

DOCUMENT RESUME

ED 123 847

EC 090 201

AUTHOR Brodie, Patrick; And Others  
 TITLE Health Education for Special Children: Junior High  
 EMR.  
 INSTITUTION Cortland-Madison Board of Cooperative Educational  
 Services, Homer, N.Y.  
 SPONS AGENCY New York State Education Dept., Albany. Div. of Drug  
 and Health Education Services.  
 PUB DATE Jan 76  
 NOTE 101p.; For related documents, see EC 090 196-205

EDRS PRICE MF-\$0.83 HC-\$6.01 Plus Postage.  
 DESCRIPTORS Alcoholism; \*Curriculum Guides; Dental Health; Drug  
 Abuse; \*Educable Mentally Handicapped; Exceptional  
 Child Education; Family (Sociological Unit); \*Health  
 Education; Junior High Schools; Mental Health;  
 Mentally Handicapped; Nutrition; Perception;  
 Prevention; Public Health; Safety Education; \*Special  
 Education

ABSTRACT

Intended for teachers and administrators in special education, the curriculum guide offers information on planning a health education program for educable mentally handicapped children in junior high school. Sections preceding the actual guide include information on specific goals of and elements necessary for a successful health education program, the philosophy and implementation of a school health program, and a curriculum overview. Units are presented in outline form for the following topics: nutrition; sensory perception; dental health; health status and disease prevention and control; drugs, alcohol, and tobacco; mental health; family life; consumer, community, environmental, and public health; and safety and first aid. Each topical unit consists of five basic parts--overview and objectives (a brief orientation to the philosophy regarding the unit), concepts (necessary background material for behavioral change), content outline, learning and evaluative activities, and resources (including books, films, pamphlets, and games). (SB)

\*\*\*\*\*  
 \* Documents acquired by ERIC include many informal unpublished \*  
 \* materials not available from other sources. ERIC makes every effort \*  
 \* to obtain the best copy available. Nevertheless, items of marginal \*  
 \* reproducibility are often encountered and this affects the quality \*  
 \* of the microfiche and hardcopy reproductions ERIC makes available \*  
 \* via the ERIC Document Reproduction Service (EDRS). EDRS is not \*  
 \* responsible for the quality of the original document. Reproductions \*  
 \* supplied by EDRS are the best that can be made from the original. \*  
 \*\*\*\*\*

HEALTH EDUCATION FOR SPECIAL CHILDREN

Curriculum Development Committee

U S DEPARTMENT OF HEALTH,  
EDUCATION & WELFARE  
NATIONAL INSTITUTE OF  
EDUCATION

THIS DOCUMENT HAS BEEN REPRODUCED EXACTLY AS RECEIVED FROM THE PERSON OR ORGANIZATION ORIGINATING IT. POINTS OF VIEW OR OPINIONS STATED DO NOT NECESSARILY REPRESENT OFFICIAL NATIONAL INSTITUTE OF EDUCATION POSITION OR POLICY

ED123847

State Education Department  
Division of Drug and Health  
Education and Services

Cortland-Madison  
Board of Cooperative  
Educational Services

Teacher-Writer Team

Primary  
Linda Allen  
Elaine Faas  
Donna Funk  
Carole Robinson

Intermediate  
Patrick Brodie  
Elena Catalano  
Mary Beth Claps  
Daniel Funk  
Elizabeth Savino  
Genevieve Wingate

Secondary  
Elvira Brundage  
Ann Derr  
Elizabeth Hannon  
Edward Mueller  
Arthur Renschler

Trainer-Writer Team

Janice Allis	David Jacobsen
Anne Brackett	Thomas Murphy
Jeanette Dippo	Nancy Struve

Program Coordinator/Curriculum Editor: Jeanette Dippo  
BOCES Health Education Coordinator

Printed by: Graphics Department  
Cortland-Madison BOCES

EC090201

# BOARD OF COOPERATIVE EDUCATIONAL SERVICES

McEVOY EDUCATIONAL CENTER  
CLINTON AVENUE EXTENSION  
CORTLAND, NEW YORK 13045

Dear Special Educators,

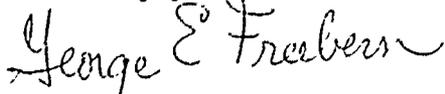
A comprehensive health curriculum is a must in the education of exceptional children. Excepting the three "R's", health is probably the most functional of the skills we can attempt to teach special children. Through coordinated efforts, from the primary level to the high school level, proper habits and attitudes can be developed.

