells or loss of consciousness
- o Severe or continuing nausea and vomiting
- o Continuing or severe headache
- o Swelling or puffiness of the face or hands, or marked swelling of the feet and ankles
- o Blurring of vision or spots before the eyes
- o Pain or burning on passing urine
- o Chills or fever
- o Low dull backache
- o Rashes or lesions

Your doctor will plan to watch and give you more than the usual care during and after your pregnancy if you:

- o are under 17 or over 35 years of age
- o have a history of repeated miscarriages, premature delivery, stillbirth or toxemia during other pregnancies.
- o have had a previous Caesarean section
- o have Rh negative blood and your partner has Rh positive
- o have an infectious disease, such as VD, or a urinary tract infection
- o have a chronic medical condition, such as heart or respiratory disease
- o have a metabolic disorder such as diabetes or hyperthyroidism
- o have a family history of genetic diseases

You don't have to stop making love when you are pregnant. Having a baby should bring you even closer together. Sometimes feelings about sex change during pregnancy, but most expectant parents are unaffected. A well adjusted sex life is just as important now as it is at any other time. Sexual intercourse is safe during a normal pregnancy until four weeks before the delivery date, unless you have contractions or bleeding afterwards.

More and more fathers-to-be are participating in childbirth preparation classes. These classes are usually held at local hospitals or public health clinics. They will remove much of the fear associated with delivery. You will learn about the various delivery methods and what to expect during labor.

Other classes are set up to teach both parents the fundamentals of newborn care. They may take you on a tour of the delivery room and show you the nursery where your baby will stay until ready to leave the hospital. They will teach you how to bathe and diaper the baby, as well as how to hold and feed it.

You will know the baby is really on its way when muscle contractions become strong and regular. You may bleed a little at the onset of labor.

A gush or trickle of water from the vagina means that your bag of water has broken. It may break at the beginning of labor, or it may not break until just before the baby is born. Tell the doctor or nurse if this happens.

When contractions come regularly by the clock, you are probably in labor. The time between contractions will keep getting shorter as labor continues. Call the doctor or clinic when you think labor has begun. They will advise you when to go to the hospital.

The length of labor is different for every pregnancy. Most women will have their first babies eight to eighteen hours after labor begins; later babies arrive sooner, usually in four to eight hours. Women who have enjoyed good care during pregnancy, who are well informed and not afraid, tend to have shorter labors.

Talk over any concerns about pain with your doctor early in pregnancy. He will explain the various types of pain relief available. Even if you decide you want childbirth without anesthesia, there are times when it is better to use some type of anesthesia. Together you can make the final decision as to which method is best for you.

The hospital staff can offer good information on baby care - classes are often offered on formula preparation, feeding schedules, baby bathing techniques and care of the infant's umbilical cord.

Before you go home, ask the doctor or nurse about how much activity you should engage in and how to care for your genital area.

About four to six weeks after your baby is born, the doctor or nurse-midwife will give you a complete physical examination.

There are many effective ways a couple, acting according to their own moral or religious principles, can plan and space the number of children in their family. You can get medical advice and help from your doctor or local family planning clinic.

A healthy baby is the goal of every pregnant woman. You can help assure the health of your baby by getting prenatal care early and often.

By taking good care of your own body you will be giving proper nourishment to the unborn baby whose development depends on you.



So, be good to your baby before it is born - your baby will thank you for it.

For additional copies of this information contact your local March of Dimes chapter.



FETAL ALCOHOL SYNDROME

What is Fetal Alcohol Syndrome?

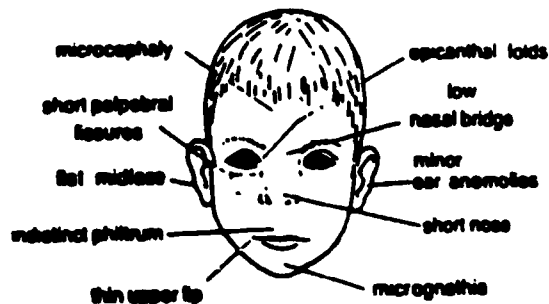
Fetal Alcohol Syndrome (FAS) is a group of physical and mental birth defects which result from drinking alcohol during pregnancy.

These abnormalities occur in three areas:

1. Growth retardation before and after birth including weight, height, and small head size.
2. Developmental delay and mental retardation. FAS is the *leading cause of birth defects associated with mental retardation* and the only birth defect that is *totally preventable*.
3. Abnormal facial structure.

Common Problems:

- a. wide set eyes
- b. small nose
- c. long, thin upper lip
- d. unusual facial features
- e. poor growth patterns
- f. mental retardation



Some alcohol-affected babies are born with all of the above FAS characteristics, while others display only some of them in lesser degrees such as hyperactivity, nervousness, and short attention spans. This is known as Fetal Alcohol Effects (FAE).

Other possible abnormalities include heart murmurs (heart defects occur in 30-40% of patients with FAS) and skeletal deformities including fetal clubfoot.

How does Fetal Alcohol Syndrome Occur?

Alcohol is a drug that crosses the placenta of a pregnant woman into the baby's bloodstream. An adult woman is affected by one alcoholic drink for one or two hours. Because the baby's developing liver is not as effective at burning off alcohol as an adult liver, this same amount of alcohol in the fetal system will continue to create an effect for six to eighteen hours.

During the first three months of development, the embryonic brain is especially sensitive to alcohol. Growth retardation may originate in the first three months and continue during the second three months as a result of alcohol's interference in fetal metabolism and absorption of nutrients.

During the last three months of development, the central nervous system is susceptible due to rapid brain growth and neurophysiological organization. If a mother continues drinking heavily right up to the time of birth, her baby may be born drunk and have a higher blood alcohol level than its mother.

Originally, it was believed that damage to the fetus only occurred during the first three months of pregnancy; however, research now indicates that the potential for alcohol damage exists at any time during pregnancy.

How Much Drinking is "Too Much"

Experts cannot determine any level of alcohol which is "safe" for a fetus. The probability of FAS increases directly with the amount and frequency of alcohol consumed.

The United States Surgeon General, National Council on Alcoholism, and the National Foundation-March of Dimes advise women who are pregnant or considering pregnancy to not drink alcoholic beverages and to be aware of the alcoholic content of food and drugs.

How Many Babies Are Born With FAS?

- o In Michigan approximately 400 FAS births would be expected annually.
- o One out of every 400 to 500 may be born with other harmful consequences of alcohol exposure such as learning disabilities, small size, isolated mental retardation, evidence of hyperactivity, and isolated birth defects.

For more information on Fetal Alcohol Syndrome contact your regional Substance Abuse Coordinating Agency of Michigan Office of Substance Abuse Services 3423 North Logan, P.O. Box 30035, Lansing, Michigan 48909, Phone: 517- 335-8800

PRIMARY OBJECTIVE AREA: Health/Wellness

AGE GROUP: Teens & Up

CROSS REFERENCE OBJECTIVE AREA(s): Personal Power

READING LEVEL: Intermediate (can be read to)

NAME OF ACTIVITY: Facts About Contraception

GROUP SIZE: Individual to Large

MATERIALS NEEDED: Handouts from Planned Parenthood

TIME NEEDED: 45 min to 1 Hour

PURPOSE

1. To inform about choices (methods) of contraception.
2. To explore participants' beliefs about contraception (and behaviors).
3. To increase independent behavior by knowing more about ways to plan their family size.

NOTE: Depending on needs of the group, you may want to obtain methods or ask Planned Parenthood to come in as resource. Students will be more affected by touching the samples than talking.

KEY RESOURCE: Your local Planned Parenthood organization

DIRECTIONS FOR ACTIVITY:

1. Facilitator should read the "Methods of Birth Control" pamphlet carefully from Planned Parenthood. Do not give this to students.

*Students receive simple handout from Planned Parenthood on methods.
2. Introduce activity by telling students we will be looking at the issue of using birth control methods for family planning today.

*If you choose a speaker from Planned Parenthood, introduce him/her and proceed.
*If no speaker -
Pass out student handouts and go over methods. (Have samples of contraceptive methods available if possible)
Answer questions and encourage discussion
3. Other materials (and those included here) are available from your local Planned Parenthood office or local physicians.
4. Following birth control methods presentation, do a processing of benefits and problems involved in requesting birth control to be used in a relationship.

Health and Wellness
 Facts About Contraception
 Page 2

PURPOSE
DIRECTIONS FOR ACTIVITY:

Sample:

- BENEFIT**
- 1) limit no. of children.
 - 2) Some prevent STD's (Sexually Transmitted Diseases)

- PROBLEMS**
- 1) afraid to ask partner to use.
 - 2) Feel embarrassed to plan for sex.

BRAINSTORM

Process feelings and beliefs of using a birth control method.

Try to get at reasons why we don't use a method when we should.

Follow-up with self-esteem and assertiveness topics.

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PRIMARY OBJECTIVE AREA: Health and Wellness

AGE GROUP: Teens to Adult

CROSS REFERENCE OBJECTIVE AREA(s): Personal Power

READING LEVEL: Intermediate

NAME OF ACTIVITY: Sexually Transmitted Diseases

GROUP SIZE: Any

MATERIALS NEEDED: Handouts 1 - 5, Transparencies, and pencil/pens

TIME NEEDED: 1-3 Hours or longer

PURPOSE

DIRECTIONS FOR ACTIVITY:

1. To become informed about sexually transmitted diseases(STDs).
2. To understand prevention and treatment of STD's.
3. To focus on the cause and prevention of AIDS.
4. To assist participants to choose safe low risk behavior, i.e., don't share needles; protect yourself during sex; in order to prevent STD's and AIDS.

1. Facilitator will introduce the unit by saying there are many diseases which are sexually transmitted. We need to become familiar with what these diseases are and how we can protect ourselves against them. Using the transparency or put the list on the board, go over the STD's which are most common. Point out that there are 26 or more diseases which fall into the category.
2. Review the pamphlet "More Than Love Is Sweeping the Country" (Handout 1) with the students. Discuss the need to change behaviors in order to protect yourself. Emphasize that a behavior change is the only way to prevent these diseases.
3. Using the AIDS - Fact or Myth? pretest, (Handout 2) introduce students to the misinformation that is out about AIDS. The myths on the pretest are numbers 6, 11, and 12. Be sure to point out that 13 is a fact based on the best protection we know to date.
4. Pass out the handouts AIDS IN THE WORKPLACE (Handout 3) and AIDS and Children (Handout 4). Go over them with the students. Discuss and answer questions.

PURPOSE

DIRECTIONS FOR ACTIVITIES:

5. Using the overhead transparencies, go through the following information on AIDS.
 - a. Levels of Infection: There are three levels at which people are affected by the virus. The largest number of people in our population are at the HIV level, which means they do not have symptoms but they can pass the disease on to others. A person can be in the HIV stage for years. The second stage is when they actually begin to have symptoms that are AIDS related. Things like extended infections, long term sore throats, etc. This also can be experienced for many years without developing AIDS. The disease can still be passed, and yet the person does not have AIDS. The last part of the triangle is the disease. It is here that the person develops the symptoms and their life will be shortened a great deal.
 - b. HIV Transmission - explain to students there are four ways AIDS is transmitted during the HIV stage.
 - c. AIDS is NOT - go over the misinformation.

6. How do you protect yourself from these diseases and lower your risks. Explain to students that we need to look at our behaviors. Using Handout #5, have students get into groups of three or four and fill in their examples. Then discuss their comments and concerns.

PURPOSE

DIRECTIONS FOR ACTIVITIES:

7. Invite a professional from the Health Department or the local Planned Parenthood to be a guest speaker. (Treatment for STD's and AIDS might be best presented by a health professional.)

Key Resource: See your Curriculum Director for a copy of the state AIDS curriculum for 11th and 12th graders.

Other Sources of Information for students:

Your Doctor
AIDS Hotline 1-800-342-AIDS (taped messages)

1-800-447-AIDS (person to talk to)

Wellness Network 1-800-872-AIDS (ex. 2437 in MI)

Local Chapter of the Red Cross
State or Local Health Department
National Gay Task Force Crisisline
1-800-221-7044

MAJOR SEXUALLY TRANSMITTED DISEASES

AIDS

HERPES SIMPLEX II

GONORRHEA

SYPHILIS

CHLAMYDIA

VIRAL HEPATITIS

VENEREAL WARTS

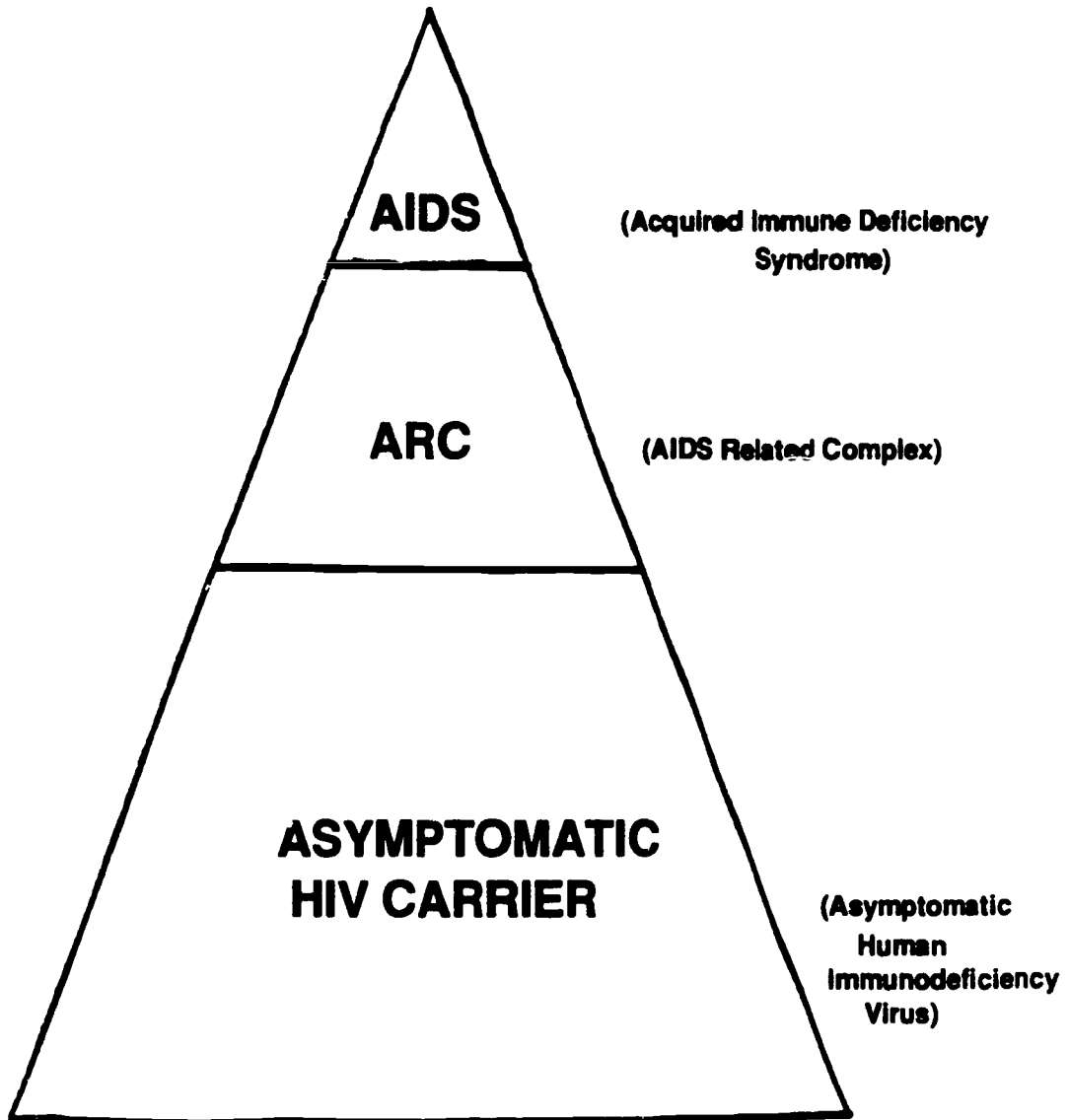
LICE AND CRABS

SCABIES

VAGINITIS

NSU

LEVELS OF INFECTION



HIV TRANSMISSION

**Unprotected
Sexual Intercourse**

**anal intercourse
vaginal intercourse**

Needle sharing



**Contaminated
blood products**

**Pregnant Woman/
Unborn Child**

**Perinatal Transmission
In Womb or During Birth**

AIDS is NOT:

AIDS is NOT:

- 1. Just a homosexual disease.**
- 2. Transmitted through casual contact.**
- 3. Transmitted through saliva, sweat, tears, coughing or sneezing.**
- 4. Contracted by donating blood.**

MORE THAN LOVE IS SWEEPING THE COUNTRY: Some Facts About STDs

It's widely assumed that 'nice people' don't get STDs.

Yet the fact remains that sexually transmitted diseases (STDs) are the most widespread communicable diseases monitored by the U.S. Government. According to the Centers for Disease Control in Atlanta, STDs are more common than measles, chicken pox, mumps and tuberculosis combined. They strike millions of Americans each year...and the effects can be devastating if left untreated.

What are STDs

They are a group of contagious infections that are spread almost entirely by sexual contact. Until recently, the common name for STDs was venereal disease or VD. And most people were only aware of syphilis and gonorrhea. But today, we know that STDs encompass a much broader variety of specific illnesses.

A person could conceivably get an STD from an object or surface (such as a toilet seat) infected by a carrier of the disease. But this is highly unlikely. With the exception of viral hepatitis, the microorganisms that cause STDs are extremely fragile and cannot survive long outside the human body.

Doctors classify about 25 separate conditions as sexually transmitted diseases, but the vast majority of cases result from six major illnesses.

Gonorrhea

A major threat in the present epidemic of STDs, gonorrhea strikes from one to three million Americans every year. That translates to a new infection every 12 seconds.

Gonorrhea is a bacterial infection that may lead to severe inflammation of the urinary tract in men. In women it can result in inflammation of the reproductive organs and potentially lead to sterility. Or it may spread to other parts of the body, resulting in crippling arthritis and liver damage.

The danger of severe complications from gonorrhea is greatest for women, since the early stages of the disease may produce no visible symptoms. Medical experts estimate that pelvic inflammatory disease, the most common complication of gonorrhea, afflicts 275,000 women each year, threatening them with abnormal pregnancies and sterility.

Material from: pamphlet presented by
Abbott Laboratories, Public Affairs, Dept. 383P
Abbott Park, Illinois, 1986
#972139/75-0886R2

Chlamydia

Health officials estimate chlamydia strikes at least three million Americans each year, making this bacterial infection the most widespread STD.

In males, chlamydia causes an inflammation of the urethra, the tube that carries urine from the bladder. If left untreated, it can cause arthritis and sterility. In women, chlamydia will infect the cervix or fallopian tubes which can lead to pelvic inflammatory disease (200,000 cases per year), as well as ectopic or tubal pregnancies and sterility. In addition, chlamydia can be passed from an infected woman to her child during birth resulting in an estimated 125,000 cases of infant chlamydia each year. The disease may cause eye infections and pneumonia in newborns.

The danger of chlamydia is that it often produces no symptoms or is mistaken for another STD, such as gonorrhea. As a result, some victims never seek treatment, or are treated for the wrong disease.

Genital herpes

An estimated 500,000 Americans get this disease every year. Genital herpes is usually caused by herpes simplex virus type 2, a relative of the virus that causes the common cold sore. No cure has been found for it. It lives in a person for the rest of his or her life, causing periodic eruptions of painful sores on the genitals. Herpes is most contagious when the sores are present and continues to be very contagious until the sores are completely healed. While the long-term effects of herpes are not yet known, there is evidence linking it to an increased risk of cervical cancer and to serious birth defects.

Syphilis

Once the most dreaded STD due to its disastrous long-term effects, syphilis caused 14,000 deaths in 1940. The mortality figure has since dipped below 200 per year, thanks to massive screening and treatment efforts.

Caused by a spirochete, a type of bacterium, syphilis attacks the nervous and cardiovascular systems and may lead to paralysis, blindness, insanity, disfiguration and eventual death. The disease can cause serious birth defects by damaging the skin, bone, eyes and liver of the fetus.

Perhaps the most dangerous thing about syphilis is the lack of serious symptoms early in the disease and the long period of time (one to 20 years) before serious and permanent damage to organs occurs.

Viral hepatitis

Health officials estimate that 500,000 new cases of viral hepatitis occur each year. An inflammation of the liver, it can lead to chronic liver disease and sometimes can be fatal.

There are several forms of hepatitis caused by different viruses. All forms can be spread in nonsexual ways, such as contaminated water, food, and blood transfusions. However, sexual contact has been identified as one of the most common means of transmission for two types of viral hepatitis - hepatitis B and non-A, non-B hepatitis.

These forms of hepatitis often occur among male homosexuals. In addition, women infected with hepatitis may pass the disease to infants during childbirth or soon afterwards.

AIDS

Thousands of cases of AIDS (Acquired Immune Deficiency Syndrome) have been reported since the disease was recognized in the U.S. in 1981. This rapid spread - plus the high mortality rate - have made AIDS one of the most dreaded STDs.

AIDS is caused by a virus that attacks the immune system, the body's natural defenses against disease. As a result, AIDS victims are susceptible to recurrent illnesses including pneumonia and unusual diseases rarely seen in healthy individuals.

The AIDS virus is most often spread by sexual contact, but it can also be passed by infected hypodermic needles and contaminated blood transfusions. The disease occurs primarily among male homosexuals and bisexuals, intravenous drug abusers, and hemophiliacs. However, AIDS is moving into the general population. A number of victims have also been found among sexual partners of high-risk persons, children born to infected women, and sexually active heterosexuals.

At present there is no cure for AIDS, and more than 70 percent of the cases prove fatal within two years of diagnosis.

Other STDs

Other less common STDs include granuloma inguinale and chancroid, both caused by bacterial infection. Granuloma results in badly infected sores that cover the entire genital area. Chancroid produces open sores that may eventually damage parts of the genitals and surrounding tissue.

Who is at risk of getting an STD?

Anyone who is sexually active is at some risk of infection. However, certain lifestyles expose some people to much greater risk than others. Celibate or monogamous lifestyles are the safest. On the other hand, frequent sexual contact with many different partners is a major risk factor for exposure to all types of STDs. In addition, AIDS and viral hepatitis are more likely to strike male homosexuals and bisexuals, although it has not been determined why.

How do you know if you have an STD?

That's a major obstacle to controlling STDs. Many victims don't even know they are infected, because symptoms are mild or non-existent. Gonorrhea often produces no symptoms in women, except vaginal itching or discharge. Chlamydia may cause only minor burning or discomfort during urination. Viral hepatitis may cause only mild fatigue and fever. The symptoms of herpes may be mistaken for other types of skin rashes.

Not that STD symptoms are always minor. (See the accompanying section on symptoms.) As a general rule, anytime you notice a sore, swelling, or discharge from anywhere near the genital area, you should suspect STD until proven otherwise.

In addition, if your sexual partner is diagnosed as having an STD, you may be infected, too. See a physician for a checkup, even if you have no symptoms.

How can STDs be controlled?

As long as there is sexual contact between humans, there will be the potential to spread STDs. However, health officials recommend a number of steps for controlling these diseases.

Early medical testing

If you think you have a STD, get a diagnosis immediately from a physician or health clinic. Tests for STDs are simple, inexpensive, fast, and relatively painless. However, they are not generally included in a routine medical examination. You have to ask for them. Particularly if you are a woman (since female symptoms of gonorrhea and chlamydia are so often mild), be sure that STD tests are included in your regular medical checkups. The Pap test does not detect STDs.

Appropriate treatment

If an STD test is positive, various types of treatment are available. In most cases, gonorrhea can be cured with penicillin or erythromycin. Tetracycline and erythromycin are effective against chlamydia, while penicillin works against syphilis.

Scientists have not yet developed a cure for herpes, viral hepatitis, or AIDS. However, present treatment can provide relief from painful symptoms, and a number of promising drugs are under investigation.

Prevention

The use of condoms by males can reduce the chances of catching or transmitting STDs. On the other hand, use of birth control pills does not prevent the spread of STDs.

Persons who know they have a STD should consult a physician or health clinic before resuming sexual relations. and everyone can adopt a lifestyle that lowers his or her STD risk. This includes refraining from sex with many, anonymous partners, and avoiding sex with partners who do not take this precaution.

SYMPTOMS OF MAJOR SEXUALLY TRANSMITTED DISEASES

Sores and rashes on or near the genitals, pain during urination, and unusual discharges from the penis and vagina are all indications of STDs. If you notice any of these symptoms, see your doctor or clinic for diagnosis and treatment.

Gonorrhea. In men, gonorrhea usually causes burning pain during urination and a discharge or dripping from the penis within two to seven days of infection. In women, there may be a discharge from the vagina or minor irritation.

Chlamydia. The symptoms resemble those of gonorrhea, although they are generally milder. In men, there may be pain during urination and a clear, watery mucoid discharge from the penis. Women may experience vaginal irritation, discharge, or frequent or painful urination. Like gonorrhea, chlamydia often produces no symptoms in women.

Genital herpes. Painful sores resembling cold sores break out on the genitals and may be accompanied by fever and flu-like symptoms. The sores usually disappear after two to five weeks, when the disease goes into an inactive stage. But it may erupt again at any time. Medical research shows that the eruptions can be triggered by emotional stress, fever, or physical trauma.

Syphilis. A hard, painless sore (called a chancre) appears on the genitals, mouth, or rectum one to 13 weeks (usually three to four weeks) after exposure. After one to five weeks, the chancre disappears, but not the disease.

Shortly after the chancre disappears (about six weeks), a rash may occur on any part of the body. Even when the rash disappears, two to six weeks later, the disease remains active and will eventually attack the nervous and cardiovascular systems, as well as any organ of an unborn child.

Viral hepatitis. Some victims have no symptoms or only mild discomfort. Others have a flu-like reaction, including fatigue, fever, chills, nausea, loss of appetite, and all-over aching. A tenderness may exist in the liver area (upper right side of the abdomen), and jaundice (yellow skin) may occur.

AIDS. During initial stages of infection, most victims show no symptoms. But after an incubation period of a few months to several years, the disease may cause recurring fever and night sweating; shortness of breath and dry cough not related to allergies or cigarette smoking; changes in how often and how severely a person gets sick; constant fatigue; diarrhea and loss of appetite; rapid weight loss for no apparent reason; and swollen lymph glands in the armpits, groin or neck.

In later stages of AIDS, the immune system is so weakened that normally mild or unusual disease become life-threatening. The most common are Kaposi's sarcoma, a form of cancer that marks victims with pink or purplish spots, and Pneumocystis carinii pneumonia, a virulent form of pneumonia.

Ask for a test

The value of testing for STDs cannot be overemphasized. Consider the case of syphilis. It is at its lowest level now in two decades, largely because of the blood tests routinely conducted prior to marriage, childbirth, and military service.

But remember - tests for other STDs are not routine. They are not generally performed as part of an ordinary physical examination. Nor are STDs detected by the Pap test. If you think you have a STD or may have been exposed to one, it's your responsibility to ask for a test.

By doing so, you'll protect your own health and help wipe out what has become a national epidemic.

For more information

More information on these topics can be obtained by writing to the Office of Public Affairs, U.S. Public Health Service, 200 Independence Ave., S.W., Washington, D.C. 20201.

**AIDS - Fact or Myth?
Pre-test**

Directions: Read the statement - Check the answer that best applies.

	FACT	MYTH	UNSURE
1. AIDS is a disease of the body's immune system.	_____	_____	_____
2. There is a great deal of fear about AIDS.	_____	_____	_____
3. Scientists still don't know what causes AIDS.	_____	_____	_____
4. AIDS is most often spread by infected semen and vaginal secretions.	_____	_____	_____
5. IV (intravenous) drug users can get AIDS from infected blood by sharing needles.	_____	_____	_____
6. Newborn babies can't get AIDS even if their mothers have the disease.	_____	_____	_____
7. The HIV can cause many long lasting symptoms such as unexplained weight loss, swollen glands, and constant fatigue.	_____	_____	_____
8. Blood from blood banks is now tested, and safe for transfusions.	_____	_____	_____
9. Not having sex is a sure way to avoid getting AIDS.	_____	_____	_____
10. The fewer people a person has sex with, the better your chances of avoiding infection.	_____	_____	_____
11. If you get AIDS, a person can go to the hospital for shots that will cure you.	_____	_____	_____
12. You can get AIDS by casual contact, such as attending school with a student with AIDS.	_____	_____	_____
13. If you have sex, you can protect yourself from STD's (sexually transmitted diseases) including AIDS by using a condom (rubber).	_____	_____	_____
14. You can protect yourself from getting infected with the HIV by not using drugs and not having sexual intercourse.	_____	_____	_____

From: Curriculum Recommendations on AIDS for Michigan Students 11 & 12 grades
Michigan Department of Public Health
Michigan Department of Education

AIDS IN THE WORKPLACE

"Don't misunderstand me - Aids is frightening. And we are in the midst of an epidemic of fear, which is both good and bad. Two kinds of fear are at work here. One is reasonable fear among people whose behavior may put them at risk for AIDS. For those people, fear may accomplish what knowledge alone will not - fear may cause people to change the behavior that puts them at risk.

"On the other hand, fear among people who are not at risk is unwarranted and counterproductive. People who are frightened of friends, coworkers, and family members who may be at risk of AIDS are suffering unwarranted fear, and that fear doesn't produce any worthwhile outcomes. This is the fear we need to do away with."

James O. Mason, M.D., Dr. P.H.
Director, Centers for Disease Control
U.S. Public Health Service

INTRODUCTION

The Michigan Department of Public Health is taking aggressive action to prevent the spread of AIDS in our state. Because there is no vaccine or cure for the AIDS virus, the department has undertaken bold initiatives in the areas of health education and risk reduction. In October 1985, Governor James J. Blanchard created an Expert Committee on AIDS to review Michigan's AIDS experience to date and make recommendations for state policies concerning AIDS.

This Health Update is consistent with the Expert Committee's recommendation that "the Department of Public Health should direct broad public education campaigns and produce regular reports about AIDS for the general public."

What is AIDS?

Acquired Immune Deficiency Syndrome (AIDS) is a serious medical condition affecting the body's natural ability to fight infection. Persons with AIDS are vulnerable to serious illnesses which would not be a threat to anyone whose immune system functions normally. These diseases, rather than the AIDS virus itself, often lead to death.

Infection is caused by the Human Immunodeficiency Virus (HIV) and does not always lead to development of AIDS; many infected persons remain in good health while others may develop illnesses ranging from mild to severe.

"The evidence is overwhelming that there is no danger of this virus being transmitted through such common exposures as handshaking, sharing meals, sneezing, coughing or through other casual school and workplace contacts."

Dr. Robert E. Windom
Assistant Secretary for Health
U.S. Department of Health and
Human Services
June 24, 1986

Who Gets AIDS?

The federal government has been collecting information on AIDS cases since 1981. In September, 1986 the Centers for Disease Control reported that over 96 percent of persons with AIDS fall into one of the following categories:

- o Sexually active homosexual or bisexual men (73 percent)
- o Present or former Intravenous drug abusers (17 percent)
- o Patients receiving transfusions of blood or blood products (2 percent)
- o Hemophiliacs or persons with other coagulation disorders (1 percent)
- o Heterosexuals who have had sexual contact with persons with AIDS or with someone at risk for AIDS (4 percent)
- o Infants born to mothers infected with AIDS (1 percent)

Approximately 3 percent of persons with AIDS can't be placed into any of these groups, including those who refuse to provide risk status information or die before they can be interviewed.

It should be noted that there is no evidence indicating that one can become infected with HIV when donating blood at a Red Cross or other organized blood donor program. This is particularly important since these programs rely upon the workplace as an essential collection site to maintain the nation's blood supply. In donating blood, the sterile needle used for one person is never reused on another person, thereby eliminating any possibility of contamination or infection. Members of high risk groups named above are discouraged from ever donating blood. All collection programs routinely test donated blood to assure it is free from HIV and other bloodborne infections.

How Contagious is AIDS?

AIDS is not transmitted easily. The virus does not travel through the air or pass through clothing. So long as you do not have sexual contact or share blood products with infected individuals, you are not at risk.

"Is it ever appropriate to exclude a child from school or an adult from a job because they are infected with the virus that causes AIDS? We think exclusion is warranted only in the rarest of situations."

Dr. Gloria R. Smith
Director, Michigan Department of
Public Health
October 21, 1985

Federal public health officials firmly believe that the general public should not fear ordinary social and workplace associations with persons with AIDS.

Three years of study of children who contracted AIDS through blood transfusions have shown that no one else in their households developed antibodies to the AIDS virus. Similarly, in the homes of adult AIDS patients no others have been infected except through well-known modes of transmission like, sexual contact.

Is AIDS a Threat in the Workplace?

Nonsexual person-to-person contact occurring among workers and clients or consumers in the workplace does not present a risk of spreading AIDS. Workers with AIDS who do not perform invasive procedures, such as surgery, should not be restricted from work, nor, according to the United States Public Health Service, should they be restricted "from using telephones, office equipment, toilets, showers, eating facilities and water fountains."

Because there is no evidence that the AIDS virus is transmitted by an infected person handling food; the Centers for Disease Control recommends that food service workers infected with the virus should not be excluded from work just because they might be carrying the virus.

Public health experience with AIDS indicates that persons who contact the virus fall into specific groups but do not include health care workers who treat persons with AIDS, nor do they include family members, friends, or co-workers with whom they have daily contact.

"Employees with AIDS should work to the extent of their physical capacity ... there should be no discrimination against the AIDS patient."

James O. Mason, M.D., Dr. P.H.
Director, Centers for Disease Control
U.S. Public Health Service
September 19, 1985

In April of 1986, Michigan Governor James J. Blanchard's Expert Committee on AIDS recommended that "funeral directors, ambulance personnel and other health care workers should be notified of infectious conditions" but "employers, including health care facilities, should not mandate screenings for employees."

The National Education Association has recommended that "Teachers who have AIDS should be allowed to stay in the classroom." the Association also opposes mandatory AIDS testing for teachers and other school employees and, in most cases, opposes mandatory tests for students.

Should Persons with AIDS Remain on the Job?

Today, in many states, it is a violation of the law for an employer to discriminate against an infected worker on the basis of fear that AIDS might be spread through the workforce.

In August of 1986, the Michigan Civil Rights Commission adopted a policy which reads, in part: "the Public Health Advisory Council, the policy-making body for the Department of Public Health, has concluded that there is no need for specific precautions against AIDS in the workplace."

"The Michigan Department of Civil Rights will accept and process complaints from persons who believe they have been discriminated against in employment, housing, public accommodations, public service and education because of AIDS or a related condition or the perception of AIDS "

FOR FURTHER INFORMATION

Public Health Service AIDS Hotline

1-800-447-AIDS, Hours: 9:00 a.m. to 7:00 p.m., Monday - Friday. Specific questions answered.

Wellness Networks (Detroit)

1-800-482-2404, ext. 3582. The 800 number is for Ford Hospital; the extension is for Wellness, Local Detroit - dial direct 1-313-876-3582. Hours: 9:00 a.m. - 9:00 p.m., Monday - Friday; noon - 3:00 p.m., Saturday and Sunday. Specific questions answered. Wellness also provides counseling and referral services.

Michigan Department of Civil Rights

1-517-334-6079, 8:00 a.m. - 4:20 p.m.

Michigan Department of Public Health

1-517-335-8371, 8:00 a.m. - 4:30 p.m.

"It's very hard to imagine that casual contact in the workplace would lead to infection."

Dr. Gerald Friedland
Monterio Medical Center, N.Y.
February 5, 1986

WORKPLACE PRECAUTIONS FOR HEALTH CARE WORKERS (HCWs) U.S. PUBLIC HEALTH SERVICE

These precautions represent prudent practices that apply to preventing transmission of AIDS virus and other bloodborne infections and should be used routinely.

1. Sharp items (needles, scalpel blades, and other sharp instruments) should be considered as potentially infective and be handled with extraordinary care to prevent accidental injuries.
2. Disposable syringes and needles, scalpel blades, and other sharp items should be placed into puncture-resistant containers located as close as practical to the area in which they were used. To prevent needlestick injuries, needles should not be recapped, purposefully bent, broken, removed from disposable syringes, or otherwise manipulated by hand.
3. When the possibility of exposure to blood or other body fluids exists, routinely recommended precautions should be followed. The anticipated exposure may require gloves alone, as in handling items soiled with blood or equipment contaminated with blood or other body fluids, or may also require gowns, masks, and eye-coverings when performing procedures involving more extensive contact with blood or potentially infective body fluids, as in some dental or endoscopic procedures or postmortem examination. Hands should be washed thoroughly and immediately if they accidentally become contaminated with blood.

4. To minimize the need for emergency mouth-to-mouth resuscitation, mouth pieces, resuscitation bags, or other ventilation devices should be strategically located and available for use in areas where the need for resuscitation is predictable.
5. Pregnant HCWs are not known to be at greater risk of contracting the virus than HCWs who are not pregnant; however, if a HCW develops HIV infection during pregnancy, the infant is at increased risk of infection resulting from perinatal transmission. Because of this risk, pregnant HCWs should be especially familiar with precautions for preventing HIV transmission.

Material from: Michigan Department of Public Health
3500 N. Logan, Lansing, MI
Gloria R. Smith, Director
Robert Wyckoff, Editor
Health and Wellness

AIDS AND CHILDREN

Information for Teachers and School Officials

AIDS (acquired immune deficiency syndrome) is a disease that breaks down the body's immune system, or its ability to fight disease. This leaves a person with AIDS vulnerable to life-threatening illnesses that do not affect people with normal immunity.

AIDS is caused by a virus that infects and damages cells of the immune system. This virus can also infect cells of the central nervous system, causing mental and emotional disorders.

How Widespread Is AIDS Among Children?

The number of children with AIDS is small. Of the first 20,000 AIDS cases in the United States, fewer than 300 were children under 13 years old.

How Is AIDS Spread?

AIDS is a bloodborne disease, most often spread through sexual contact or sharing infected intravenous drug needles, or transmitted from infected mother to unborn or newborn infant.

Specifically, AIDS is spread through:

- o Sexual contact in which blood or body fluids (semen, urine, feces, vaginal secretions) are transmitted from an infected person to an uninfected person.
- o Sharing drug needles contaminated with the AIDS virus. People who inject illicit drugs and share needles risk infection.
- o Perinatal transmission. An infected woman can pass the virus to her child before, during, or shortly after birth.
- o Transfusion of blood or blood components contaminated with the AIDS virus. The risk of infection through transfusion has always been slight, and is now extremely small. Use of a test to screen blood for exposure to AIDS virus, together with voluntary deferral of donations by people at risk for AIDS, has made the blood supply very safe.

Can AIDS Be Spread Through Casual Contact?

No. The AIDS virus is very weak and does not survive outside the body. It is easily killed by many common disinfectants, including household bleach. AIDS is not spread through everyday activities such as working in an office, attending school, eating in restaurants, swimming in public pools, shaking hands, hugging, or other casual contact. The virus is not spread through the air from sneezing or coughing. In five years of studying AIDS, scientists have not found one case caused by casual contact.

Who Is at Risk?

Anyone who engages in high-risk practices such as sharing needles to inject illicit drugs or having sex with an infected person can be at risk for AIDS. Of all the cases reported in the United States since 1981 98 percent have been among the following groups of people:

- o Sexually active homosexual and bisexual men (or men who have had sex with another man since 1977)-(65 percent)
- o Present or past abusers of illicit intravenous (IV) drugs-(17 percent)

- o Homosexual and bisexual men who are also IV drug abusers (8 percent)
- o Persons who have had transfusions of blood or blood products (2 percent)
- o Persons with hemophilia or other blood-clotting disorders who have received blood-clotting factors (1 percent)
- o Heterosexual men and women (these include sex partners of persons with AIDS or at risk for AIDS, and people born in countries where heterosexual transmission is thought to be more common than in the United States)-(4 percent)
- o Infants born to mothers infected with the AIDS virus (1 percent)

About 2 percent of AIDS patients do not fall into any of these groups, but scientists believe that transmission occurred in similar ways. Some patients could not be followed up or died before complete histories could be taken.

Do All People Infected With the Virus Develop AIDS?

Scientists cannot yet answer this question because AIDS is a new disease. Many people infected with the AIDS virus remain healthy and free of symptoms for months or years. Others develop AIDS-related complex (ARC), which may include symptoms of fatigue, weight loss, diarrhea, fever, chills, night sweats, and swollen glands. These symptoms last longer than they would in other illnesses, such as the flu. Some people with ARC may never develop AIDS.

People who develop AIDS may at first have the same symptoms as those with ARC, but they go on to develop rare, often fatal illnesses. The two most common are *Pneumocystis carinii* pneumonia, a parasitic infection of the lungs, and Kaposi's sarcoma, a type of skin cancer that appears as a purplish patches on the skin or inside the mouth, nose, or eyelids.

It is important to know that all people infected with the AIDS virus - even those who remain completely free of symptoms - will probably be infectious their entire lives and able to pass the virus on to others.

How Do Children Get AIDS?

Most children with AIDS acquire the virus from their infected mothers before or during birth, either through the mother's blood system or in the birth canal. Most of the mothers were intravenous drug abusers or the sexual partners of men in a high-risk group. One child became infected shortly after birth, possibly from the mother's breast milk.

In rare cases, children have been infected through transfusion of blood or blood products. Now that all blood is screened for AIDS virus, transfusion and hemophilia treatment pose only a very small risk.

About 5 percent of pediatric cases are still being investigated, but scientists strongly suspect that these children also became infected either before or during birth, or through blood transfusion.

Can Pediatric AIDS Be Prevented?

Yes. The risk of infection through blood transfusion and hemophilia treatment is now extremely small. So future cases of pediatric AIDS will likely be in infants born to infected mothers. These cases can be prevented if women at risk of infection are educated about the possible risk to their unborn or newborn babies. Women who are infected with the AIDS virus or are at increased risk of infection should avoid becoming pregnant until more is known about transmission to their babies. They should seek counseling and testing for infection with the AIDS virus from their physician or at a clinic. State and local health departments can tell women where they can go for testing. At increased risk of infection are:

- o Women who inject illicit drugs.
- o Women from Haiti and Central African countries
- o Prostitutes
- o Women who have had sex with:
 - o IV drug users
 - o Bisexual men
 - o Men with hemophilia
 - o Men from Haiti and Central Africa

What About the Schools?

Not one case of AIDS is known to have been transmitted in a school, day care, or foster care setting. AIDS is not spread through the kind of contact children have with each other, such as touching, hugging, or sharing meals and bathrooms. This is supported by long-term studies of family members of both adults and children with AIDS. Not one household member has become infected through routine, non-sexual contact with a family member with AIDS.

Is Going to School Risky for the Child With AIDS?

Children who have damaged immune systems, either from AIDS or other illnesses, risk suffering severe complications from infections commonly picked up in school or day care centers, such as chicken pox, tuberculosis, herpes, measles, and other diseases.

The child's doctor should evaluate the risk of infection, based on the child's immune status. The risk of acquiring some infections, such as chicken pox, may be reduced by prompt administration of specific immune globulin following exposure.

Public Health Service Guidelines for Local Authorities

The Public Health Service has developed recommendations to help state and local health and education departments formulate their own guidelines for the education and foster care of children with AIDS.

These recommendations are designed to protect and promote the well-being of all children in school and day care settings.

- o Decisions about education and care for children infected with the AIDS virus should be made by a team including the child's physician, public health personnel, parents or guardian, and school or day/foster care workers.
- o Most infected school-age children would be allowed to attend school and after-school day care and, if needed, to be placed in a foster home. The benefits of an unrestricted setting outweigh the risks of their acquiring harmful infections. The risk of transmitting the virus to others is almost nonexistent.

- o A more restricted environment is advised for infected preschool-age children, for children who cannot control their bowels or bladder, for children who display such behavior as biting, and for infected children who have uncoverable, oozing sores. These children would be cared for and educated in settings that minimize the exposure of other children to their blood and body fluids.
- o Persons who are exposed to an infected child's body fluids and excrement (when changing diapers, for example) must know that the child is infected and must know procedures to follow to prevent transmission. Disposable diapers should be used, and soiled diapers should be placed in a plastic bag before discarding. Feces can be flushed down the toilet. Hands should be washed after exposure to blood and body fluid and before caring for another child. Gloves should be worn if open sores are present on the caretaker's hands. Any open sore on the infected child should also be covered.
- o Blood and body fluids on surfaces should be cleaned with one part household bleach diluted in 10 parts water.
- o The hygienic practices of an infected child may improve as the child matures, or they may deteriorate if the child's condition worsens. For these reasons, the need for a restricted environment should be re-evaluated regularly.
- o Adoption and foster care agencies should consider screening for AIDS virus infection before a child is placed in a foster or adoptive home. Foster and adoptive parents should be aware that they will need to learn about special care for the child.
- o There is no reason to screen all children before they begin school.
- o The records of children with AIDS should be kept confidential. The number of people who are aware of the child's condition should be kept to the minimum needed to assure proper care of the child that may present a potential for transmission.
- o All educational and public health departments are strongly encouraged to inform parents, children, and educators about AIDS and its transmission.

Published by: American Red Cross and U.S. Public Health Service,
AIDS - Oct. 15, 1986. For more information about AIDS contact
your doctor, your state or local Health Department, the Public Health
Service's toll-free hotline 1-800-342-AIDS, American Red Cross
local chapter.

STD BEHAVIOR CHANGE
RISK REDUCTION

HIGH RISK BEHAVIOR	ELIMINATE RISK	MODIFY RISK
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Sample:

Unprotected sexual intercourse.

Abstain from sex.

Use condoms correctly or
condoms and foam together.
Spermicide in foam also
destroys AIDS virus - but
must be used with condom.

PRIMARY OBJECTIVE AREA: Health/Wellness

AGE GROUP: Teens & Up

CROSS REFERENCE OBJECTIVE AREA(s): Self-awareness/Personal Power

READING LEVEL: Intermediate (can be read to)

NAME OF ACTIVITY: Feelings and Emotions: Awareness Through Role Play and Self Evaluation

GROUP SIZE: Any

MATERIALS NEEDED: Handouts #1, 2, and 3; Pens/Pencils

TIME NEEDED: 1 - 2 Hours

PURPOSE

DIRECTIONS FOR ACTIVITY:

1. Examine common feelings and emotional defense mechanisms.
2. Become aware of productive responses to feelings previously considered negative and debilitating.
3. Identify coping strategies for emotional problems.
4. Identify blocks to behavior change and develop coping strategies.

1. Introduce the purpose. Explain: "Feelings are facts; it is how we respond that causes negative or positive results."
2. Pass out "Feelings" list (Handout # 1) and have participants circle all the feelings they experience at this time in their life (or during some time period such as the last week). If the reading level is low, read the list aloud and have them circle as you go down the list.
3. Examine common emotional responses with the participants: shyness, stress, fear, anxiety, jealousy, anger, hate, sadness, and love. (see Handout #2).
4. Ask, "What do you do about these feelings? What happens to you when you feel them?"
 - a) Be sure that examples are explored of both productive and non-productive responses to the same feelings.

i.e.: When I am angry I work even harder, sometimes all night, to finish an activity I have been told I can't--productive. When I am angry I retreat, eat and cannot work at the activity at all--non-productive.

Health/Wellness (continued)
 Feelings & Emotions: Awareness through Role Play
 Page 2

PURPOSE

DIRECTIONS FOR ACTIVITY:

5. Work through Handout #3 activity guide with students. Explain we are looking at one feeling, anger. Stress that anger is one of the most important feelings to learn to deal with. Then give students the (Handout 3 - student's work) sheet to work an example through.
6. Using the Suggestions for Role Plays about "Feelings," choose one or two scenarios to act out in class. Encourage them to use the coping strategies they learned in the work on anger and feelings.
7. Ask participants to identify "feelings" they are experiencing now which are blocks to desired behavior change and explore ways to develop coping strategies (and sources of professional help, if applicable).

Use "T" CHART in processing.

BLOCKS

COPING STRATEGIES

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SUGGESTIONS FOR ROLE PLAYS ABOUT "FEELINGS"
(#8 of "Directions for Activity")

1. Ask participants to act out one of the following feelings:

Mad
Sad
Glad
Afraid

They can use a situation from their past or a more recent incident.
Have them identify what triggered that feeling and how they might have handled it differently.

2. Scenarios that can be done in "role play":

1. The first day after your partner has left the relationship and/or home.
2. Being turned down for the job you wanted.
3. Teenager tells Mother she is pregnant.
4. Saying "no" to peer pressure to take drugs.
5. Loss of friends because of divorce or having baby. (Hard to maintain old friendships.)
6. "What are you going to do with the rest of your life?"
7. My Mother is too much of a parent to my baby.
8. Bringing up my child is harder than I expected.
9. My younger brother/sister gets more attention than I do.
10. I feel isolated and alone since my divorce; since my baby was born.
11. I am afraid I can't provide for myself and my children.
12. Telling your children you have a new "boyfriend."

Perhaps you will think of other situations that would be good to role play. Select from the above or ones of your own that best suit the individuals you are working with. Have them play both the role of the parent and the child. Sometimes a better understanding of the dynamics of the situation is achieved when people play the role of the other person in their "problem scenario."

HOW WE DEAL WITH ANGER!

The way we deal with anger causes various reactions and rewards for ourselves and others. Every person is responsible for dealing with their feelings in a positive and productive way. However, we learn to handle our feelings by observing others or as a learned behavior as a child. Sometimes we stay in these learned behaviors whether it's productive or not. Not everyone has good examples of positive modeling. This is why we need to deal with what we have learned about handling our feelings.

- *Step 1 - Recall one time in the past year you were angry. Choose a partner and tell him/her:
- the situation
 - what you were angry about
 - who was involved
 - what you did with anger
 - long lasting results
- *Step 2 - As a class, return to circle and process. Ask class to group their responses to anger in three categories. Make chart on board and record responses--

<u>Fight</u>	<u>Flight</u>	<u>Bottle-Up</u>	<u>Cope</u>
Boyfriend said "You fool," so I hit him.	Leaving work when there are problems.	Sulked	Talked to person.

FACILITATOR -- Define each type of response and the pros and cons of each.

- *Step 3 - Now have students recall 3 ways they have seen anger handled in their families and peer groups.

Example:

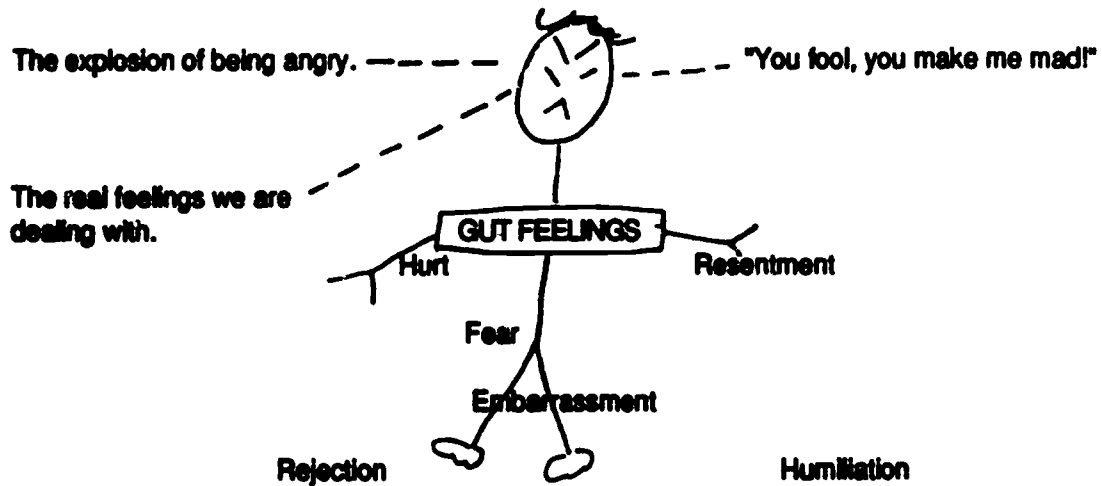
- MOM - Bottles up and then blows up
- DAD - Leaves the room and stews
- BOYFRIEND - Hits me when he is angry
- TEACHER - Called me aside and explained why she was angry at me for talking out of turn

- *Step 4 - Brainstorm ways to express anger positively. Example: Take a walk, Count to 10

- *Step 5 - Three golden rules of dealing with feelings:

- 1) Do not take out your anger on others physically or emotionally, even though it may be tempting.
- 2) Find a way to get rid of excess angry energy without boiling or exploding and making matters worse.
- 3) Deal directly with the issues that need to be faced -- the things that make you angry in the first place.

***Step 6 - Remember anger usually hides a hurt. Look for what is below the anger.**



***Step 7 - Recall a time when you covered a feeling of hurt with the mask of anger.**

***Step 8 - How might you have dealt with the hurt and not let the feeling be masked by anger?**

FEELINGS LIST

Ambivalent
Angry
Annoyed
Apathetic

Bad
Betrayed
Bewildered
Bitter
Bold
Bored
Brave
Burdened

Capable
Certain
Cheated
Concerned
Confident
Controlled
Crushed

Delighted
Depressed
Different
Distracted
Disturbed
Dominated
Doubtful

Eager
Envious
Excited
Exasperated
Exhausted

Fearful
Foolish
Frustrated
Frightened
Free

Glad
Good
Gratified
Guilty
Glum

Hate
Happy
Helpless
Homesick

Ignored
Imposed upon
Impressed
Infuriated
Intimidated
Isolated

Jealous

Knowledgeable

Left out
Lonely
Low
Lost
Love

Mad
Miserable

Naive
Nervous

Overwhelmed
Overworked

Panicky
Pleased
Pressured
Peeved
Proud
Put-down

Refreshed
Rejected
Relaxed
Relieved
Restless
Rewarded
Righteous

Sadness
Satisfied
Scared
Serious
Screwed-up
Self-conscious
Sensitive
Shocked
Shy
Silly
Skeptical
Spiteful
Startled
Stupid
Stunned
Sure
Stressed

Talkative
Tense
Threatened
Tired
Trapped
Turned-off

Uneasy
Unfair
Upset

Vulnerable

Wary
Worried
Weary

From: "Stress Management Training For Women on Public Assistance" A Replication Manual
Michigan Department of Mental Health - September 1981

FEELINGS

Feelings are a barometer of how you are coping with the world around you and the world inside you.

We all have feelings. Sometimes it's difficult to deal with them. Some feelings are new and strange to you. They can frighten you with their intensity.

We all recognize and understand physical feelings: I'm hungry, I'm thirsty, I'm tired. Emotions, the feelings that don't have a physical source, are tougher to understand.

There's a whole range of emotions you're probably experiencing - all the way from the high of being in love, to the vise-like grip of anger, or the uncertainties of being anxious.

And, it's difficult dealing with these new feelings effectively, because you may be juggling all of them at the same time.

SHYNESS

Shyness is a learned response. In a child, shyness comes from the fear of making a mistake or being rejected because of it. Shy children usually have parents who set extremely high standards for them to meet. Being shy can turn into a real handicap that stops you from reaching your full potential. And getting over being shy is difficult. Some people never do. But, if you want to overcome your shyness, you can. You won't be able to change overnight. You're going to have to assert yourself a little at a time. (If it's painful for you to say hello to a stranger, don't expect to be able to make a speech in front of an assembly right away.) Start with the possible. The impossible always takes a little longer.

STRESS

Stress is any factor that creates pressure or induces mental or physical tension. Stress is a problem that most people face. There is the stress of wanting to be the best, to succeed at a task, and excel in life. There is the stress of wanting to please others, and perhaps not being able to. Then, there's the stress of everyday living we all experience. The way we react to stress is the key to how it affects us. Because it is an inevitability of life, you must learn how to cope with stress. Remember that stress can be a positive force in your life. It can give you that extra "push" to meet any situation and do your best. One way to handle stress is to try keeping a balance among the different parts of your life. Don't constantly drive yourself past your limits. You'll only end up making yourself miserable. But if you honestly feel that stress is getting away from you and preventing you from functioning in life, you should talk to someone you trust about it.

FEAR

Fear has to do with our most basic survival instincts. Fear is caused by a source (either real or imagined) that threatens our safety or well-being. A large, snarling dog you're walking past looks ready to jump up and attack you. A car careens out of control and heads directly toward where you're standing. You've got a really important math test - one that means the difference between passing or failing the course - and you're not ready for it. We've all experienced fear in our lives.

How do we come to terms with fear? Understanding is an important weapon against fear. If you can identify and isolate the source of your fear, you can take a giant step toward getting rid of it.

ANXIETY

Anxiety is a first cousin to fear. Anxiety levels in young adults are probably high enough to register on the Richter Scale. Unlike fear, however, the source of anxiety isn't anything you can put your finger on. Anxiety makes you nervous and frightened, but you can't really explain why. One thing is certain: you feel uneasy and worried. Example: you're going to a dance alone. You wonder if you're going to have a good time by yourself. Will you dance with anyone at all, or stick out like a sore thumb because you don't? Just thinking about it makes your palms start to sweat. Or: you're chosen to be your school's representative at an important conference. You've never done anything like this before in your life, and the prospect of it terrifies you.

Anxiety comes in all sizes and shapes, and from all directions. So, how do you overcome your anxieties? You first have to analyze why you feel the way you do. Is there a valid reason for your anxiety or not? Sometimes, sharing your feelings with someone you trust can help. Pick a person you're comfortable talking to - a parent, teacher, or good friend. Their understanding and personal experience dealing with similar situations can help you with your anxieties. They may lead you to discover that the things upsetting you aren't half so terrible as you think.

JEALOUSY

It's not carried in the chromosomes. You aren't born with it. Yet jealousy exists in everyone's life at one time or another. Jealousy can be a terrifically destructive force in your life, if you're not careful.

Jealousy evolves from a lack of security. You are afraid that you will be surpassed or supplanted in some way. The person you're dating starts paying attention to your best friend. A part-time job you really wanted was given to someone else, and you don't understand why.

To deal with jealousy, you have to try to understand why you're jealous. You have to face the fact that there will always be someone who is better looking than you, smarter than you, and capable of doing something better than you can do it. A positive way to look at the same situation is that you're better looking than, smarter than, and capable of doing something better than someone else!

ANGER

Anger is a reaction to a perceived threat. Anger's real purpose is defense. What you're saying inside is: if you threaten me, I'll get my mind and body prepared to fight with you. Example: your kid brother is always in your room touching your things. He's fooling around with a model airplane you've been working on for weeks. You ask him to stop because you know he's going to break it. He doesn't listen to you, of course. You see something of yours threatened, and you explode: "That's it, you little creep! If you don't leave that alone, I'm going to break your arm!" You've perceived a threat; and you've rallied to act against that threat.

Anger is an extremely strong emotion that can cause you to do things you may regret later. So, it's better to work anger out in as constructive a way as possible. Sometimes, bringing your feelings out in the open with a friend or someone else you trust can dissipate the hostility brewing inside you. Writing down what's bothering you and seeing it in black and white can also

help. Physical exercise or hard work will get anger out of your system. Even crying is a healthier way to let off steam than allowing anger to get the best of you.

HATE

Hate isn't the same as anger. It doesn't have the same threat/action syndrome attached to it. Hate has continuity, for lack of a better word. Hate gives you a "repel" signal. You tend to avoid situations and people you hate.

Feelings of hate need to be defused as quickly as possible. You must try to examine why you have such extremely negative feelings toward a particular person, place, or thing.

SADNESS

There are different kinds of sadness. There is the sadness because a friend is moving away, and you'll probably never see him or her again. Or the sadness because your dog has to be given away. Then, there is the sadness from difficult situations in life, like a divorce. And ultimately, there is the sadness caused by the death of someone close to you.

Sadness is a perfectly natural human reaction that should never be denied. You'll see that it becomes less painful as it fades with time.

And when you stop to think about it, sadness is just the other side of happiness.

LOVE

Love is a potentially explosive four letter word in a young adult's vocabulary. Some of you equate it with sex. Others are coming to understand that love and sex can be very different things. Glands calling to glands isn't love. It's biology.

So what is love, then? A million dollar question, with a million different answers. Some people say love is security and comfort. Others say love is romance.

If you're lucky, you've seen love close-up. Maybe it's the love between your parents, or their love for you. Or the love of your grandmother or grandfather. Maybe you've seen love from an unlikely source - like a brother or sister!

There's love for a cause, or country, or a way of life. Love expresses itself in a lot of different ways, like in sacrifice or selflessness (in giving rather than taking). There are a million different types of love floating around.

Of course, the one you're probably most interested in is that unique, intense feeling between you and someone of the opposite sex. Humans want and need love. Real love is in big demand and in seemingly short supply these days.

Real love shouldn't be confused with infatuation. Infatuation is being in love with love. Infatuation is blind. When you're "in love," you don't see anything that's the least bit unappealing in the other person. Infatuation doesn't react well to change. You want these precious moments "to stay the same forever." Infatuation doesn't see a tomorrow, only today and NOW. Infatuation fades, like a summer tan.

Real love, on the other hand, isn't blind (or even the tiniest bit myopic). It always has its eyes wide open. Real love is constantly changing and growing, encouraging the people involved to expand themselves as human beings and individuals. Real love grows out of mutual respect. Real love, like anything worthwhile, takes time and hard work. Real love can survive a lot of happiness and a lot of pain. Real love gets better and stronger. Real love nurtures.

HANDLING FEELINGS

It's normal to want to handle your feelings as maturely as possible. Where emotions are concerned, control is the name of the game. But control is hard. You can't treat something so personal as your feelings with an inflexible set of rules. Control is really a question of getting a proper balance in your life. Going overboard with any one emotion - whether it's anger, anxiety or love - can unbalance the whole picture.

As you've seen, emotions are tricky. They can make you act totally out of character, sometimes. You may even decide to stop expressing feelings because of what might occur if you do. But, feelings that you try to bury will stay pent-up only for so long. You eventually find a safety valve to get rid of the pressures that mount up inside you. You could have a crying jag, develop a headache, a backache, a twitch in your eye, or even a case of "the blues" that hit everyone from time to time. That's called depression. Depression makes you lose interest in practically everything you're doing. You end up feeling helpless and unable to get yourself out of it. (Be careful. You can't anesthetize your feelings or get yourself un-depressed by relying on alcohol or drugs. You never solve a problem with a bigger problem.)

Talking to a caring and sympathetic person can do wonders to help you get in touch with your feelings and learn to handle them better.

And while we're on the subject, don't forget that other people have feelings too. They're trying to cope with their own emotions while you're doing the same with yours. For instance, you could have strong feelings of affection for someone who doesn't return them - and it makes you pretty miserable. By the same token, someone could have the biggest crush in the world on you - without your even knowing it!

Remember, the world and people are imperfect. You're interacting with people who have their own wants, needs, and emotions, and as we've said before, emotions can be very tricky.

Reprinted with permission from: YOUR SELF - FROM THE INSIDE OUT
By: Cathleen S. Plefka and Deana Jamroz
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HOW WE DEAL WITH ANGER

Step 1 - Recall one time in the past year you were angry. Choose a partner and tell them the following and then let them tell you their story.

- 1) Why I was angry.
- 2) What happened and with whom.
- 3) How it ended and results.

Step 2 - Process responses with class. Record types of responses:

1. _____ 2. _____ 3. _____ 4. _____

Step 3 - Recall three ways you have seen anger handled in your family or with peer group:

- 1)
- 2)
- 3)

Step 4 - Brainstorm ways to express anger positively.

Step 5 - Write down the three golden rules of dealing with feelings:

- 1)
- 2)
- 3)

Step 6 - Draw your version of the Iceberg Theory. (See Step 6 on How We Deal With Anger)

Step 7 - Recall a time when you exploded and really had another feeling you were covering up or masking:

- 1)

Step 8 - How might you have better dealt with the anger? Think of two more productive ways to handle it:

- 1)
- 2)

PRIMARY OBJECTIVE AREA: Health/Wellness

AGE GROUP: Teens & Up

CROSS REFERENCE OBJECTIVE AREA(s): Personal Power

READING LEVEL: Basic

NAME OF ACTIVITY: Stress Management In a Nutshell

GROUP SIZE: 8 - 12

MATERIALS NEEDED: Handouts #1, 2, 3, 4, and 5
Other Optional Handouts as Needed.

TIME NEEDED: One (1) Hour

PURPOSE

DIRECTIONS FOR ACTIVITY:

1. To define stress.
2. To become aware of the situations, activities and life events and changes that are personally stressful.
3. To understand one's use of the three basic reactions to stress: Acting Out; Withdrawal; Taking Charge.
4. To develop skills to manage stress.
5. To realize there are options/choices of behaviors that can give a greater sense of personal power.

1. Talk about or define stress/stressors and how to become aware that one is experiencing a stress. Handout sheet titled, "Identifying your Stress Signals and Reactions." (Handout 1)
 - a) First, ask participants for definitions of stress.
 - b) Have the group come up with a list of what they have experienced as stressful situations. How the situation made them feel and behave.
 - c) If no one comes up with any positive examples of stress such as parties, outstanding personal achievement, the facilitator should. Stress need not be only negative experiences.
 - d) Then the activity should take on more of a problem-solving aspect by categorizing the stressors into two different groups (with the help of the group).
 1. Life events or changes
 2. Chronic conditions
2. Make a list of life events that may include those offered by the group and more.
3. Then ask the group to generate a list of how they managed the stressful situation they described earlier. Use the transparency "The 3 General Reactions to Stress" and the Facilitator's Info. Sheet to explain, "The Three Responses to Stress"
 - a) Acting Out
 - b) Withdrawal
 - c) Taking Charge

Health/Wellness
Stress Management in a Nutshell
Page 2

PURPOSE

DIRECTIONS FOR ACTIVITY:

Ask each participant to describe times that they have used any of the three, helping each to determine any patterns in their responses if they have them.

4. Finally, bring in the notion of options and the need for flexibility and to be open to creating new patterns or choosing new behaviors. And, at this time, pass out the handout entitled, "Quickie Qualm Quietters" (Handout #2).
5. Go over the list of "qualm quietters," helping participants select one or two they feel good about trying.
6. Use the activity, "Relaxation: Autogenic Method," to help participants experience an easy and successful way to reduce tension from stress. If you do this relaxation section you might want a tape of soothing music to be a backdrop to your voice as you read the exercise.
7. Read and discuss Handout #3, "EXERCISES TO HELP YOU COPE WITH STRESS." Talk about working toward realistic goals to relieve stress and reduce the negative effects.
8. Use optional handouts number 5 and 6 as desired.

THREE RESPONSES TO STRESS

In general, people respond to stressful situations in three different ways.

- a. **Acting Out.** Acting out means taking your feelings out on the people around you. Men who beat their wives or lovers are "acting out." Parents who beat their kids or call them degrading names are acting out. Teenagers who vandalize buildings and harass people on the street are "acting out." People who cope with stress by acting out do not always act out against the person or situation perceived to be the source of the stress. For example, a husband may get in a hassle with his foreman at work and ends up feeling very threatened and angry. He's so frustrated by the time he gets home that he takes it out on his wife, even though her biggest crime was to say hello to her husband when he walked in the door. Can you give other examples of acting out?
- b. **Withdrawal.** Withdrawal means escaping from the stressful situation. This can be done with pills, alcohol, or other drugs. It can be done by running away. It can be done by withdrawing into our own little shells and trying to make the rest of the world go away. Do you have examples of withdrawal in the face of stress? (Taking a breather or a "time-out" is not the same as withdrawal.)
- c. **Taking Charge.** Taking charge means dealing with the problem. It means asking the question, "What can I do about this situation?" and then doing it. It means viewing the situation as a challenge and meeting it up front.

Again these are three general reactions to stress. All of us have used each one at different times. Some lash out at someone else because of our own hurt and pain? Some try to escape from a stressful situation by getting drunk or running away? And, of course, there have been countless times when we have taken charge and used our stress-related energy to do what had to be done and succeeded beautifully. Think of a time when you took charge and handled a stressful situation like a pro.

Ask each person to briefly describe such an experience.

Take another look at the three current stressful situations that you listed. Consider each one and decide how you have been responding to it. Have you been acting out, withdrawing, or taking charge? Or, have you been doing a little of each? See if you can find a pattern in the way in which you respond to stressful situations. Spend a short time discussing each person's list helping each to determine his/her customary stress response, if he/she has one.

RELAXATION: AUTOGENIC METHOD

1. Assume comfortable position in a quiet place.
2. Tell yourself you will spend the next 15 minutes or so shifting your active concentration from: daily concerns to worries to passive concentration on the sensations in your own body. You have nothing better to do than to relax.
3. Allow your breathing to become regular and calm. Each time you exhale, you feel yourself letting go. You feel the tension leaving as the relaxation comes in to take its place.
4. When you find your thoughts are wandering, bring your attention back to the feelings of heaviness and warmth.
5. Now, slowly and deliberately, repeat the following word formula for yourself.

My right arm is heavy. (repeat)

My left arm is heavy. (repeat)

My arms are heavy and warm. (repeat)

My arms are heavy and warm; warmth is flowing into my hands. (repeat)

My legs are heavy. (repeat)

My legs are heavy and warm. (repeat)

My breathing is calm and regular. (repeat)

My body breathes me. (repeat)

My breathing is calm and regular; I am at peace. (repeat)

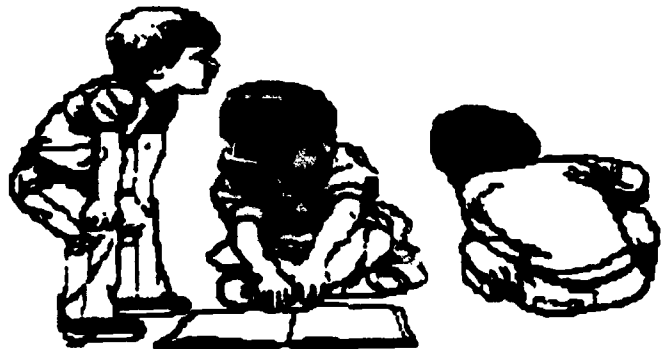
I am at peace... (repeat)

THE 3 GENERAL REACTIONS TO STRESS

1. Acting Out



2. Withdrawal



3. Taking Charge



IDENTIFYING YOUR STRESS SIGNALS AND REACTIONS

How do you react to a stressful situation? (Mark all that apply)

- I worry.
- I lose sleep.
- I become nervous.
- I feel my muscles tighten.
- I get a headache.
- My stomach hurts.
- My heart pounds.
- My face becomes red.
- I feel faint.
- I feel cold.
- I feel hot.
- I feel like crying.
- My hands shake.
- I can't sit still.
- I stutter or have difficulty talking.
- I cough or clear my throat.
- My face breaks out.

What other reactions do you have?

How do you currently cope with your stress reactions?

- I get angry.
- I become depressed.
- I take medication (aspirin, tranquilizers, etc.)
- I drink or use illegally acquired drugs.
- I blame my problems on others.
- I tell myself that I'll laugh about this later.
- I ignore them.
- I talk about the stress with a friend, family member, or counselor.
- I look for ways to change the stress-causing situation.
- I hate myself.
- I laugh at the situation.
- I accept the situation.
- I think about suicide.
- I withdraw from others.
- I eat.
- I try to make others feel miserable, too.
- I try to think of a way to avoid this kind of stressful situation in the future.

What other ways do you have of coping with your stress reactions?

QUICKIE QUALM QUIETERS

How do you spell relief from stress? Sometimes all you need is a quick break from a stressful situation to return refreshed and ready to tackle the problem. The following are some of the many "qualm quieters" other people have found helpful. Perhaps one or two may just do the trick for you!

Walk at twilight or early morning
Share a fun experience with a friend
Garden, especially pulling weeds
Curl up under an afghan
Get up an hour earlier than I "must"
Browse in small shops
Go to a movie (light comedy)
Play and talk with my kids
Write long intimate letters to close friends
Travel-actually or dream about it
Make little repairs around the house
Collect driftwood and make things out of it
Try a new restaurant
Go on a boat ride
Sit in my backyard
Take a long, warm bubble-oil bath
Get out of town for a day or two
Visit a neighbor I seldom see
Play music-loud, very loud
Do absolutely nothing
Draw house plans
Play bridge
Hear a good lecture
Work with stained glass
Keep a diary or journal
Fix a cup of herbal tea
Fly a kite
Sew

Go barefoot
Repot houseplants
Listen to others
Watch birds
Take a walk
Jog
Backpack
Play the organ
Bake yeast bread
Embroider
Go skiing
Go dancing
Take photographs
Clean the house
Read a mystery
Watch a sunset
Play the guitar
Smile at someone
Play pool
Take a short nap
Sing with a group
Laugh more
Officiate in sports
10 minutes of Yoga
Clean the car
Model railroading
Wear old clothes

Are any of these "quickie-qualm quieters" ones you'd like to try? Which ones?

From: Manczak, Donna Warner, "Stress: A Family Affair." Cooperative Extension Service, Michigan State University, East Lansing, 1979.

EXERCISES TO HELP YOU COPE WITH STRESS

Establish some realistic goals, and work towards achieving them. (Include goals that lead to enjoyment and fulfillment such as that special vacation you hope to take someday.)

Find a tension outlet that works for you, and use it when you need to. Consider crossword puzzles, card games, running, dancing, aerobics, or playing a musical instrument. But stay away from those outlets that work only at the moment, that only add up to bad news, like eating, drinking, and drugs.

Be careful not to schedule all of your leisure hours.

Get proper rest. Try to stick to a regular sleep pattern.

Learn to relax. Take time for yourself and be by yourself doing something pleasurable.

Eat a nutritionally balanced diet. Cut down on caffeine, sugar, and white flour.

If you're popping aspirin, antacids, or tranquilizers, cut down on the number you take, stop taking them, or get some professional counseling.

Get regular exercise--aerobic exercise is best. (Check with your doctor for types and amount.)

Get in some big-muscle action: saw wood, dig up the garden, chop down trees, scrub the floor.

Cut down on the noise levels which surround you. Turn down (or off) the television, radio, stereo, etc.

Avoid going home and sitting in front of the TV or lying on the couch night after night.

Take a walk--up the hall, up the street, or in the country.

Take deep breaths before entering a stressful situation (or when you find yourself in the midst of one unexpectedly).

Stop worrying. Remind yourself that worrying doesn't help a situation--only action helps.

Each week for a month, list the things you dislike about your life. At the end of the month, compare the lists to find out what's really making you unhappy. Concentrate on changing/accepting these things.

Think positively! Change those stressful things which you can, and accept those which you cannot.

Keep a diary faithfully, focusing on the positive aspects of your life and on your positive plans for the near future.

Look for things to praise in yourself and others.

Let bygones be bygones. Learn to forget past injustices. Learn to understand and forgive others.

Get a new hairstyle, shave your mustache, grow a beard, or experiment with some new makeup.

Schedule time to be with people you care about.

Don't get caught up in the complaints of others.

Try to keep other people's problems separate from your own.

Avoid competitive leisure activities unless you can easily accept loss.

EARLY STRESS SIGNALS

Frequent Headaches Or Stomachaches

Soreness In Neck And/Or Shoulders

Loss Of Or Increase In Appetite

Sleeplessness/Nightmares

Excessive Sleeping

Depression

Frequent Desire To Cry

Rash/Increase In Facial Blemishes

Inability To Concentrate

Memory Lapses

Coughing/Throat Congestion Unrelated To Cold

Frequent Loss Of Temper

STRESS CAN BRING OUT THE BEAST IN YOU



IRRITABLE: This may cause you to be overly harsh with family and friends.

ANXIOUS: This may give you feelings of fear, panic, and paranoia.

TIRED: This may cause you to be ineffective and can decrease your ability to be alert.

RESTLESS: This may cause you to jump from one task to another, leaving jobs undone.

DEPRESSED: This can result in feelings of unhappiness and uselessness and may cause a drop in your energy level.

PRIMARY OBJECTIVE AREA: Health/Wellness

AGE GROUP: Teens - Adult (All)

CROSS REFERENCE OBJECTIVE AREA(s): Personal Power

READING LEVEL: Any

NAME OF ACTIVITY: Substance Abuse

GROUP SIZE: Any

MATERIALS NEEDED: Handouts #1, 2, and 3, Paper and Pencils

TIME NEEDED: 1 to 4 Hours

PURPOSE

DIRECTIONS FOR ACTIVITY:

1. To explore the causes and management of substance abuse.
2. To identify blocks to behavior change that participants may be experiencing.
3. To increase awareness of sources of help for substance problems.
4. To increase independent behaviors.

1. Read through Handouts #1 and 2 with participants. Encourage input and feedback.
2. Divide people into small groups for discussion of: smoking, drinking, drugs, marijuana, etc. (Separate sessions for each may be desirable).
3. Suggest ways and topics for discussion; affect of taking drugs on the productivity in the workplace, accident rate, sports, etc., drug testing, laws against smoking in public places, etc., drunk drivers, insurance rates, effect on health, etc. (For Fetal Alcohol Syndrome, see activity titled "When You're Pregnant: Be Good to Yourself and Your Baby.")
4. Have smaller groups design scenarios where they are using a substance and again where they are refusing a substance. Have each person take a turn in a "role play." Ask them to make it as real as possible.
5. Identify reasons for accepting and barriers to refusing. (Discuss "Peer Pressure" using handout #1.)
6. Have participants write down how they felt in their role, try to help them identify blocks to change if they are substance users. Help them understand that the choice is theirs. Refer to "Assertiveness Activity" in section 2 of this book.

NOTE:

Additional information and handouts are available from the Michigan Substance Abuse Information Clearing House, 925 E. Kalamazoo Street, Lansing, MI 48912 (517) 482-9902

Michigan LAW FACT SHEET

Hard Narcotics

Opium, Heroin, Morphine, Demerol, Methadone, Codeine, Dilaudid, Cocaine*

Possession

- Felony -
1. 650 grams or more - mandatory life imprisonment
 2. 225-650 grams - mandatory 20 to 30 years
 3. 50 to 225 grams - 10 - 20 years or probation for life.

Sale

- Felony -
1. 650 grams or more - mandatory life imprisonment
 2. 225-650 grams - mandatory 20 to 30 years
 3. 50 to 225 grams - 10 - 20 years or probation for life.
 4. Less than 50 grams up to 20 years and/or up to \$25,000 fine.

Use

Misdemeanor - Up to 1 year or up to \$2,000 fine.

Illegal Quantities of Non-Prescription Cough Syrups
such as: Robitussin A.D., Cheracol, Terpin Hydrate with Codeine

Possession

Misdemeanor - Up to 1 year and/or up to \$1,000 fine.

Sale

Felony - Up to 2 years and/or up to \$2,000 fine.

Use

Up to 6 months and/or up to \$500 fine.

Depressants ("Downers")

Tuinal, Seconal, Nembutal, Amytal, Quaalude, Phencyclidine (PCP)

OR

Misc. Narcotic Containing Substances

such as: Hycodan Syrup, Empirin with Codeine No. 3

Possession

Felony - Up to 2 years and/or up to \$2,000 fine.

Sale

Up to 7 years and/or up to \$5,000 fine.

Use

Misdemeanor - Up to 1 year and/or up to \$1,000 fine.

Depressants

Meprobarbital, Phenobarbital, Valium

OR

Analgesics (Pain Killers)

Darvon

Possession

Felony - Up to 2 years and/or up to \$2,000 fine.

Sale

Up to 4 years and/or up to \$2,000 fine.

Use

Up to 1 year and/or up to \$1,000 fine.

Stimulants ("Uppers")

Dexedrine, Desoxyn, Benzedrine, Biphentamine

Possession

Felony - Up to 2 years and/or up to \$2,000 fine.

Sale

Felony - Up to 7 years and/or up to \$5,000 fine.

Use

Misdemeanor - Up to 1 year and/or up to \$1,000 fine.

Hallucinogens

L.S.D., Mescaline, Psilocybin, D.M.T.

Possession

Misdemeanor - Up to 1 year and/or up to \$1,000

Sale

Felony - Up to 7 years and/or up to \$5,000 fine.

Use

Misdemeanor - Up to 6 months and/or up to \$500 fine.

Other Hallucinogens
Marijuana, Hashish

Possession

Misdemeanor - Up to 1 year and/or up to \$1,000 fine.

Sale

Up to 4 years and/or up to \$2,000 fine.

Use

Misdemeanor - Up to 90 days and/or up to \$100 fine.

**These are the laws in the State of Michigan.
Local jurisdictions may have more restrictive ordinances.**

Source: Michigan Public Act 368 of 1978 and Revisions. Revised March, 1985

SMOKING, DRUGS, AND DRINKING

The adverse kind of peer pressure we've talked about comes dramatically into focus where smoking, drugs and drinking are concerned. Your circle of friends may be into all three and urge you to give them a try. It's up to you to use your intelligence and common sense in evaluating a situation that could affect you mentally and physically for the rest of your life.

SMOKING

Smoking feeds a need for, or addiction to, nicotine. (Sure, you don't shoot nicotine, pop it, snort it, or drop it, but it's an addiction just the same.) Smoking does a lot of other unpleasant things.

Reports from the Surgeon General of the United States all say the same thing; smoking is hazardous to your health. Smoking cigarettes pollutes your lungs, the air around you, and everyone else's air in the process. Smoking can cause throat irritation, chronic coughing and respiratory ailments, like emphysema or sinusitis. There is also mounting evidence that smoking is a contributing factor to lung and throat cancer.

Smoking is an expensive habit. Just ask anyone who's been smoking for 20 years (and still has the breath to tell you). Smoking yellows your teeth, makes your breath stale, and your clothes smell as though they were stored in a cigarette carton. Kissing someone who smokes is like kissing an ashtray full of cigarette butts.

If you're already smoking, think seriously about stopping. If you're being pressured into starting by your friends who do, don't. Smoking doesn't make youth more grown up. How adult can someone be if they are willing to do something potentially harmful to themselves just to please others?

MARIJUANA

Smoking marijuana gives you an advanced case of the "mellows." The active ingredient in marijuana is THC (tetrahydrocannabinol); the more THC you have in your system, the easier and quicker it is for you to get high.

Marijuana impairs your judgment. Right and wrong seem to merge together. Things are overlooked - or forgotten - when you're smoking pot... things like homework and other responsibilities. Marijuana gives the user a false sense of well-being that makes any fears or inadequacies seem to float away. It also stimulates the appetite (you've probably heard about or witnessed "mad munchies").

Scientific studies on the potentially harmful effects of smoking grass long-term have only been conducted in earnest in the last few years. So, there are no clear-cut conclusions available. But, there is growing data pointing to possible genetic damage in heavy marijuana users. This means that any children produced by parents who smoke heavily could be mentally or physically harmed in some way.

DRUGS

You've probably had it "up to here" with anti-drug literature and information in high school. But all the pamphlets and speeches point to one thing: the choice to use drugs is a bad one.

A drug is any chemical substance that alters your perception, your consciousness, or your behavior. A drug can induce pleasure or dull pain for the user. A drug has the definite potential for abuse. And abuse can lead to addiction.

Addiction to drugs is a dependence on them. It can be physical or psychological. Why should anyone expose himself or herself to the always harmful effects of drugs? It's a good question with no good answer.