When this curriculum guide is implemented, with the vigor characteristic of the Special Educators in our county, there is no doubt that this guide will help provide improved health education in our county and serve as a source of continuous and sequential health education planning. The teachers, however, who employ the guide in their everyday instruction will give the curriculum its ultimate test.

We appreciate the cooperation and coordination that has taken place to make the health curriculum a vital part of the Special Education program in Cortland County. The format in which the curriculum is presented is most useful and provides many ideas to teach content.

It is only through evaluation by those in the field that enables any curriculum to be fully and successfully implemented. Please feel free to contact us if you have any concerns, questions, or suggestions for improvement of the "Health Education for Special Children." This curriculum is a good beginning, but only a beginning to be refined as dictated by the experience of the teachers who utilize it.

Sincerely yours,



George E. Freebern, Director  
Special Education

Table of Contents

Title Page.....i

Curriculum Development Committee.....ii

Superintendent's Message.....iii

Table of Contents.....iv

Forward.....v

Introduction.....vi

Statement of Philosophy.....vii

Implementation.....viii

Curriculum Overview.....ix

Content Overview.....xi

Nutrition.....1

Sensory Perception.....12

Dental Health.....19

Health Status and Disease Prevention and Cure.....26

Drugs, Tobacco and Alcohol.....36

Mental Health.....50

Family Life.....60

Consumer, Community, Environmental and Public Health.....71

Safety and First Aid.....83

## Forward

Health Education For Special Children is the culmination of workshops funded by the Division of Drug and Health Education and Services, State Education Department, and sponsored by the Cortland-Madison BOCES. It reflects the concerted efforts of many persons. The knowledge and expertise of the individual curriculum developers/writers are most worthy of recognition.

This health curriculum guide for special education students is an outgrowth of the health education guides which were developed during the summer of 1974 for use in regular public school classes within this BOCES district.

The eventual mainstreaming of some handicapped children helped to govern much of the material included. Therefore, the activities in each unit were varied enough to provide for individual differences among pupils. The result has been that the content of the units written specifically for emotionally disturbed or learning disabled children, and educable mentally handicapped children was able to follow quite closely the content of the original guides. References should be made to the original guides, therefore, for additional related activities.

To the writing team's knowledge, this is the first comprehensive curriculum created with the special child in mind. It will provide the teacher with many ideas and resources. However, there is always room for modification and suggestions for improvement, any are welcomed.

## Introduction

The specific goals of a health education program can be as many and varied as life itself. However, optimal health is dependent upon the interactions of knowledge, attitudes and behavior. The health education program should establish an approach to concepts, generalizations, understandings, facts, values and applications, basic skills, and decision-making processes which can serve as keys to good physical, mental, social, emotional, and spiritual well-being. All participants in the school health education program, including teachers and administrators as well as students, should be assisted in working towards:

1. Acquiring an understanding of his own physical, mental and social health.
2. Developing responsibility toward his own and community health.
3. Acquiring an understanding that the goals of good health result from individual practices and maintenance of those mental, physical, and social habits selected as desirable and good by society and the individual.
4. Acquiring an appreciation of the value of a healthful life.
5. Encouraging systematic development of individual human potential for health, growth and happiness.

These are certain elements necessary for success of a health education program that cannot be written into a curriculum guide. These essential elements come from within the individuals responsible for implementing and carrying out the program:

1. Commitment on the part of administrators and teaching staff to a belief in the value and potential of health education is most important.
2. In view of the definition of health in terms of its psychological, physiological, sociological aspects, there needs to be, more than in any other curriculum area, a willingness to work together and lend support in setting up and maintaining a good school health education program - one which is prevention-oriented and clearly above and beyond the minimal requirements for drug and health education as delineated in the Rules of the Board of Regents and the Regulations of the Commissioner of Education.
3. It is possible to improve the classroom experiences of health education students through sincere desire by all directly involved to utilize to the greatest advantage appropriate resources (including those of a human nature) and/or other quality teaching aids, materials and devices which are made available.
4. Support for the concept of student participation and involvement in their own learning is a most meaningful part of a sound health education program. Provision should be made for a diversity of learning approaches including extension of learning into multi-community settings.

## A Statement on Philosophy of the School Health Program

Health is an integral aspect of every phase of life. Without health man cannot function effectively in his society. Health can, therefore, be considered not only biological, but psychological and sociological well-being as well.

The School Health Program, which includes all functions and services designed to promote the optimum health in each child, is a flexible blueprint aimed at assisting students in developing into independent, responsible adults. It would seem that no one, be it student or adult, can be independent and responsible unless he is equipped with the health necessary to be so; health that is, in part, imparted by knowledge and understanding of the forces which is for this reason that, with the guidance of State legislation and the local Board of Education, the School Health Program endeavors to supplement parental responsibility in this realm. The effective and flexible program must originate with the needs and interests of the individual. From this basis, it should continue to meet the needs of the family, community, nation, and the world...

As a result of imparted knowledge, understandings, and good health habits and attitudes, we would hope to kindle, promote, and help each child achieve a state of physical, social, emotional, intellectual and spiritual well-being that would be conducive to such academic learning as the student was capable of acquiring. In short, we aim at helping the student to "become all he is capable of being." This is based on the assumption that health, not being an end in itself, is a means to an end ---- a happy, fruitful life.

## Implementation of a School Health Program

Whatever the organizational plan, the only significant test of its worthwhileness is the effect which it brings to bear on the total educational program or the opportunity which it affords children to learn.

When the School Health Program is being established or adjusted, certain guidelines or basic principles, if adhered to, will help to insure its success. These are as follows.

1. Develop it gradually rather than superimposing it abruptly.
2. Though idealistic in its announced goals, it is realistic in its current performance.
3. It fosters continuous communication between all school staff members.
4. Special facilities are at its disposal.
5. It is interwoven with the instructional program.
6. It brings its services to every student, not just to those in distress.
7. It plays an important role in the school's public relations program.
8. It is constantly engaged in a process of self-examination.
9. It insures a balance in services it offers pupils.

Once the program is ready to be established, there are certain general fundamentals which should be considered in its administration:

1. There should be centralized control to assure efficient and effective functioning of the total program.
2. Adequate budgeting of finances to provide necessary salaries, supplies, and equipment should be carried out.
3. There needs to be proper coordination of various divisions, departments, and areas.
4. Selection of teachers and health specialists should be based on the best qualifications for the particular school and community.
5. Allotment of sufficient time in the school curriculum for the health program to function effectively is a necessity.
6. Definite assignment of duties and responsibilities to teachers, health specialists, and administrative assistants is a must.
7. Organization of a health teaching program should be on a school-wide basis.
8. Consideration of legal provisions, state and local laws, and requirements pertaining to and affecting the School Health Program and pertaining to special children should not be neglected.
9. Provisions should be made for assuring maintenance of the school plant and facilities in a sanitary and hygienic manner.
10. Special measures are necessary to recognize and provide for individual physical, mental, emotional, and social differences of students.
11. Methods and plans for safeguarding the health of teachers, as well as of students, should be an integral part of the plan.
12. There should be constant and thorough evaluation of the total School Health Program.

## Curriculum Overview

One area of study which is often lacking for special education students is that of health education.

The overall goal of this curriculum is to assist in developing individuals with the competency to function well in society and the ability to cope with the social, physical, emotional, intellectual, and spiritual dimensions of man. This goal seeks to aid in the discovery of self in relation to others in society and in the world and to implement the concept that decision-making is best where each individual has adequate information and experiences upon which to base his decisions. Decision-making is a cumulative process which results from a growing awareness of self and a growing awareness of the healthful alternatives which the health education process provides.

This guide is a vehicle for preventive education, acknowledging that a primary task of the school is development of positive self-concepts, helping students obtain control over their own lives, and maximizing their health potentialities. It offers a curriculum which helps each individual examine the meaning and value he desires health to have in his life and the life style he envisions necessary to implement his desires and values. It represents curriculum designed to fulfill personal needs and interests based on varied ability levels via being meaningful and relevant to students preparing to live healthful, productive and rewarding lives.

This rationale is based on concepts which provide for increasing levels of information and experiences related to physical, psychological, and social development as grade level increases. There is decreasing breadth, but greater concentration of information and experiences in various areas of health education and maturity levels increase providing a continuous and cumulative effect rather than a disjointed one.