Barbiturates

Barbiturates are drugs prescribed by doctors to relax the patient's nerves, lower blood pressure, and slow down the rate of the heart. The side effects include a sense of euphoria (a feeling of drifting along without a care in the world), drowsiness and the inability to concentrate or think clearly. There's a litany of barbiturates that find their way into the wrong hands. Their street names have included: candy, yellow jackets, purple hearts, blue devils, and reds. Fun names for dangerous and potentially fatal drugs.

Amphetamines

Amphetamines are stimulant drugs. Amphetamines relieve mild depression, control appetite and help prevent sleepiness. They are "uppers" that can make the user feel as though there's nothing he or she can't do. The down-side effect is the "crash" that inevitably comes.

Hallucinogens

Hallucinogens are powerful drugs that provide changes in sensation, thinking, self-awareness and emotions. You've probably heard stories about what people have done to themselves on bad LSD or PCP trips. What's worse, many people who have used these hallucinogens can experience uncontrollable, recurring flashback experiences.

Narcotics

Narcotics are drugs that relieve pain and are physically addictive. They can be smoked like opium, injected like heroine or morphine, or swallowed like codeine and its derivatives.

DRINKING

Alcohol has an anesthetic effect on the drinker. It's a pain-killer and a nerve-calmer. It has the ability to release your inhibitions, and alter your personality. It can depress you, put you to sleep, or make you pass out. And no matter how little you drink, it impairs your efficiency. (That's why coaches say a loud "no" to alcohol for their athletes.)

Anyone can have a problem with alcohol. Male or female. Rich or poor. White or black, or any color in between. You are never too young to be an alcoholic. If you need a drink to wake up in the morning, to help you get through the day, to help you relax and unwind, or help you get to sleep at night you have a serious problem with alcohol.

Alcohol doesn't mix well with a lot of things. The most lethal mixture around is alcohol and gasoline. Driving while under the influence of alcohol is a leading cause of young adult deaths. And any survivors of a car crash can be maimed or crippled for life.

It doesn't matter that you've heard this over and over. One more time: alcohol and driving don't mix. Don't drink if you're driving. Don't get into a car if the driver has been drinking, even if it's your best buddy, your boyfriend, or girlfriend. Take the keys away from him or her if you can. If you can't, don't get into the car. (Take a cab, a bus, make a phone call to a friend, whatever you have to do to get home safely.) At the very least, that kind of drive will be dangerous. At the very most, it will be deadly.

The kicks you get from using artificial stimulants are fewer and fewer the more you use them. You have to constantly "trade up," either by using more of what you're taking, or taking something more powerful. If you think it's worth it, think again.

The bottom line on drugs: they make you lose control. A junkie or an alcoholic has lost all control. And misery doesn't love company. The misery of addiction makes loving anything or anyone impossible.

Reprinted with permission from: **Your Self - From the Inside Out**
By: Cathleen S. Plefka and Deana Jamroz
EDN Corporation, 8003 Old York Rd.,
Elkins, PA 19117-1410
(212) 635-1700

GENERAL QUESTIONS

What is a drug?

A drug is any chemical substance that produces physical, mental, emotional, or behavioral change in the user.

What is drug abuse?

Drug abuse is the use of a drug for other than medicinal purposes which results in the impaired physical, mental, emotional, or social well-being of the user. Drug misuse is the unintentional or inappropriate use of prescription or over-the-counter drugs, with similar results.

Which drugs are abused?

Narcotics, sedatives, alcohol, tobacco, stimulants, marijuana, inhalants, hallucinogens, phencyclidine - these are the major drugs of abuse. All have one thing in common: to one degree or another, they affect the user's feelings, perceptions, and behavior. Most of these drugs affect the user in physical ways as well, but they are abused because of their psychoactive (mind-altering) properties.

What is drug addiction?

The term drug addiction has been popularly used to describe a "physical" dependence on a drug. Originally associated with narcotic dependence, the term is gradually being replaced by the more general drug dependence.

What is tolerance?

Tolerance is a state which develops in users of certain drugs and requires them to take larger and larger amounts of the drug to produce the same effect. Tolerance often, but not always, occurs along with (physical) dependence.

Why do people abuse drugs?

There are many reasons: the wish or belief that drugs can solve every problem, the pressure from friends to experiment, the enjoyment of drug effects, and easy access to socially acceptable drugs like alcohol and tobacco.

Reasons for drug experimentation - like curiosity or social pressure - differ from reasons for occasional drug use - like enjoyment or availability. And reasons for continuing to use drugs - like dependence and fear of withdrawal - are different still.

What is drug dependence?

Drug dependence is the need for a drug which results from the continuous or periodic use of that drug. This need can be characterized by mental and/or physical changes in users which make it difficult for them to control or stop their drug use. They believe that they must have the drug to feel good, or normal, or just to get by. This mental aspect of drug dependence is often called psychological dependence.

Some drugs, like narcotics and barbiturates, change the body's physical system so that it becomes used to the drug and needs it to function. When a user stops taking the drug, he or she will experience withdrawal symptoms, like vomiting, tremors, sweating, insomnia, or even convulsions. So to avoid withdrawal and to continue to function, the user takes the drug again. This aspect of drug dependence is often called physical dependence.

Many people try to distinguish between psychological and physical dependence, believing one type of dependence is worse than the other. However, heavy use of any psychoactive drug produces some type of dependence; and this dependence interferes with the social, behavioral, and physical functioning of the individual.

Are drugs harmful?

Any drug can be harmful. Drug effects depend on many variables, including the amount of drug taken, how often it is taken, the way it is taken, and other drugs used at the same time. Also, user's weight, sex (personality, mood, expectations), and setting of use (environment) help determine how a drug affects a person.

How can misuse of legally obtained drugs be controlled?

Drugs should be used only as prescribed and should be destroyed when they are no longer needed. All drugs, including nonprescription, over-the-counter drugs, should be kept away from children. Doctors and pharmacists should watch prescription renewals for drugs that can lead to dependence.

Are substances other than those commonly called drugs ever abused?

Yes. Substances like various aerosols, gasoline, paint thinner, and model airplane glue contain volatile anesthetic-like chemicals which people sometimes sniff to get high. These inhalants should be sold and used with caution. Young children often get into common household products such as volatile solvents, so parents should take precautions to keep these substances out of reach.

Do drug abusers ever take more than one drug?

Yes. Multiple drug abuse is common. People who abuse one drug are likely to abuse other drugs, either by taking a variety of them all at once or at different times. Multiple drug abuse means multiple risk. Mixing alcohol and sleeping pills, sedatives, or tranquilizers is especially dangerous. Unfortunately, young people are experimenting more and more now with these potentially lethal combinations.

Do most drug experimenters become drug dependent?

No. Most people who experiment with drugs do not become dependent. In fact, some do not even become regular users.

What is the effect of drugs on sexual response?

No drug seems to be a true aphrodisiac (capable of creating sexual desire rather than reducing inhibitions), although various substances have been considered as such throughout history. What users expect is probably more important than what drugs do. In fact, narcotics and alcohol in particular often actually reduce sexual responsiveness. Small doses of certain drugs, however, may make a person feel less inhibited.

Is it unsafe to use drugs during pregnancy?

It can be. Pregnant women should be extremely cautious about taking any drug, even aspirin, without first consulting their physician.

Research has shown that heavy smoking and drinking can harm the developing fetus. Babies born of narcotic- and barbiturate-dependent mothers often become drug dependent and require special care after birth.

What is drug overdose, what can I do about it?

An overdose of drugs is any amount which produces an acute and dangerous reaction. A severely low breathing rate, stupor, or coma are indicative of drug overdose. Get medical help immediately! In the meantime, make sure the overdosed person gets plenty of air. Artificial respiration may be necessary. Sometimes hallucinogens, PCP, marijuana, or stimulants produce a panic reaction. The person may become frightened, suspicious, and may fear harm from others. It is crucial that everyone remain calm and reassure the person that these feelings are drug related and will subside. Outside help is usually available from community hot lines, drug crisis centers, or hospital emergency rooms, and should be sought as soon as possible.

Is it possible to get medical help for drug problems without getting into trouble with the law?

Yes. There are important regulations which safeguard the confidentiality of patients in treatment. Federal law requires doctors, psychologists, and drug treatment centers to keep confidential any information obtained from patients. However, under certain conditions, the law does allow disclosure. (The information might be necessary so other doctors can treat the patient, or so insurance carriers can provide benefits.)

Can over-the-counter (nonprescription) drugs be dangerous?

Yes. When these drugs are overused or misused in some other way, they too can cause serious problems. Drugs bought without prescription, such as antihistamines, aspirin, cough medicines, diet pills, sleeping pills, and pep pills, can be helpful for minor, short-term discomforts. Although these preparations are relatively safe, users should always read labels carefully and check with their doctor if uncertain about the effect a particular over-the-counter drug may have.

What are controlled drugs?

Controlled drugs are those placed on a schedule or in special categories to prevent, curtail, or limit their distribution and manufacture. Under the Controlled Substances Act of 1970, the Attorney General of the United States (on the recommendation of the Secretary of Health, Education, and Welfare) has the authority to place drugs into five schedules or categories, based on their relative potential for abuse, scientific evidence of the drug's pharmacological effect, the state of current scientific knowledge about the drug, and its history and current pattern of abuse.

What are the legal distinctions between possession, dealing, and trafficking in controlled substances?

Possession means: 1) having controlled legal drugs that are not obtained either directly from a doctor or from a pharmacist using a doctor or from a pharmacist using a valid prescription; or 2) having controlled drugs which are illegal for use under any circumstance, like heroin or marijuana. Dealing is illegally supplying or selling controlled drugs to users on a small scale. Trafficking is the illegal manufacture, distribution, and sale of these drugs to dealers on a large scale. Penalties for each offense vary from State to State and according to schedule.

What kind of treatment is available for the drug abuser?

In recent years, the kinds of treatment programs have multiplied since no single therapeutic approach seems to succeed for all people and with all drugs. Treatment approaches for narcotics abusers principally include drug-free or methadone maintenance in residential or outpatient facilities. Approximately two-thirds of the 3,400 treatment programs located across the country are drug free; the remaining one-third utilize methadone maintenance. Rehabilitation services such as career development, counseling, and job skills training are also available. For alcohol-dependent people, treatment often includes drug therapy during the alcohol withdrawal phase, group or individual psychotherapy, and the particular kind of support provided by self-help groups similar to Alcoholics Anonymous. There are many other programs providing short-term counseling or drug crisis counseling or drug crisis therapy in health agencies, schools, community mental health centers, and other organizations. And telephone hotlines are often the first source of confidential advice and referral information in the community.

THINGS YOU CAN DO TO PREVENT DRUG ABUSE!

As a Parent:

- Raise caring, thinking children
- Help them to make sound decisions
- Let them feel consequences of their actions
- Set reasonable firm limits
- Make them responsible for their actions

As a Citizen:

- Offer community activities for kids
- Help young people develop without need for drugs

As a Friend:

- Be a good listener when friend is in trouble
- Provide accurate and helpful information about drugs and their dangerous effects

Help people develop their human potential!

PEOPLE DON'T NEED DRUGS FOR EXCITEMENT OR PROBLEM SOLVING!

Adapted from What Can I Do To Prevent Drug Abuse?...National Clearinghouse for Drug Abuse Information, 5800 Fishers Lane, Room 10A - 56; Rockville, Maryland 20857

PRIMARY OBJECTIVE AREA: Health and Wellness

AGE GROUP: Teens to Adults

CROSS REFERENCE OBJECTIVE AREA(s): Relationships

READING LEVEL: All

NAME OF ACTIVITY: Recognizing Abusive Relationships...Educational Lesson

GROUP SIZE: Any

MATERIALS NEEDED: Handouts 1 and 2, Blackboard and Chalk, Overhead Projector

TIME NEEDED: One Hour

PURPOSE

DIRECTIONS FOR ACTIVITIES:

1. Analyze patterns of abusive relationships.
2. Examine information from experts who have researched abuse and its effects.
3. Evaluate the payoffs and losses in an abusive relationship.

1. Discuss with the class what they feel are abusive behaviors between two people. Female/Male or same sexed persons. List behaviors on board or newsprint.
2. Introduce research concept of the types or categories of abuse in Male/Female relationships. (Use overhead projector and transparency)
3. Pass out Student Handout 1. Share the cycle of abuse and explain why persons get hooked into relationship by payoffs of the "honeymoon period." (See Facilitator's Notes)
4. Look at what can be done to avoid abuse.
5. Evaluate the payoffs and losses in staying or leaving an abusive relationship.
6. Distribute Handout 2 on abused or abusive. Allow discussion and questions.

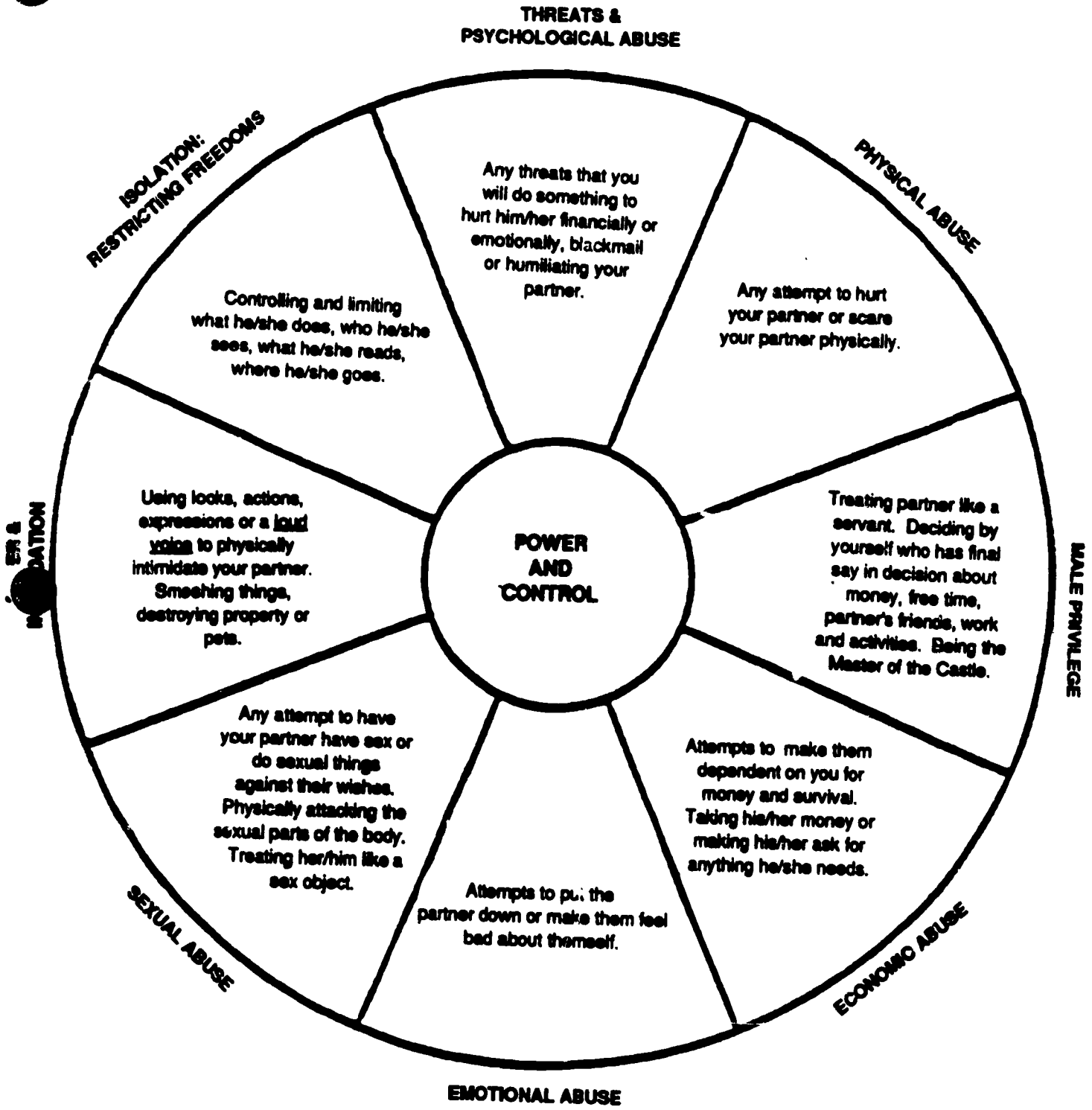
*May want to have a speaker from a Domestic Crisis Center.

ABUSIVE RELATIONSHIPS

- I. Abuse is an attempt to gain power and control over another person.
 - A. Methods of Abuse - refer to transparency chart
 - B. Why abuse is tolerated in our society
 1. contradictions about violence in our society
 2. expectations of being "a man" and "a woman"
 3. people are unprepared for conflicts in family life
 4. people don't know how to disagree without hitting
 5. people don't know how to cope with stress
 6. violence is common on TV and in movies
 7. stereotypes and historical practices justify abuse (ex. women - Tarzan & Jane)
 8. belief that it is acceptable
- II. Abuse is a crime that is illegal and unacceptable
- III. Why do people stay in abusive relationships?
 - A. Because they are dependent on abuser
 1. psychologically
 2. emotionally
 3. economically
 4. socially
- IV. Abuse in relationships occurs in a cycle
 - A. Three fairly predictable cycles or phases
 1. Tension Build-up
 - a. increase of irritability and frustration
 - b. inappropriate behavior towards partner
 - c. increased effort to appease by partner being abused
 2. Battering Incident - Abuse
 - a. abuser starts violence in effort to teach partner a lesson
 - b. dangerous for helpers to intervene, but victim may be forewarned and need a safe place to go
 - c. victim often denies the seriousness of the incident
 3. Calm, Respite, - "Honeymoon Period"
 - a. abuser uses kind and loving behavior
 - b. victim believes abuse is over for good
 - c. victim often is rewarded with gifts
 - d. victim is unaware of pattern
 - B. Unless something happens to interrupt the cycle, the battering and abuse will get worse
 - C. Abuse is a learned pattern of behavior
 1. See it happen in families
 2. Observe it in society
- V. What to do if you are being abused
 - A. Form a support network for yourself
 - B. Know the hotline and help numbers
 - C. Get counseling for yourself to raise your self-esteem

- VI. **Avoid Abuse by**
 - A. **Working to develop a good self-esteem**
 - 1. **being confident and in control of life is a sure way to stop allowing abuse**
 - B. **Become assertive**
 - 1. **must look at pay-offs and losses of assertive behavior**
 - 2. **being assertive may mean knowing when to leave a situation periodically**
 - C. **Learn problem-solving methods for conflict**
 - 1. **define problem**
 - 2. **brainstorm solutions**
 - 3. **evaluate the brainstorming and narrow your focus**
 - 4. **decide on one solution**
 - 5. **develop a plan to implement the solution**
 - 6. **re-evaluate at another time in future**
 - D. **Learn to state your feelings positively**
 - 1. **learn and practice good I-messages**
 - 2. **get in touch with your feelings**
 - E. **Learn stress management**
 - F. **Review role relationships**
 - 1. **define balance of power**
 - 2. **define male and female relationship of power**
 - G. **Recognize types and cycle of abuse**

By Lynette Boylen



RECOGNIZING ABUSIVE RELATIONSHIPS

Types of abuse in relationships

1. Threats and psychological abuse
2. Physical abuse
3. Male privilege
4. Economic abuse
5. Emotional abuse
6. Sexual abuse
7. Anger and intimidation
8. Isolation: restricting freedoms

Cycle of Abuse

1. Tension Build-up
2. Abusive Incident
3. Calm and Respite

What can be done to avoid abuse?

1. Develop a positive self-esteem
2. Become assertive in your communication
3. Learn a problem solving approach to conflict
4. Learn to state your feelings in a positive way
5. Learn stress management techniques
6. Define roles in relationships for power balance
7. Recognize types of abuse and cycle of abuse

ABUSED OR ABUSIVE?

AM I IN AN ABUSIVE RELATIONSHIP?

Yes, you may be in an abusive relationship if you:

- *Are frightened of your partner's temper
- *Are often compliant because you are afraid to hurt your partner's feelings or are afraid of your partner's anger
- *Have the urge to "rescue" your partner when your partner is troubled
- *Find yourself apologizing to yourself or to others for your partner's behavior when you are treated badly
- *Have been hit, kicked, shoved or had things thrown at you by your partner when he or she was jealous or angry
- *Make decisions about activities and friends according to what your partner wants or how your partner will react
- *Drink heavily or use drugs
- *(For some people) Have been abused as a child or seen your mother abused

Yes, you may be an abuser if you:

- *Are very jealous
- *Sulk silently when upset
- *Have an explosive temper
- *Criticize and put down your partner a lot
- *Have difficulty expressing feelings
- *Drink heavily or use drugs
- *Believe that it is the male role to be in charge, or have contempt for women
- *Are protective of your partner to the point of controlling
- *Control your partner's behavior, money, and decisions
- *Have broken things, thrown things at your partner, hit, shoved, or kicked your partner when angry
- *(For some people) Were physically or emotionally abused by a parent
- *(For some people) Have a father who abuses (or abused) his wife

Material used with permission from: "Am I in a Battering Relationship?" by Barrie Levy,
Skills for Violence-Free Relationships, © 1984, (p.82),
Jr. League of Los Angeles: Southern California Coalition on Battered Women;
P.O. Box 5036, Santa Monica 90405

PRIMARY OBJECTIVE AREA: Health/Wellness
CROSS REFERENCE OBJECTIVE AREA(s): Personal Power
NAME OF ACTIVITY: Self-Defense
MATERIALS NEEDED: Handouts #1 and 2
Paper, Pens and Pencils

AGE GROUP: Teens/Adults
READING LEVEL: Intermediate and up
GROUP SIZE: Any
TIME NEEDED: 1 to 2 Hours or more

PURPOSE

1. To identify the types of, and places where assault frequently occurs.
2. To identify the best way to prevent assault or respond to the threat: self-defense places to avoid, etc.
3. To identify services and resources for help: medical, police, court procedures, counseling, alternatives.
4. To be able to practice behavior/procedures that promote personal safety.
5. To learn to limit vulnerability in everyday life and be aware of assertive behavior to fend off attacks.

DIRECTIONS FOR ACTIVITY:

1. Give out Fact or Myth Test, (Handout #1) Take, Correct, and Discuss. Use statistics sheet of facilitator's notes for discussion.
2. In preparation, read Facilitator Notes and share information with the group.
3. Review and Discuss - Option System. Use overhead projector and facilitator's notes and Handout #2. Use brainstorming and discussion to review methods they can use for option 1 and 2. Review their own lifestyles.
4. Introduce Sequence of Rape with overhead projection. All rapes go in this sequence.
5. Discuss or read aloud Handout #3 and #4. Talk about the use of friends and support groups for help and counseling.
6. Using Handout #5 as a guide, have participants develop a Services and Resources list with phone numbers that identifies help in the community where they live. (For them to keep.) (Encourage this for homework.)
7. Optional: Ask a professional from one of the organizations on the Services and Resources list to be a guest speaker.

STATISTICS

Sexual assault is the fastest growing crime in America.

It is the oldest crime on record.

A sexual assault occurs every 60 seconds somewhere in the U.S.

1% of rapes result in murder of the victim.

70 - 80% occur during another crime (burglary, etc.).

50% of the sexual assaults happen in the home of the victim.

50% of sexual assaults occur during the daylight hours.

85% of assaults are known to their victims.

90% of all sexual assaults involve persons of the same race.

50% of all sexual assaults are planned and statistics show assailants tend to rape more than once.

According to surveys done by the U.S. Census Bureau, the FBI and the National Opinion Research Center 3.5% - 10% of sexual assaults are reported.

Using conservative estimates, experts calculate that a woman's chance of being sexually assaulted at some point during her life is an appalling 1 in 10.

National figures show there were 154,000 sexual assaults in 1983 and 186,000 in 1984.

Most victims range in age from 13 to 33 years.

Most assailants range in age from 15 to 34 years.

40% of assailants are married or in a consenting sexual relationship.

The stereotype of the 'dirty old man' is not accurate in regard to incest/child sexual abuse. According to one study, half of all abusers were under age 31, and only 10% were over age 50.

Current national statistics indicate that 1 out of 4 females and 1 out of 6 males will be sexually assaulted before age 18.

In cases where children are sexually assaulted, 75-80% of the perpetrators are known to the victim.

It is estimated that 100,000 to 500,000 children are sexually assaulted annually in the U.S.

**Cornerstone Sexual Assault Services,
24 -Hour Crisis Intervention Services,
(616) 774-3535, Grand Rapids, MI**

**PERSONAL SAFETY FOR WOMEN
CONCEPTS FROM STEPHEN THOMPSON, CMU
SEXUAL ASSAULT FOR WOMEN
OPTION SYSTEM OF SEXUAL ASSAULT PREVENTION**

Option 1 - Lower Your Vulnerability

Using the tips presented in handout number 2, lower your opportunity to be assaulted by eliminating behaviors which make you vulnerable. Things like leaving your doors unlocked, not pulling shades at night, walking alone at night, and opening a door when you have not identified the caller. By lowering your vulnerability you lower your chances of being assaulted.

Option 2 - Be Assertive In Your Behavior

A potential rapist looks for a woman they can take control of and gain power over. Remember rape is not an act of passion, but an act of power. The assertive woman will be less likely to be attacked. Being assertive means walking with head held high and with a confident stride, speaking with firmness, saying no and meaning it. The assertive person has control of the situation, and this behavior will ward off a potential rapist.

MOST RAPES CAN BE AVERTED BY THESE TWO OPTIONS. IF YOUR LIFE IS IN DANGER, THEN GO TO OPTION 3. TEACH OPTION 3 TO ADULTS ONLY AND PERSONS WHO CAN USE GOOD JUDGMENT. THIS OPTION WILL PERMANENTLY DISABLE A MAN.

Option 3 - Using Body As a Weapon

If your life is in danger:

- a. Gouge eyes of the attacker with your thumbs.
- b. Crush a testicle in one hand.

Both of these options should be demonstrated by someone trained in the Option system. The first two options will protect in most situations.

THE OPTION SYSTEM OF SEXUAL ASSAULT PREVENTION

1. REDUCE VULNERABILITY

2. USE PSYCHOLOGY AND ASSERTIVENESS AS A WEAPON

3. USE BODY AS A WEAPON

Adapted from materials by: Stephen M. Thompson
Central Michigan University
Mt. Pleasant, MI

SEQUENCE OF RAPE

1. SELECTION OF TARGET

2. TESTING OF VICTIM

3. INTIMIDATION

4. SEXUAL TRANSACTION

5. TERMINATION

Adapted from materials by:
Dr. James Selkin - Violence Research Institute
Denver, Colorado

WHAT'S MYTH AND WHAT'S FACT

Please circle one. (M for Myth and F is for Fact)

Myth Fact

- | | | |
|---|---|--|
| M | F | 1. Some people actually enjoy being sexually assaulted. |
| M | F | 2. One percent of sexual assaults end in murder. |
| M | F | 3. In sexual assaults, sex is the weapon used by the assailant. |
| M | F | 4. Sexual assault is an act of passion. |
| M | F | 5. Some people ask to be sexually assaulted. |
| M | F | 6. More than 50% of all sexual assaults are planned and statistics show that assailants tend to assault again. |
| M | F | 7. Assailants are generally young men between the ages of 15-30 years. |
| M | F | 8. Victims are most often sexually assaulted by strangers in dark alleys. |
| M | F | 9. An unwilling person cannot be sexually assaulted. |
| M | F | 10. Assailants are generally sexually sick and degenerate men. |
| M | F | 11. The majority of sexual assault victims are between the ages of 13-24 years. |
| M | F | 12. Most sexual assaults occur during evening hours. |
| M | F | 13. 85% of assailants are known to their victims. |
| M | F | 14. Women cry "rape" to get even with a man or to protect her reputation. |
| M | F | 15. A sexual assault occurs every 60 seconds in the United States. |
| M | F | 16. Sexual assault is the oldest crime on record. |

WHAT'S MYTH AND WHAT'S FACT

Please circle one.

- | | | |
|----------|----------|--|
| <u>M</u> | F | 1. Some people actually enjoy being sexually assaulted. |
| M | <u>E</u> | 2. One percent of sexual assaults end in murder. |
| <u>M</u> | F | 3. In sexual assaults, sex is the weapon used by the assailant. |
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LIMITING VULNERABILITY
Option 1 of the Option System

Environmental Vulnerability:

In your Residence

Vulnerable Areas

Limiting Vulnerability

**Apartments and first-floor
residency**

**Avoid first-floor residency if possible due to easy
access to windows, sliding glass doors, etc.**

Sliding Glass Doors

**Keep secured (locked). A wooden dowel placed along
the door runner will prohibit the door from being
opened.**

Windows

Keep secured, especially ground level windows.

Doors

**Keep secured with a deadbolt. Locks within a door-
knob are easily mastered to gain entrance. If door
has a window, make sure deadbolt is out of reach if
window is broken.**

Lack of Viewing Area

**Install a viewing device in the door to allow you to
see visitors.**

Other

**A "mail slot" is beneficial to allow you to receive
visitor's identification without opening the door.
Apartment complexes should keep main doors
secured at all times, allowing only residents and
management to have keys. Use of an intercom system
for visitors seeking entrance is beneficial. Make
people prove their identity - call their employer to
verify if you have doubts.**

Environmental Vulnerability:

Out of Residence

Unfamiliar Surroundings

**Be aware of what is around you. Look for avenues
of help if it were needed. Know where you are
going (address, etc.). Do not wander.**

Poorly Lit Areas

Travel in well lit areas when at all possible.

Traveling (walking) Alone

**Avoid traveling alone when possible. Inform someone
of your situation (time you will arrive, return, etc.)**

Overnight Accommodations

**A triangular wedge of wood as a doorstep is
recommended. Do not open doors to unexpected
guests. Know where to go if help is needed. Avoid
rooms near stairways and elevators.**

Vulnerable Areas

Car Trouble

Limiting Vulnerability

Wait in your vehicle for help. Ask anyone who stops to call someone for you. Do not leave your car if at all possible. If you must leave with a stranger for any reason, leave a note on the dashboard with your name, the time you left your car, and a description of the car and who you left with. Leave your keys in the ignition (you should have a spare in your wallet or at home) and get out of the car on the passenger side.

Character Vulnerability

Posture/Appearance

Body language is strong. Be assertive in how you present yourself. Do not appear intimidated. Be self-assured and at ease.

Language

Take part in conversation. Have control yet do not be intimidating.

Social Vulnerability

Unfamiliar Groups/Gatherings

Do not go to unfamiliar gatherings alone if possible. If going with a person(s) you do not know well, tell someone else their name, where you are going, etc. Do not leave a gathering with a stranger. If you do, tell a friend who he is and where you are going.

REMEMBER - If possible, avoid situations where you can be targeted. This means that you should be aware of vulnerable situations.

HOW AWARE ARE YOU?

At this time in your life, the last thing you probably want to hear is "be careful . . . rape can happen to you."

Sexual assault can happen any time, any place to anybody and that includes YOU. Therefore, it is important to be conscious of situations and habits that can make YOU a potential sexual assault victim. Preventative measure and practices now can reduce the chances of YOU becoming a victim.

Think for a minute. When you leave home, do you tell at least one person where you are going? If no one is there, do you leave a note explaining your absence? Do you mention who you will be with? When you get to your destination, do you call home to let someone know that you arrived safe?

On a date, do you say no when you mean no? At a party, do you leave with young men that you don't know well?

Do you often walk alone at night? Do you know what businesses and/or homes are in the area that can offer you safety if necessary? Do you walk with a purpose? Or are you lost in thought? Are the streets you walk on well-lit?

When you are home alone or with younger children, are the doors and windows securely locked? Are the porch lights turned on? When someone is at your door, do you identify them before opening the door? Are curtains and shades closed at night?

When you drive, do you check inside the car before you enter? Do you lock the doors?

And finally, do you hitchhike? If you do, stop! If you "just have to get there," call a friend or relative to pick you up. Otherwise, buy a car or bike. You have no way of knowing if the "kind" stranger is going to take you where you want to go - safely.

Self-awareness is the key to self-protection. When you become aware of those situations and habits that can make YOU a potential sexual assault victim, then YOU can take the necessary steps to protect yourself.

No one can tell you what course of action to take if you are attacked. Women have vomited, urinated, screamed, faked a pregnancy or seizure, fought, etc., etc., etc. the list is endless. Anyone of these tactics could work, but none are guaranteed to work. The key word again is awareness. Awareness of your surroundings, your situation and yourself.

At this time in your life, the last thing you want to hear is - "be careful . . . rape can happen to you." But it can. HOW AWARE ARE YOU?

Cornerstone Sexual Assault Services,
24-Hour Crisis Intervention Services,
(616) 774-3535 Grand Rapids, MI

PREVENTING SEXUAL ASSAULT

Protect Your Body ... Use Your Head

Sexual assault has received increasing public attention in the last few years. However, for many people the issue is still clouded by myths and misconceptions. The primary purpose of this handout is to inform community members about sexual assault and its prevention.

A secondary purpose is to briefly outline the Michigan Criminal Sexual Conduct law, and the medical needs and emotional reactions common to victims of sexual assault.

Many additional resources are available on this subject. If you would like to learn more about sexual assault, please ask your facilitator.

Sexual Assault

In this country, a sexual assault is reported every nine minutes. Yet law enforcement officials estimate that the number of sexual assaults which actually occur are ten to twenty times the number reported.

Sexual assault is any sexual activity involving a person who does not consent. It includes penetration or touching of intimate body parts, same-sex assault, sexual abuse of children and incest.

Sexual assault is not a crime of sexual desire or passion. It is a crime of violence, designed to humiliate and degrade the victim.

The Victims

Anyone can become a victim of sexual assault at any time. It is a myth that only young attractive women are the victims of this crime. Victims have ranged in age from infancy to 91 years. It is not uncommon for men and boys to be sexually assaulted by other men and by women.

The Assailants

The majority of sexual assaults occur between people who know one another - acquaintances, neighbors, relatives. Offenders often approach their chosen victims in ways that seem harmless or friendly at first.

Most assailants are not mentally deranged nor sexually unfulfilled. Very often rapists are married or have other healthy sexual relationships available to them. The major difference between a sexual assault criminal and a normal person is that she/he has a greater tendency toward violence and aggression.

Men who expose themselves may not physically harm you at that time. However, studies show that exhibitionists sometimes escalate to more violent acts in the future.

The Setting

Sexual assaults don't just happen in dark alleys or as a result of hitchhiking. Studies show that over one-half of all reported sexual assaults occurred in a residence.

Sexual assaults occur more frequently during the spring and summer months, during weekends and during the night.

Prevention

The first step in protecting yourself is to realize that YOU could be a victim of sexual assault. The best prevention is to avoid potential rape situations. Always be aware of your surroundings: people, landscape, buildings, and plan where you could run for help if you need it. Thinking through and rehearsing how to foil an attack can prepare you to act quickly if an assault occurs.

On Foot

Avoid walking alone. Walk with a friend whenever possible.

If sidewalks are dark, walk near the curb or down the middle of the street.

Be aware of houses with lights on, or open businesses, in case you have to run for help.

Wear comfortable clothing and shoes that you can run in.

Always walk briskly and confidently.

Be aware of people and cars around you. Take note of any activity which seems unusual to you.

If you walk to the same destination frequently, vary your route.

Carry a whistle on your keychain, or carry a hand alarm. Keep it in your hand ready to use.

If you are being followed by a vehicle, turn around and walk quickly in the opposite direction.

If you suspect someone is following you, turn around confidently and check. If so, scream loudly, blow your whistle or activate your hand alarm while running to a lighted house or open business.

At Home

Make sure all doors have good deadbolt locks and a chain lock or peephole.

Be sure all windows have locks also. For sliding doors or windows, place a wooden or metal rod between the movable pane and the opposite casing.

Use your locks. Make sure you lock your door even when you are leaving for only a few minutes, and when you are inside.

Be careful about who you let into your home. Insist that visitors identify themselves before opening your door.

If a service person comes to your door, ask the individual to produce an I.D. If you have any doubts, ask the person to wait outside while you call his/her supervisor or company.

Never hide your house key under the doormat, over a door frame or in a flower pot. Have a duplicate key made and leave it with a friend or trusted neighbor.

On your mailbox, list only your first initial instead of your whole first name, and put extra names on it if you live alone.

List only your first initial in the phone book and, if possible, do not list your address.

Never tell a stranger or someone you do not know well that you are home alone.

When you enter elevators, always locate the emergency button and stay near it.

If you suspect someone is in your home when you return, leave quietly and call the police immediately from a neighbor's phone.

In Your Car

Check the back seat of your car before entering.

Park in areas that will be well-lighted when you return. Park as close as possible to your destination and walk to your car with others.

Always lock your car door as soon as you get in your car. When possible, keep windows at least partially rolled up.

When walking to your locked car, have car keys ready in your hand to open the car door.

If you must leave your car with a parking attendant, leave only your ignition key.

If you have car trouble, raise your hood. Then get back in your car and wait. If another motorist offers to help, roll your window down an inch and ask him or her to go on to the next gas station or phone and call the police or repair truck.

If you want to help the driver of a disabled vehicle, do not stop and get out. Instead, note the location, drive to a nearby phone and call the police, giving location information.

If you suspect your car is being followed, drive to a busy, well-lighted place and call the police or go to the police station. Do not drive to your home.

If you are stopped at an intersection and someone tries to get in your car, blow the horn, and flash your lights, and drive straight through the intersection if possible.

Hitchhiking

Hitchhiking is an unsafe practice for anyone. When you enter an unknown vehicle, you are reducing your options for getting away from a potential assailant.

If you do not have your own car, try to use available public transportation or arrange rides with friends.

Public Transportation

Wait in busy, well-lighted areas

On buses, sit near the driver, especially if the bus is almost empty.

When you get off the bus, be aware of the people who get off with you.

In Case of Attack

Because each potential assault situation is different, there is not one solution for avoiding or aborting an attack. The response that is successful in one situation may not work with another assailant or in a different location.

The best prevention is to assess the situation and then use your head. In deciding what response is best, you will want to consider such things as the number of assailants, whether or not the assailant(s) has a weapon, and your surroundings. Are there people close by who would hear your screams, or is there a well-lighted house to run to? Look at the behavior of the assailant; is he/she angry and violent or is he/she hesitant and unsure? Finally, consider your own physical and emotional abilities and determine what response is best for you.

Resistance can take many forms including talking to the assailant, screaming, running, and fighting back. If you choose to resist physically, remember your goal is to get away unharmed. Wait for an opportunity, then create a moment of escape. The assailant will probably expect you to panic, freeze, and be quiet. If you respond quickly and temporarily stun or disable the attacker, you may still have a chance to get away.

Make noise. Don't worry about creating a scene. Noise will attract attention and may frighten your attacker away.

If you are grabbed from behind, kick for the knee and scrape your heel down the attacker's shin and stomp hard on the instep.

Kicking in the groin is seldom successful and your leg could be grabbed in the process.

Take a deep breath so that your feelings of panic will not paralyze you. Try to keep your mind clear enough to assess the situation.

If you are unable to escape or your assailant has a weapon, concentrate on the attacker's identity. Height, weight, hair and eye color, race and distinguishing characteristics will help the police find him or her.

Medical Care

It is very important to obtain medical care after being sexually assaulted. Even if you don't think you're hurt, you may have internal injuries or may have been exposed to sexually transmitted disease.

The medical examination is also the best time for evidence to be collected. This evidence will be analyzed in a laboratory to determine blood type and other identifying information about the attacker. Should you decide to prosecute, this information can be important evidence in the trial.

You may wish to see your own doctor or select a hospital of your choice for a medical examination. However, your physician or hospital may not be prepared to collect medical evidence and may prefer not to perform an examination following a sexual assault. Some doctors and nurses have been specially trained in collecting evidence and in treating sexual assault patients.

The Law

Michigan has a new Criminal Sexual Conduct statute which replaced the old rape law. The law protects men, women, and children who have been sexually assaulted. People who have filed for separation or divorce and are living apart are also protected against sexual assault by their former spouse.

The law prohibits assaults involving both sexual penetration (oral, anal, or genital) and sexual contact (touching or forced touching of genitals, groin, inner thigh, or breast). The maximum penalty for each crime varies according to the circumstances surrounding it.

Victims who choose to prosecute need not disclose their past sexual activities in court. It is also not necessary to prove that the victim resisted to the utmost or sustained injury from the assault.

Reporting

Many people hesitate to report a sexual assault to the police out of a fear of retaliation from the attacker, because of fear of the reactions from family or friends, or fear of the prosecution process. But if you are sexually assaulted, keep in mind that your rights have been violated, your body has been injured, and perhaps your life has been threatened. YOU have done nothing horrible, your attacker has! The shame should be if the attacker were to assault again.

A report to the police does not necessarily mean you must prosecute the assailant. The information you give the police can be used to learn more about trends, locations and methods of assault. It may also be used to help identify the same assailant if he or she assaults again.

If you do wish to press charges against the assailant, the police will ask you to sign a complaint; and you may be asked to identify the assailant in a line-up. You will be required to testify as a witness in court at least two times. You will not need to hire an attorney since the county Prosecuting Attorney handles your case in court. There will be no fees for you to pay.

If you decide not to report to the police, you can remain anonymous and still give information about your assailant and the attack. Ask your facilitator about how an anonymous report can be filed in your community. The interviewer will take information about the criminal elements of the assault by the phone and will file this anonymous report with the police.

You need not give your name and you will have no involvement with the police or courts. Anonymous reporting is one way to turn an ugly situation into something that can help other people.

Impact on the Victim

A sexual assault is traumatic for the victim. Even when the attack was attempted but not completed, the victim will feel upset and frightened.