Health Education should:

1. Represent a major part of a life-long educational process.
2. Exist for benefit of all students.
3. Represent a process that begins informally during pre-kindergarten years and continues throughout adulthood.
4. Involve total school/community efforts.
5. By its basic nature, revolve around developing a meaningful, satisfying and healthy life.

This particular guide represents one level of a planned, unified and comprehensive K-12 health education program for special children designed to:

1. Meet the needs of all students.
2. Be sequential, building on developmental tasks at each level.
3. Be flexible in order to facilitate implementation on a county-wide basis.
4. Include objectives and learning experiences for assisting in the decision-making process.
5. Be easily updated, due to its format, via replacement of pages upon their obsolescence.

Each topical area or unit consists of five basic parts:

1. Overview and Objectives
2. Concepts
3. Content Outline
4. Learning and Evaluative Activities
5. Resources

The unit overview gives a brief orientation to the philosophy regarding the unit. The outline of objectives reflects the cognitive, affective and psychomotor domains. They signify specific ways students should be able to think, feel, and act, after completion of the unit of study.

The concepts and supporting content outlines provide necessary background material for behavioral change. Coordinated with these are suggested resources and learning and evaluative activities from which student experiences may be selected in order to promote desired behavioral changes. These resources are not only for students, but also include materials which are too difficult for students' personal use, but valuable for teachers in the preparation of lesson plans.

Included among the resources are films which are usually listed with a reference to their Cortland-Madison BOCES number. To locate the producer/distributor, the teacher should consult the NIGEM Index of Films, which is available in most BOCES buildings or other film centers. Of course, any film or material must be previewed and carefully integrated with classroom activities in order to be of maximum effectiveness.

The curriculum guide contained herein is specifically designed to be descriptive and adaptable in order to allow for variations in school systems, teachers, classes and special education students. The teacher may not be able to expect students with certain disabilities to be able to spell correctly or write explanations, if at all, but by repetition as required the student should be able to learn eventually to pronounce and understand the important vocabulary words. The interaction of content and process in health education should lead to the development of problem-solving behavior which can be used flexibly and in a variety of situations. The goal, therefore, is to move as much as possible beyond fragmented and memorized information to the level where concepts are developed and internalized. To this end the teacher may want to draw upon activities from one unit to reinforce the objectives of another, or to use these activities as a point of departure in devising new ones.

## Content Overview

Teachers need to be very flexible and ready to adapt the learning experiences to individual learning capabilities. Some of the students who may read and write very poorly can be expected to be very curious and verbalize fairly well regarding health topics presented.

Certain special education students, such as the educable mentally retarded and the trainable mentally retarded, may have very little ability to transfer learning. Words may have to be explained repeatedly in terms they can understand. Any audio-visual materials employed must be carefully screened prior to use and discussed after use to make certain the pupils understand the vocabulary and concepts presented. Emphasis should be placed on learning major concepts not facts that students won't be able to retain. The teaching techniques and extent or depth of coverage of material is governed to a considerable degree by the types and degree of handicaps of the children involved.

Remember that the mentally handicapped child or adult is not very different from any other human being. First, this individual is a human being, and only secondly does he have a handicap. His basic needs are as great as anyone else's, but his difficulties in learning, relating and coping may be greater. His behavioral manifestations may be inappropriate and because of this so-called negative behavior, his problems are great.

Teaching anything to those with learning problems requires special skills and understanding. Their needs are often more individually demanding; and it is usually more difficult to communicate with them. In preparing this guide, the writers were especially conscious of the tremendous range of special education students' abilities to learn. There are handicapped individuals who are barely distinguishable from the so-called "normal" members of society. And there are those whose handicaps are so extreme that they may never learn to perform simple tasks of self-care such as eating or dressing. The writers of this guide assume that the special education teachers using it already have an understanding of the similarities and differences of their students compared to those students without learning problems. Therefore, any reference to types and/or classifications of handicaps is generally avoided.

## NUTRITION

### OVERVIEW

The child of adolescent age is going through a period of rapid physical growth. He needs extra food to meet the demands of this growth. However, the sources of this larger number of daily calories are critical. At this point it is essential that the child make some connections between types of food and their effect on growth, strength, and freedom from illness.

Adequate rest and physical activity must be related to good nutrition. Exercise requires extra fuel, but obesity results if the intake of food exceeds the number of calories burned in activity.

Bad eating habits, which have been formed early in life as a result of environmental and parental training, can still be altered by proper education and the desire to become more physically fit.

### OBJECTIVES

#### Suggested Pupil Outcomes:

1. Compare the relationship between the foods eaten and the body's health, growth and development.
2. Differentiate among varieties, forms and sources of food.
3. Critically evaluates facts, fallacies and beliefs about foods and food facts.
4. Compare the similarities and differences among families relative to the types of foods eaten and the manner in which they are prepared.
5. Analyze some of the consequences of poor food selection and eating patterns.
6. Compare the required quantities of nutrients and how they vary for each individual based on his: sex, age, growth, activity, and environment with the understanding that all people need the same nutrients.
7. Apply knowledge of proper nutrition when selecting one's food.
8. Recognizes the growing problems of obesity at all age levels.
9. Can plan and understand the preparation of nutritious meals and snacks.
10. Analyze current trends and events in society which affect nutritional status and behavior.

11. Discovers how behavior while eating can influence body processes in both a negative and positive manner.
12. Relates how temporary and long standing health problems can result from improper food selection and eating patterns.
13. Understand that we all have a "diet".

## MAJOR CONCEPTS

1. Good nutrition is the individual's basic responsibility.
2. Food choices need to be distributed wisely among meals and snacks.
3. Every person is responsible for making meal times pleasant and harmonious.
4. Our selection of food depends upon many different factors.
5. All nutrients needed for growth are available through foods.
6. Some foods do more for us than others.
7. Work efficiency depends upon adequate food intake.
8. One's daily diet should be planned each day to include foods which produce sufficient amounts of nutrients and calories.
9. Observing proper table manners helps make meals pleasant for everyone.
10. One's feelings and emotions affect digestion of food.
11. Many agencies at both the local and national levels help to protect against unsafe food practices.
12. Patterns of selecting and eating foods are determined by many factors - cultural, economic, mental, physical and social.

## CONTENT OUTLINE

- I. Functions of Foods in the Body
  - A. Building body tissues and muscles
  - B. Preventing disease
  - C. Building strong teeth and bones
  - D. Providing energy and heat
  - E. Aiding in elimination
  
- II. Nutrients and Their Functions
  - A. Proteins
    - 1. Build and repair body tissues
    - 2. Supply heat and energy
  - B. Carbohydrates
    - 1. Supply heat
    - 2. Provide energy
  - C. Fats
    - 1. Supply heat
    - 2. Provide energy
  - D. Vitamins
    - 1. Regulate body processes
    - 2. Maintain health (prevent deficiency diseases)
  - E. Minerals
    - 1. Build and repair body tissues
    - 2. Regulate body processes
  - F. Water
    - 1. Regulate body processes
    - 2. Build body tissues
  
- III. Sources of Nutrients
  - A. Protein
    - 1. Milk
    - 2. Meat group
  - B. Carbohydrates
    - 1. Breads and cereals
    - 2. Vegetables and fruits
    - 3. Sweets
  - C. Fats
    - 1. Butter and margarine
    - 2. Oils
  - D. Vitamins and minerals
    - 1. In all food groups
    - 2. In varying amounts
  
- IV. Planning for Good Nutrition
  - A. Selecting from the Basic Four food groups for simple meal planning
  - B. Good snacks versus empty calories
  - C. Comparing nutritive value of foods and their prices
  - D. Type A School Lunch Program

- V. Reasons for Eating
  - A. Maintain life
  - B. Promote growth
  - C. Keep healthy
  - D. Satisfy hunger
  - E. Satisfy habit
  - F. Enjoyment
  
- VI. Digestion
  - A. Basic structure and function of digestive tract
    - 1. Mouth
    - 2. Stomach
    - 3. Small and large intestine
  - B. Basic structure and function
    - 1. Pancreas
    - 2. Liver
    - 3. Gall bladder
  
- VII. Nutrition as a Person's Individual Basic Responsibility
  - A. Teenager's eating habits
  - B. Recent studies of teenager's nutritional status
  - C. Nutritional concerns of teenagers
  