Victims express their feelings in many ways. Some respond hysterically and either cry or laugh. Many others seem to be in a state of shock, appearing numb or stunned or they may appear calm. No matter how the victim behaves, all victims feel terrified and overwhelmed by the assault.

The victim may feel many intense emotions all at once. Usually she/he is left feeling powerless and out of control. She/he may also feel humiliated and degraded and is often embarrassed or ashamed. The victim may blame her/himself for not preventing the assault or she/he may feel enraged at the assailant and want revenge.

All of these feelings are to be expected after an assault and may come and go. They will not come in any specific order. The victim may experience all of these emotions, only some of them, or perhaps he/she will experience more feelings than these. Even when the intense feelings are gone, it is not uncommon for the victim to experience insomnia, mood swings or depression.

Strong feelings about the assault may return months or even years later. Often these emotions are triggered by an event such as seeing the assailant, or by stress from a life change such as marriage or a new job.

Young children may have difficulty talking about a sexual assault. This may be because they do not understand what happened or they feel it is too "dirty" to talk about. Problems such as bedwetting, nightmares, fear of adults may occur. However, these behaviors may result from many types of problems and do not necessarily indicate that a sexual assault has occurred. Parents can help by assuring the child who has been sexually assaulted that she/he is not a "bad" person and that she/he is still loved.

It is important for a victim of any age to be allowed to talk about the sexual assault. Friends or relatives can help by listening and giving support without judging the victim. Counseling soon after the assault can help the victim understand his/her feelings and perhaps prevent more severe reactions that could come later.

Sexual assault is not so devastating that a person can never get over it. It will take time to regain the feeling of safety and a sense of control. It is an experience that can be worked through. The victim of sexual assault will, in time, return to previous activities and again be able to feel good about himself/herself. Although the experience will never be forgotten, it will fall into perspective and will be remembered as an unhappy event that happened. Eventually, it will no longer affect the person's entire life.

What You Can Do

The most important thing you can do to prevent sexual assault is to realize that YOU can be attacked. Practice being aware of your safety all the time.

Pass this handout on to your friends, children, relatives, and neighbors.

Talk to other people about sexual assault and make them aware that it is a serious problem.

Encourage your school or organization to develop programs for prevention.

Information for victims of domestic violence

Information about shelters and alternatives to domestic violence is available in Michigan from a STATEWIDE 24-HOUR TOLL-FREE HOTLINE AT 1-800-292-3925

If you are the victim of domestic violence you can ask the county prosecuting attorney to file a criminal complaint.

You also have the right to go to court and file a petition requesting an injunctive order from domestic abuse which could include the following:

- o An order restraining or enjoining the abuser from entering onto premises.
- o An order restraining or enjoining the abuser from assaulting, beating, molesting, or wounding you.
- o An order restraining or enjoining the abuser from removing minor children from you, except as otherwise authorized by a custody or visitation order issued by a court of competent jurisdiction.

MICHIGAN SERVICES AND RESOURCES FOR HELP

Fill in address, phone number, and contact person or information:

1. **Police**

2. **Medical (emergency room)**

3. **Assault Crisis Center**

4. **Women's Crisis Center**

5. **SAFE House (if you have one)**

6. **SOS Crisis Center**

7. **Sheriff's Department**

8. **Protective Services**

9. **Domestic Violence Hotline 1-800-292-3925**

10. **National Child Abuse Hotline 1-800-422-4453**

11. **Runaway Assistance Program 1-800-292-4517**

12. **Lawyers Referral Service 1-800-292-7850**

PRIMARY OBJECTIVE AREA: Health and Wellness

CROSS REFERENCE OBJECTIVE AREA: —

NAME OF ACTIVITY: Evaluation

MATERIALS NEEDED: Paper, Pencil, Envelopes, Stamps

AGE GROUP: Teens and Up

READING LEVEL: Intermediate

GROUP SIZE: Any

TIME NEEDED: 15 min. to 30 min.

PURPOSE

1. To evaluate material covered in each unit.
2. To provide an opportunity to do self assessment.
3. To practice written communication skills.
4. To help develop and reinforce long term goals.

DIRECTIONS FOR ACTIVITY:

1. At the end of each unit, have students compose a letter themselves. In the first unit covered (usually Self Awareness), have students address an envelope to themselves. Collect the envelopes to send with the letters upon completion of the whole course.
2. Explain to students that they will have an opportunity to evaluate what they have learned. They will be writing an ongoing letter to themselves about what they have learned or experienced as a result of each unit. (The length of the letter is up to the facilitator). The facilitator should stress that this letter allows them to look back, evaluate and maybe even write down goals for the future. The facilitator may want to provide a sample letter for the unit that has just been completed.
3. Have students write the letters while in class. The facilitator should circulate among the students to assist anyone who may have difficulty.
4. Collect letters. Read them. At the end of each unit, return student letters so that they may write additional evaluations.
5. When the course is complete, send the letters to each student.

Health and Wellness Bibliography

A partial listing of books, articles, and curriculums which our writers and editors recommend. For additional help in selecting relevant reading or audio-visual materials, please call the Michigan Vocational Education Resource Center at Michigan State University: 1-800-292-1606.

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SUCCESSFUL LIFE SKILLS

SECTION 4

OBJECTIVE: RESOURCE MANAGEMENT

Upon completion participants will be able to identify and utilize resources in order to meet their physical, social and emotional needs.

Supporting Objectives: Participants will be able to:

- Utilize community resource agencies to meet their needs.
- Describe human and community resources to which they personally have access.
- Identify sources of legal aid.
- Interpret the legal rights of women.
- Use the decision-making process when making personal decisions.
- Generate and practice using problem-solving strategies.
- Analyze and improve their management of time.
- Design a personal or household budget.

PRIMARY OBJECTIVE AREA: Resource Management

AGE GROUP: Teen/Adult

CROSS REFERENCE OBJECTIVE AREA(s): Personal Power

READING LEVEL: Basic

NWE OF ACTIVITY: Community Resources/Services

GROUP SIZE: Any

MATERIALS NEEDED: Handouts #1 and #2
Phone Book, Pencils/Pens, Paper, Prizes (Optional)

TIME NEEDED: 1-2 Hours

PURPOSE

DIRECTIONS FOR ACTIVITY:

1. To identify "helping" resources in the community.
2. To participate in group problem solving.
3. To have a list of community resource agencies that will meet participants needs when they arise.

1. Talk about the importance of knowing what community resources are available to them.
2. Handout copies of Handout #1 and Handout #2, phone books and pencils/pens. The General Resources (Handout 2) is a guide to find specific organizations and their phone numbers for your community.
3. Break the group into groups of three to six participants. To make a different mix of participants, ask the class to count off. Example: If there are twelve participants and you would like four groups of three participants, ask them to count off one through four. Then identify all ones, twos, threes, and fours, as a group.
4. Assign each group the task of completing two of the seven pages allowing 30 to 45 minutes to complete. (Offer a prize of some sort to the group that gets the most correct. Example: Cup of coffee, coke, dismissal 15 minutes early, notebook, pen, etc. The prize enhances the participants enthusiasm; however, it is optional).

PURPOSE

DIRECTIONS FOR ACTIVITY:

5. When the groups come back together, ask that a spokesperson from each group read their answers for the others to copy on their worksheets. Tell participants that they only need copy numbers that may be useful. Encourage any participants to offer choices/options that they know about that were not included by the spokesperson.

NOTE: To the facilitator:

- There are toll free numbers listed in the Health/Wellness section under the following activities: Sexually Transmitted Diseases and Self-Defense. A list of toll free numbers could be made in addition to the local Community Services/Resources if you feel it is desirable.

Community Services

DIRECTIONS: Please list phone numbers, addresses, and other important information about services in your area which you would contact for the following situations:

Alcohol Problems

Ambulance

Birth and Death Certificates

Blood Donations

Blood Pressure

Bus Service

Chamber of Commerce

Chest X Ray

Child Abuse

Child Care

Children's Health Services

COMMUNITY SERVICES

Civil Rights

Civil Service Information

Clothing and Furnishings

Community Centers

Consumer Information & Protection

Counseling - Adults, Family & Marriage

Counseling - Children & Adolescents

Credit Counseling

Crisis Intervention

Dental Services

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COMMUNITY SERVICES

Doctors

Domestic Violence

Draft Counseling (Military Service)

Drug Abuse

Emergency

Employment

Emergency Shelter

Family Planning & Pregnancy Counseling

Mental Retardation

Missing Persons

Museums

Nursing Home Care Information

Nutrition Services

COMMUNITY SERVICES

Parks & Recreation

Poison

Police

Probation & Parolee/Prisoner Services

Public Utilities

Rape

Runaways

Senior Citizens Services

Social Security

Suicide Prevention

Unemployment Compensation

Veterans Services

Volunteer Services

Voter Registration

Youth Services

Other:

GENERAL RESOURCES

Your community may have all or some of the resources listed below:

Alcoholism: See yellow pages under Alcoholism Information and Treatment Centers or white pages under the name of your city, town, or county or your State Government - Health and Environment Department - behavioral Health Services Division or Alcohol.

Child Abuse: Call Social Services, listed in your white pages under your State Government, Health and Human Services Department, Social Services Division.

Child Care: See yellow pages under Day Nurseries and Child Care, Homes and Institutions, or Sitting Services.

Child Support: See white pages under your State Government - Human Services Department of - Income Support Division - Child Support Enforcement.

Churches: See yellow pages under Churches.

Counseling: See yellow pages under Child Guidance, Marriage and Family Counselors, Mental Health Services, Religious Counseling or Social Service Organizations.

Crisis Lines: See inside front cover of your phone book or yellow pages under Crisis Intervention Service or white pages under your city, town or county, or under Rape Crisis Center or Suicide Prevention Center or call information.

District Attorney: See white pages under the name of your county.

District Court Clerk: See white pages under your State Government - District Court Offices.

Drug Abuse: See yellow pages under Drug Abuse and Addiction - Information and Treatment.

Education: See yellow pages under "schools" or "training" for local contacts.

Emergency Housing: See white pages under the name of your city, town or county. You can also call the closest domestic violence shelter or program, listed under "Domestic Violence Shelters."

Employment: See yellow pages under Employment Agencies; Employment Contractors - Temporary Help; Employment Service - Government, Company, Fraternal, etc.; Vocational Guidance; Employment Training Service or white pages under your State Government - Employment Security Department.

Family Violence: See Domestic Violence, Child Abuse, Crisis Intervention, Hotline under Community Services Numbers in front of phone book. If none is close to you, call your local police or sheriff's department.

Financial Assistance: See white pages under your State Government, Human Services - Income Support.

Legal Services: See yellow pages under Lawyers or Legal Clinics or see white pages under the name of your county.

Medical Services: See yellow pages under Clinics - Medical, Hospitals or Physicians and Surgeons.

Mental Health Services: See yellow pages under Mental Health Services.

Police: See inside front cover of phone book or white pages under the name of your city or town.

Sheriff: See inside front cover of phone book or white pages under the name of your county.

Social Services: See yellow pages under Social Services or white pages under your State Government, Health and Social Services Department.

Women's Organizations: Call the Commission on the Status of Women: 1-800-432-9168, local Chamber of Commerce, or use Women's Yellow Pages if available in your community.

PRIMARY OBJECTIVE AREA: Resource Management

CROSS REFERENCE OBJECTIVE AREA(s): Personal Power

NAME OF ACTIVITY: Networking as a Resource

MATERIALS NEEDED: Handout #1-6, Paper, Pencils/Pens, Overhead projector

AGE GROUP: Teens and Up

READING LEVEL: Intermediate

GROUP SIZE: Any

TIME NEEDED: 3/4 - 1 Hour

PURPOSE

DIRECTIONS FOR ACTIVITY:

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- | | |
|---|--|
| <ol style="list-style-type: none">1. To define networking and how to build a network.2. To learn how to benefit from support through networking.3. To be able to define oneself as a resource.4. To learn that other people are resources to accomplishing our goals.5. To set goals for improving the networks participants have and how to do this. | <ol style="list-style-type: none">1. Define NETWORKING. Put transparency up (Handout #1) or pass out Handout #1.2. Read Handouts #2, 3 and 4 and discuss. (Handouts 3 & 4 may be made into transparencies).3. Ask participants to list 5 ways they can be a resource to other people. Assist members of the group who are having difficulty.4. Ask participants to write three ways they participate in networking. Put on blackboard examples of how participants use networks. Use examples of your own also.5. Divide groups into two and ask them to see who can come up with the longest list of network sources for Mary in Handout #3. Reconvene to larger group to determine which group had the most sources.6. Handout #6 is optional. It may be useful to further illustrate one aspect of networking or help fulfill the needs of the class.7. Close by restating the importance of seeing oneself as a resource who can benefit greatly by establishing various networks. |
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NETWORKING

A **NETWORK** is a group of individuals who are linked by one or more shared values/goals. **NETWORKS** are made up of **SELF-RELIANT PEOPLE AND OF INDEPENDENT GROUPS.**

NETWORKING IS HOW PARTICIPANTS CONNECT, ONE PERSON WHO HAS A NEED CONTACTS ANOTHER WITH A RESOURCE, AND NETWORKING HAS BEGUN.

NETWORKING

Networks are made up of self-reliant people and independent groups who are linked by one or more shared values/goals.

Networking is defined by self interest. If a person has a need, he/she contacts another with a resource. A good example of this is job networking. If a person is out of work and a skilled job hunter, one of the things that he/she will do first is to ask friends and business associates if they know of companies that might use someone with his/her talents. When the job seeker does this, he/she becomes part of a work network.

Networks can provide 1) moral support, 2) advice, 3) encouragement, 4) supportive listening. They can also provide resources and references. They also may provide opportunities to share common and political concerns.

Networks provide opportunities to give and get. What initially motivates someone to network is his/her own need. What frequently happens is that the person who gives, gets something in return. They may get another service in exchange, a favor or just appreciation. To return to the job seeking example, those who help the job seeker may get a favor returned or the satisfaction of helping another human being.

Every person is a resource. People who identify themselves as resources can take advantage of networking.

POSSIBLE PURPOSES FOR NETWORKS

SUPPORT:

MORAL SUPPORT

- HELP IMPROVE SELF-ESTEEM

ADVICE

- SHARE KNOWLEDGE ABOUT CHILDREN AT DIFFERENT AGE LEVELS

ENCOURAGEMENT

- REMINDERS OF IMPORTANT REASONS FOR STAYING IN SCHOOL

SUPPORTIVE LISTENING

- SHARING PROBLEMS AT SCHOOL, HOME, OR WITH CHILDREN

REFERENCES AND RESOURCES:

INFORMATION

- RECOMMEND BOOKS ON CHILD RAISING
- RECOMMEND BOOKS FOR CHILDREN
- SHARE SOURCES OF COMMUNITY BARGAINS
- SHARE INFORMATION ON CHILD CARE

HELP WITH CONTACTS

- MEET POSSIBLE BABYSITTERS
- FOR EMPLOYMENT

ISSUES:

COMMON CONCERNS

- COMMUNITY CHILD CARE FACILITIES
- FACILITIES FOR CHILD CARE OR SCHOOL

POLITICAL CONCERNS

- LEGISLATION AFFECTING CAR SEAT LAWS
- LEGISLATION RELATING TO TAX BENEFITS FOR PARENTS

TYPES OF CAREER NETWORKS

INTERNAL: MEMBERS WORK FOR THE SAME COMPANY.

EXTERNAL: MEMBERS WORK FOR DIFFERENT COMPANIES.

GEOGRAPHICAL: MEMBERS LIVE IN A DEFINED AREA.

VERTICAL: MEMBERS WORK IN ALL LEVELS OF ONE UNIT (SECRETARY THROUGH GENERAL MANAGER).

HORIZONTAL: MEMBERS ARE EMPLOYED AT SAME LEVEL (ALL DIRECTORS).

OCCUPATIONAL: MEMBERS ARE EMPLOYED IN THE SAME OCCUPATION (TEACHERS).

GENDER: MEMBERS ARE OF THE SAME SEX.

Mary has been at home raising her two children. Besides being a mother, she also does volunteer work at the local hospital, is a member of the PTA, plays bingo every Tuesday night and takes one class a semester at the local community college. Mary's husband recently left her so she is presently seeking a job. List as many resources that she can use for a job seeking network and a supportive friend network that she can use to help her get through this difficult period.

JOB SEEKING NETWORK

SUPPORTIVE FRIEND NETWORK

BARTERING

Bartering--A non-cash form of trade for property or services, or an alternative to paying money for property or services.

Example: You are a self-employed lawyer and perform legal services for a client. In payment for your services, your client, a self-employed painter, does some painting for you. The two of you agree ahead of time on the value of each of your services to be traded so that you are satisfied that the exchange is equal.

Most bartering is done through personal "word of mouth" contacts or NETWORKING.

Example: You have two young children. You need to go to a dentist appointment and do some shopping. You ask your friend with two young children to swap baby-sitting services so you can do your errands. In return you agree upon another time for your friend to leave her children with you to do her errands.

Even in an informal arrangement, as in the exchange above, it is important to set-up the exchange ahead of time so that the expectations are very clear to both parties.

If it is difficult to give a value to the service you can give, the exchange can be made on the basis of equal number of hours; i.e., three hours of baby-sitting for your friend gives you three hours of time from your friend to baby-sit.

If one of you can give hours of baby-sitting and the other can't then a dollar value for the hours must be agreed upon and some property provided to the party who gave the hours, i.e., three hours of baby-sitting for your friend will give you 6 loaves of homemade bread and a dozen cookies, or whatever. Whatever the exchange, the value exchanged must be agreed upon before the transaction takes place. Such an oral contract as this is valid and will stand up in court.

Listed below are some ways to contact others for purpose of informal bartering:

1. Day care centers
2. Churches
3. Co-ops
4. Newspaper ads
5. Ads at stores, i.e., grocery store
6. Yellow pages
7. Friends
8. Family

Bartering Clubs are available to join in some communities. Usually a community co-op will know if one exists near you. These can be set up in different ways.

Example: 1. You are a self-employed accountant. Both you and a house painter are members of a barter club. The organization each year gives its members a directory of members and the services each member provides. Members get in touch with each other directly and bargain for the value of the services to be performed. In return for accounting services you provided, the house painter painted your home. Even though no money was exchanged these services are taxable to both parties on their Federal income taxes. The tax is based upon the fair market value of the services provided that had been agreed upon before the exchange.

Example: 2. You are a member of a barter club that uses "credit units" as a means of exchange. It adds credit units to your account for goods or services you provide to other members, and it subtracts credit units from your account for goods or services you receive from other members. The credit units you have in your account have a monetary value for purposes of income tax and should be included in your income.

However you do it, bartering can be a good way to stretch your resources and put your skills to work at the same time. Whether it be through a less formal network or a formal club, be sure you know ahead of time exactly what is expected of you and what you can expect in return.

GENERAL OBJECTIVE AREA: Resource Management
LEARNING OBJECTIVE AREA(s): Personal Power
TOPIC OF ACTIVITY: Selected Legal Issues
MATERIALS NEEDED: Handouts #1-3 (Selected)

AGE GROUP: Teens and Up
READING LEVEL: Intermediate (Can be read aloud)
GROUP SIZE: Any
TIME NEEDED: 1-2 Hours or as much as you want.

PURPOSE

1. Become familiar with pertinent legal issues and ways to address them.
2. To encourage participants to exercise their rights in an acceptable and effective manner.

DIRECTIONS FOR ACTIVITY:

1. Distribute selected handouts (depending on legal issues of interest to participants). Read together and discuss. Other articles on these or other issues are available from a number of sources. There is an excellent article on credit in Turning Point: A Program For Women In Transition (available in the Resource Center, and also listed in the Bibliography).
2. If any member of the group has a specific problem, perhaps the group can brainstorm solutions. You may also want to analyze a situation with a payoff and loss column.
3. Invite outside speakers for any or all of these topics if that seems appropriate and helpful.

PRE-EMPLOYMENT INQUIRY GUIDE

Michigan Department of Civil Rights
 State of Michigan Plaza Bldg.
 1200 Sixth Avenue
 Detroit, Michigan 48226
 (313) 256-2578
 or
 303 W. Kalamazoo
 Fourth Floor
 Lansing, Michigan 48913
 (517) 373-7638
 In Northern Michigan
 Call Toll Free
 1-800-482-3604

SUBJECT	LAWFUL PRE-EMPLOYMENT INQUIRIES	UNLAWFUL PRE-EMPLOYMENT INQUIRIES
NAME:	<p>Applicant's full name</p> <p>Have you ever worked for this company under a different name?</p> <p>Is any additional information relative to a different name necessary to check work record? If yes, explain.</p>	<p>Original name of an applicant whose name has been changed by court order or otherwise.</p> <p>Applicant's maiden name</p>
ADDRESS OR DURATION OF RESIDENCE:	<p>How long a resident of this state or city?</p>	
BIRTHPLACE:		<p>Birthplace of applicant.</p> <p>Birthplace of applicant's parents, spouse or other close relatives.</p> <p>Requirement that applicant submit birth certificate, naturalization or baptismal record.</p>
AGE:	<p>Are you 18 years old or older? Can only be asked to determine whether applicant is of legal age to work.</p>	<p>How old are you? What is your date of birth?</p>
RELIGION OR CREED:		<p>Inquiry into an applicant's religious denomination, religious affiliations, church, parish, pastor, or religious holidays observed.</p> <p>An applicant may not be told "This is a Catholic (Protestant or Jewish) organization.</p>

SUBJECT	LAWFUL PRE-EMPLOYMENT INQUIRIES	UNLAWFUL PRE-EMPLOYMENT INQUIRIES
RACE OR COLOR:		Complexion or color of skin.
PHOTOGRAPH:		Requirement that an applicant for employment affix a photograph to an employment application form. Request an applicant, at his or her option, to submit a photograph. Requirement for photograph after interview but before hiring.
HEIGHT:		Inquiry regarding applicant's height.
WEIGHT:		Inquiry regarding applicant's weight.
MARITAL STATUS:		Requirement that an applicant provide any information regarding marital status or children. Are you single or married? Do you have any children? Is your spouse employed? What is your spouse's name?
SEX:		Mr., Miss or Mrs. or an inquiry regarding sex. Inquiry as to the ability to reproduce or advocacy of any form of birth control.
HEALTH:	Do you have impairments, physical, mental, or medical which would interfere with your ability to do the job for which you have applied? Inquiry into contagious or communicable diseases which may endanger others. If there are any positions for which you should not be considered or job duties you cannot perform because of a physical or mental handicap, please explain.	Inquiries regarding an individual's physical or mental condition which are not directly related to the requirements of a specific job and which are used as a factor in making employment decisions in a way which is contrary to the provisions or purposes of the Michigan Handicappers' Civil Rights Act. Requirement that women be given pelvic examinations.

SUBJECT	LAWFUL PRE-EMPLOYMENT INQUIRIES	UNLAWFUL PRE-EMPLOYMENT INQUIRIES
CITIZENSHIP:	<p>Are you a citizen of the United States?</p> <p>If not a citizen of the United States, does applicant intend to become a citizen of the United States?</p> <p>If you are not a United States citizen, have you the legal right to remain permanently in the United States? Do you intend to remain permanently in the United States?</p>	<p>Of what country are you a citizen?</p> <p>Whether an applicant is naturalized or a native-born citizen. The date when the applicant acquired citizenship.</p> <p>Requirement that an applicant produce naturalization papers or first papers.</p> <p>Whether applicant's parents or spouse are naturalized or native born citizens of the United States. The date when such parent or spouse acquired citizenship.</p>
NATIONAL ORIGIN:	<p>Inquiry into languages applicant speaks and writes fluently.</p>	<p>Inquiry into applicant's lineage, ancestry, national origin, descent, parentage, or nationality.</p> <p>Nationality of applicant's parents or spouse.</p> <p>What is your mother tongue?</p> <p>Inquiry into how applicant acquired ability to read, write or speak a foreign language.</p>
EDUCATION:	<p>Inquiry into the academic vocational or professional education of an applicant and the public and private schools attended.</p>	
EXPERIENCE:	<p>Inquiry into work experience.</p> <p>Inquiry into countries applicant has visited.</p>	
ARRESTS:	<p>Have you ever been convicted of a crime? If so, when, where and nature of offense?</p> <p>Are there any felony charges pending against you?</p>	<p>Inquiry regarding arrests</p>

SUBJECT	LAWFUL PRE-EMPLOYMENT INQUIRIES	UNLAWFUL PRE-EMPLOYMENT INQUIRIES
RELATIVES:	Names of applicant's relatives, other than a spouse, already employed by this company.	Address of any relative of applicant, other than address (within the United States) of applicant's father and mother husband, or wife and minor dependent children.
NOTICE IN CASE OF EMERGENCY:	Name and address of person to be notified in case of accident or emergency.	Name and address of nearest relative to be notified in case of accident or emergency.
MILITARY EXPERIENCE:	Inquiry into an applicant's military experience in the Armed Forces of the United States or in a State Militia. Inquiry into applicant's service in particular branch of United States Army, Navy, etc.	Inquiry into an applicant's general military experience.
ORGANIZATIONS:	Inquiry into the organizations of which an applicant is a member excluding organizations, the name or character of which indicates the race, color, religion, national origin or ancestry of its members.	List all clubs, societies and lodges to which you belong.
REFERENCES:	Who suggested that you apply for a position here?	

PREGNANT AND WORKING?

Discrimination against pregnant workers is against the law. If you are concerned about your rights, then you should know about the Pregnancy Discrimination Act. This federal law, part of the Civil Rights Act of 1964, can protect you from losing your job or on-the-job benefits.

Under the Pregnancy Discrimination Act (PDA) it is illegal for your employer to discriminate against you because of pregnancy, childbirth or pregnancy-related conditions. This means that employers must treat pregnancy the same way they treat any other temporary medical disability.

WHAT DOES THIS MEAN FOR YOU?

- o You can't be fired, denied a job, or denied a promotion simply because you are pregnant.
- o Your pregnancy must be treated like any other employee disability or medical condition.
- o You cannot be forced to take maternity leave if you are still willing and able to work.
- o You must be provided the same level of medical benefits, disability insurance and leave as are offered for other medical conditions or disabilities.
- o Your job may be protected upon your return to work if other temporarily disabled employees can return to their jobs.
- o A male employee must get health insurance coverage for his wife's pregnancy related conditions if a female employee's husband gets comprehensive health insurance coverage.

WHERE TO FILE A COMPLAINT

- o The regional Equal Employment Opportunity Commission (EEOC) office in your area (check your local phone directory under U.S. Government), or the EEOC's main office at 2401 E Street, N.W., Washington, D.C. 20210, if you work for a company that has federal government contracts.

The Women's Legal Defense Fund, founded in 1971, is a membership organization dedicated to eliminating sex discrimination in the law and in society as a whole. Through counseling, litigation, advocacy, and community education, WLDF has won many victories for women's rights. Your support is needed. Write or call for more information about our publications, volunteering, or becoming a member.

FOR MORE INFORMATION CALL

The Women's Legal Defense Fund
2000 P Street, N.W., Suite 400
Washington, D.C. 20036
(202) 887-0364

UNLAWFUL SEXUAL HARASSMENT

How to recognize it
How to stop it
Who to go to for help

Share the information in this handout with others. Be supportive of people you know who are facing this problem. Encourage them to resist and take action. If you observe sexual harassment, be courageous enough to offer to be a witness. Put yourself in the victim's place and remember that you will need encouragement and support if this ever happens to you. Above all, don't be forced into "going along with the crowd" and accepting sexual harassment as "the way things are" or as a joking matter. Support legislation that seeks to prevent sexual harassment. Ask your company or union if they have a specific policy against sexual harassment. If not, work toward getting one. Talk with your co-workers about things like appropriate dress on the job, joking around about sex, personal relationships on the job and other things that people may try to use against you if you are ever a victim of sexual harassment.

WHERE TO GO FOR HELP

Michigan Department of Civil Rights
District Office
309 North Washington Square
Lansing, Michigan 48913
(517) 373-3590

see phone book for listing of a local office near you

U.S.E.E.O.C.
231 W. Lafayette Street - Room 461
Detroit, Michigan 48226
(313) 226-7636

Michigan Employment Security Commission
EEO Division - Room 605
7310 Woodward
Detroit, Michigan 48202
(313)876-5544

Office of Women and Work
309 North Washington
P.O. Box 30015
Lansing, Michigan 48909
(517) 373-9475



A complete definition of sexual harassment is printed on the last page of this handout. But briefly, sexual harassment is when someone makes you think you'll get in trouble or lose your job, or be discriminated against in obtaining or benefiting from public accommodations, public services, employment, education, or housing, if you do not give in to their sexual advances or put up with their sexual remarks.

Here are some examples that have happened in Michigan:

JOANN:

Joann just took a "nontraditional" job in the skilled trades. The men on the job whistle and hiss when she walks by and yell out what they'd like to do to her when she's alone. They stare at her body and touch her when no one is looking. Pornographic pictures are pasted on her locker and objects from a local sex shop are attached with obscene notes to her work bench. Her supervisor says if she can't "take a little fun" she should get out.

KAREN:

Karen was still in school when her professor offered her an "A" in a course if she'd sleep with him. She didn't and she got a "C." She appealed to the university's Review Board and her mark was changed to an "A." Nothing was done to the professor. Karen has been working for several years and getting promoted with no trouble. Now her new boss asks her to stay late at work and "discusses" her upcoming promotion with his arms around her. He asks her to bring completed work to his apartment on the weekend. Karen is afraid that she has a reward as a troublemaker because of her college experience and she's afraid no one will believe her again.

MOLLY:

Molly works in a factory and wears an apron filled with bolts for the assembly line. Her supervisor "checks" the bolts by reaching into the aprons and feeling around. He does not "check" the aprons of male workers. He also waits until Molly is alone in the cloakroom and backs her up against the wall. When Molly protests, he says he's being "friendly," and she shouldn't be "uncooperative" or she'll lose her job.

SUSAN:

Susan works in an insurance office and has to travel to other cities with her boss. He wants to share a hotel room "to save the company some money." When Susan refuses he tells her to "smarten up" or he'll give her a poor rating on her next job review and demote her to a clerical job. In the meantime, he doubles Susan's workload and complains that she "can't keep up."

WHO ARE THE VICTIMS?

Although the majority of victims are women harassed by men, the following cases of sexual abuse on the job have been reported:

- Men sexually harassed by women
- Women sexually harassed by women
- Men sexually harassed by men

Victims range from young to old, from executives to unskilled workers, from married and single, and can be attractive or not. No one knows why a certain person is singled out for sexual harassment while co-workers are left alone. Often workers who need their jobs most desperately, to support their children or spouses, are singled out because they are most likely to fear losing their pay.

First, be sure that the harasser knows you do not welcome these advances. State your objections clearly when it first begins, don't just hope the problem will go away.

If the harassment continues, don't keep it to yourself. Put your objections in writing and ask for a written reply. Talk to your co-workers and tell them what is happening to you. Ask if they have had similar problems with your harasser. Keep notes on when your problem occurred and what you did and said. You may need these notes if you have to go to court.

If initial efforts fail, go higher. Use your grievance procedure, if any, or write to your supervisor's supervisor. Ask for written answers to your complaints.

If your union steward or other grievance taker shrugs off your complaint or says it is not a "grievable issue," do not become discouraged and drop your complaint. Go higher and exercise every right to appeal. Under the National Labor Relations Act section on the duty of fair representation, your union has the duty to represent you on issues of sexual harassment.

Like rape, most sexual harassment goes unreported because the victims are somehow made to feel ashamed of what has happened to them. They are afraid that other people will say they "asked for it" or that no one will believe them or they won't be able to prove it and will be branded as troublemakers. Rather than face embarrassment and reprisals, many victims who are lucky enough to transfer, or get a new job elsewhere, quietly leave without saying anything. This leaves the harasser free to victimize other workers.

SEXUAL DISCRIMINATION:

Sec. 103(h) Discrimination because of sex includes sexual harassment which means unwelcome sexual advances, requests for sexual favors, and other verbal or physical conduct or communication of a sexual nature when:

(i) Submission to such conduct or communication is made a term or condition either explicitly or implicitly to obtain employment, public accommodations or public services, education, or housing.

(ii) Submission to or rejection of such conduct or communication by an individual is used as a factor in decisions affecting such individual's employment, public accommodations or public services, education, or housing.

(iii) Such conduct or communication has the purpose or effect of substantially interfering with an individual's employment, public accommodations or public services, education, or housing, or creating an intimidating, hostile, or offensive employment, public accommodations, public services, education, or housing environment.

Elliott-Larsen Civil Rights Act 453 of 1976 as Amended by Public Act 202 of 1980.

Material Published by: Office of Women and Work,
309 N. Washington, Lansing, MI 48909
(517) 373-9475

PRIMARY OBJECTIVE AREA: Resource Management

AGE GROUP: Teen and up

CROSS REFERENCE OBJECTIVE AREA: Personal Power

READING LEVEL: Basic

NAME OF ACTIVITY: Decision Making/Personal Decisions

GROUP SIZE: Any

MATERIALS NEEDED: Handouts #1, 2, and 3; paper, pencils/pens

TIME NEEDED: 1 hour minimum

PURPOSE

DIRECTIONS FOR ACTIVITIES:

1. To assist participants to understand the decision-making process.
2. To help participants record, analyze and evaluate their decisions based on an identified criteria.
3. To help participants see what kind of balance (if any) they are striving for in their decision-making process and brainstorm alternatives where they feel it is desirable.
4. To understand that decisions are choices between the alternatives available.

1. Using paper and pencil, ask participants to write down 10 decisions which they have made today. For example: to get out of bed, to eat breakfast, what clothes to wear, etc.
2. After participants complete the list, handout the "Personal Decision Key" (Handout #1).
3. Have participants record the decisions from their daily list to the "Personal Decision Key" by coding each of their decisions in the category which is most appropriate for them.
4. In small groups have participants share and analyze their codings.
5. Ask participants to evaluate how their decisions are made: In one way, or by using a variety of patterns:
 - a. What they want.
 - b. What others want.
 - c. Is there a balance in their own codings of these two factors?
6. Help participants to define decisions as choices between alternatives.
7. For additional decision making practice, have students go through Handout #2, either in the group or as homework.

Note: This activity works well in conjunction with the activity "Conflict Resolution," in the "Communication" section of this manual.

PERSONAL DECISION KEY

DIRECTIONS: Copy ten decisions from your list and place beside the category which best fits the situations.

Decision was on basis
of only my own choice.

Decision was my own
but I did consider what
the effect on others
would be.

My decision was a
compromise between
what I wanted and
what others wanted.

I made my decision to
please others but I
thought about what I
would like.

My decision was made on
the basis of some else's
wishes and desires.

MAKING DECISIONS FOR MYSELF

Decisions affect your life both in the short term and long term. Any decisions you make concerning your future must be carefully thought out.

Decision-making is a skill you can use for your entire life. Making sound decisions can create possibilities that help you succeed in life. Setting goals is part of making decisions. Having practical decision-making skills can help you to sort out the things you need to think about and weigh before you set goals and proceed with them.

Using an organized method or plan for making decisions will help you make better decisions. A plan helps to organize the facts and information about the problem or situation. Using a decision-making plan in this way shows that you take decisions and your life seriously. It increases your chances for positive results because you think things over carefully and weigh your options.

When making decisions, using a plan shows you the choices and alternatives you have. There is usually more than one choice for most decisions. When you have choices, you can better guide the direction of your life.

Knowing and understanding your values will help you make better decisions. Your decisions reflect your values and goals in life. You need to know yourself well to make good decisions. Keep in mind the things that are really important to you and what you want out of life.

Not deciding on something is making a decision. It has consequences that must be thought about, too.

Before we begin, let's take a look at how you FEEL about making decisions. Your attitude about it is important to how you approach this skill. On the following page, fill out your responses to the questions.

HOW DO YOU FEEL ABOUT MAKING DECISIONS?

Complete each of the following sentences by writing how you feel about making decisions.

1. When I have to make a decision I feel _____

2. I feel the hardest kinds of decisions for me to make are _____

3. I feel the easiest kind of decisions for me to make are _____

4. Some decisions that I disagree with my parents about are _____

5. Good decisions make me feel _____
6. Poor decisions make me feel _____
7. I would like to make decisions about _____

8. I really like it when I make a decision and _____

9. I do not like it when I make a decision and _____

10. One important decision i made was _____

11. The hardest thing about making that decision was _____

12. The best decision I ever made was _____

13. The worst decision I ever made was _____

14. One decision that my parents and I both agreed on was _____

Look back at your answers and see if you can learn something about how you feel when making decisions. Write a summary describing your attitude toward making decisions. Use the information you wrote about in this exercise.

Now describe an important decision you had to make in the last year. (For example, I decided to stay in school rather than dropping out to stay at home with my baby.)

In the space below, describe one decision, how you made it, the choices, circumstances, alternatives, and the outcome for the decision you listed above.

If you were not pleased with the result of your decision, think about how you might have improved on the way you made it. Write in how it might have been handled differently.

The following 10 steps are one way to make a decision. There are others. You can change some of the steps if you think there is a way that works better for you.

The important thing to keep in mind is that you need to be organized about how you make decisions. These steps are designed to help you organize your thinking about decisions.

After you read through these steps, you can practice the steps with the exercise that follows.

10 STEPS TO MAKING A DECISION

1. State the decision you need to make.
2. Identify the problem or need.
3. State the outcome you want.
4. Identify any resources concerning the decision?
5. What are your alternative choices?
6. Weigh your alternatives.
7. Make a decision. Choose one alternative.
8. What action will you take?
9. Evaluate your decision.
10. Evaluate the steps and the processes you used to make your decision.

Now let's try this out to see how these steps work for you.

A DECISION MAKING EXERCISE

Think of an important decision that you need to make. Use each of the steps below to guide your decision-making process. Do each step, one at a time, in the order they appear. Be sure to record all the information at each step as soon as the step has been completed.

1. **STATE THE DECISION YOU NEED TO MAKE.** Write down a clear description of the decision. Make it a brief statement.

2. **IDENTIFY THE PROBLEMS ABOUT THE DECISION.** Write down your concerns about the decision. Identify the factors that make it a difficult decision.

3. **STATE THE OUTCOME YOU WANT.** Think about this clearly and carefully. You need to know the possible consequences of your decision. What will be the result or effect of your decision (both on you and on your child?) Write down what you want from this decision. To do this you need to think about what's important to you and what you are willing to give up. Knowing yourself and your personal values will help with this. Your decision should be made according to your values.

4. **WHAT ARE YOUR RESOURCES?** What resources do you have available to help you make your decision? A resource would be a person or place where you can get more information or help with your decision. For example, your family would be a good resource because they know you well. Ask for their advice but be sure to make the decision yourself, based on all the facts and information you find.

5. **WHAT ARE YOUR ALTERNATIVE CHOICES?** What are other possible solutions or choices? An alternative is something you can do instead of, or in addition to, the first choice you have. Alternatives give you more than one way of looking at the problem and of choosing. After you have checked with all sources of information about your decision, list all the alternatives and choices you see as possibilities. Write down even those that seem silly. You may get ideas from them later.

6. **WEIGH YOUR ALTERNATIVES.** Look at the list and predict what might be the positive and negative factors of each choice. Decide which ones are best for you. Then write the list again, ordering the best choices first and the less desirable choices last.

Positive Factors

Negative Factors

7. **MAKE A DECISION. CHOOSE ONE ALTERNATIVE.** Decide from the choices you have listed which will give the best outcome for you.

8. **WHAT ACTION WILL YOU TAKE?** Now that you have made a decision, act on it. Do what you have decided to do. Write down what action you will take to follow through on your decision.

9. **EVALUATE YOUR DECISION.** How do you feel about the decision you made? After you have acted on your decision, evaluate whether you made the best possible decision or if you might have made a better one.

10. **EVALUATE THE STEPS AND THE PROCESS YOU USED TO MAKE YOUR DECISION.** Was this the best way for you to make a decision? Are there things you might have done that would be helpful to organizing and acting on your decision-making style? Write down other steps you might include in making the next important decision.

This is only one method for making decisions. You can find out about other ways by talking to people, reading books on decision making, and trying ideas that might work better for you.

Each person is different and may have a way that works best for her or him. The important thing to remember about making decisions is to be organized about it, and to be clear about the decision and choices facing you.

Material From: Life Skills Workbook.
A Guide to Personal Growth
by A. Frances Lindner
Vocational Studies Center
School of Education
University of Wisconsin
September, 1987

PRIMARY OBJECTIVE AREA: Resource Management
CROSS REFERENCE OBJECTIVE AREA(s): Personal Power
NAME OF ACTIVITY: Managing Daily Activities
MATERIALS NEEDED: Handouts #1, 2 and 3; Pencils/Pens

AGE GROUP: Teens and Up
READING LEVEL: Basic
GROUP SIZE: Any
TIME NEEDED: Two 1 Hour Sessions
One Week Apart; Daily
Monitoring, 10 Minutes a Day

PURPOSE

1. To help participants "look at" daily activities.
2. To identify criteria for a schedule: prioritizing, flexibility, emergency backup plan, sense of accomplishment.
3. Assist participants to develop a routine for better management of time.

DIRECTIONS FOR ACTIVITY:**NOTE:**

It is suggested that this activity be followed by the Time Management activity in this Resource Management section or used in conjunction with it.

There are people who are unable or resist scheduling and decision making. If such resistance is evident the exercise can be shortened to meet the needs of the group. (Fewer entries in Daily Schedule, etc.). Facilitator may wish to introduce the activity with an individual crisis role play which will better illustrate value of decision making. This could be followed by discussion.

1. Distribute Handout #1, "Daily Schedule," and have participants list their daily activities on them. (You can limit the activities to that part of the day that's hardest for them if that seems appropriate to the situation.)
2. Ask participants to prioritize the activities in the order of importance in the space provided. Use a scale of 1 to 5 with 1 = highest priority and 5 = lowest priority.