- VIII. The Far-reaching Effect Foods Eaten Today Have on the Body Physically and Emotionally
  - A. Nutrients for energy, growth and repair
  - B. Emotional problems related to diet
    - 1. Over-eating, overweight, underweight
    - 2. Skin problems of adolescence
  - C. Physical performance
  - D. Adequate rest
  
- IX. Food Choices Need to be Distributed Wisely Among Meals and Snacks
  - A. Good snacks, bad snacks
  - B. Intelligent choices-about foods
  - C. Vulnerability to food fads
  - D. Food choice according to food groups

## LEARNING AND EVALUATIVE ACTIVITIES

1. List and discuss the foods they ate for breakfast this morning.
2. Role-play ways to encourage a relaxed mealtime and ways to create tension during mealtime.
3. Discuss radio and television advertisements and family food likes.
4. Discuss your favorite food at birthdays, Christmas, Thanksgiving, etc. What do children in other lands eat on their holidays.
5. List foods you dislike and find substitute foods supplying same nutritional value.
6. Visit the school kitchen to find out how they store foods to conserve nutritional value. (Refrigeration, freezer, cold, dry, etc.)
7. Discuss food fads and the problem of getting reliable information. Discuss how to tell the difference between food facts and misinformation.
8. Relate obesity to caloric intake and output. Determine how our body uses energy.
9. Discuss table manners and reasons why manners are used.
10. What are the effects of cheerful, pleasant surroundings.
11. Discuss whether feelings of happiness or sadness influence digestion.
12. Discuss fear, hate and anger relating to digestion.
13. Discuss rest and relaxation in relation to digestion. Importance of moderate activities immediately after meals.
14. Discuss effects of a quick or hurried meal.
15. Discuss the advantages of each of the following processes used to preserve food: cooling, canning, drying, dehydration, freezing, smoking, salting, pickling, freeze-dried, flash frozen.
16. Expose a variety of foods to the air at room temperature. Note how long it takes for each kind of food to spoil. Discuss how these foods are "kept" when they are transported and when they are in stores. Identify the signs of food spoilage: odor, change in texture, change in appearance and color, and change in taste.
17. Invite a home economist to speak to the class about preserving and enriching food.

18. Investigate current world food problems. Plan a panel discussion on some solutions to these problems.
19. Make a bulletin board display of reasons why we eat (growth, energy, feel better, etc.).
20. Have a committee check plate waste for a week to determine what foods are not eaten in the lunchroom from both school served and home packed lunches. Discuss why these foods were not eaten; discuss how we learn to like foods.
21. Write about your favorite food. (Try to make it sound so tasty others will want to try it. Bring recipe to class for others to try. Tell its history and any related customs.)
22. Make a chart of the nutrients listing each one, telling what it does and what foods contain adequate amounts of them.
23. Discuss best ways of spending allowance money on food treats. Emphasize best time to eat snacks.
24. Choose a food such as milk or eggs or a favorite vegetable. Make a little book chart showing the many ways to serve this food, how the food aids in growth and development, etc.
25. Plan a "Food of the Week" campaign to introduce new foods or those seldom eaten.
26. Develop a class or individual recipe booklet to add to from time to time. Use recipes they've tried from their own camping or cooking experience or refer to Scout or Junior Cook Books.
27. Collect menus from cafeteria for a week and evaluate them for their basic four contributions.
28. Prepare sample breakfast, dinner, snack, and party menus. Compare with own daily intake.
29. Exhibit a display of healthful foods in school lunchrooms.
30. Prepare charts or posters showing an infant, growing child, construction worker, a mother, a grandmother, etc. Discuss their individual food needs.
31. Demonstrate setting up a table, serving and clearing off.
32. Discuss and demonstrate use of napkins, utensils, condiments, etc.
33. Soak some dried food such as prunes, raisins, macaroni, milk and soup in water. Observe the effect on the food; permit the soaked food to remain exposed to the air at room temperature for several days. Discuss why this soaked food spoiled, but when it was dried it did not.