PURPOSE

DIRECTIONS FOR ACTIVITY:

3. Distribute Handout #2 and have participants transfer these activities with a priority of 1 and 2 to the "activities" column. Then have them fill in across (examples given) the chart with special attention to "backup plan."
4. Give each participant 5 to 7 copies of Handout #3. During the next week ask participants to develop plans that would help them do the activities for the hardest part of their day by listing the activity, what makes it easier/better and the results. If results were not satisfactory have them try another way to accomplish the activity for the next day. Ask them to continue this evaluation process for a week by spending 10 minutes at the end of each day recording:
 - a) Activity - Accomplished
 - b) Activity - needs attention
 - c) Activity - needs adjustment (giving suggestions)
5. During the second session review evaluations by participants. If anyone (or all) have experienced a block for improving their schedule open it to the group for discussion. Brainstorm "backup plans," "helping plans" and "better plans." (Suggest note taking.)

(Facilitator: You can refer back to the activity on "Decision Making" in this Resource Management section. If participants are having problems with decision making in this activity.

DAILY SCHEDULE

Instructions: Complete the daily schedule chart. Rate the activities in order of importance on a scale of 1 to 5. 1 = highest priority and 5 = lowest priority. (If you do not have children, list your activities under the Adult column)

Time	Children's Activity	priority (1 - 5)	Mother's Activity	priority (1 - 5)
1:00 am				
2:00am				
3:00 am				
4:00 am				
5:00 am				
6:00 am				
7:00 am				
8:00 am				
9:00 am				
10:00 am				
11:00 am				
12:00 am				
1:00 pm				
2:00 pm				
3:00 pm				
4:00 pm				
5:00 pm				
6:00 pm				
7:00 pm				
8:00 pm				
9:00 pm				
10:00 pm				
11:00 pm				
12:00 am				

EXAMPLE PRIORITY ACTIVITIES

Activities	Obstacle situations	Back-up plan	Accomplishment and better plan
Example #1			
Dress Baby	Drier doesn't work	Wear lightly soiled T-shirt and crawlers	Child wore soiled clothing. Get drier repaired or go to the laundromat and wash.
Example #2			
Feed Baby	Fruit juice is all gone.	Serve a vegetable	Make a weekly grocery list
Complete this example yourself:			
Prepare baby's supplies for day care			

PRIMARY OBJECTIVE AREA: Resource Management

AGE GROUP: Teen/Adults

CROSS REFERENCE OBJECTIVE AREA(s): Personal Power

READING LEVEL: Intermediate (can be read to group)

NAME OF ACTIVITY: Time Management

GROUP SIZE: Any

MATERIALS NEEDED: Handouts #1 and 2; Paper, Pencils/Pens

TIME NEEDED: 1 - 2 Hours

PURPOSE

DIRECTIONS FOR ACTIVITY:

1. To learn techniques for using time more effectively.
2. To understand the importance of setting priorities and planning ahead.
3. To motivate participants to choose positive strategies for managing time.

1. Distribute Handouts #1 and #2.
2. Describe each of the five strategies (Handout #1) using examples that would apply to the lives of the participants and ask participants to share examples they have seen or which they practice.
3. Read aloud with group "Save Time"(Handout #2).
4. Present the idea that some people get more done in the same time than others. Question why the participants think this is so. Examples: Priorities, Planning, Motivation, Speed of thinking, Time of day (more rested in the AM), Flexibility, etc.
5. Have each member of the group set a goal for themselves to use at least one of the techniques described within the next week. Ask them to write it down.
6. One week later as a follow up to their homework, ask participants to share the results of their time management goal that they set for themselves. Process why it did or didn't work.

FIVE TECHNIQUES FOR TIME MANAGEMENT

Introduction

There are some tricks to saving time. Some will work; some will not work for everyone. The strategies are:

1. Learn to say "NO".
 - a. If you do not learn to say no -- others set your priorities -- then you end up saying "no" to yourself, friends, and family and the end result is unhappy.
 - b. Techniques for saying "NO":
 - 1) Say "no" first then give your excuses. The best excuses will be your own priorities which you will have already thought out.
 - 2) Say "no" with a tone of commitment. Be assertive, not wishy-washy. If you are hesitant, it encourages the asker to continue to beg.
 - 3) Balance the trade-offs and communicate them. Example: "No, I can't. If I go with you shopping, I will not be able to complete the homework I planned for this evening. My priority is to pass the class."
 - 4) Delegate some tasks. You do not have to do everything yourself. What can be left undone? What can your children do for you, etc?
2. Set aside time for yourself.
 - a. Every day set aside some time, even a specific time, with little or no exception. Time to do something you like to do; read for pleasure, knit, watch a particular T.V. show, exercise. This creates less frustration that there is never enough time and that everything you do is for someone else.
 - b. Ways to set aside time for yourself:
 - 1) Get up 15 minutes earlier.
 - 2) Use time between classes/appointments.
 - 3) Use driving time or other transportation time as self-relaxation.
 - 4) Put kids in front of T.V. or give them a structured activity that will take 1/2 to 1 hour.
 - 5) Participate in a neighborhood or friends babysitting exchange.
 - 6) Put kids to bed a few minutes early and stay up a few minutes later.

3. Plan the use of time.

- a. Make lists of things to do. This saves time, energy and the frustration of forgetting to get something done.
- b. Cross off tasks completed. This will give you a sense of accomplishment. We have a tendency to remember only those things we failed to get done and that can be depressing.
- c. Analyze the list to see what can be "dove-tailed" -- do two things at the same time.
Examples:
 - 1) Take a book back to the library on the way to class rather than a separate trip.
 - 2) Dry your hair while doing homework.
 - 3) Collect things to be taken upstairs or downstairs at the head or foot of the stairs. Take them with you the next time you use the stairs.
 - 4) Read while on the bus, toilet or waiting for an appointment.

These things won't happen if you don't plan ahead.

4. Establish routines.

- a. Make some tasks automatic; something you do not even have to think about before doing it. Examples:
 - 1) Every time you write a check, deduct it from your balance. Two seconds each time is easier and less time consuming than having to sit down and subtract for 10 minutes to 1 hour each week.
 - 2) Do your homework every night from 7-8 or 3-4.
 - 3) Hang or hamper your clothes every time you change them.
- b. For something to become routine you must decide to do it every time the same way. This may take some time and concentration to establish, but it will save time.

5. Be punctual. Do not procrastinate.

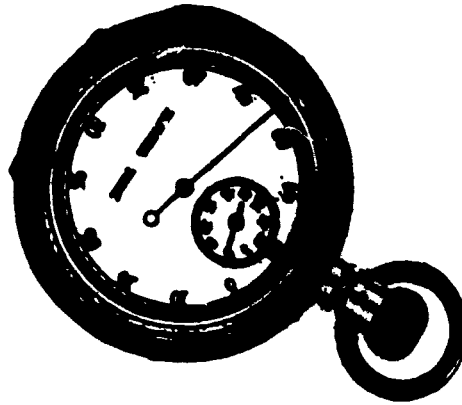
- a. When you catch yourself procrastinating say out loud "I am wasting time."
- b. Cut off escape routes, unhook the telephone or go into another room and shut the door. Turn off the T.V., get away from the refrigerator, or go to the library to study.
- c. Block out a realistic amount of time free from interruptions. Decide the amount of time needed for the task to be done, then schedule it. Usually works best if the kids are in bed and the T.V. off if you need to study.
- d. Try "procrastinating positively." If you catch yourself procrastinating, stop and force yourself to sit in a chair and do absolutely nothing for 15 minutes. Don't read, don't shuffle papers, don't watch T.V., don't cheat, just sit. Before the 15 minutes are up getting started will become an appealing alternative.

WARNING: If you find yourself enjoying this vegetation DO NOT USE this last technique.

Written by Sherry Anderson, Phd., Michigan Department of Education

SAVE TIME

10 Primary Rules To Get More Done In Less Time



Often the only way to get ahead is to increase your work capacity. If you were to take a general time management course or study several books on the subject, you would find that they consist primarily of motivational stories, case histories and a few primary principles on how to accomplish more in less time.

1. **Be clear on your intent:** Decide exactly what you want. If you're unsure of your objectives you'll be unable to concentrate your efforts or generate the energy required to achieve results.
2. **Do first things first:** Decide upon your priorities and then concentrate upon the central and essential priorities.
3. **Group related activities:** Group similar jobs together (phone calls, letter writing, etc.).
4. **Do large jobs one step at a time:** It is easy to procrastinate on a large job because you are overpowered. Divide it into workable steps and then work on one step at a time.
5. **Don't use dollar time on penny jobs:** Divorce yourself from routine tasks. Use your time where it counts.
6. **Use a time schedule:** If you give yourself a time schedule, it will spur you to action. Set deadlines and commit to keep them.
7. **Delegate what you have mastered:** Once you know how to do something, train someone else to do it and oversee the job.
8. **Do one thing at a time:** To do your best you must fully concentrate on the project at hand.
9. **Finish fully:** If you make finishing fully part of your daily routine, you'll accomplish far more and will have more energy. It will also help your concentration and increase your feelings of personal satisfaction.
10. **Do it now:** Now is the best time to accomplish whatever you desire. Say these three magic words to yourself, and they will spur you to action and assist you to utilize every day to its fullest.

PRIMARY OBJECTIVE AREA: Resource Management

AGE GROUP: Teens and Up

CROSS REFERENCE OBJECTIVE AREA(s): Personal Power

READING LEVEL: Basic/Intermediate

NAME OF ACTIVITY: Developing Money Management Skills

GROUP SIZE: Any

MATERIALS NEEDED: Copies of Handout # 1 - 4; Pencils/Pens;

TIME NEEDED: 2 - 3 Hours

PURPOSE

DIRECTIONS FOR ACTIVITY:

1. To be able to define some money management terms.
 2. To learn about budgets and their preparation.
 3. To practice making a budget.
 4. To learn more money management strategies from a credit counselor.
1. Prior to class, cut up the occupations on Handout #1 and place them in a hat.
 2. Distribute "Managing Your Money" (Handout #2) and go over the list of terms.
 3. Explain to students that they will be doing a budget for an occupation that they pull out of a hat. Have students each select an occupation.
 4. Pass out Handout #3. Assign as homework, completion of Handout #3 for the occupation they selected (Note to Facilitator: Since many Single Parent Curricula cover budgeting and a significant number of the students are low income, our focus is on application of a budgeting process to various occupations. If your students do not receive instruction on budgeting, you may want to provide additional resources). (Handout #4 is included if needed) Give students 1 week to complete Handout #3. List local resources they may use to complete Handout #3 (Example MOIS, etc.)
 5. For the second portion of this activity, invite a local credit counselor to give a presentation on money-managing strategies particularly for low-income people.
 6. Follow up on homework assignment by having participants share their budgets with the group. Discuss what they learned.
 7. Facilitator may want to share costs of standard expenses for their own area such as: rent, home, electrical, gas & new car costs.

OCCUPATION LIST FOR BUDGET RESEARCH

A beginning Physician

A beginning Engineer

A beginning College Professor

A beginning Electronics Technician

A beginning Farm Laborer

A beginning Dentist

A beginning Secretary

A beginning Elementary Teacher

A beginning Lawyer

A beginning Secondary Teacher

A beginning Newspaper Reporter

A beginning Day Care Worker

A beginning Cosmetologist

A beginning Nurse's Aide

A beginning Truck Driver

A beginning Nurse

A beginning Construction Worker

A beginning Travel Agent

A beginning Salesperson

A beginning Welder

MANAGING YOUR MONEY

SOME WORDS TO KNOW

- Budget:** A plan that keeps track of how much you earn each month and how much you spend
- Fixed Expenses:** Expenses that you must pay each month involving specific amounts, such as rent
- Flexible Expenses:** Expenses that may vary in amounts or times when they must be paid, such as food and clothing
- Dual Income:** Two incomes from both husband and wife working
- Salary:** A fixed amount of money paid for work
- Variable Income:** Income that changes because it is based on how much work you do or how well you do the work
- Commission:** Earnings based on a certain percentage of the sales a person makes during a pay period
- Minimum Wage:** The least amount of money you can be paid for each hour of work, as set by federal law
- Deductions:** Amounts taken out of your paycheck for state and federal taxes, Social Security, etc.
- Take-Home Pay:** The amount of money you are given after your deductions are subtracted from the total
- Credit Rating:** A rating given by the Credit bureau based on how well or how poorly you pay your bills
- Installment Plan:** A monthly or weekly plan by which you repay a loan or pay a debt through set payments
- Buying on Credit:** Buying something, such as furniture, and paying for it over a period of time
- Interest:** A charge that you must pay for buying on credit or borrowing money

BUDGET
OE

 List Occupation

 Salary - yearly

 One-month's salary
 (-minus 20% for taxes)

 Weekly Salary
 (-20% for taxes)

Fixed Expenses (Expenses you must pay each month):

Rent or mortgage, telephone, utilities, water, child care, medical insurance and loan payments.

Flexible expenses (Expenses that vary in amounts or when they must be paid):

Food/supplies, clothing, medical costs, transportation, newspaper/magazines, entertainment/recreation and school expenses.

MONTHLY EXPENSES

RENT	_____	GROCERIES/SUPPLIES	_____
TELEPHONE	_____	CLOTHING	_____
UTILITIES	_____	MEDICAL COSTS	_____
WATER	_____	TRANSPORTATION	_____
CHILD CARE	_____	SCHOOL EXPENSES	_____
LOAN PAYMENTS	_____	ENTERTAINMENT	_____
MEDICAL INSURANCE	_____	NEWSPAPER/MAGAZINES	_____
		GIFTS	_____
		SAVINGS	_____
		TOTAL MONTHLY INCOME	\$ _____
		TOTAL MONTHLY EXPENSES	\$ _____
		BALANCE	\$ _____

BUDGET CONTROL WORKSHEET #2

1. **Make a budget based on Monthly Actual Expenses**
2. **Keep track of what you spend this month and compare expenditures to budget**
3. **Copy this form and use for each month**

Month This Form _____ Year _____

Item	Budgeted monthly	Spent this month	Spent column plus or minus budget by how much
Housing	_____	_____	_____
Utilities	_____	_____	_____
Food	_____	_____	_____
Medical	_____	_____	_____
Car Expense	_____	_____	_____
Insurance	_____	_____	_____
Clothing	_____	_____	_____
Recreation & Entertainment	_____	_____	_____
Savings	_____	_____	_____
Donations	_____	_____	_____
Gifts	_____	_____	_____
Other	_____	_____	_____
	_____	_____	_____
	_____	_____	_____
TOTALS	\$ _____	\$ _____	+ - _____

PRIMARY OBJECTIVE AREA: Resource Management

GRADE REFERENCE OBJECTIVE AREA: —

NAME OF ACTIVITY: Evaluation

MATERIALS NEEDED: Paper, Pencil, Envelopes, Stamps

AGE GROUP: Teens and Up

READING LEVEL: Intermediate

GROUP SIZE: Any

TIME NEEDED: 15 min. to 30 min.

PURPOSE

1. To evaluate material covered in each unit.
2. To provide an opportunity to do self assessment.
3. To practice written communication skills.
4. To help develop and reinforce long term goals.

DIRECTIONS FOR ACTIVITY:

1. At the end of each unit, have students compose a letter to themselves. In the first unit covered (usually Self Awareness), have students address an envelope to themselves. Collect the envelopes to send with the letters upon completion of the whole course.
2. Explain to students that they will have an opportunity to evaluate what they have learned. They will be writing an ongoing letter to themselves about what they have learned or experienced as a result of each unit. (The length of the letter is up to the facilitator). The facilitator should stress that this letter allows them to look back, evaluate and maybe even write down goals for the future. The facilitator may want to provide a sample letter for the unit that has just been completed.
3. Have students write the letters while in class. The facilitator should circulate among the students to assist anyone who may have difficulty.
4. Collect letters. Read them. At the end of each unit, return student letters so that they may write additional evaluations.
5. When the course is complete, send the letters to each student.

Resource Management Bibliography

A partial listing of books, articles, and curriculums which our writers and editors recommend. For additional help in selecting relevant reading or audio-visual materials, please call the Michigan Vocational Education Resource Center at Michigan State University: 1-800-292-1606.

Dessinger, Katherine; **OLD, POOR, ALONE, AND HAPPY: HOW TO LIVE NICELY ON NEARLY NOTHING**, Chicago: Nelson-Hall; 1980.

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ESSENTIAL LIFE SKILLS

INSTRUCTION

CONCEPTS TO BE COVERED

Students will understand the concepts of parenting skills through study and application of the following concepts and objectives:

Parenting Skills. Participants will be able to:

Describe the stages of human development.

Compare different temperament styles of children and parents.

Describe the effects of multiple father-figures on the development of children.

Develop strategies for maintaining consistency in the lives of the children.

Compare parenting styles.

Identify guidance/discipline techniques with desired behavioral changes.

Describe a child's place in the changing relationships and life patterns of the mother and father, if present.

Define the step-relationship-child relationship.

Identify child care issues and resources.

Describe methods to promote child safety.

PRIMARY OBJECTIVE AREA: Parenting

AGE GROUP: Teens-Adults

CROSS REFERENCE OBJECTIVE AREA(s): Communication

READING LEVEL: Intermediate

NAME OF ACTIVITY: "The Goodness of Fit" and "Feeling Thermometer"

GROUP SIZE: 10 - 15

MATERIALS NEEDED: Handouts No.s 1, 2, 3, 4

TIME NEEDED: 1 - 2 Hours

PURPOSE

DIRECTIONS FOR ACTIVITY:

1. To examine how different children and parents have different temperaments.
2. To learn how parents using their own temperaments can interact with their children of different temperaments.
3. To practice active listening using the Feeling Thermometer.
4. To learn to be sensitive to the Feeling Thermometer in order to interact more powerfully with their children.

1. The Facilitator may want to examine Facilitator's copy #2 and use Facilitator's copy #1 for opening remarks. Pass out Handout 1 and Handout 2. (Note: Be particularly sensitive to participant's response to their "Goodness of Fit" with their own children or parents. This concept seems to invite participants to examine their own family "fits." If a serious problem presents itself, the Facilitator may need to encourage therapy.)
2. Discuss the "Goodness of Fit" material (Handouts #1 and #2). Discuss what happens when a child's window is closed because he/she is sleeping, or impaired, etc. as opposed to a parent's window being narrowly open when he/she is tired or depressed, etc. Ask students to give oral examples of open and closed windows for both parent and child. Throughout the Life Skills class try to point out when students' windows are open for the children vice versa and each other.
3. Distribute Handout #3. Read together. You may want the group to brainstorm the examples, answer them privately, and/or discuss them as a class. Encourage interaction.

Parenting
The Goodness of Fit and The Thermometer Feeling
Page 2

PURPOSE

DIRECTIONS FOR ACTIVITY:

4. Distribute Handout #4. Give examples of active listening of what you heard in the "Feeling Thermometer" exercise. Begin the Round Robin exercise, starting with yourself or ask for a volunteer. Continue until everyone has answered one statement.
5. Continue with the "Active Listening" exercise. Ask the class to write an illustration of active listening with the John and Bill example.
6. Assign the homework on Handout #4, Page 2--and plan on using 15 minutes of class time to follow-up. Give the group a week to complete the exercise.

OPENING REMARKS FOR "GOODNESS OF FIT"

You might open the class with "Today we are going to talk about windows being open. Each of us looks out into the world through our own unique window. When our windows are open, we are able to learn, talk with, and respond to others. When our window is shut (when we are sleeping, angry, hurt, thinking about tomorrow, etc.) it is difficult, if not sometimes impossible, for us to learn, listen and respond

Children are born into this world with their own unique windows. Their windows are open and available for parents when they are well rested, fed, healthy, etc. When both the parents and the child's window are open at the same time, there is a "Goodness of Fit." When there is a "Good Fit" between the characteristics of the child and the environment, learning can occur and communication can take place. We need good fits to help the child and ourselves grow.

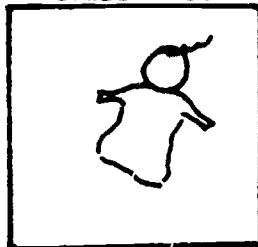
If windows are shut, we are unavailable to one another. Sometimes they naturally need to be shut as in the case when we are sleeping or just need private time. There are times, however, when our windows are closed when it would be better if they were open - ex. baby is born premature, mother is sick, baby is easily overstimulated, mom is emotionally upset, etc. "Goodness of Fit" does not necessarily happen naturally. When there is not a "Goodness of Fit", we can learn why and seek to open the window.

Adapted from: Dr. Mark Rains
By: P. Alford

GOODNESS OF FIT

A working model for "goodness of fit" between children and their family environments

Child's Window



area of "good fit" between characteristics of child and environment

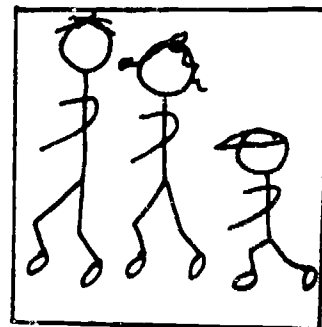
Learning occurs, the interaction is mutually satisfying

The child has a variety of developmental tasks to achieve through interaction with the environment...

...e.g. including development of competence, confidence, self-concept, etc.

A variety of characteristics affect the dimensions of the windows through which child interacts with the environment, including temperament, attentional control, sensory and motor functioning, language development, etc.

Family's Window



Above this edge of the window, the child is not prepared to meet the challenge and may be overwhelmed, frustrated, or unaware of expectations or possibilities. Family may be upset by failure of interaction to meet needs.

The family has a variety of developmental tasks to achieve and situational stresses to cope with while interacting with the child...

Below this edge, the child is not challenged, may be bored and may engage in behavior to escape boredom (e.g. self-stimulation, rituals, behavior directed toward non-learning goals).

...e.g. facilitating development of child's competence, maintaining family unit, dealing with personal development, etc.

A variety of characteristics affect the dimensions of the windows through which the family interacts with the child, including parenting skills, expectations, emotional availability, learning histories, etc.

Presented March 29, 1985 at "Learning Disorders in the Preschool Child: Recognition and Intervention", at State University of New York--Upstate Medical Center, Syracuse, N.Y., by Mark Rains, Ph.D., Family Health Institute, Alma, MI.

"GOODNESS OF FIT"

(Adapted from the work of Dr. Mark Rains,
Family Health Institute, Alma, Michigan)

ALL OF US SEE THE WORLD THROUGH OUR OWN UNIQUE WINDOW. WE OPEN AND CLOSE OUR WINDOWS WHEN WE NEED TO.

EXAMPLES OF OPENING OUR WINDOWS INCLUDE:

- WAKING UP FROM A SLEEP REFRESHED
- SEEING A DEAR FRIEND ON THE STREET
- RELAXING ON THE COUCH TO WATCH OUR FAVORITE TV SHOW

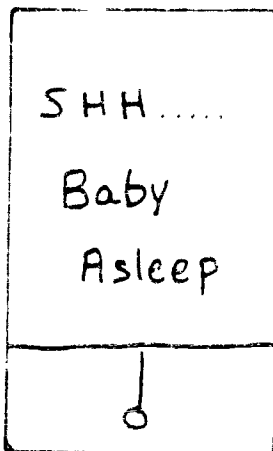
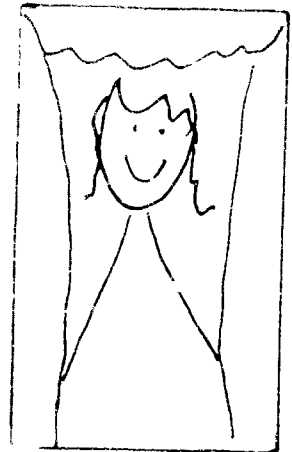
EXAMPLES OF CLOSING OUR WINDOWS INCLUDE:

- BEING SO TIRED THAT WE CAN NO LONGER LISTEN
- DECIDING THAT A SPEAKER IS BORING
- FEELING HURT FROM AN ARGUMENT WITH A LOVED ONE

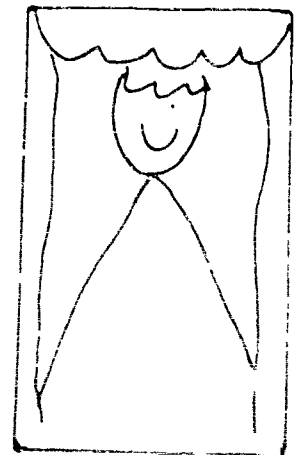
ALL OF OUR CHILDREN ARE BORN WITH THEIR INDIVIDUAL WINDOWS. WE LOOK OUT THROUGH OUR WINDOW AT THEM. WHEN OUR WINDOW AND OUR CHILD'S WINDOW ARE OPEN AT THE SAME TIME, GOOD COMMUNICATION AND LEARNING CAN TAKE PLACE. THIS "GOODNESS OF FIT" IS WHAT PARENTS AND CHILDREN STRIVE FOR. IT IS MUTUALLY SATISFYING.



**OPEN
WINDOWS
MEAN THAT
WE ARE ABLE TO
UNDERSTAND, COMMUNICATE
AND LEARN FROM ONE
ANOTHER**

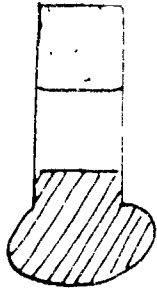


**WHEN ONE
WINDOW IS CLOSED,
COMMUNICATION
STOPS**



THE KEY TO "GOODNESS OF FIT" IS FOR PARENTS AND CHILDREN TO RECOGNIZE WHEN WINDOWS ARE OPEN AND CLOSED. ANOTHER WAY TO SAY THIS IS TO HAVE PARENTS AND CHILDREN ADAPT THEIR TEMPERAMENTS TO ONE ANOTHER.

FEELING THERMOMETER



HOT	"Boiling Over" - Too emotionally upset to think, problem solve or learn. Difficulty controlling self - mostly showing feelings (like nervous, anxious, tears, and tuning out)
WARM	Sort of frustrated and upset. Challenged but is able to learn, solve problems
COOL	No problem

In order to communicate, teach or problem solve with a "hot" child, he/she needs to move down to the warm level. If a child heats up quickly or easily, it's important to develop means to assist the child to do self-calming.

Give an example of a child as

- hot -
- warm -
- warming up -
- warming down
- cool -

Parents also operate on feeling thermometers and express feelings when hot. They learn problem solve when warm.

Give an example of a parent as

- hot -
- warm -
- warming up
- warming down
- cool -

What happens to a child's window when he/she is hot?

What happens to a parent's window when he/she is hot?

Permission from Mark Rains, Ph.D. Director of Center for Study of Infant & Family

ACTIVE LISTENING TO BE PAIRED WITH THE FEELING THERMOMETER

Children typically tend to express their feelings through their behavior. Active listening can help the child put feelings into words as well as communicating to the child that he/she is worth being listened to and has feelings that are acceptable. Active listening tells the child that he/she is understood and respected as a person with feelings. It also brings the child's temperature down.

Active listening involves:

1. Hearing the message - (both verbal and nonverbal)
2. Repeating back what you heard (opening lines that may be helpful - "Maybe" "Sounds as if...", "You're feeling kind of...", "When..." "Looks like you felt...")
3. Repeating the preceding steps until the child knows he/she has been understood.

Start general and gradually become specific in terms of feeling words, situational events related to feelings, and the intensity of feelings.

ROUND ROBIN ACTIVE LISTENING EXERCISE

Choose anyone in the class to answer a statement of his/her choice. After they have answered the class will actively listen to what they heard. When the speaker is satisfied that he/she has been heard correctly, he/she picks another class member and the exercise continues until everyone has had a turn.

Statement:

I get angry when
I am hurt when
Domineering people talk to me like
Rude people
I'm happiest when

Sadness is
A high point in my life was
The best thing about America is
The worst thing about America is
If I could have a magic wand, I'd

Active listening becomes more difficult in an emotionally charged area. When you are hot or when you are not

One Method that may assist in problem solving with a "hot" child is:

- 1 Do active listening to identify the problem and feeling
"I can see that you are angry because your brother won't let you in his room."
- 2 When the child is in the warm stage, remind or implement the rule, instruct problem solve, etc.
"However, I ask your brother to stay out of your room when you want to be alone you must also stay out of his room now."
- 3 Help the child find alternatives to the goal within your family rules
"Maybe you could ask him if he wants to play in your room."
- 4 Recycle to #1.

Example John (age 10) teases Bill (age 7) until Bill who is highly frustrated hits John over the head with his toy truck. Bill is screaming and kicking his feet as you try to send him to his room for breaking the "no hitting" rule in your household.

Illustrate how the problem-solving method would work.

Homework Try this problem solving method with one of your children when they are too "hot." Write a paragraph describing the outcome. Practice it one step at a time. Example: Do only step #1 (Active Listening). After you have practiced each step separately, try using the whole method. Write a paragraph describing the outcome.

"Feelings Thermometer" exercise Family Health Bureau of Educational Services, 503 N. State Street, Alma, Michigan, 48801

Mark Rains, Ph.D. Limited License - Psychologist

CONTENT OBJECTIVE AREA: Parenting

SKILL OBJECTIVE AREA: Relationships

TOPIC ACTIVITY: Multiple Dads

MATERIALS NEEDED: Plain paper, pens and pencils

AGE GROUP: Teens and Up

READING LEVEL: Intermediate

GROUP SIZE: Any

TIME NEEDED: 1 Hour

PURPOSE

1. To examine the effects of multiple father-figures on the development of children.
2. To practice role playing through creative writing.
3. To increase sensitivity to a variety of family situations.
4. To examine a child's place in the changing relationships and life patterns of the mother (and father, if present).

DIRECTIONS FOR ACTIVITY:

1. Explain to students that they will presently be doing a creative writing assignment to look at the effects of how multiple father figures may affect a child's life. Resist any temptation to preach how negative it might be. Most likely participants will illustrate the negative effects.
2. Divide the class into groups of 4 or 5 participants. Ask each group to select a recorder to write down the story. Give them the following directions "Today I would like you to do a group writing assignment. It does not have to be long. We are not going to correct it. You will read it to the group spokesperson who will read it to the group or if your group so desires, they may choose to act it out instead of reading it. This must be a story about a mom, her child and the different men with whom she develops strong relationships. You can name the mother, child and the men with whom she has relationships. There must be more than two men. You may have her marry them. Tell the story through the child's eyes. Write why the child thinks he/she has a new dad, what the new dads are like and how he/she feels about them. You have 20-25 minutes to complete the story.
3. Have groups read the story or act it out.
4. Process what they learned from this exercise. Could they put themselves in the child's shoes? Do they think that having more than one father affects children, etc.? Allow time for students to tell their stories.

PURPOSE

DIRECTIONS FOR ACTIVITY:

-
- * An additional follow up is to present a lifestyle lab with a resource person with children who has been married and divorced. See directions for Lifestyle Lab exercise called Resource Lab in the Relationships unit.

PRIMARY OBJECTIVE AREA: Parenting

AGE GROUP: Teens and Up

CROSS REFERENCE OBJECTIVE AREA: Relationships

READING LEVEL: Basic

NAME OF ACTIVITY: Parenting for Security

GROUP SIZE: Any

MATERIALS NEEDED: None

TIME NEEDED: 1/2 Hour

PURPOSE

DIRECT IONS FOR ACTIVITY:

1. To analyze what consistent behavior means in a child's life.
2. To devise strategies to maintain consistent parental behavior in a child's life.

1. Open the session by talking about how we become creatures of habit. Illustrate this by pointing out that students generally sit in the same seat or families develop consistent patterns like a mother drinking a cup of coffee at the same time everyday, etc. Ask them to think of consistent patterns of behavior in their own family. Brainstorm as a group. Examples might include: holiday rituals, bedtime rituals, vacation rituals. Ask people how they feel when these rituals are changed?
2. Introduce the concept of how some consistent behavior makes us feel secure. Explain that you are not suggesting we adopt all routine and a dull life. Point out that we need order in our life to make us feel secure. (Perhaps you could illustrate how some children of alcoholics seldom get predictable behavior and responses from the alcoholic parent). Without some order the child is unable to feel secure.
3. List on the blackboard ways that the class members provide consistent behavior for their children to feel secure. Some examples might be: bath rituals, bedtime stories, dinner conversation, breakfast routines, etc. Discuss what happens, for their children, when rituals or consistent behavior is broken.
4. Ask participants to write three ways that they intend to provide consistency in their children's lives.

PRIMARY OBJECTIVE AREA: Parenting

AGE GROUP: Any

CROSS REFERENCE OBJECTIVE AREA(s): Self-Awareness

READING LEVEL: Basic

NAME OF ACTIVITY: I am Lovable and Capable

GROUP SIZE: Small

MATERIALS NEEDED: Copies of Handout; 8 x 11 (or larger) Paper;
String to tie paper around neck; tape;
Make sign: I am Lovable and Capable
Nametags with IALAC on them

TIME NEEDED: 20 to 30 Minutes

PURPOSE

DIRECTIONS FOR ACTIVITY:

1. To enhance parenting skills through understanding the impact of parental behavior toward the child.
2. To consider the effect of the child's experience at school, with peers, etc. on his/her self esteem.

1. Pass out IALAC tags for participants to wear.
2. Introduce activity by stating that children's feelings as well as adults' are influenced by their "small" experiences each day. These experiences which may not seem very significant to anyone else but have an important impact on their perception of themselves.
3. Explain that everyone needs to feel accepted. Another way of saying this is that everyone needs to feel both lovable and capable. This demonstration shows how other people's behavior toward us can either make us feel more lovable and capable or less so.
4. Hang a sign around your neck. Distribute "I am loveable and capable" signs.

When a "cold prickly" (negative statement or experience) is described, tear off a piece of the sign (size of piece to reflect the severity of the negative statement or experience). When a "warm fuzzy" statement or experience is described, tape an appropriately sized piece of sign back on. At end of story, the sign is a mess of torn and replaced pieces.

PURPOSE

DIRECTIONS FOR ACTIVITY:

Distribute "I am Lovable and Capable" handout for assigned reading. Have volunteers take turns reading the story out loud. Suggest that they try some of the activities on last page of handout.

5. Explain that all of us have an IALAC sign which we wear everyday.
6. Ask for reactions from group on the demonstration.
7. You may ask for examples from group of statements they made to their children in last 24 hours which may have torn the child's sign or added a piece. It is important to elicit both the positive and negative examples.
8. You can then ask for examples from the students from their own experience in the past 24 hours which added to or tore away parts of their own IALAC sign.
9. Ask what kinds of statements they like to hear and statements that are hurtful to hear. For homework, ask them to see what their children's and their own signs will look like at the end of the day.

I AM LOVABLE AND CAPABLE

Think about all the invisible signs around you . . . signs belonging to your self,

to "big" people, and

especially the signs

belonging to the

"little people "

Parents are people . . .

and so are kids . . .

and we all need to feel good about ourselves!!!

Did you know you wear one of these signs?



Everyone wears one

This sign represents something very important -- our feelings about ourself. Many of the things we do every day reflect our need to feel lovable and capable.

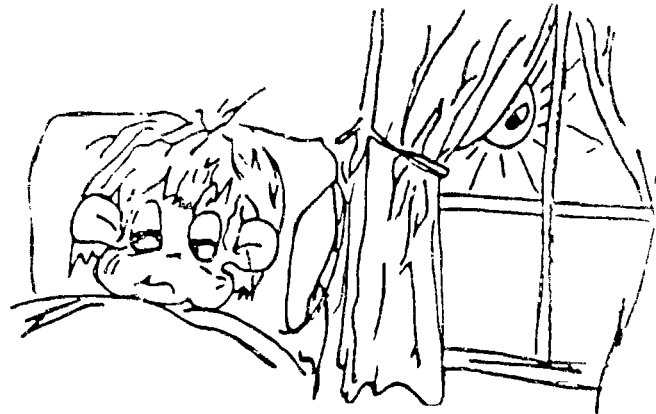
What we need to do . . .

each of us . . .



is take the initiative at being open and having warm and genuine relationships with our children . . . as well as with other adults

The sun is just starting to poke its head through the half-open curtains into Mike's room. There, towering above him, is a parent with an angry face!



"Come on, Mike!" For crying out loud, how many times do I have to tell you GET UP! We're going to be late!"

Whimpering, whining and muttering to himself, Mike starts out his day with a small piece of his IALAC sign falls to the floor.

Fortunately, it doesn't take a lot of effort to help someone feel accepted or competent. But what usually happens is that we tear up other people's signs in an effort to put ours back together again . . . and . . . the "put-down" is the easiest and quickest way to accomplish our task.

If you doubt that the "put-downs" or hurt feelings are as prevalent as I say, spend a day counting the number of times your feelings are hurt . . . and think about how you react.

Do you try to compensate or build back your sign by tearing at others?

Or do you start by helping others build up their signs?

At breakfast, Michael finds chocolate milk and his favorite - strawberry jam - for his toast. A piece of his sign goes back on. Being five (or 4 or 3 for that matter) naturally means eating slowly, picking at food, being easily distracted from the job at hand.

Mike is watching the cat chase the birds instead of eating. "Hurry up Mike! If you don't hurry up and eat I'm just going to leave and you won't get another thing to eat til lunch. I don't know why I bother to fix anything for you. I should just let you go hungry. Then maybe you'll eat."



(There goes another piece of the sign.)

His parent calms down a bit and "Mike" goes to work on the sign. The sign goes back on.

Often the "Mikes" of the world begin to believe all the criticism they get during their daily interaction and react by thinking "You have told me over and over that I'm not lovable that I'm not capable. Well, I'll just show you how unlovable and incapable I can really be. I'm going to shut myself off from everybody and be just as critical of everyone else. You'll never see me helping anyone else feel good about themselves!"

On the bus to kindergarten, the driver yells at him and all the other kids tell him "Down! Down!" Doesn't help the old sign one little bit.

At kindergarten he picks up one of the pieces when the teacher gives him a warm "Hello, Mike. How are you today?" He starts playing and one of the kids doesn't want him to play. He gets a piece.



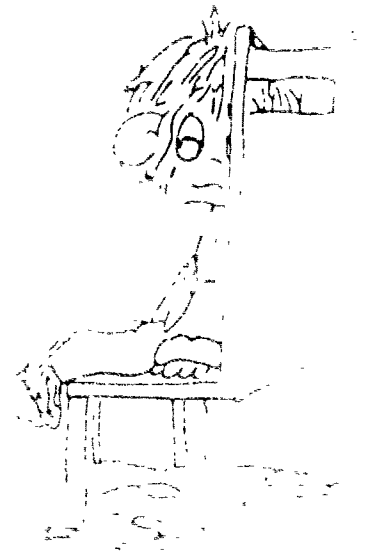
Then he falls and scrapes his knee. Some of the kids laugh at him when he starts to cry. Another piece of the sign falls to the wayside. He finally picks himself up and looks for something else to do.

An even better way to experiment with your feelings and how others treat them is to make a LALAC sign. Attach some string and hang it around your neck.

Everytime someone hurts your feelings, tear off a piece of the sign and tape it to the wall. Then tape a piece back on.

The size of the piece will depend on how good you feel they are.

Some of his classmates start playing too rough for indoor play and Mike joins in. The teacher gets upset because the kids are out of control. Teacher grabs Mike by the arm and pulls him out of the group and takes him to a corner of the room where he's lectured about proper behavior in school and told to sit in the corner until he knows the difference between indoor and outdoor play. Others are made to do the same things. But that doesn't help Mike's sign.



In the evening, after dinner, Mike plays with his toys in the living room. His parent joins him and a piece of his sign goes back on. At bedtime he is told to pick up his things.



Again, as a 5 year-old, he's not the fastest person in the world. He needs encouragement and help . . . to get the job done.

Instead of being positive about the situation, both mom and dad begin nagging and yelling about being so slow and "Can't you do anything unless we yell?" . . . off goes another piece.

Taking a bath . . . brushing his teeth . . . both too slowly . . . finally to bed.

After the light is out . . . and the door shut . . . Mike takes off his IALAC sign . . . but there's not much left of it. Some days will be better than others . . . but torn signs usually outnumber the undamaged ones.



SOME ACTIVITIES TO TRY

1. Wear an IALAC sign to dinner tonight. Tell your family a story about your parent and what happened to your sign.
2. Think about other people's IALAC sign. "Add a piece" to someone else's sign with a genuine compliment.
3. Make a family IALAC sign. Each family member can listen to what is said in family conversations and add on or tear off pieces. Is the tone of your family nurturing or destructive?

Material From: Simon Sidney, I AM LOVABLE AND CAPABLE
Sacramento, CA: Agus Communication, 1974
By permission of the author.

PRIMARY OBJECTIVE AREA: Parenting

CROSS REFERENCE OBJECTIVE AREA(s): Relationships

NAME OF ACTIVITY: Job Description For Parents

MATERIALS NEEDED: "Help Wanted" Handout
Pencil, Chalk, Blackboard

AGE GROUP: Teen-Adult

READING LEVEL: Basic

GROUP SIZE: 20 - 25

TIME NEEDED: 60 Minutes

PURPOSE

1. To find out how students view the role of a parent.
2. To help students distinguish different parenting styles.
3. To encourage group discussion and problem solving.
4. To help the facilitator and fellow students better understand each student's family's unique needs.

DIRECTIONS FOR ACTIVITY:

1. Divide class into groups of 4 or 5 students. Give students 15 minutes. Each group will write a job description for the position of parent on the worksheet. Students may add additional categories on the worksheet if so desired.
2. Have the students compare their own job descriptions with each other's.
3. List all descriptive words used by participants in their job descriptions on the board.
4. Discuss similarities and differences in parenting styles.
5. Rewrite job descriptions as a group(s). You may want to expand and rewrite individually.

HELP WANTED: IMMEDIATELY

Job Title: Parent

Responsible For:

Qualifications Needed:

Work Hours:

Salary:

Additional:

PRIMARY OBJECTIVE AREA: Parenting

CROSS REFERENCE OBJECTIVE AREA(s): Communication Skills

NAME OF ACTIVITY: Peace In The Family

MATERIALS NEEDED: Handouts #1 and 2, and 3
Handout #4 (Optional)
Paper, Pens/Pencils

AGE GROUP: Teens and Up

READING LEVEL: Basic and Up

GROUP SIZE: Any

TIME NEEDED: 45 Minutes to One Hour

PURPOSE

1. To define discipline.
2. To match guidance/discipline techniques.
3. To compare parenting styles.
4. To develop strategies for effective discipline.

DIRECTIONS FOR ACTIVITY:

- Put "Discipline Is..." on the board. Ask students to add responses to it.
1. Have participants list the various methods of discipline they use when their child (children) misbehaves - on Handout #1. Ask them to note what results their methods get from the child and what the child learns from their choice of discipline.
 2. Have the participants share their methods and reasons for their use in a group discussion. Encourage participants to talk about why they use this method, where they learned it, if it impacts all of their children the same, how effective it is, etc. Note: It may be difficult for you to understand or accept some methods.
 3. Distribute Handout #2 and #3. Read one or both out loud, silently or have different class members read a paragraph out loud. Make reading out loud strictly volunteer.
 4. Examine the differences between punishment and discipline. (See Facilitator's Resources) Point out that discipline is a sign of caring. Encourage participants to think of discipline as "GUIDANCE."

PURPOSE

DIRECTIONS FOR ACTIVITY:

5. Use optional Handout #4 to show alternatives to exploding. Point out how early and appropriate discipline is effective; how their own feelings effect the way they discipline; long term effects of discipline and the importance of separating feelings and actions. Ask for a volunteer who might like to role play a discipline problem they may be having.
6. Role Play - Have person discipline as they normally would--get input from the group on how effective this method was or other methods that would be effective.
7. Pitfalls to avoid or correct when discipline is required:
 - a) When you punish in anger and impose unrealistic punishment, say so to your child. Children need to know parents are human and make mistakes.
 - b) When you know that a child has done something wrong, don't ask him/her--tell him/her.
 - c) Inconsistency never gives a child a clear message.
 - d) Inappropriate discipline for older or younger children, i.e. sitting a two year- old in a chair for an hour.
 - e) Ask participants to identify other pitfalls.
8. Point out that discipline is an important form of communication; that is a lifelong process. "This involves a system of listening and responding from infancy onward."

DISCIPLINE VS PUNISHMENT

THE ELEMENTS OF DISCIPLINE

- 1 enforces rules
- 2 involves self control and learning
- 3 gives a sense of control, enhances self concept and identity - ties into personality development
- 4 is started when young
- 5 is a coping skill needed by child
- 6 takes time and thought
- 7 given in a spirit of love in order to guide
- 8 helps child to improve self
- 9 helps child "own" the problem
- 10 parent does not have to be on scene to influence behavior because foundations are laid (teaches independence)

THE ELEMENTS OF PUNISHMENT

- 1 is separate from discipline
- 2 can take the form of depriving the child of love, attention, money or other goodies
- 3 can be physical, mental, emotional
- 4 must be constantly reinforced by the physical presence of parent
- 5 parent sees problem as theirs (parents)
- 6 done in anger to get even or to straighten child out
- 7 for parent to control child, not for child to control self
- 8 done on the spur of the moment not much thought given

EFFECTIVE DISCIPLINE WORKSHEET

<u>Type of Discipline Used.</u>	<u>Results.</u>	<u>What My Child Learns.</u>
1.	1.	1.
2.	2.	2.

PEACE IN THE FAMILY TAKES EARLY COMMUNICATION

Setting up a two-way communications system with your children that will keep peace in the family involves a lot more than separate telephones. It involves a system of listening and responding from infancy onward.

"When I work with parents who are in trouble with their kids, I frequently find a breakdown in transactions between the children and parents that goes in both directions," says Ray Helfer, M.D., Professor of Pediatrics and Human Development, Michigan State University, College of Human Medicine.

"Our communications systems with our children get set up when they are infants and that's when many of us fall back on the first method of correction that seems to work - pain. The trouble with pain, or the threat of pain, is that it is so effective when children are small."

"The threat of spanking is so effective when children are little that we say, "Aha! It Works! I don't have to do anything else."

"But it's like adding on your fingers," Dr. Helfer says, "until you get to ten, it's an adequate system, but when you need something more complex, you have run out of fingers."

The best system of communication to use when your children are little is one that will work when they are older, but most people don't know how to set that up.

First, don't be fooled by the immediacy of the effect. When a small child is threatened with pain, you get immediate response and it's hard to argue with those results, but the results are so immediate that the long-term effects are missed. As the child gets older, he/she learns to accommodate spanking and pain or the threat of pain has less and less effect on changing behavior; more and more pain doesn't work. Kids learn not to let pain or the threat of pain bother them.

Second, use pain only on occasions when that form of forcible change may be necessary, particularly when the child is really little, from toddler to three or four years old. The only justification for hitting or threatening to hit a kid is when he/she is about to do something personally very dangerous, such as put a key in a 220 watt socket or touch a lighted stove or run in front of a truck.

"We had a child who liked to ride his tricycle with the front wheel on the white line of the highway. We could have taken his trike away or tied him/her to a tree--those options were open. Instead we gave him/her a spanking and he/she quit. He/she is still alive and we didn't have to use that technique very often."

When possible, get the child involved in the solution to the problem. For instance, tell him/her you know he/she took jam--or later maybe he/she took the car without permission. Let him/her know you know and see what he/she can come up with for a punishment.

But, throughout, be sure you separate feelings and actions. And when the child is punished be sure he/she knows he/she is punished for what he/she did and not how he/she felt. You don't have to wait for a big event to teach these lessons. "One night watching a basketball game with an eight year old and a twelve year-old, we saw Jud Heathcote get mad at the referee and collect two technical fouls. I asked the boys why Heathcote got the technicals; the eight year old said it was for getting mad, but the twelve year old knew it was for yelling at the referee. By the age of twelve, the older boy knew the difference.

When two of my boys were playing hockey, the older boy tripped the younger one, and the younger boy hit his brother over the head with a hockey stick. We made sure he knew he wasn't being punished for getting angry, but for hitting his brother over the head with a stick.

But these are skills that have to be learned. They don't come easy; they have to be practiced. It's like learning tennis from a book. You can know something because you've learned it, but in the pressure to real life it may not come naturally and you'll smack the kid and then say, "Blast it. Why did I do that? I knew better."

Home should be a safe place to screw up, where you are allowed time and energy to work out your mistakes. It's safer to learn these lessons as a kid than as an adult, but it's not too late to learn them together.

From: "Stress Management Training For Women on Public Assistance". A Replication Manual.
Michigan Department of Mental Health - September, 1981.

PARENT WORKSHOPS

Methods of Child Management
(The good ways and those that aren't so good!)

1. Communication (BEST METHOD)

Make sure that you set aside time to communicate with your child. Explain to him/her clearly what you expect of him/her. Remember, it is important to describe what you expect, why you expect it, how you expect it, and where you expect to have it done. Allow time for your child's questions. He/she needs to feel that you're being fair with him/her and that you respect his/her feelings.

Listen carefully to what your child has to say; this will help to insure that he/she will listen to you.

2. Attention (VERY GOOD METHOD)

Are you available and interested when your child feels that he/she needs your time? Your child needs to feel important to you. Share yourself with your child and he/she will value what you ask of him/her. Be sure to tell your child when he/she pleases you, if you do this, he/she will try to please you more often.

3. Rewards (VERY GOOD METHOD)

When you want a good thing from your child, give your child a good feeling in return; this lets the child know that you appreciate him/her.

4. Choices (VERY GOOD METHOD)

Allow your child the right to make decisions. Remember, since the child has no experience in making decisions as a child, how will he/she know how to make decisions as an adult?

Giving a child a choice helps develop a sense of responsibility and self-respect.

5. Set Example (GOOD METHOD)

Your child learns to be like you. If you are dissatisfied with yourself, then you may find that you dislike your child because he/she reminds you of you. Remember you cannot expect more of your child than you expect of yourself.

6. Change Environment (GOOD METHOD)

Sometimes you can change something in a child's surroundings that will help to eliminate a problem.

Example:

Problem: Your child spills milk on himself/herself. Solution: Check to see if he/she needs a smaller glass.

7. Natural Consequences (A MUST)

When we feel the hurt of a painful experience in life, we then learn to avoid making similar mistakes. If you try to protect a child from a painful mistake that he/she has made, then you are teaching your child that he/she doesn't have to take the responsibility for his/her errors. Let the child make his/her own mistakes.

8. Withdrawing Attention (GOOD)

We live for the attention of others. When your child misbehaves, don't reward the child with an audience. Send him/her to another room to think about his/her behavior and then after a few minutes, take the time to discuss the problem with him/her.

9. Restricting Privileges (BE FAIR ABOUT THIS)

When a child misuses a privilege, it is only fair to restrict that privilege to point out that agreements must be kept to insure the use of privileges.

Restricting a privilege when a child has misbehaved works but be careful to explain to the child why you feel the punishment is necessary.

10. Criticism (BE CONSTRUCTIVE)

Constructive criticism is essential to help a child understand that he/she is in error. However, it is much more important to point out what a child does well than it is to point out a mistake.

11. Embarrassment (AVOID)

Some parents feel that by publicly embarrassing their children that this will improve their behavior. What is really accomplished is that the child learns to fear social contact with people. As an adult, this child will lack the vital self-confidence needed to develop successful adult relationships.

12. Guilt Infliction (A GREAT BIG NEVER)

Inflicting guilt means that a parent tries to make their child feel responsible for their own personal needs. This is wrong! Parents are responsible for their own needs. Teach your child to be responsible for himself/herself. Guilt infliction teaches a child to give to everyone and to neglect oneself.

13. Force (AVOID)

Keep in mind that every time you use force with a child that you are teaching the child to hate and fear you. The more you use force, the more the child will hate and fear. Try to reserve this method for those occasions when you need to protect and insure a child's personal safety.

12 Alternatives To Whacking Your Kid.

When the big and little problems of your everyday life pile up to the point where you feel like lashing out - stop. Take time out. Don't take it out on your kid. Try any or all of these simple alternatives - whatever works for you.

1. Stop in your tracks. Step back. Sit down.
2. Take five deep breaths. Inhale. Exhale. Slowly slowly.
3. Count to 10. Better yet, 20. Or say the alphabet out loud.
4. Phone a friend. A relative. Even the weather.
5. Still mad? Punch a pillow. Or munch an apple.
6. Thumb through a magazine, book, newspaper, photo album.
7. Do some sit-ups.
8. Pick up a pencil and write down your thoughts.
9. Take a hot bath. Or a cold shower.
10. Lie down on the floor, or just put your feet up
11. Put on your favorite record.
12. Water your plants.

For more parenting information, call:
Child Abuse Prevention Services, Inc.
300 N. Washington, Ste. 51, Lansing, MI 48933
(517) 464-8444

**Take time out.
Don't take it out on your kid.**

1 1 1 1

Effective Parenting

Effective Parenting

For the Inmate Parent

Handouts #1, 2 and 3

AGE GROUP: Secondary - Adult

READING LEVEL: Low to High

GROUP SIZE: Individual to Large

TIME NEEDED: One to 3 Hours

DIRECTIONS FOR ACTIVITY:

1. To identify effective parenting techniques.
2. To practice effective parenting techniques.
3. To assist in developing a definition of effective parenting.

1. Introduce idea that good parenting techniques do not take a lot of time.
2. Share the diagrams and strategies for the one-minute reprimand on Handout #1.
3. Develop one example to share with the group. The book has several or you may use one of your own.
4. Brainstorm with the group other situations and walk through the technique.
5. Role play examples. You might role play one in the larger group then break into smaller groups.
6. Reconvene in the larger group and ask for honest feedback on both the negative and positive points of the one-minute method. Ask students to compare this technique with their present effective methods.
7. Assign participants to try technique at least once in the next week.
8. Report back the results--problem solve where the technique did not work.
9. Repeat the above steps for the one-minute praise, and then again for goals--in that order. (Distribute Handout #2 and Handout #3.)

CONTENT OBJECTIVE AREA: Parenting

CONTENT OBJECTIVE AREA: Relationships

TOPIC OF ACTIVITY: Step parent/Step child relationships

MATERIALS NEEDED: Multiple copies of Handout

AGE GROUP: Teens and Up

READING LEVEL: Basic

GROUP SIZE: Any

TIME NEEDED: 45 min. plus
1/2 Hour follow up

PURPOSE

1. To learn more about the step parent/step child relationship.
2. To practice interviewing skills.
3. To analyze some of the conflicts and strategies for coping with step parenting.

DIRECTIONS FOR ACTIVITY:

1. Make multiple copies of Handout #1.
2. Open the class with the statement: "How many of you are either step children or step parents?" "How many of you know someone who is a step child or step parent?"
Point out that (most likely) everyone in the class will have raised their hands at least once. Talk about how it is almost impossible for us in the 80s to not have some type of first-hand experience with step parents and/or step children.
3. Explain that students will be interviewing actual step parents/children to become more sensitive to and learn about their situation. Assign them to interview one step child and one step parent and to complete Handout #1 for each interview. This assignment will be due in one week. Note: Participants who are step children/step parents may fill out Handout #1 on themselves.
4. Practice interviewing in the class with a volunteer to prepare students for the homework interviews. Break into small groups with a step child in each group who volunteers to be interviewed by the group. Ask each of the questions on Handout #1. Have the group interview him/her.

One Minute Reprimands: A Summary

The One Minute Reprimands works well when:

1. I tell my children beforehand that I am going to reprimand them when their behavior is unacceptable to me. And I encourage them to be just as honest with me.

The First Half of the Reprimand

2. I reprimand my children as *soon* as possible.
3. I tell them *specifically* what they did.
4. I tell my children, in no uncertain terms, just how I *feel* about what they have done.
5. I am silent for a few very long, unpleasant seconds - to let them *feel* what I feel.

The Second Half of the Reprimand

6. Then I calm down and *touch* my children in a way that lets them know that I am on their side.
7. I remind my children that while their recent behavior was not good, I think *they* are good.
8. I tell my children, "I love you!" And I hug them. When the Reprimand is over - it's *over*.
9. Later in the day, I listen to whatever the children want to tell me.
10. I realize that while it may take me only a minute to reprimand my children with love, the benefits may last them for a *lifetime*.

Excerpt pp 282-285 from THE ONE MINUTE FATHER
by Spencer Johnson. © 1983 by Candle Communications Corporation
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One Minute Praising - A Summary

One Minute Praisings work well when:

1. I tell my children ahead of time that I am going to praise them when they do something that makes me feel good
2. I catch my children doing something *right*
3. I tell my children specifically what they *did*
4. Then I tell them how *good I feel* about what they did and why it makes me feel so good
5. I stop talking for a few seconds. The silence lets *them* feel the good feeling themselves
6. Then I tell them that I love them
7. I end the praising with a *hug* - or at least a light touch to let them know I care
8. The Praising is short and sweet. When it's over, it's over
9. I realize that it takes me only a minute to praise my children. But feeling good about themselves may last *them* for a lifetime
10. I know that what I am doing is good for my children and for *me* - I'm really good about *myself*

Excerpt pp 287-285 from THE ONE MINUTE PARENT by Stephen Johnson. © 1983 by Candie Communications Corporation. Reprinted by permission of William Morrow and Company.

One Minute Goals: A Summary

One Minute Goals work well in our family when

- 1 We have clear goals as a family ("We" goals), and as individuals ("I" goals)
- 2 We strive for mutual agreement so we all feel we are getting what we want from the family
- 3 We each write out our goals in 250 words or fewer on a single piece of paper - so it takes us only a minute or so to reread them
- 4 Our goals are *specific*, showing exactly what we would each like to see happen and when: "I have realized . . . I am doing . . . It has happened by . . ."
- 5 We each *reread* our goals often in order to make them mental habits - a way of thinking
- 6 I take a minute out every now and then - I look at my own goals - I look at my behavior. I see if my behavior matches my goals
- 7 I encourage my children to do the same
- 8 Once a week, we enjoy reviewing our goals and progress together as a family

TOPIC AREA: Parenting
TOPIC AREA: Relationships
TOPIC AREA: Stages of Grief/Loss
TOPIC AREA: Handout

AGE GROUP: Adults

READING LEVEL: Intermediate

GROUP SIZE: Any

TIME NEEDED: 30 Minutes

PURPOSE

1. To better understand divorce as a loss.
2. To assist single parents in understanding the pressures and concerns of their children in the divorcing process.
3. To point out that divorce is a loss and that children may act out their grief.

DIRECTIONS FOR ACTIVITY:

1. Introduce the concept that while they as parents are experiencing the stages of grief and loss during the break up of a marriage, their children are also experiencing these stages.
2. Give participants the handout titled, "Stages of Grief/Loss". Walk through the handout asking at each stage for verification, other examples. If group is not sharing freely, ask them to share in groups of three. After that, ask for examples.
3. Other information to share about stages:
 - A. Experiences will effect our adjustment to any loss.
 - B. Boys and girls will experience the stages differently: boys experience many emotions as anger and will be much more open about that stage; girls will show the depression stage more openly and may not outwardly show anger. Outside socializing of boys and girls makes these two emotions acceptable.
 - C. Schools will often become aware of the pending divorce when a child is in the anger stage and acting out in class.
 - D. It is difficult to do your best quality parenting during this time period as you the parent will also be experiencing these stages.
 - E. If a child or adult gets "stuck" at one of these stages, that's an indication counseling might be needed.
 - F. If a child or adult hasn't worked through to acceptance after 2 - 3 years, counseling is indicated.

PURPOSE

DIRECTIONS FOR ACTIVITY:

4. Close activity by asking for any further questions or comments. If the group consists of parents currently in the divorcing process, you might want to wrap up the activity with an "I learned" statement; i.e., "One thing I learned about my child during this activity is ..."

Activity designed by Sarah Smith

STAGES OF GRIEF LOSS

The grief process of divorce often follows the stages of acceptance of death described by Kubler-Ross. However, the divorce process includes two unique aspects: the effect of a pending of a new life.

DENIAL

This stage occurs during the emotional divorce. The divorcing individual and children, do not want to recognize the signs of decay in the relationship.

"This can't be happening."
"She/he/they are only going through a rough time."
"If I ignore this, it'll be better."

ANGER

During this stage, there may be a great deal of fighting over issues such as money, property, custody, visitation rights, etc.

"How could she/he/they do this to me?"
"It's not fair."
"What have I done to deserve this?"

BARGAINING

This may be part of the ambivalence that occurs during the divorce. Some positive emotional bonds are broken, but there is still a holding on.

"Let's wait until the end of the summer... maybe we can work things out by then."
"Maybe if I'm real good and clean my room, (etc.) you and Dad will get back together."

DEPRESSION

Feelings of loss and depression occur when the person comes to a new awareness of the reality of the situation. Feelings of isolation are intensified, and there is a mourning of a lost marriage, a way of life.

"Who's going to take care of me?"
"I'm so sad... there's nothing left."

ACCEPTANCE

In the final stage, acceptance and integration of one's new life is achieved. A new life style, re-direction of energies, and the former marriage becomes part of the past.

"That part of my life is over... I am ready to move on."
"I know my mom/dad still loves me."

PRIMARY OBJECTIVE AREA: Parenting

AGE GROUP: Adult

CROSS REFERENCE OBJECTIVE AREA(s): Relationships

READING LEVEL: Intermediate

NAME OF ACTIVITY: Guidelines for Helping Children Cope With Divorce

GROUP SIZE: Any

MATERIALS NEEDED: Handout

TIME NEEDED: 20 - 30 Minutes

PURPOSE

1. To assist parents in helping their child's adjustment to divorce.
2. Goal of this activity is to relieve some of the incapacitating guilt many parents feel about the effects of divorce on children.

DIRECTIONS FOR ACTIVITY:

1. The research that was done by Marin County, California, shows that children adjust best when their parents make a quick and good adjustment. For example, get through the stages of grief/loss and move on with a positive direction in their lives.
2. Because parents will be experiencing the stages themselves, the list of guidelines is important. Give parents guidelines and walk through them, asking for specific examples of if and how they handled each item. Focus particularly on items 10, 11 and 12. All children feel somehow they were to blame. If parents allow themselves to be manipulated, they only reinforce that and delay the adjustment for all. Encourage parents not to become a parent who gets "divorced to their spouse", instead of "divorced from their spouse". Children should not become go-betweens, this is very unhealthy for all involved.
3. Reinforce that everyone usually does the very best that he/she can at any point in time. As divorced parents look back, they may have regrets and wish that they had done some things differently. (Encourage them to stop blaming, forgive themselves and go on with life.) Ask group members if they believe blame and guilt incapacitate us?

OBJECTIVE

DIRECTIONS FOR ACTIVITY:

4. If students participate, be sure to allow them to help each other. Sharing feelings, knowledge and concerns may help other members a great deal.

GUIDELINES FOR HELPING CHILDREN COPE WITH DIVORCE (By Coping Better Ourselves)

1. Take care of yourself - children are not helped by feeling their parents are martyrs. Read and follow suggestions for helping yourself work through feelings, set goals, and build a new happier life and friendships.
2. Notify the school and others who work closely with your children - enlist their support of the child and tell them they can contact you with any concerns regarding the child.
3. Encourage child to discuss her (his) feelings with you - be empathetic in listening - nonjudgmental and nondefensive. Tell them they need to let you know if you are making them uncomfortable.
4. Be honest about your feelings regarding divorce without being defensive or dragging them into the middle. Use "I feel" statements rather than "she did" or "he did" or "I didn't." Try to be brief but give an honest picture of where you are so they know.
5. Reassure them of your love for them which will always be there and does not end with divorce. If you can do so honestly, reassure them that both parents love them.
6. Maintain as much stability and consistency as possible for the children to have frequent, positive, regular contact with both parents separately. (Seeing parents together is confusing unless a reconciliation is contemplated - witnessing fights is very destructive; witnessing brief, civilized exchanges between divorced parents is reassuring to children.)
7. Encourage children to talk to the other parent about concerns related to the other parent and don't discuss the other parent negatively under any circumstances. Don't put the children in the middle - often their negative comments are to please you, but it hurts them to do this - both parents are part of their identity so to reject a parent is to reject a part of themselves.
8. Expect, accept and support them when they are having adjustment stress. This is usually short-term unless the parent(s) fail(s) to adjust appropriately.
9. Have fun with your children when you're able to do so - even a short intimate time together means a lot.
10. Help the children understand that the divorce is in no way related to any of their behavior; they are not responsible and should not feel guilt.
11. Don't let your own guilt put them in a place where they can manipulate you (for money, favors, etc.).
12. Don't fight with ex-spouse in front of the children - do it in private if it needs to be done.
13. Seek divorce counseling - all parties involved if possible - to work through divorce and children's issues constructively with the help of objective, trained outside person.

AGE GROUP: Parenting

TOPIC AREA(S): Relationships

STAGES: Stages Adjustment of Children
Loss Inventory for Kids

FORMAT: Handout

AGE GROUP: Adult

READING LEVEL: Intermediate

GROUP SIZE: Any

TIME NEEDED: 45 Minutes

OBJECTIVE

To help parents understand the nature of loss for children and the multiple losses associated with divorce.

Activity written by Sarah Smith

DIRECTIONS FOR ACTIVITY:

1. Introduce the concept of loss as it relates to children.
 - a) Children experience loss differently—they may not begin to grieve until one year after the loss/divorce. They may stay in the denial state. Refer back to Stages of Grief/Loss.
 - b) It takes 2-4 years to recover from a major loss event.
 - c) Children lose both parents, as they used to be, when there is a divorce.
 - d) It is not our possessions (or people), but our attachment to them that measures the intensity of the loss.
2. Handout the "Loss Inventory of Kids" and ask participants to complete as they think would be typical for children experiencing divorce.
3. Ask participants to share in groups of 2 or 3, their thoughts and feelings about the Inventory.
4. Share in the large group. Help participants understand the multiple loss events children experience. Discuss, not blaming one's self, but rather the necessity to talk with their children and to allow children the same time and space they feel the need for, to adjust to all changes related to divorce.

LOSS INVENTORY FOR KIDS

DIRECTIONS:

1. Read the loss listed below.
2. If a child has experienced that loss, place an "x" in the appropriate "time factor" box reflecting how long ago the event happened.
3. When you have completed the entire inventory of losses, tally each loss as follows: Multiply "impact factor" by "time factor" and enter the answer in the far right column. Add "total" column vertically for your total score.
4. See score impact information at end of this inventory.

	Impact Factor	Time Factor (Length of time since the event happened)			Impact "X" Time Factor
		0 - 6 Months	6 Mos. - 1 Year	1 - 4 Years	
Death of Parent	10	X5	X3	X1	
Death of Brother/ Sister	10				
Divorce of Parents	10				
Extended separation of Parents (No divorce)	10				
Diagnosed terminal illness - self/ parent/sibling	10				
Death of close relative	9				
Moving to new city	9				
Major personal injury or illness (loss of limb, etc)	9				
Abortion	9				
Rape	9				
Marriage/Re- marriage of parent	8				
Unplanned job loss self, parent (fired, laid off)	8				

PAGE SUB-TOTAL

	Impact Factor	Time Factor			Impact "X" Time Factor
		0 - 6 Months X5	6 Mos. - 1 Year X3	1 - 4 Years X1	
Retirement - parent	8				
Unwanted Pregnancy	8				
Changing to new school	8				
Major change in a family member (health, behavior)	8				
Moved or kicked out of home before age 18	8				
Permanent suspension from school	8				
Gaining new family member (birth, adoption, relative)	7				
Change in financial status of family (better/worse)	7				
Love relationship breakup	7				
Death of a friend	7				
Loss of harmony (conflicts) w/parents, teachers, friends	6				
Brother/sister leaving home (marriage, college, run-away)	6				
Mother beginning work or going back to school	6				

PAGE SUBTOTAL

		0 - 6 Months	Time Factor 6 Mos. - 1 Year	1 - 4 Years	Impact "X" Time Factor
Class/teacher/ schedule change	5	X5	X3	X1	
Sporadic school attendance	5				
Moving within a city	5				
Beginning/end of school	5				
Taking new job after school	5				
Temporary separ- ations in family (military, business)	4				
Change in physical appearance (pimples, glasses, etc.)	4				
Violations of the law (drugs, speeding)	4				
Trouble in school (teacher/principal)	4				
Change in living conditions (sharing a room, remodeling)	3				
Christmas/Easter/ Vacations	3				
Daily success/loss (A to B on paper, didn't make team)	3				
Argument with friend	3				

SUBTOTAL THIS PAGE _____
 SUBTOTAL 1ST PAGE _____
 SUBTOTAL 2ND PAGE _____
 COMPOSITE SCORE _____

IMPACT:

Under 150:

Probably have not faced major losses within the last year. It is not that their life is without loss; however, they should have adjusted to the losses that have occurred.

150 - 300:

The child is experiencing an average amount of loss in their life. More than likely they have experienced no or very few major losses within the last year. The losses they experienced did cause a change in your life and warranted some adjustment from them; however, there should not have been great confusion/pain with this adjustment.

300 - 400:

May have experienced several high level losses in the last four years or one major loss in the last year. The losses may have caused a degree of confusion/pain, and re-adjustment may have been difficult and prolonged.

400 and up:

Probably have experienced multiple high level losses within the last year. These losses more than likely have affected the child physically and emotionally. Adjusting to the losses has been painful, confusing, and has caused major interruptions with which to deal.

ERIC

CONTENT AREA: Parenting

CONTENT AREA: Relationships

TOPIC: Step parent/Step child relationships

MATERIALS NEEDED: Multiple copies of Handout

AGE GROUP: Teens and Up

READING LEVEL: Basic

GROUP SIZE: Any

TIME NEEDED: 45 min. plus
1/2 Hour follow up

PURPOSE

1. To learn more about the step parent/step child relationship.
2. To practice interviewing skills.
3. To analyze some of the conflicts and strategies for coping with step parenting.

DIRECTIONS FOR ACTIVITY:

1. Make multiple copies of Handout #1.
2. Open the class with the statement: "How many of you are either step children or step parents?" "How many of you know someone who is a step child or step parent?" Point out that (most likely) everyone in the class will have raised their hands at least once. Talk about how it is almost impossible for us in the 80s to not have some type of first-hand experience with step parents and/or step children.
3. Explain that students will be interviewing actual step parents/children to become more sensitive to and learn about their situation. Assign them to interview one step child and one step parent and to complete Handout #1 for each interview. This assignment will be due in one week. Note: Participants who are step children/step parents may fill out Handout #1 on themselves.
4. Practice interviewing in the class with a volunteer to prepare students for the homework interviews. Break into small groups with a step child in each group who volunteers to be interviewed by the group. Ask each of the questions on Handout #1. Have the group interview him/her.

Stepfamily Relationships

PURPOSE

DIRECTIONS FOR ACTIVITY:

Follow Up Activity:

1. Ask participants to answer the following (round robin) based on their interviews:

I learned _____

Being a step parent is _____

Being a step child is _____

Follow through with discussion. Allow time for participants to discuss feelings.

STEP PARENT/STEP CHILD INTERVIEW

Name of Interviewer:

Step parent _____

Step child _____

1. At what age did you become a step child or step parent?
2. If you can remember how you felt when you first became a step child or step parent, could you describe it?
3. What is the hardest thing about being a step child or step parent?
4. What is the nicest thing about being a step child or step parent?
5. Do you have any advice for future step children or step parents?

CONTENT OBJECTIVE AREA: Parenting

CONTENT OBJECTIVE AREA(s): Health and Wellness

CONTENT SKILL: Safety In The Home

RESOURCES NEEDED: Handouts #1 and 2

AGE GROUP: Grade 10 and Up

READING LEVEL: Intermediate

GROUP SIZE: Any

TIME NEEDED: One to 2 Hours

PURPOSE

To teach parents how to protect their child from danger.

Note: Other materials on childrens' safety in the home and/or car are often available from local hospitals or police departments. These groups may also provide speakers.

DIRECTIONS FOR ACTIVITY:

1. Pass out Handout #1, "Poison Primer" (can be obtained in quantity from local hospital or doctor). Discuss and/or develop questions to go with this.
2. Distribute Handout #2. Have students complete it and discuss.

POISON PRIMER

A Guide to the Prevention of Poisoning

Make your home Poison-Proof

Poison Information Centers answer questions about poisoning from both health professionals and the general public 24 hours per day. There is no charge for this service. Look in the front of the local telephone book for telephone number.

A checklist of poisonous products found in the home:

Kitchen

- o aspirin
- o drain cleaners - lye
- o furniture polish
- o oven cleaner
- o automatic dishwasher detergent
- o powder and liquid detergents
- o cleanser and scouring powders
- o metal cleaners
- o ammonia
- o rust remover
- o pills
- o carpet and upholstery cleaners
- o bleach
- o vitamins

Bedroom

- o sleeping drugs
- o tranquilizers
- o other drugs
- o jewelry cleaner
- o cosmetics
- o perfume
- o after shave
- o cologne

Closets, Attic, Storage Places

- o rat poison, ant poison and insecticides
- o moth balls

Bathroom

- o aspirin
- o all drugs and pills
- o drain cleaners - lye
- o iron pills
- o shampoo, wave lotion and sprays
- o hand lotion
- o creams
- o nail polish and remover
- o suntan lotions
- o deodorants
- o shaving lotions
- o toilet bowl cleaners
- o hair remover
- o pine oil and bath oil
- o rubbing alcohol
- o boric acid
- o room deodorizer

Laundry

- o bleaches
- o soap and detergents
- o disinfectant
- o bluing, dyes
- o dry cleaning fluid

Garage, Basement

- o lye
- o kerosene
- o pesticides
- o gasoline
- o lighter fluids
- o turpentine
- o paint remover and thinner
- o anti-freeze
- o paint
- o weed killers
- o fertilizers

General

- o flaking paint
- o repainted toys
- o broken plaster
- o plants

Based on experience, the products underlined are the most dangerous poison.
If your child swallows any of the above materials, call your doctor or the poison information center nearest you immediately.

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- o other drugs
- o jewelry cleaner
- o cosmetics
- o perfume
- o after shave
- o cologne

Closets, Attic, Storage Places

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and insecticides
- o moth balls

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- o boric acid
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Garage, Basement

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General

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Syrup of IPECAC

Syrup of Ipecac is for emergency use in poisoning. It is a medicine that can be purchased in a pharmacy without a prescription. When given to a child or an adult it will cause vomiting.

**Syrup of Ipecac must never be
used before calling your
Family Physician or a
Poison Information Center**

Normally Syrup of Ipecac should not be given at home if:

1. The patient is less than one year old; or
2. Corrosives (lye, drain cleaners, oven cleaners, automatic dishwasher detergent, or other strong acids or bases) have been taken or burns are seen around or in the mouth or
3. A petroleum distillate containing product (kerosene, gasoline, paint thinner, furniture polish, etc.) has been taken; or
4. The patient is lethargic (sluggish), asleep, or comatose (unconscious); or
5. The patient is convulsing.

Directions:

For children over one year and adults

1. Give one tablespoonful (15 ml, one half ounce) of Syrup of Ipecac.
2. Immediately give 4 - 8 oz. of any fluid except milk.
3. Vomiting should occur in approximately 15 - 20 minutes.
4. If vomiting has not occurred in 20 minutes administer an additional tablespoonful of Syrup of Ipecac. Never give more than two tablespoonfuls.
5. If vomiting does not occur, transport patient to an emergency treatment facility.

Things to do to prevent accidental childhood poisonings

1. Do read and heed labels and precautionary statements on containers.
2. Store potentially harmful products out of the reach of children or lock the products up.
3. Do dispose of unused portions and empty containers.
4. Do avoid putting harmful substances into food or drink containers; such as storing gasoline in Coke bottles.
5. Do avoid leaving children alone, especially where potentially harmful substances are accessible, i.e., the kitchen or the bathroom.
6. Do recognize that children are curious about things and they learn to climb at very young ages.
7. Do avoid keeping edibles and non-edibles on the same shelf.
8. Do avoid calling any medicines "candy."
9. Do train your children to stay away from storage areas and medicine cabinets.

What to do in different poison situations

Swallowed Poisons: If the person is awake and able to swallow, give milk or water only. Then call the poison center or doctor. Caution: antidote labels on products and antidote charts may be out of date and incorrect. DO NOT give salt, vinegar, or citrus fruit juices.

Poisons on the Skin: Remove any affected clothing. Flood involved parts with water, wash with soap and water, and rinse. Then call the poison center or doctor.

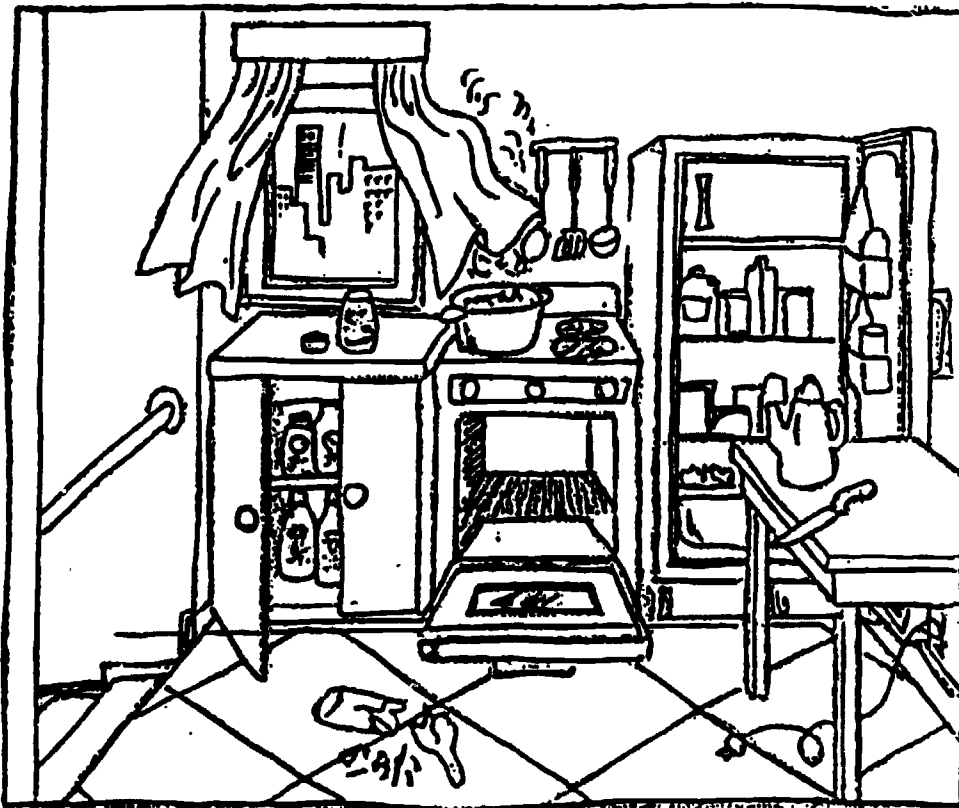
Poisons in the Eye: Flood the eye with lukewarm (never hot) water poured from a pitcher held 3 to 4 inches from the eye for 15 minutes. Then call the poison center or doctor.

Inhaled Poisons: Immediately, carry or drag the person to fresh air and give mouth-to-mouth resuscitation, if necessary. Ventilate the area. Then call the poison center or doctor.

Find items in this room which make it unsafe for young children

Then list them in the spaces below

AN EYE ON SAFETY



1. _____
2. _____
3. _____
4. _____
5. _____

6. _____
7. _____
8. _____
9. _____
10. _____

PRIMARY OBJECTIVE AREA: Parenting

AGE GROUP: Teen and Up

CROSS REFERENCE OBJECTIVE AREA: Relationships

READING LEVEL: Intermediate

NAME OF ACTIVITY: How to Rate a Toy

GROUP SIZE: 20 - 25

MATERIALS NEEDED: "How to Rate a Toy" Handout, pen/pencil, toy(optional)

TIME NEEDED: 20 Minutes

P U R P O S E

D I R E C T I O N S F O R A C T I V I T Y :

1. To devise strategies for maintaining consistency in the lives of the children.
2. To describe methods to promote child safety.

1. Distribute Handout #1.
2. Have a toy in mind (or in hand) to describe to the participants.
3. Have them rate this toy for a selected age group on the sheet provided.
4. Lead a discussion on participant's answers. Suggest they make notes on the rating sheet that will help them in future toy selection as well as using toys to evaluate their relationship with their child; how this toy or toys (play) acts as a source(s) of pleasure and stress, physical and mental growth, creativity and socialization.

Material written by the Ann Arbor Student Parent Center, students and teachers together.

III. DOES THE TOY INCLUDE - yes/no because

1. Age labeling guide on toy packages?

2. Sturdy, well-sewn seams on stuffed animals & cloth dolls?

3. Eyes and nose that are securely fastened on stuffed animals?

4. Rubber rattles, squeaks and teething toys that are too large to fit completely in an infant's mouth?

5. Electric toys with heating elements that are appropriate for children over eight?

6. Arrows and darts that have blunt tips?

7. A label stating : Non-toxic paint on painted toys?

8. A label stating: Flame-retardant/ flame resistant on fabrics?

9. A label stating: Machine/Surface washable on stuffed and cloth toys?

OTHER:

IV. DISCUSSION QUESTIONS:

Toys can help children grow in different ways. How does this toy help physical growth? (Exercise the large and small muscles: develop physical skills and coordination.)

Mental growth? (Help the child to deal with language, numbers, and other kinds of information: develop the ability to solve problems.)

Creative? (Encourage the child to be imaginative and inventive, provide an opportunity for self-expression.)

Social? (Give the child practice in getting along with people; help develop communication skills.)

1. _____
2. _____
3. _____
4. _____

INSTRUCTIONS FOR ACTIVITY

1. Divide into 4 groups of 4-5 students.
2. Each group will be given 15-20 minutes to discuss the topic.

Activity Designed by: Thomas Mills

PRIMARY OBJECTIVE AREA: Parenting

AGE GROUP: Adult

CROSS REFERENCE OBJECTIVE AREA(s):

READING LEVEL: Intermediate

NAME OF ACTIVITY: Latchkey Parenting

GROUP SIZE: One to 30

MATERIALS NEEDED: Handout and Chalkboard

TIME NEEDED: 30 Minutes

P U R P O S E

D I R E C T I O N S F O R A C T I V I T Y :

To discuss dangers facing "latchkey children" and how to teach children how to avoid them.

1. Ask participants to share their concerns related to "latchkey children." Write them on the chalkboard.
2. Discuss ways of dealing with these concerns.
3. Pass out "Preparing Your Child To Be Home." Read through information and discuss each topic.

Activity Designed by: Thomas Mills

PREPARING YOUR CHILD TO BE HOME ALONE

At one time or another, most parents who work outside the home confront the dilemma of deciding when their youngster is ready to be alone after school. This decision is difficult and causes many parents significant anxiety. There is no strict rule -- each child is different and must be evaluated individually. Your child's readiness depends on her or his age and maturity, your neighborhood and the length of time before an adult arrives home. Rabbi Earl Grollmand and child-development specialist Gerri Sweder, who surveyed more than 1,000 school-age children of working parents, share their insights and advice on the subject.

SIGNALS OF YOUR CHILD'S READINESS

"I really feel good that my parents trust me enough to take care of myself after school. I know it's a big responsibility, but I think I'm old enough."

-- Jennifer, age 13

A child's age is only the barest indication of when the child can be left alone. Most younger children do not want to be by themselves after school: "It's scary, and besides, we're lonely," many say. Some 9- and 10-year-olds feel that they can handle an occasional hour alone. Youngsters under 12, however, lack the decision-making skills necessary to function alone day by day. Primary-school children need after-school supervision, and young adolescents still need quidar.ce

You should also consider your child's emotional maturity. Children of the same age have varying limitations and capabilities. Some show more common sense than others, some are more independent, self-sufficient and self-confident. A 12-year-old girl said, "I like coming home and having a little time to be by myself." But a 13-year-old boy said he dreaded walking into the house alone. In deciding whether your child is mature enough to be home alone, it's important to be scrupulously fair in your assessment.

Young people want to share their anxieties with their parents, and they need their parents to listen to them. Ask your children whether they want to be alone. If so, for how long. Encourage them to speak openly. If your child says he/she does not want to be left alone, honor this request if you possibly can and in any case, treat the child's wishes with respect. Children who are forced to be alone too soon may develop physical symptoms such as headaches, stomachaches and nightmares -- clear signs of stress.

Another consideration is the length of time you propose to leave your child. In our interviews, many children over the age of 12 said they could handle being home by themselves for limited periods of time, but younger children found it overwhelming to return to an empty house even a day. Even adolescents mentioned their loneliness through a long afternoon.

When you determine that your child is ready to spend the afternoon hours at home alone, you can actively prepare the youngster for this step by developing your neighborhood as a resource, teaching your child how to handle various responsibilities and making your home safer.

USING YOUR NEIGHBORHOOD --

"My best friend, Cheryl, lives across the street. I know I can go to her house in the afternoons. Someone is always there."

-- Tamar, age 12

A child alone after school should know which neighbors are available and under what circumstances. For example, most youngsters feel less lonely when they know they can visit friends in the neighborhood to listen to music, shoot baskets, play with the computer or do homework together. Children in an apartment building or in the suburbs should know that a neighbor has an extra key. They should also know at least two neighbors they can call if they are hurt.

Having neighborhood contacts will help your child feel less alone and less isolated. Even an independent child who welcomes the responsibility and freedom of unsupervised after-school hours can benefit from a pre-established support network. Your careful effort to weave a fabric of neighborhood life that your child can depend upon can lead to her or his greater comfort when home without you.

STAYING IN TOUCH BY TELEPHONE --

"My dad is a druggist. In fact, the store is just a few blocks from our house. If something happened, I know I could call him and he would be here in a few minutes."

-- Damien, age 14

Youngsters told us how much better they feel when they know they can easily reach their parents by phone. These children have focused on the crucial point: reassurance. Children who are repeatedly told that their parents want to talk to them on the telephone and like to hear how they are doing will have far less trouble adjusting to being by themselves. As one 13-year-old girl said, "Just knowing that I can call if I have to makes me feel safer."

COUNTDOWN TO INDEPENDENCE --

Preparing a child to be alone really begins before age 8 or 10. You are laying the groundwork when you say to a toddler, "The stove is hot. Don't touch it. You can burn yourself." Later . . . you might say to a 5-year-old, "Don't open the door until you know who it is. Here's how to find out: Look through the window, call through the mail slot," and so on. At each step, you are teaching your child to exercise caution, to think about the act and its consequences, to understand the larger circumstances.

In the beginning, leave your child alone for only a very short period of time. You might say, "I'm going to the grocery store. I'll be back in ten minutes. While I'm away, make sure the door is locked." You may want to do this occasionally so that your child fully understands the rules and the routine.

COUNTDOWN TO INDEPENDENCE - Continued

As children grow older and become more self sufficient, they can be left unsupervised for longer times. You should monitor or review each situation of greater responsibility to determine how well the child is doing, making a point to compliment your child whenever she or he handles the new situation well.

At a certain point your child may grow uncomfortable and uncooperative. Accept this as a sign that you have reached the limit for now. Do not push your child further; let her or him get used to this new level of responsibility before introducing any more.

HANDLING THE FEAR FACTOR --

"I hate to go home when my parents aren't there. I always think someone is inside, waiting for me. As soon as I go in the house, I check everywhere to see whether someone is there."

-- Donna, age 12.

More than three-quarters of the youngsters we interviewed said that there are times when they are afraid to be home alone. They are afraid of strange telephone calls, unexplained noises or suspicious people coming to the door. Because they feel unprotected at home, the world becomes a threatening, unsafe place.

Unfortunately, many children feel that their parents are frequently unaware of or insensitive to their fears. According to these children, parents either do not listen to their anxieties or else casually dismiss them as "childish." One 10-year-old said, "When I told my dad I was afraid some guy in the neighborhood was going to come after me, he told me to stop acting like a baby." Although it probably comes from the parent's own discomfort with an imperfect after-school situation, this rejection of a young child's feelings is unkind and can be dangerous.

Children want their parents not only to listen to how they feel but also to teach them how to respond better to dangerous situations that could arise. When your child says she or he is afraid to be alone or hears noises in the house, listen carefully; the youngster is telling you she or he needs help to feel more safe and secure. By offering strategies for coping with possible emergencies, you can considerably lessen your child's anxiety and help her or him mature and find greater enjoyment in the hours after school.

Teach your child the proper response to various situations. When children know the solutions to problems that might arise, they feel more confident and relaxed about being on their own. The process can be handled in a game beginning with the hypothetical questions, "What would you do if . . . ?" and ending with such phrases as: . . . you were hungry? . . . you had a headache? . . . you lost the key to the apartment? . . . you wanted to visit a friend? After each answer, you should fill in any missing information. Because children need constant reminders, you should play this game at regular intervals, gradually incorporating new situations and supplying simple, basic instructions.

Keep instructions clear and concise: Please call one of us when you come home after school. Let us know if you are going out. Take your key and lock the door. Come home by 5:00.

Discuss with older children the kinds of problems children alone can encounter. For example, what should your daughter do if she is waiting for an elevator alone and a stranger also arrives to wait for the elevator? What should your son do if he thinks someone is following him home? All children should know how to answer the telephone and take a message without giving out any information.

You want your children to learn to be cautious and alert without being too scared to enjoy their afternoon. You also want your children to feel that they are becoming more competent and reliable, not that the world is becoming more dangerous and unreliable.

MAKING YOUR HOME SAFER --

It has been said of home security that the best method of keeping strangers out of the house is to make it as difficult as possible for them to get in.

Most children report feeling safer when their house is equipped with an alarm system. It's like a silent guard watching out for them. It will alert the children, the neighbors and even the police that someone is trying to break in. Children especially like the panic button next to the door "just in case."

When we think of security for the home, most of us think of devices that will physically hinder another person, yet some of the most effective security devices are simple everyday gadgets. Leaving the radio on during the day (or set by an automatic timer) can make a home sound occupied, and the familiar sounds can be reassuring to youngsters. More than half the children we interviewed said that they like hearing the sounds of a radio when they come home, especially a talk show, which creates the impression of conversation. Many youngsters hate to walk into a quiet house or apartment. "It's spooky," one 13-year-old said.

You might consider purchasing a telephone-answering machine to screen telephone calls. If you teach your child how to use the machine, the youngster will be able to interrupt the machine to answer calls from people she or he knows.

Teach your children that the doors and windows must be locked. Encourage the habit by practicing with your child locking and unlocking the doors and by letting your youngster lock up whenever you leave home together.

Different kinds of doors, locks and windows provide varying degrees of protection. You should consider hiring a bonded professional locksmith to perform a detailed security analysis of your home. Regardless of where you live, your child should always be able to view an outsider without opening a door. In a house, a curtained window near the door allows a child to view anyone who comes to the door. In an apartment building, doors should have a peephole at a level on which the child can see easily.

Never leave the key under the doormat, in a mailbox or under a flowerpot. There truly is no hiding place that is "secret" to the professional criminal. Each member of the family should have a key. Duplicate keys should be left with a trusted neighbor, a nearby friend or the superintendent of the building.

Tell your children that if they suspect that their keys have been stolen, they should not return to the house. Rather than risk encountering an intruder, your children should immediately call you and report their suspicions. In the meantime, the youngsters should go to the home of a friend or neighbor. They should not return until a security check has been made. If the keys are not found, lock cylinders should be changed as soon as possible.

PRECAUTIONS AROUND THE HOME --

Survey the outside of your home for possible small changes you can make to increase your child's safety. Below is a list of tips that are designed to thwart or hinder intruders. As you look at your home, you may find other changes you can make.

- Cut back shrubbery that could conceal a person.
- Do not leave ladders or tools outside.
- Do not display your family name on the mailbox.
- Close and lock the garage doors.
- Do not leave notes on doors or windows.
- Do not leave outside lights on during the day.

Preparing your youngster to be home alone requires that both you and the child undertake to learn and adjust to a new situation. An understanding of safety precautions and responsibility will make your child less likely to feel afraid and more likely to feel both pride and confidence in her or his growing maturity.

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PRIMARY OBJECTIVE AREA: Parenting

SECONDARY OBJECTIVE AREA: —

MODE OF ACTIVITY: Evaluation

MATERIALS NEEDED: Paper, Pencil, Envelopes, Stamps

AGE GROUP: Teens and Up

READING LEVEL: Intermediate

GROUP SIZE: Any

TIME NEEDED: 15 min. to 30 min.

PURPOSE

DIRECTIONS FOR ACTIVITY:

1. To evaluate material covered in each unit.
 2. To provide an opportunity to do self assessment.
 3. To practice written communication skills.
 4. To help develop and reinforce long term goals.
1. At the end of each unit, have students compose a letter to themselves. In the first unit covered (usually Self Awareness), have students address an envelope to themselves. Collect the envelopes to send with the letters upon completion of the whole course.
 2. Explain to students that they will have an opportunity to evaluate what they have learned. They will be writing an ongoing letter to themselves about what they have learned or experienced as a result of each unit. (The length of the letter is up to the facilitator). The facilitator should stress that this letter allows them to look back, evaluate and maybe even write down goals for the future. The facilitator may want to provide a sample letter for the unit that has just been completed.
 3. Have students write the letters while in class. The facilitator should circulate among the students to assist anyone who may have difficulty.
 4. Collect letters. Read them. At the end of each unit, return student letters so that they may write additional evaluations.
 5. When the course is complete, send the letters to each student.

Parenting Bibliography

A partial listing of books, articles, and curriculums which our writers and editors recommend. For additional help in selecting relevant reading or audio-visual materials, please call the Michigan Vocational Education Resource Center at Michigan State University: 1-800-292-1606.

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SUCCESSFUL LIFE SKILLS

SECTION 6

OBJECTIVE: RELATIONSHIPS

Upon completion participants will be able to analyze relationships for positive and negative contributions to overall life satisfaction.

Supporting objectives: Participants will be able to:

- Evaluate personal relationships for sources of pleasure and stress.
- Increase sensitivity to others feelings, cultural uniquenesses, needs and goals.
- Investigate the influence of group dynamics on relationships.
- Improve strategies for managing peer pressures.
- Identify behavior patterns and defense mechanisms which interfere with positive functioning of relationships.
- Assess the rewards of changing personal behaviors to change relationships.
- Examine how relationships change throughout life.

PRIMARY OBJECTIVE AREA: Relationships

AGE GROUP: Teens and Up

CROSS REFERENCE OBJECTIVE AREA: Self Awareness

READING LEVEL: Basic

NAME OF ACTIVITY: Relationships Need Many Qualities

GROUP SIZE: Any

MATERIALS NEEDED: Chalk

TIME NEEDED: 1/2 Hour to 1 Hour

PURPOSE

DIRECTIONS FOR ACTIVITY:

1. To examine the components of a relationship.
2. To understand the stages of relationship building.
3. To evaluate relationships for sources of pleasure and stress.

1. Read the Facilitator's Resource and proceed with the activity as directed.

RELATIONSHIPS NEED MANY QUALITIES

When we become friends with someone, it doesn't just happen. A friendship develops when two people meet who have similar values, goals, and common interests. In addition, we also have certain personal qualities that we value such as honesty, integrity, sincerity, etc. Plus we cannot forget the concept of chemistry. This is a difficult idea to explain, but it brings people together based on a certain feeling. We are attracted to persons who share common ideals with us. The more we have to build a relationship on the more we have to build a relationship on, the more we will have a friendship to stand the test of time.

Some of the common similarities which bring people together are: (Put these on the board)

1. geographic location
2. educational background
3. ethnic background
4. careers or jobs
5. social status
6. personality and communication style
7. hobbies and sports
8. mutual interests
9. religious background
10. values and goals

- Have students close their eyes and think of the person in their life whom they consider their best friend. Then have them spend a few moments with their eyes closed and think about why they like that person and have such a good friendship. Now have them open their eyes and write down all the qualities this friend has.

The facilitator now asks students to share these qualities. A list of them should be put on the board. Next to similar values, goals and common interests. Some examples of these qualities might be: honesty, humorous, sincere, etc.

- Ask students to think of reasons why these qualities make for a better friendship.

STUDENTS MUST UNDERSTAND THAT FRIENDSHIPS AND RELATIONSHIPS ARE BUILT ON COMPLIMENTARY NEEDS AND COMMON BACKGROUNDS. THE MORE WE HAVE IN COMMON, THE EASIER IT IS TO DEVELOP A RELATIONSHIP.

- Now have students think of a friendship that has broken down. Have them list the reasons the friendship ended. Again, ask them to look at the similarities and differences in the two people.

PRIMARY OBJECTIVE AREA: Relationships

CROSS REFERENCE OBJECTIVE AREA(s): Personal Power

NAME OF ACTIVITY: Pyramids

MATERIALS NEEDED: Handout #1; Paper; Pens/Pencils

AGE GROUP: Teen/Adult

READING LEVEL: Intermediate

GROUP SIZE: 8 - 12

TIME NEEDED: 1/2 - 1 Hour

P U R P O S E

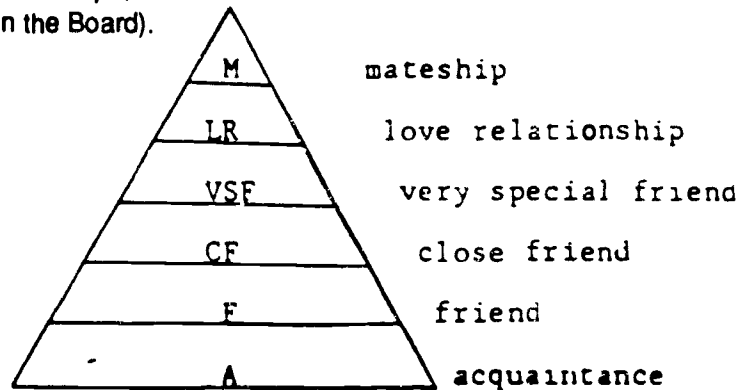
D I R E C T I O N S F O R A C T I V I T Y :

1. Participants will examine how relationships come to be.
2. How they change throughout life, and
3. Evaluate them for sources of pleasure and stress.

1. Have the class or facilitator read "Life Stresses" on Handout #1. Go over the list of life cycle stressors noting that the list often has both positive and negative stressors. (Generate list from group or use the list given.) Ask students to examine if the negative or positive stressors have common factors.
2. Then introduce the "Relationship Pyramid," Facilitator's Resource, as a basis for discussion about supportive networks and also a discussion on how relationships change as needs change in one's life. Put pyramid on the board. Discuss whether students agree with the points and why. Example: Is it necessary to have a mate?
3. Discussion should be open enough so that group can add experiential information when they feel like doing so.

About Friends

Here is a diagram which shows several relationships, which are built in a manner much like the building blocks of a child's game. (Draw on the Board).



This diagram should help you visualize a number of important points. Read each point.

- a. The length of each segment is related to the number of these relationships one might have in a lifetime. And the relationship may go from one segment to another or drop off in relation to one's life situation.
- b. The diagram should demonstrate the order, or sequence of events, that occurs in the selection process. For example, from our acquaintances we select our friends, and on upward to love relationships and mateships.
- c. The diagram should also demonstrate that the two segments on the very top, i.e., mateship and love relationships, do not, necessarily have to be present in one's life in order to function very well. It is perfectly feasible to decide, for whatever period of time one wishes, to go without either of these two relationships. Many live alone, or with a close friend, without ever moving into a mateship (or another mateship in cases of divorced or separated individuals). These people can, and do, function very well.

LIFE STRESSES

MOVED
GOT MARRIED
DEATH OF SPOUSE
HAD OPERATION
OUTSTANDING PERSONAL
ACHIEVEMENT

DIVORCE
SICK CHILD
HUSBAND WENT TO JAIL
HAD A BABY

You will notice that not all stress-producing life events are "negative." Changes that are positive such as getting married or attaining an outstanding personal achievement can also be stressful. **ANYTHING THAT REQUIRES ADJUSTMENT IS POTENTIALLY STRESSFUL.** Married life requires adjustment. Having attained a long-awaited personal achievement requires adjustment. Living as a divorced person requires adjustment. The most difficult life events are those which come without warning and which threaten to change our lives for the worse. Periods of adjustments are to be expected when major life events occur, and such periods may be long and hard. The thing to remember when you are hit with one or several of these life events is that it is perfectly normal to feel crummy, confused, and out-of-kilter. It only means you are human. Talking to a friend or reaching out to other support sources is certainly appropriate at times like these. Adjustments to most life events are time-limited, and most of us do eventually acquire the skills we need to cope with the change. What major life events have you faced, and what was your period of adjustment like?

Developmental Life Changes

Certain life changes can be anticipated as we move through our life stages. These changes are called developmental crises. They require adjustment and mastery of new coping skills.

- Child leaves mother to go to school (must learn to operate independently of mother).
- Child becomes a teenager (must learn to cope with rapid growth and transition from childhood to adulthood; must learn to form new relationships and make life goals decisions)
- Young adult has own children (must learn to meet kids' needs as well as own).
- Middle-aged parents watch children leaving home (must learn to let children go and learn to lead own "childless" lives again).
- Mid-life crisis (must learn to make peace with self-limitations)
- Retirement (must learn to adjust to slowed-down lifestyle).
- Death of family and friends (must learn art of letting go).

PRIMARY OBJECTIVE AREA: Relationships

AGE GROUP: Teen/Adult

CROSS REFERENCE OBJECTIVE AREA(s):

READING LEVEL: Basic

NAME OF ACTIVITY: ECO Map - Personal Ecological System

GROUP SIZE: Any

MATERIALS NEEDED: Handouts #1, 2; Paper; Pens/Pencils

TIME NEEDED: One Hour

PURPOSE

1. To have participants examine the social system that they exist in.
2. To identify both support and stress areas in their system.
3. If a great deal of stress is present, examine how they may build more support into their network.

Note: This entire activity is taken from:
Methods & Materials for Teaching Occupational Survival Skills, Illinois State Board of Education, Department of Adult Vocational & Technical Education, August, 1978.

DIRECTIONS FOR ACTIVITY:

1. Lead a general discussion about the system that we all participate in--talk in terms of the overall "Ecological System." Give the definition of a Personal ECO System: A sensitive balance between a person and his/her environment that provides nurturing, support, stimulation and stress. To drive home the point, illustrate it with upsets in our natural eco system, i.e. - forest fires, destroying food for animals or spraying for bugs, which may alter the food chain for people or animals. Then ask students if they can list ways human systems are changed, i.e., having a baby, moving away from home, alcoholism, etc. List these stressors or changes on the board.
2. Tell participants that the purpose of the ECO Map is to examine their own system--paying close attention to their sources of support and stress. (Note: We derive support and stress from our unique system.) An ECO Map plots out our system with us at the center.
3. Distribute handout. Show them "Example A" on the board or on handout. Point out that Mary Jones is the center of this Eco Map. In the next exercise, they will become the center of their Eco Map. Explain symbols using notes which accompany the example, and then as a class ask them to analyze the supports and stresses of Mary's system. Ask them if Mary has enough support in her system and if not, how might she get more? Be sure everyone understands how to map.

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Relationships
Personal Ecological System
Page 2

PURPOSE

DIRECTIONS FOR ACTIVITY:

4. Ask them to do their own ECO Map using the Instructions on the bottom of the ECO Map. Note that this is a private exercise, but they may share information if they would like to. Be available to answer questions.
5. Have them share in small groups or with the class what they have learned. If participants have mapped a great deal of stress and little support, problem solve as a group, ways participants can gain more support and reduce stressors. Suggest that they do another ECO Map at a different stage in their life.

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SAMPLE A

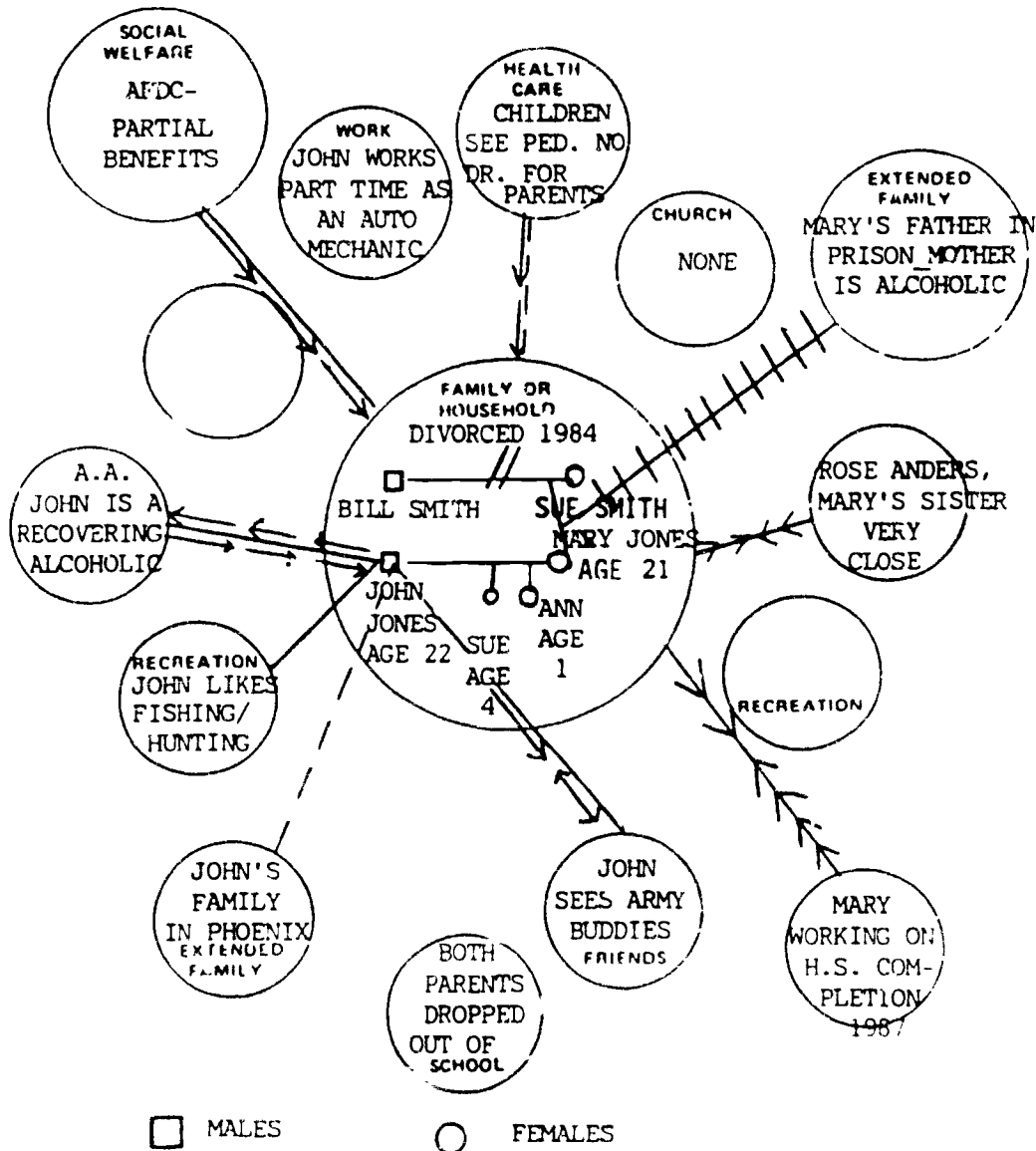
Diagrammatic assessment of family relationships

Figure 2

ECO MAP

Name Mary Jones & Family

Date 1987



Identify significant people and fill in empty circles as needed.
 Fill in connections where they exist
 Indicate nature of connections with a descriptive word or by drawing different kinds of lines. _____ for strong. - - - - - for tenuous.
 // // // // // for stressful. Draw arrows along line to signify flow of energy and resources.

Explanation:

1. Mary is notated by an O, and John is notated by a □ Since the map revolved around Mary, her parents, Bill and Sue Smith, are listed. Bill and Sue divorced (#). Mary was born after they divorced because she is listed as an offspring after the divorce sign (#). Her age, spouse and children's ages are noted. Note that Sue and Ann are John and Mary's children.
2. Energy put out -----> and received <----- can be illustrated as >>>>> or <<<<< >>>>>. John has strong relationships with AA, recreation and his army buddies. Mary gives and receives support from her high school completion and her sister. John's relationship with his family and work is tenuous as illustrated by ----- . Mary's relationship toward her family is stressful as illustrated by ///////////////. Mary has no friends, church, or recreation to speak of.
3. Note the positive and negative of Mary's Eco Map. What might she do to get additional support?

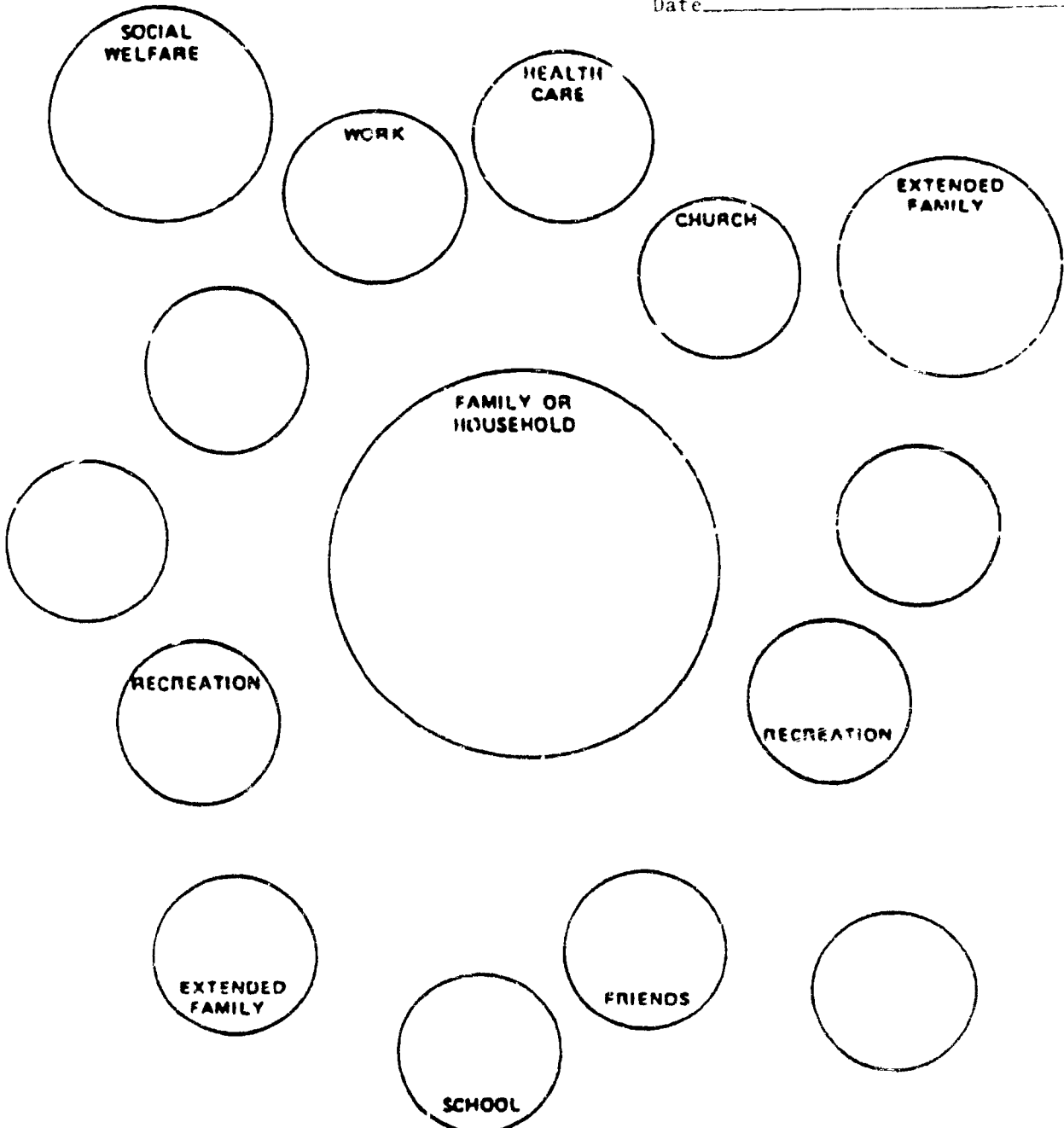
SAMPLE A

Diagrammatic assessment of family relationships

ECO Map

Name _____

Date _____



Identify significant people and fill in empty circles as needed.

Fill in connections where they exist

Indicate nature of connections with a descriptive word or by drawing different kinds of lines

_____ for strong. ----- for tenuous. //////////////// for stressful.

Draw arrows along line to signify flow of energy, resources.

MALES

FEMALES

56

PRIMARY OBJECTIVE AREA: Relationships

AGE GROUP: Any

CROSS REFERENCE OBJECTIVE AREA: Parenting, Communication

READING LEVEL: None

NAME OF ACTIVITY: Lifestyle Lab - Group Interview

GROUP SIZE: Any

MATERIALS NEEDED: Resource People selected prior to class

TIME NEEDED: 1 to 3 Hours

P U R P O S E

D I R E C T I O N S F O R A C T I V I T Y :

1. To examine three different lifestyles.
2. To understand more about relationships in different lifestyles.
3. To practice interviewing.
4. To increase sensitivity to others' needs and goals.

1. Some of the best teachers that we have available are in the community. Prior to this session, you'll need to invite three speakers to come to your class to be interviewed. Each speaker should be a good representative of one of the 3 lifestyles - 1) single without any children 2) single parent 3) married. Explain to the resource people that you would like them to do a brief introduction. In the brief introduction, ask them to let the class know about themselves. Guidelines for the introduction might include: where they grew up and what their family was like, what their family or life is like now, etc. Stress to the resource people that they do not have to do much public speaking - mostly they need to be available to answer appropriate questions from the students. You may want to use the Facilitator's copy of a reminder to send to each speaker prior to their arrival.
2. You will want the students to begin thinking of questions before the resource persons arrive. Stress to the students that they should ask meaningful and appropriate questions.
3. You may conduct the exercise by having all three speakers on the same day or inviting one speaker per session.
4. During the session, introduce the resource person and let the resource person give a brief introduction. Then let students interview the speaker in a round robin. The instructor asks the initial question and each student in the circle follows with a question. Each student must ask a question.

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PURPOSE

DIRECTIONS FOR ACTIVITIES

5. After all of the speakers have finished, process what the students learned, etc.
6. The class may want to write a thank you note to each speaker.

Dear _____,

Thank you so much for agreeing to participate in our lifestyle lab. As per our conversation, we are looking forward to seeing you on _____ at _____.

There is no preparation for your presentation other than a brief introduction to the students about who you are - your family, work, etc. The students will then ask you appropriate questions concerning your lifestyle.

We can't stress how valuable your visit will be as a learning experience.

Sincerely,

PRIMARY OBJECTIVE AREA:

Relationships

AGE GROUP: Any

CROSS REFERENCE OBJECTIVE AREA(s):

Communication

READING LEVEL: Basic

NAME OF ACTIVITY:

Conflict Resulting From Prejudice

GROUP SIZE: Any

MATERIALS NEEDED:

Handout; Pen/Pencil

TIME NEEDED: 45 Minutes

P U R P O S E

D I R E C T I O N S F O R A C T I V I T Y :

1. To become aware of prejudices that students may hold.
2. To increase student ability to get along with others.
3. To recognize where prejudices come from.
4. To recognize that students may choose to change prejudices.

NOTE:

Nobody likes others to think they are stupid, lazy, dishonest, incompetent, or inferior just because they are different. Yet some people treat others unfairly or unkindly simply because of a different race, sex, age, religion, or background. This kind of conflict is especially difficult to handle because it may involve beliefs or values that a person holds strongly. Getting others to change their prejudiced beliefs may be difficult or even impossible. One way of preventing conflicts due to prejudice is to become aware of and examine our own prejudices. We can then avoid causing conflicts. We can also try to increase our respect for others.

1. Begin the session by distributing handout. Tell participants to complete the worksheet quickly, writing down the first words that come to their minds.

NOTE:

Several blanks are left on the worksheet. The facilitator may wish to fill in the blank spaces with names of additional groups toward whom people might be prejudiced.

2. After participants have finished, have them exchange papers. Then ask them to circle any of the responses they consider negative. If they would feel bad, angry or insulted, the word can be considered negative. One way of deciding this is for participants to imagine that the words were used to describe themselves.
3. Have the participants count the total number of words circled and write the total in the box at the bottom of the worksheet.
4. Compile a "group profile" by recording all the individual totals on the chalkboard. Have participants return the worksheet to their owners and ask them to compare their scores with the overall class scores.

Relationships
Conflict Resulting From Prejudice
Page 2

PURPOSE

DIRECTIONS FOR ACTIVITY:

FOLLOW-UP

1. Use the following questions to begin a discussion of prejudices, including how they can cause conflicts.
 - a) What is prejudice?
(People often think of prejudice as only applying to certain races and ethnic groups. One of the purposes of the worksheet was to show students that prejudice means judging any group unfairly, including age groups, occupational groups, etc.)
 - b) How does your "prejudice quotient" compare with others'?
 - c) Which groups on the worksheet brought to mind the most negative words? Why?
 - d) How can prejudice cause conflicts on a job? Give examples from your experiences.

Note: This activity is taken from: METHODS AND MATERIALS FOR TEACHING OCCUPATIONAL SURVIVAL SKILLS, Illinois State Board of Education, Department of Adult Vocational and Technical Education, August, 1987.

WORKSHEET - YOUR "PREJUDICE QUOTIENT"

Finish the following sentence with the first three words that come to your mind. Be honest with yourself. An example is given

Example: Cats are	quiet	clean	sneaky
Children are	_____	_____	_____
Bus drivers are	_____	_____	_____
Men are	_____	_____	_____
Customers are	_____	_____	_____
Tourists are	_____	_____	_____
Secretaries are	_____	_____	_____
Handicapped people are	_____	_____	_____
Bosses are	_____	_____	_____
Hairdressers are	_____	_____	_____
Factory workers are	_____	_____	_____
Cab drivers are	_____	_____	_____
Working mothers are	_____	_____	_____
People on welfare are	_____	_____	_____
Sales persons are	_____	_____	_____
Old people are	_____	_____	_____
Women are	_____	_____	_____
Politicians are	_____	_____	_____
Alcoholics are	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

TOTAL _____

PRIMARY OBJECTIVE AREA: Relationships

AGE GROUP: Any

CROSS REFERENCE OBJECTIVE AREA: Communication

READING LEVEL: Intermediate

NAME OF ACTIVITY: Old vs. Young

GROUP SIZE: Any

MATERIALS NEEDED: Handout, pen or pencil

TIME NEEDED: 45 Minutes

P U R P O S E

D I R E C T I O N S F O R A C T I V I T Y :

1. To become more aware of prejudices.

Old Vs. Young

2. To practice conflict resolution.

1. Divide the group into pairs.

3. To understand behaviors better.

2. Distribute handout, "Old vs. Young."

4. To recognize that there is more than one choice.

3. Tell participants to read through the incident, discuss the conflict situation with each other, how to resolve the conflict, and answer the questions given on the worksheet.

4. Use the questions on the worksheet to discuss the conflict situation with group. Below are some possible responses.

o Gladys and Hilda seem to be extremely critical of a new worker, Amanda. There doesn't seem to be a good reason for this.

o Amanda probably feels frustrated, angry, or hurt about the situation.

o It is hard to know what Gladys and Hilda are feeling. They may be acting the way they are for a number of reasons. Perhaps they are afraid Amanda will take away one of their jobs. They might see the hiring of a new worker as an insult to them, implying that they are not doing a good job.

o There are many possible ways of working out the conflict. Amanda could report the situation to her employer, but this might make things worse. Amanda could wait for a time when Hilda and Gladys are in a good mood and tell them how she feels. She could treat them with extra respect about things. Amanda could simply ask Hilda and Gladys what she has done to upset them.

Note: This entire activity is taken from:
METHODS AND MATERIALS FOR TEACHING
OCCUPATIONAL SURVIVAL SKILLS, Illinois
State Board of Education, Department of
Adult Vocational and Technical Education,
August, 1978.

Relationships
Old vs. Young
Page 2

PURPOSE

DIRECTIONS FOR ACTIVITY:

- o Amanda should probably start by looking at her own behavior. Is she doing anything that might anger Gladys or Hilda? Then she should try to understand how Gladys and Hilda feel. After she has looked at these two things, she should decide what action is most likely to get the best results.
 - o Suppose instead of being younger than Hilda and Gladys, Amanda was of a different race. How would this change the situation?
5. Ask participants to relate similar experiences to the group.

WORKSHEET - OLD VS. YOUNG

Star Catering Service employs three cooks, two middle-aged women and a newly-hired high school girl. The two middle-aged women, Gladys and Hilda, are longtime employees. Gladys has been the head cook for ten years, and Hilda has been her assistant for eight years. The new high school girl, Amanda, has just been hired as an additional worker. Both older women quarrel with Amanda for no apparent reason except that she is a young newcomer. Hilda and Gladys are constantly jumping on Amanda and are making her job an unpleasant one. Amanda needs this job for some additional training in cooking that she wants to take.

Amanda came to work today determined to get along with Hilda and Gladys. She worked very hard and began to sing softly as she worked. Gladys remarked to Hilda, "Maybe if she would put her energy into working instead of singing, she might get something done today."

This was the last straw for Amanda. She turned to Gladys and said, "Listen, I'm working harder than either one of you ever do. Why don't you just mind your own business and get off my back!"

1. What is the conflict here and who is involved?
2. How do you think Amanda feels?
3. Why do you think Gladys and Hilda feel the way they do?
4. What are three possible ways of dealing with this conflict?
5. If you were Amanda, what else could you have done to work with them better?

PRIMARY OBJECTIVE AREA: Relationships

AGE GROUP: Any

CROSS REFERENCE OBJECTIVE AREA: Communication

READING LEVEL: Intermediate

NAME OF ACTIVITY: A Glimpse of Group Dynamics

GROUP SIZE: Any

MATERIALS NEEDED: Handouts 1, 2, and Pen/Pencil

TIME NEEDED: 1 Hour

PURPOSE

DIRECTIONS FOR ACTIVITY:

1. To examine an individual's behavior in group process.
2. To examine group process during a problem-solving exercise.

1. Explain to students that they are going to have an opportunity to either participate in or observe what happens in group. Ask one half of the class to volunteer to be the participants and the other half to be the observers. Have the participants sit in a circle. Assign an observer for each participant. They may position themselves on the outside of the circle where they can best observe their assigned participant.
2. Give Handout #1 to all of the participants. Ask them to read it over and determine #1 priority, #2 priority, etc. on their own sheets of paper.
3. While they are determining their priorities, give Handout #2 to the observers. Ask them to familiarize themselves with what they are to look for in their assigned participant. They are to keep brief notes and examples during the 20 minutes of the problem-solving activity.
4. When the participants have completed their priorities, give them the following instructions: "You will have 20 minutes to come to a group consensus (where everyone agrees) as to which is the first priority, second, etc. You are allowed only to talk among yourselves. Please speak up so that we are able to observe what takes place in your group."
5. When 20 minutes are up, stop the participants whether they are finished or not.

Relationships
A Glimpse of Group Dynamics
Page 2

PURPOSE

DIRECTIONS FOR ACTIVITY:

-
6. Pair observers and their assigned participants up. Ask the observers to share Handout #2 with their assigned participants.
 7. Reconvene to the whole group and process what took place. Questions to ask might include:
 - *How did you feel about this whole process?
 - *What type of group dynamics evolved?
 - *What did you learn as an observer?
 - *What did you learn as a participant?

SETTING PRIORITIES

PROBLEM Your boss is on a vacation. You decided to take three days off. Another secretary was covering for you but went to the hospital during the morning for emergency surgery.

DIRECTIONS: Determine which is the #1 priority, #2, etc. Time needed to handle each priority is listed.

- 1 _____ A secretary from another office is waiting for you with a complaint about your office procedure. 20 minutes
- 2 _____ Mr. Big left word that he wants to see you in his office immediately upon your return. Anticipated time: 60 minutes
- 3 _____ You have a one inch stack of important looking unopened mail (both company and personal) on your desk. Time: 10 minutes
- 4 _____ Your answering machine registers 10 messages
- 5 _____ An addressograph machine has broken down. You've successfully fixed it in the past. Several departments are waiting to use it. You are asked to repair it. 30 minutes
- 6 _____ A salesman has been waiting to talk to you for 1/2 hour. Time: 10 minutes
- 7 _____ You have an urgent written notice in front of you to call a Phoenix operator. Both your sister and the company headquarters are located in Phoenix. Time: 10 minutes
- 8 _____ Ms. Smith in the Vice President's office has sent word that she wants to see you as soon as possible. Time: 15 minutes
- 9 _____ An intern in the office has called and wants the day off for very personal reasons. It would take about 5 minutes to get the facts and make a decision.
- 10 _____ In order to get to your office by 9:00 you had to miss breakfast. You are very hungry. It will take 20 minutes to get something from the company cafeteria.

OBSERVER'S GUIDE ON GROUP BEHAVIOR

DIRECTIONS Position yourself so you are able to clearly see the person you are observing. Read this guide sheet before the group begins. Pay close attention to the person you are to observe. In the right hand column, mark down any examples of that kind of behavior which you see the person doing.

BEHAVIORS WHICH FOCUS ON THE TASK TO BE DONE:

- 1 Initiating or getting the group going
-

- 2 Seeking and giving information or opinions.
-

- 3 Making clear or expanding in detail
-

BEHAVIORS WHICH HELP TO BUILD AND MAINTAIN THE GROUP AS A WORKING UNIT.

- 4 Encouraging
-

- 5 Harmonizing or helping people get along
-

- 6 Trying to keep communication open and encouraging others to participate (Gate-Keeping)

7. Setting and applying rules for the group process and task

BEHAVIORS WHICH DO NOT CONTRIBUTE TO THE GROUP BUT ONLY SATISFY PERSONAL NEEDS.

8. Blocking or preventing the group from progressing:
-

9. Attacking, criticizing or blaming others.
-

10. Calling attention to oneself by talking too much, boasting or using extreme ideas
-

11. Withdrawing or being on the outside of the group
-

12. Dominating or controlling:

Adapted from materials developed at
the Continuum Center, Oakland University,
Rochester, Michigan

PRIMARY OBJECTIVE AREA: Relationships

AGE GROUP: Teens and Up

CROSS REFERENCE OBJECTIVE AREA: Health and Wellness

READING LEVEL: Basic

NAME OF ACTIVITY: Saying No to Peer Pressure

GROUP SIZE: Any

MATERIALS NEEDED: Cookies, paper, pencils, Handouts 1 & 2, "Just say no" buttons, or pamphlets (optional)

TIME NEEDED: 1-2 Hours

PURPOSE

DIRECTIONS FOR ACTIVITY:

1. To define Peer Pressure.
2. To understand why we give in to Peer Pressure.
3. To experience the four types of Peer Pressure through role play.
4. To learn techniques for "saying no" to Peer Pressure.
5. To help participants choose the goal to be assertive and "say no".

1. Introduction of the lesson: Participants should be told that peer pressure is a normal process and allows them to normalize their feelings of nervousness and curiosity regarding these issues. (group information/involvement necessary at this time).
2. Ask the group to suggest a definition of the terms to be used -Peer; -Pressure; -Peer Pressure. Here are some sample definitions:
Pressure: a force that acts on us to try to get us to do something.
Peer: someone your own age
Peer Pressure: influence that is put on us by people our own age; they may be our friends or even people we do not know.
Ask the group to help to define the degrees of pressure: -heavy pressure; -indirect pressure; -friendly pressure; -I dare you pressure.
3. Discuss why we respond to peer pressure. Your goal is to begin to get the participants to talk about peer pressure and why they give in to it. Using a simple example, such as someone wanting them to go to the Mall or a movie and they would have preferred to stay home. Discuss why they would give in and say "Yes" when they really wanted to say "No".

NOTE:

This entire activity is adapted from **SOUND OFF** by Dee Lindenberger, Gary Ebrecht and Shelly Baldes with permission.

PURPOSE
DIRECTIONS FOR ACTIVITY:

Write their responses on the board. Typical responses are: I don't want to lose a friend; I don't want to hurt my friend's feelings; I don't want to be called "chicken"; or I don't want my friend to get angry.

Discuss how they feel inside when they say "Yes" when they want to be saying "No".

4. Explain the four types of peer pressure using Handout #1. Be sure to present them in this order: Friendly; I dare you; Heavy; and Indirect.

Divide the group into smaller groups to develop a skit for each kind of pressure. Be sure they understand the definitions. Have each group present their skit and discuss the result with the entire group.

5. Techniques for Saying No (Handout #2):

Begin to define the techniques with the technique for Friendly pressure. Ask if they have any questions, then have volunteers demonstrate each technique with a skit.

Want them to learn that they do not have to give an explanation. An excuse can actually make their situation worse.

6. Review the lesson.
7. Do Role Play with cookies - directions attached. Distribute the cookies - leaving time to interact with the students individually.

COOKIE ROLE PLAY

This is intended as a possible closing activity for the lesson. It is in two parts. You will need to bring enough cookies for each student plus five.

PART I

Five of you will need to participate in the role play. One of you will be the person trying to pressure the others to eat a cookie. The other four should spread themselves across the front of the room. Explain to the participants that you are going to do a final role play in which you illustrate several of the techniques for saying "No." Ask them to watch and see how many of the techniques they can identify.

The person doing the pressuring should approach Person #1. Offer them the cookie using one of the types of peer pressure. Person #1 then demonstrates one of the techniques for saying "No" that seems appropriate for the type of peer pressure they are receiving. Continue on to Persons #2, #3, #4.

There are many ways you could modify this activity. Feel free to improvise. Be sure to ask the participants to tell you all the techniques they observed.

PART II

Tell the participants that you have some cookies for them. In order to get a cookie, they will need to demonstrate to you that they have learned one of the techniques for saying "No." Each of the five participants then takes a handful of cookies and goes to each other participant individually. Offer them a cookie. After they have demonstrated one of the techniques, ask them if they can tell you the name of the techniques they just demonstrated. As their reward, they receive a cookie.

At this time you may also wish to ask them if they have any further questions.

TYPES OF PEER PRESSURE

- FRIENDLY** A simple offer done in a friendly manner
- Examples: "Would you like a beer?"
 "Care for a cigarette?"
- I DARE YOU** A strong pressure where people tease you if you say "No"
- Examples: "Come on. Are you chicken?"
 "It's time you grew up, baby "
- HEAVY** The strongest pressure
- Examples: Using threats
 "No one is going to like you if you don't drink "
 "I thought you were my best friend."
- INDIRECT** Feeling pressured to do something, like use alcohol
 without directly being offered the substance.
- Example: Someone invites you to a party. You go and
 when you get there you see that most of the
 others are drinking. No one directly offers you
 a drink, but you feel like you should drink to
 fit in

TECHNIQUES TO SAY "NO"

There are many different ways to say "No" to offers of alcohol, cigarettes or other drugs. Some of these techniques are listed below

I. FOR FRIENDLY PRESSURE

1. "No thanks" technique - Just say a simple "No, thanks" in a friendly tone of voice.

Friendly pressure	"Would you like a drink?"
Answer:	"No, thanks "

II. FOR I-DARE-YOU PRESSURE

1. Broken Record Technique - Just say "No" or "I'm not interested" and if the pressurer does not take "No" for an answer, keep repeating "No, not interested "

I-Dare-You Pressure:	"Want a drink?"
Answer:	"No, not interested."
More Pressure:	"Come on, are you chicken? Have a drink "
Answer:	"No, not interested."
More Pressure:	"What's the matter? Afraid your parents will find out?"
Answer:	"No, not interested "

2. Walk away - When someone pressures you to use alcohol or cigarettes, you always have the right to walk away

I-Dare-You Pressure:	"I'm not going to be your friend if you don't drink this six-pack with me "
Answer	"I told you 'No " (Walk away while you say it)

III. FOR HEAVY PRESSURE

1. Strength in Numbers - Spend your time with friends who don't use drugs, especially in situations where drinking or smoking may be expected.

This technique is very useful for Heavy Pressure. When you are with a group and not alone, you are less likely to get heavy pressure.

2. Walk away - When someone pressures you to use alcohol or cigarettes, you always have the right to walk away.

Heavy Pressure:	"I'm not going to be your friend if you don't drink this six-pack with me."
Answer:	"I told you 'No'." (Walk away while you say it.)

IV. FOR INDIRECT PRESSURE

1. Avoiding the Situation - If you know of places where others are smoking or drinking, stay away from those places. If you accidentally find yourself in a situation where others are smoking and drinking and you didn't expect it, you have the right to choose to leave.

IT IS IMPORTANT TO REMEMBER THAT:

You always have the right to say "No" to alcohol and other drugs

You always have the right to walk away

You never have to give anyone a reason for your decision to say "No"

PRIMARY OBJECTIVE AREA: Relationships

AGE GROUP: Early Teens and Up

CROSS REFERENCE OBJECTIVE AREA: Health and Wellness

READING LEVEL: Basic

NAME OF ACTIVITY: Sexual Rights/Responsibilities

GROUP SIZE: Any

MATERIALS NEEDED: Paper, Pencils

TIME NEEDED: 1/2 to 1 Hour

P U R P O S E

D I R E C T I O N S F O R A C T I V I T Y :

1. To compare sexual rights and responsibilities
2. To become more sensitive toward the parents and/or teenager's point of view toward sexual responsibilities.
3. To examine one's own guidelines for sexual rights and responsibilities.

1. Follow the exercise as outlined on the Facilitator's Resource on Sexual Rights and Responsibilities.

SEXUAL RIGHTS AND RESPONSIBILITIES FOR EVERYONE

The decision to become sexually active requires thought on the rights and responsibilities of both men and women.

Using the brainstorming format and a "T" chart, ask class to think of the rights and responsibilities a person must consider before becoming sexually active.

Rights	Responsibilities
To self expression	To guard against sexually transmitted diseases

Discuss the lists following the brainstorming. Ask for comments, concerns, and questions.

Now have students put themselves in the position of being a parent to a thirteen-year-old daughter. They will be role-playing the following scene: one daughter and one mother is needed.

Role Play: You want to talk with your 13-year-old daughter about her sexuality and especially about becoming sexually active. You want to impress upon her of the tremendous right and responsibility she has within her body. You want to make the following points:

1. You feel becoming sexually involved is a big decision and one you want her to make carefully.
2. You want her to wait until she is older and in a long term relationship.
3. You want her to know about birth control if she does become sexually active. You hope she will discuss this with her boyfriend.
4. You want her to be aware of the chance of getting a sexually transmitted disease.
5. You want her to realize a consequence of sexual activity is a possible pregnancy. Is she ready to deal with that?
6. You want her to know you love her very much, and you trust her to make good decisions when the time comes.

Daughter: Your mother wants to talk to you about having sex. You love and respect your mother, but you don't feel real comfortable talking about sex with her. You are just beginning to go steady with a boy and you like him a great deal. Some of the girls in your class are already sexually active. You have a feeling your mom is worried about you.

** Complete the role play and then discuss the communication between the mom and her daughter. You may want to have a couple of different groups role play this and compare.

- Did the mother stay with her feelings and share them?
- Was the daughter able to listen?
- Did the daughter hear the rights and responsibilities?

** Now make a "T" chart of the rights and responsibilities you would want your young teenager to follow:

- How are they alike?
- How are they different?
- Are there other ways parents can convey this message to their children?

Role Play taken from: Sex Education,
Teacher's Guide and Resource Manual
Steven Bignell, Network Publications
Santa Cruz, p. 85, California, 1982

By Lynette Boylen

PRIMARY OBJECTIVE AREA: Relationships

AGE GROUP: Adult; Teens, If mature

CROSS REFERENCE OBJECTIVE AREA(s): Self-Awareness, Personal Power,
and Parenting

READING LEVEL: Intermediate

NAME OF ACTIVITY: Divorce Adjustment

GROUP SIZE: Any

MATERIALS NEEDED: Handout; Paper; Pen/Pencils

TIME NEEDED: 10 Minutes to 1/2 Hour

PURPOSE

DIRECTIONS FOR ACTIVITY:

1. To provide opportunity for participants to understand current feelings about loss of a love relationship and to project into the future a time when feelings won't be as painful.
2. Discuss feelings in a group.
3. To build confidence in their ability to cope.

A Key Resource for this Activity, which is listed in the Bibliography, is: REBUILDING by Bruce Fisher, or you may know of other good books on divorce adjustment.

1. Begin by pointing out that when we have a loss of a love relationship/breakup/divorce, we go through an "adjustment," period that can be painful and intense--whether we decide to end it or the other person "rejects" us. Reassure them that feelings are normal and O.K. and that they change with time and growth.
2. Distribute handout. Tell group that this scale was developed by a counselor who specializes in working with people who are divorced or widowed. She has found that scores get lower as time passes and if they don't, the person may want to seek help from a professional counselor (explore resources for this service with the group).
3. Ask people to answer questions--give them a few minutes.
4. When group completes answers explain score range meaning. A score below 21 means you are coping pretty well; above 21 means you are having difficulty coping and may want to seek assistance.
5. Ask group if they want to discuss feelings about a particular item on questionnaire.
6. Conclude with reassurance that feelings are normal, but should become less intensely negative with time and as they "move-on" to get needs met in new ways.

**DIVORCE ADJUSTMENT
SELF-ASSESSMENT**
(Circle correct number and add total)

1. I become upset when I think my ex-husband or wife may be involved with someone else
- | | |
|-----------------|------------------|
| 1. Almost never | 4. Often |
| 2. Seldom | 5. Almost always |
| 3. Sometimes | |
2. I find myself daydreaming about or thinking often about all the good times I had with my ex spouse.
- | | |
|-----------------|------------------|
| 1. Almost never | 4. Often |
| 2. Seldom | 5. Almost always |
| 3. Sometimes | |
3. I feel I'm "losing it" (i.e. not in control of myself or my life).
- | | |
|-----------------|------------------|
| 1. Almost never | 4. Often |
| 2. Seldom | 5. Almost always |
| 3. Sometimes | |
4. I feel like other people may not enjoy my company, or don't like me.
- | | |
|-----------------|------------------|
| 1. Almost never | 4. Often |
| 2. Seldom | 5. Almost always |
| 3. Sometimes | |
5. When I wake up in the morning, it is hard to get out of bed.
- | | |
|-----------------|------------------|
| 1. Almost never | 4. Often |
| 2. Seldom | 5. Almost always |
| 3. Sometimes | |
6. I don't understand the reasons why my marriage (or long term relationship) did not work out.
- | | |
|-----------------|------------------|
| 1. Almost never | 4. Often |
| 2. Seldom | 5. Almost always |
| 3. Sometimes | |
7. I am still very angry at my "ex" and find I need to talk about this a lot with other people
- | | |
|-----------------|------------------|
| 1. Almost never | 4. Often |
| 2. Seldom | 5. Almost always |
| 3. Sometimes | |

Total Score _____

PRIMARY OBJECTIVE AREA: Relationships

AGE GROUP: Teen and Up

CROSS REFERENCE OBJECTIVE AREA(s): Personal Power

READING LEVEL: Intermediate

NAME OF ACTIVITY: Payoffs/Losses

GROUP SIZE: Any

MATERIALS NEEDED: Handouts #1 and 2; Paper; Pens/Pencils

TIME NEEDED: One to 1-1/2 Hours

PURPOSE

DIRECTIONS FOR ACTIVITY:

1. Examine barriers that may prevent success.
2. To understand decision-making better.
3. To increase self awareness and awareness of others.

1. Read Informational Handout #1 out loud or let class members do so individually. (Facilitator should be prepared to talk about the payoff/loss concept and answer questions.) Note that changes or situations are seldom all good or bad.
2. Break into small groups of 3 or 4 and have them collectively work on the case studies in Handout #1.
3. Reconvene the class to the large group to discuss their opinions and reactions. List payoffs and losses on the board.
4. As an alternative to discussing the cases, break the class into 2 groups. Assign each group a case study to role play for the other group. Give them ample time to practice, setup props, etc.
5. Let one group act out their case. Ask the other group to list the payoffs/losses for the case that they just saw. Write them on the board. Continue with the second group's role playing and repeat the process.

Relationships
Payoffs/Losses
Page 2

PURPOSE

DIRECTIONS FOR ACTIVITY:

6. Read directions to Handout #2 out loud and look at the sample. Be sure everyone understands.
7. Ask students to analyze one or two changes for themselves on the worksheet in the outline format. If they are unable to come up with anything in the present, let them look at a past decision. Stress that they may choose to keep their work private or discuss it in small groups. Be available to help individuals as they work on their worksheet.
8. Reconvene back to small groups and ask them to brainstorm the question, "What might be an alternative decision or solution?" to any individual who would like to discuss their concern.

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ASSESSING REWARDS OF CHANGING PERSONAL BEHAVIORS TO CHANGE RELATIONSHIPS (OR MY LIFE)

"Man (or woman) is not an island." None of us live totally in a vacuum. We are all connected to one or another in a variety of relationships such as being a parent to our children, being a son or daughter to our parents, a spouse, an employee of an organization, a brother or sister, a friend, a student in a class, a neighbor in our neighborhood, etc. Changes in our behavior can have an affect on those around us. We may choose to change our behavior because we perceive that our behavior change will have a positive impact on those around us (i.e. a high school student who begins to get good grades and consequently pleases his/her parents who in turn grant him/her more privileges). On the other hand, we may not choose to make a behavior change because we perceive that our behavior change will have a negative impact on those around us (i.e. a woman who wants to work outside of her home but doesn't do so because her husband has indicated that it is inappropriate for women to work outside of the home). We sometimes may choose not to change a self-defeating behavior because we feel that a change will have a negative impact on those around us (i.e. an alcoholic will not stop drinking because it will impact the relationship with an alcoholic spouse). Most of us operate on a payoff system (hidden or otherwise) and continue behaviors that have a payoff for ourselves. Look at the following case studies and assess the "payoffs" and "losses."

Case A: Joan Smith has been a homemaker and mother for the past 10 years. She married Jim the day after she graduated. They have three children who are all enrolled in school full time. Three years ago, Jim was hurt on his construction job and has been unable to work. Since then Jim has been unhappy and spends a great deal of time drinking. He resists all effort toward retraining and does not want his wife to work outside of the home. Joan, on the other hand, wants to get out of the house and be around others. She has been offered the opportunity to accept a full scholarship to a community college and would like to accept. Jim believes that it would be a waste of time and that she is needed at home. Describe the payoffs and losses for Joan

If Joan attends college, then it will affect her relationship with her husband Jim.

Payoffs for Joan

Losses for Joan

Now star (*) those items that are most significant on either side

What might be an alternative decision or solution?

Case B: Susan Jones, a 17-year-old mother is in the process of completing her high school diploma. Her son Brian, age one, is cared for by her mother, Betty. Betty is prone to depression and has a "sour attitude" toward life. Lately Susan has been noticing that Brian is very fussy when she comes home from school and that her mother constantly complains how difficult Brian is to manage. Susan has three months before she graduates. She wonders if all of her home stress is worth continuing in school. She does not have enough money to hire a babysitter. List the payoffs and losses for Susan.

If Susan stays in school it will affect what happens in her home.

Payoffs for Susan

Losses for Susan

Now star (*) those items that are most significant.

What might be an alternative solution or decision?

By Patricia Alford

**"CHANGES"
(PAYOFF/LOSS WORKSHEET)**

Think about an area where you would like to make a change in your life. Your change could affect others positively, negatively, both or neither. Analyze it in terms of your "payoffs."

Example: If I lose 50 lbs., it will have an affect on my relationship with my husband

Payoffs

- *-I'll feel better
- I can wear my old size 10 clothes
- I can purchase a new wardrobe
- *-I'll feel more confident
- *-I'll have more energy

Losses

- *-My husband says he likes me a little chunky
- I'll be hungry
- I'll have to give up chocolate
- I'll have to change my cooking style

Now star (*) those items that are most significant

What might be an alternative decision or solution?

If I do this _____ this will happen _____

It will affect (who or what) _____

Payoffs

Losses

By Patricia Allard

PRIMARY OBJECTIVE AREA: Relationships

AGE GROUP: Teens/Adult

CROSS REFERENCE OBJECTIVE AREA: Self Awareness

READING LEVEL: Basic

NAME OF ACTIVITY: Important Mate Characteristics

GROUP SIZE: Any

MATERIALS NEEDED: Handout #1 cut into slips of paper, Handout #2, tape, pins

TIME NEEDED: 45 Minutes to 1 Hour

P U R P O S E

1. To introduce the concept of mate characteristics as an important component in marriage.
2. To prioritize or give value ranking of mate characteristics.

D I R E C T I O N S F O R A C T I V I T Y :

1. Explain that participants will be analyzing what mate characteristics are most important to them. This activity will assist single people to evaluate what is important to them for the future. It will assist married people in evaluating their present situation.
2. Have participants cut or tear up Handout #1 into 14 slips (or do it yourself prior to class and give each student envelopes with the 14 slips inside). Give each person Handout #2.
3. Have participants arrange the slips of paper in order of importance. When they have determined their final ordering, have them tape slips to Handout #2.
4. Have participants tape or pin their ordered characteristics on Handout 2 themselves.
5. Have them mill around the room and see if they can find someone with the same no. 1 choice. Have them explain their reasons for ranking it no. 1 for one minute.
6. Repeat the milling process and then talk with someone who has the same no. 2 choice.
7. Reconvene in the larger group and discuss what happened. You may want to take group votes on the #1, 2, 13, 14 choices. Ask participants if they think people marry one another with few characteristics in common, etc.

MATE CHARACTERISTICS

1. the support and approval of both families
2. corresponding views about having and raising children
3. similar political beliefs
4. attractiveness
5. you like each other's friends
6. alike values in food and clothing styles
7. comparable hobbies and recreational activities
8. similar religious beliefs and practices
9. capacity to communicate and solve problems
10. comparable intelligence
11. similar work interests
12. similar height
13. same economic backgrounds
14. identical race and ethnic backgrounds

MATE CHARACTERISTICS

1.

8.

2.

9.

3.

10.

4.

11.

5.

12.

6.

13.

7.

14.

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PRIMARY OBJECTIVE AREA: Relationships

AGE GROUP: Teens and Up

CROSS REFERENCE OBJECTIVE AREA: --

READING LEVEL: Intermediate

NAME OF ACTIVITY: Evaluation

GROUP SIZE: Any

MATERIALS NEEDED: Paper, Pencil, Envelopes, Stamps

TIME NEEDED: 15 min. to 30 min.

PURPOSE

DIRECTIONS FOR ACTIVITY:

-
- | | |
|--|--|
| <ol style="list-style-type: none">1. To evaluate material covered in each unit.2. To provide an opportunity to do self assessment.3. To practice written communication skills.4. To help develop and reinforce long term goals. | <ol style="list-style-type: none">1. At the end of each unit, have students compose a letter to themselves. In the first unit covered (usually Self Awareness), have students address an envelope to themselves. Collect the envelopes to send with the letters upon completion of the whole course.2. Explain to students that they will have an opportunity to evaluate what they have learned. They will be writing an ongoing letter to themselves about what they have learned or experienced as a result of each unit. (The length of the letter is up to the facilitator.) The facilitator should stress that this letter allows them to look back, evaluate and maybe even write down goals for the future. The facilitator may want to provide a sample letter for the unit that has just been completed.3. Have students write the letters while in class. The facilitator should circulate among the students to assist anyone who may have difficulty.4. Collect letters. Read them. At the end of each unit, return student letters so that they may write additional evaluations.5. When the course is complete, send the letters to each student. |
|--|--|

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A partial listing of books, articles, and curriculums which our writers and editors recommend. For additional help in selecting relevant reading or audio-visual materials, please call the Michigan Vocational Education Resource Center at Michigan State University: 1-800-292-1606.

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SUCCESSFUL LIFE SKILLS

Section 7

OBJECTIVE: PERSONAL POWER

Upon completion participants will be able to control the direction of their lives through active decision-making.

Supporting Objectives: Participants will be able to:

- Increase independent behaviors.
- Strive for greater fulfillment of their own potential.
- Demonstrate decision making that utilizes resources and is based on personal/familial values and goals.
- Strive for personally-determined goals.
- Identify blocks to behavior change that they may be experiencing.
- Support behavior changes of other group members.
- Seek solutions to problems with problem-solving strategies.
- Increase positive employee/employer interactions.
- Strive for improved performance at the workplace.

PRIMARY OBJECTIVE AREA: Personal Power

CROSS REFERENCE OBJECTIVE AREA(s): Communication

NAME OF ACTIVITY: Overcoming Barriers

MATERIALS NEEDED: Handouts #1, 2 and 3, Pen & Pencils

AGE GROUP: Teen - Adult

READING LEVEL: Intermediate

GROUP SIZE: Individual-Large

TIME NEEDED: 1 - 2 Hours

PURPOSE

One of the most important elements contributing to success is the ability to overcome internal and external barriers that get in our way, and take charge of our lives. This activity allows participants to:

1. discuss self-empowering mind sets versus self-victimizing mind sets;
2. determine and analyze where each person fits on the self-empowering scale; and
3. promote a self-empowering mind set.

DIRECTIONS FOR ACTIVITY:

1. Distribute Handout #1. Read Self-Victimizing material together.
2. Split the groups into smaller groups to see which group can come up with the most examples of self victims. Give them 5 to 10 minutes.
3. Have a spokesperson for each group read the group's list. The facilitator determines which examples will be counted.
4. Distribute Handout #2. Read self-empowering material together.
5. Distribute Handout #3 and do assessment individually.
6. Discuss their reactions and perhaps discuss in small groups or as a class.
7. Assign them to have a self-empowering attitude for the evening as homework.
8. Follow up at the next class meeting.

PRIMARY OBJECTIVE AREA: Personal Power

AGE GROUP: Teen - Adult

CROSS REFERENCE OBJECTIVE AREA(s): Communication

READING LEVEL: Intermediate

NAME OF ACTIVITY: Overcoming Barriers

GROUP SIZE: Individual-Large

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TIME NEEDED: 1 - 2 Hours

P U R P O S E

D I R E C T I O N S F O R A C T I V I T Y :

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8. Follow up at the next class meeting.

SELF-EMPOWERING INFORMATION

"There are two major barriers that keep people from getting what they want, or in many cases, even attempting to go after it. The first of these barriers is associated with your mind set and the second has to do with the competencies you have developed as a decision maker."

MIND SETS

Have you noticed how some people tend to be winners in life and others losers? Ask people who are consistent winners in life what their secret is, and the odds are you will receive an answer like, "I don't know why. I just expect things to go well." Losers are likely to tell you about the same thing in reverse. Patterns of winning, losing, and just getting by seem to correspond to the distinctive attitudes that different people have about the course of their lives.

These distinctive viewpoints that most people have about life are called mind sets. A mind set is a characteristic pattern of thinking, feeling, and believing. Some people, for example, believe that others have all the luck while they never get any breaks and remain powerless to change their lives. Other individuals feel that things usually turn out well for them and that they will eventually be successful at what they do. Such attitudes are likely to develop into a pattern which characteristically shapes a person's thinking and feeling on almost any issue.

Mind sets are the foundations of prejudice. A personal prejudice can shape a person's behavior in the career-choice process in the same way that it shapes behavior socially or morally. The old adage about the power of positive thinking is as true in the career-choice and implementation process as in other areas of life.

Each of us develops unique outlooks during the course of our lives. Some of us become more pessimistic in our thoughts, emotions, and beliefs while others develop more optimistic outlooks. We refer to these two contrasting orientations as the self-victimizing and the self-empowering mind sets.

THE SELF-VICTIMIZING MIND SET

A victim is defined as someone who is injured in some way or suffering from some act, condition, or circumstance. Unfortunately, there are many true victims in the world. Some people are impoverished, mentally retarded and physically disabled. Other people are imprisoned for crimes they did not commit or are victims of accidents they didn't cause. People like these do live with limitations or restrictions, and they truly lack some of the options that most of us have. However, most people who feel like victims are not really victims at all. These imagined victims are called self-victimizers.

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SELF-VICTIMIZATION

Self-victimizing people are inclined to be involved, dependent, and inflexible in the career-choice process. They are not likely to generate much energy or enthusiasm for the process of career choosing or career changing. They also tend to feel that they do not possess the knowledge or skills needed to make good choices. Often they will either look to others to decide for them or wait for circumstances to determine what happens. Self-victimizers are unlikely to explore the full range of alternatives available to them in career-choice situations out of a rigid conviction that it doesn't really make much difference anyway.

Self-victimizing people often feel harmed by circumstances, agencies, or people whom they perceive as hostile. They may say things like "I just can't get ahead because I am a member of a minority, suffering from reverse discrimination, short, tall, fat, thin, ugly, pretty, too smart, too dumb, too poor, too rich, too unskilled, too skilled, too old, too young, etc., etc."

THE SELF-EMPOWERING MIND SET

To empower means to give power or authority to a person or an organization for some specific purpose. The IRS, for example, is empowered by the United States Government to levy and collect income taxes. Similarly, the police in your home town have been authorized to enforce the laws of your community.

Empowering someone means giving them permission to exercise some type of power. The difference between empowerment and self-empowerment is the source of the permission. Self-empowering people give themselves internal permission for exercising power.

The term "self-empowering mind set," refers to self-permission to take charge actively of one's life. Self-empowering people feel free to engage in activities geared to getting what they want, and they are optimistic about getting it.

Self-empowering people take responsibility for creating the conditions they want in their lives while self-victimizing people take whatever comes their way. Both groups may begin in exactly the same conditions and circumstances. Because self-victimizing people conclude that they are powerless to change or create, they passively take what they get in life, perhaps hoping for the best. In this sense, they make themselves total victims of chance and circumstance. Self-empowering people, in contrast, will be actively inclined to create and implement desired goals. What happens in the life of the self-empowering person is likely to occur more as a result of self-motivation than external circumstances and conditions.

Incidentally, having a pessimistic viewpoint and/or a self-victimizing mind set is neither better nor worse than an optimistic viewpoint and/or a self-empowering tendency. In terms of life success, however, the self-empowering orientation usually produces better results.

A SELF-EMPOWERING EXAMPLE

A few years ago, a self-empowering man in his early thirties became very disenchanted with the career he was in and decided to make a change. To help clarify his career-related needs and his attitude he took a career-planning course. During the course, he recognized his need to use his capabilities more fully in whatever career he chose. Although he was a bit introverted, he also discovered that he was an effective communicator. He knew he wanted to be around thinking, inquiring, open-minded people. With this self-knowledge in mind, he began interviewing dozens of people in occupations that seemed related to his needs, wants, and attributes. After becoming acquainted with the opportunities available, he decided that the skills that he had used and developed and in his previous occupation could be transferred to a new field in which he would be able to use his communication skills while continuing to develop new skills. This would allow him to move into a new field with minimum added formal education. Although it was his desire to obtain a degree in a new field, he was aware that the time and money spent for a new degree would probably not yield the kind of return that would be worth it. He was able to take some short-term seminars and was offered an internship with a small consulting company. This led in turn to several part-time opportunities which increased his experience in his new field. Eventually he acquired a full-time job that made use of his communication skills and his organizing and coordinating talents which was due largely to the contacts he had made during the period he was working part-time.

Your Career Choices Chances Changes. David C. Borchard, John J. Kelly, Nancy Pat K. Weaver
Kendall Hunt Publishing, 1984 p. 152

ASSESSING YOUR MIND-SET TENDENCIES

1. After reviewing the material on the two mind sets, determine your self-victimizing and self-empowering traits.

I self-victimize in that:

I self-empower in that:

2. Rate yourself on the scale below by placing an X at the place that best describes your assessment now. Make this assessment based on your current general attitudes rather than your particular mood at this moment.

THE SELF-VICTIMIZING			VERSUS		THE SELF-EMPOWERING SCALE			
0	1	2	3	4	5	6	7	8
Totally Self-victimizing		Somewhat Self-victimizing		A little of both		Somewhat Self-empowering		Highly Self-empowering

3. What are the main things you learned about yourself in doing this assessment?

PRIMARY OBJECTIVE AREA: Personal Power

CROSS REFERENCE OBJECTIVE AREA: Communication

NAME OF ACTIVITY: Brainstorming

MATERIALS NEEDED: Student Worksheet, Pens, Blackboard

AGE GROUP: Teen - Adult

READING LEVEL: Basic

GROUP SIZE: Any

TIME NEEDED: 1 Hour

P U R P O S E

D I R E C T I O N S F O R A C T I V I T I E S :

1. Learn the rules of brainstorming.
 2. Enhance each student's potential or sense of power.
 3. Practice using brainstorming alone. In pairs and in groups.
- *Brainstorming can unlock creativity, teach participants about alternatives to problems and be a means for creative group problem solving.

1. Cut the worksheet into three strips on the dotted lines.
2. Ask students to define brainstorming. Brainstorming is a problem-solving tool whereby participants think of many ideas without criticizing.
3. Ask students to think of ways people block their creativity and list them on the blackboard. Note that the class has just done some brainstorming. Examples: "It won't work, it's too hard, we have always done it this way. . ."
4. Talk about and list major guidelines for brainstorming on the blackboard. Brainstorming can be done alone or in groups.

The major guidelines for it are:

- o No criticizing - All ideas are written down without judging their worth.
- o Use your imagination - Don't censor your ideas.
- o Think Quantity - Think of as many ideas as you can. The more ideas, the greater chance you'll end up with some good ones.
- o Combine and Improve Ideas - Putting together two or more ideas is fair play as long as it is improving instead of criticizing.

Personal Power
Brainstorming
Page 2

PURPOSE

DIRECTIONS FOR ACTIVITIES:

5. Hand out Section A of the worksheet to everyone and read the instructions with the students. Have the students (as well as yourself) apply the guidelines of brainstorming for three minutes.
6. After three minutes, ask students if the activity was easy or difficult and if any of the brainstorming guidelines were difficult to follow. Process how it felt.
7. Divide the class into pairs. Hand out Section B and read the instructions. Allow three minutes for brainstorming.
8. After three minutes, process what happened with the class.
9. Divide the class into groups of four or five and pass out Section C.
10. After three minutes, process what happened. Ask them whether they got more ideas alone, in pairs or groups, etc.
11. Ask students where they want to use the brainstorming technique?

BRAINSTORMING

--(A)--

Brainstorming guidelines (No criticizing * Use your imagination *Think quantity *Combine and improve ideas)

Suppose you are working for Happy Days College. Lately Happy Days College (HDC) enrollment has been down, and you have been asked to work on a campaign to get more students. Your boss has asked you to make a list of ways to attract new students to attend HDC. Write your ideas below. Use your imagination.

BRAINSTORMING WITH A PARTNER

--(B)--

You and a co-worker have been assigned to begin an advertising campaign to attract students to HDC. You each have a list of ways to attract new students. Your assignment is to develop slogans to be used in an advertising campaign. Write possible slogans below. (Examples of common slogans are: "Join the Pepsi Generation," "You deserve a break today")

BRAINSTORMING FOR BETTER WORK SITUATIONS

--(C)--

Using the brainstorming technique, list as many ideas as you can for making your school situations more enjoyable. Just write down ideas without judging.

PRIMARY OBJECTIVE AREA: Personal Power

CROSS REFERENCE OBJECTIVE AREA: Self Awareness

NAME OF ACTIVITY: Goal Setting - S.M.A.C.

MATERIALS NEEDED: Handout 1 (or make it into a transparency),
Handout 2, pens, pencils

AGE GROUP: Teens and Up

READING LEVEL: Intermediate

GROUP SIZE: Any

TIME NEEDED: 1/2 Hour to 45 Min.

PURPOSE

DIRECTIONS FOR ACTIVITY:

1. To define goal setting.
2. To learn a simplified but effective method for setting goals.
3. To practice goal setting.

1. Make Handout 1 into a transparency and put up on the overhead or pass out as Handout 1 (if there is no overhead available.) Read out loud and discuss each statement. Explain SMAC.
2. Break into dyads and have participants brainstorm some goals that they might like to set. Each partner is responsible for assisting the other in brainstorming his/her goals. Walk around the classroom and assist students who may be having difficulty.
3. Pass out Handout 2 for students to complete. Assist students who are having difficulty. Talk with each student privately or in the group about his/her goals.

-- S.M.A.C. --

GOAL SETTING

- A goal is something we set for ourselves.
- It is the aim or the end.
- Goal setting is a skill. If you do not make a practice of setting goals, you can learn how to do it.
- One can set small goals like, "I will wash the kitchen windows by six o'clock on Tuesday," or
- One can set larger, more global goals like, "I will become a practicing surgeon by age 30."
- The larger, global goals must be broken down into smaller goals to seem manageable, such as, "I will complete college by age 22, I will be accepted into medical school by age 23, etc."
- Goal setting is a good way to complete a class. It gives the participants the opportunity to take what they learned and apply it. They leave class with a plan.

** Four goal setting criteria called the S.M.A.C. method are:

Specific	Is your goal specific?
Measurable	Can you measure it?
Achievable	Do you believe you can do it?
Consistent	Is it consistent with what is important to you?

S.M.A.C.

GOAL SETTING

A GOAL IS SOMETHING THAT WE SET FOR OURSELVES -- the aim or the end.

Four goal setting criteria (S.M.A.C.) are:

SPECIFIC Is your goal specific?

MEASURABLE Can you measure it?

ACHIEVABLE Do you believe you can do it?

CONSISTENT Is it consistent with what is important to you?

Criteria For Successful Goal Setting and Goal Achievement

- S** 1. Is your goal **SPECIFIC**? A goal should not be general such as "I will be happy in my career," or "I want a career that provides me with a lot of money."

An example of a **SPECIFIC** goal is: "I will train to become an Elementary teacher."

List one of your **SPECIFIC** goals:

- M** 2. Can you **MEASURE** your goal to show that it has been completed or accomplished? How can you measure that one has become a teacher? The aforementioned goal can be measured when you complete your degree. You might want to make your goal more measurable by enlarging it to "I will complete my Elementary Teaching Certificate in five years."

Look at your **SPECIFIC** goal. How can you **MEASURE** it?

- A** 3. Do you believe that your goal is **ACHIEVABLE**? If you think that your goal is unrealistic then it isn't achievable. If your goal is one that your parents or family has selected for you, is it achievable?

Look back at the **SPECIFIC** goal that you first wrote down. Do you believe it is **ACHIEVABLE**? Yes No

If it isn't, adjust it to be achievable or rewrite a new achievable goal.

- C** 4. Is your goal **CONSISTENT** with what is important to you and what you want to do?

** Each time you set a goal, see if it meets the S.M.A.C. test.**
(SPECIFIC, MEASURABLE, ACHIEVABLE, AND CONSISTENT)

PRIMARY OBJECTIVE AREA: Personal Power

CROSS REFERENCE OBJECTIVE AREA: Communication

NAME OF ACTIVITY: Strength Acknowledgement

MATERIALS NEEDED: Handout, Plain 3 x 5 cards (Amount varies with class size), Pens, Pencils; Handout

AGE GROUP: Any

READING LEVEL: Basic

GROUP SIZE: Any

TIME NEEDED: 1 to 2 Hours
(depending on group size)

PURPOSE

1. To have participants practice giving positive feedback.
2. To identify strengths of each participant.
3. To provide closure for the Successful Life Skills class.

DIRECTIONS FOR ACTIVITY:

1. Discuss with students how it feels to have the Successful Life Skills class or series or sessions come to an end. (Recognizing that some students may feel that they will miss the group process, etc.) Ask each student to think back as to what they might have learned or perhaps how they changed.--
2. Tell students that you would like to leave the class on a positive note. Hand out blank 3 x 5 cards. (The Facilitator should plan on participating in this exercise.) Ask each participant to take as many cards as there are in the class. Have them write the name of each student and the Facilitator on a card. Then ask them to write a strength that they see in that person on their card. (They may choose to sign their own name on the card or leave it anonymous.) It is likely that this activity may feel somewhat uncomfortable or embarrassing to some participants. The Facilitator's attitude and behavior can help lessen their embarrassment. Talk about how it feels to have others list your strengths and how our culture might see this as bragging.
3. When students have completed their cards, have them mill around and hand out the cards. (They may choose to hand out their cards face down or face up.)
4. When all cards are passed out, allow students enough time to read them.

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PURPOSE

DIRECTIONS FOR ACTIVITY:

5. Have students complete Handout. When they have completed it, ask each person to share one statement from:
I learned: _____
A strength I have is: _____

*This activity should begin with the Facilitator.

WHO AM I TODAY?

NAME _____

THREE TOP VALUES: _____

WHAT I WANT IS: _____

HOW AM I GOING TO GET IT: _____

STRENGTHS I SEE IN MYSELF: _____

STRENGTHS OTHERS SEE IN ME: _____

**** 3 THINGS I LEARNED IN SUCCESSFUL LIFE SKILLS:**

1. _____
2. _____
3. _____

PRIMARY OBJECTIVE AREA: Personal Power

CROSS REFERENCE OBJECTIVE AREA: —

NAME OF ACTIVITY: Evaluation

MATERIALS NEEDED: Paper, Pencil, Envelopes, Stamps

AGE GROUP: Teens and Up

READING LEVEL: Intermediate

GROUP SIZE: Any

TIME NEEDED: 15 min. to 30 min.

PURPOSE

DIRECTIONS FOR ACTIVITY:

- | | |
|--|--|
| <ol style="list-style-type: none">1. To evaluate material covered in each unit.2. To provide an opportunity to do self assessment.3. To practice written communication skills.4. To help develop and reinforce long term goals. | <ol style="list-style-type: none">1. At the end of each unit, have students compose a letter to themselves. In the first unit covered (usually Self Awareness), have students address an envelope to themselves. Collect the envelopes to send with the letters upon completion of the whole course.2. Explain to students that they will have an opportunity to evaluate what they have learned. They will be writing an outgoing letter to themselves about what they have learned or experienced as a result of each unit. (The length of the letter is up to the facilitator.) The facilitator should stress their letter allows them to look back, evaluate and maybe even write down goals for the future. The facilitator may want to provide a sample section for the unit that has just been completed.3. Have students write the letters while in class. The facilitator should circulate among the students to assist anyone who may have difficulty.4. Collect letters. Read them. At the end of each unit, return student letters so that they may write additional evaluations.5. When the course is complete, send the letters to each student. |
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Personal Power Bibliography

A partial listing of books, articles, and curriculums which our writers and editors recommend. For additional help in selecting relevant reading or audio-visual materials, please call the Michigan Vocational Education Resource Center at Michigan State University: 1-800-292-1606.

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