34. Test nutritional understanding by the following: two menus, each including favorite teenage foods - one balanced, one unbalanced. Have students choose which is nutritionally adequate and explain why.
35. Give the students a list of foods to determine which are used for quick energy, long term energy, growth and repair.
36. Have a mock family dinner.
37. Project a magazine ad and have students evaluate the emotional appeal and mis-advertising concepts.
38. Have students "price shop" in a supermarket for a week's supply of food for a family of 5. Report findings to class orally.
39. Analyze TV commercials on foods, relating the approach used and to whom the appeal is made.
40. Crossword puzzle on nutritional terminology.
41. Using local newspapers and supermarket flyers, have students make up a nutrition notebook, show pictures of different types of foods (groups) - also price fluctuations lends to study of growing seasons, math, etc.
42. Play "Know Your Foods" blindfold subjects, taste samples from foods of different groups. (1 point for right food, 2 points for right group.)
43. Locate pictures of 3 foods from each of the four basic food groups.
44. Make 3 posters showing some rules for good, nutritious diets.
45. Look up the words (carbohydrate, fat, vitamin, mineral, protein) in the dictionary. Write the meaning of them and give an example of a food they are found in.

## RESOURCES

### Books:

Food and Nutrition, W.H. Sebrill and JJ. Haggerty; The Life Science Library, Time Inc., 613.2

S

Introductory Nutrition, Helen Guthrie; 2nd Edition, C.V. Mosby Company, St. Louis, 1971

The Medicine Show, Consumer's Union, Part II (Chapters 13-17) - Food faddism and quackery

Natural Food, Barbara Fenton; 1973

The Nuts Among the Berries, Ballantine Books, Inc., Discusses food faddism and nutritional quackery

### Films:

\*Count Down 4-4-3-2..., BOCES #833-115, 30 minutes

Digestion and the Foods We Eat, BOCES #831-259, 9 minutes

Digestion in Our Bodies, BOCES #831-47, 11 minutes

\*The Flim-Flam Man, BOCES #833-118, 30 minutes

\*Getting It All Together, BOCES #833-120, 30 minutes

\*The Great Nutrition Turn On..., BOCES #833-122, 30 minutes

How a Hamburger Turns Into You, BOCES #832-119, 19 minutes

\*Look Inside Yourself, BOCES #833-131, 30 minutes

\*The Racer That Lost His Edge, BOCES #833-135, 30 minutes

Read the Label, Set a Better Table, BOCES (video cassette), 14 minutes

What's Good To Eat, BOCES #832-199, 17 minutes

\*films from Mulligan Stew Series - student comic book-type manuals, BOCES #P-132, records, and teacher's manuals available upon request.

Kits:

Cereals, A Food For Today, BOCES #123-24

Yardsticks for Nutrition, BOCES #123-28

Filmstrips and Cassettes:

Breakfast and the Bright Life, BOCES #392-8

Breakfast Cereals in Today's Lifestyles, BOCES #392-11

Posters:

American Institute of Baking, 400 East Ontario Street, Chicago,  
Illinois

Foodway to Follow

The Pack-It Meal

Dairy Council of California, 1095 Market Street, San Francisco,  
California

Child Feeding Posters

The Four Food Groups

My Lunch for a Happy School Day

We All Like Milk

What We Do Day By Day

Pamphlets:

Heart Association

Metropolitan Insurance Company

Cooperative Extension Service

Nutritional Facts About Foods (Free)

Perspectives on Overweight (Free)

When Is Food Safe? (Free)

Metropolitan Life

Four Steps to Weight Control (Free)

The Big Stretch (Free)

Game:

The 4 Food Groups for Better Meals Game, BOCES #110-35, Food and  
Nutrition Service, U.S. Department of Agriculture

HENs:

Nutrition Materials, BOCES #HN-19

Nutrition Menus, BOCES #HN-20

Charts:

Nutrition: Carbohydrates, BOCES #CH-1

Nutrition: Protein, BOCES #CH-2

## SENSORY PERCEPTION

### Overview

It is, in essence, our senses which keep the body functioning in a state of dynamic homeostasis. The stimuli in our external surroundings are picked up and interpreted in the brain so that we can respond to the sights, sounds, smells and feelings in the immediate environment.

For the emotionally disturbed or learning disabled pupil of 13 to 17, the most important aspect of his/her immediate environment is the people with whom he interacts. At this age, there is an emphasis from adults and among the students themselves on sex-appropriate behavior. Gestures and facial expressions have subtle nuances which each individual needs to perceive and respond to in order to achieve full acceptance. This is in addition to the tremendous complexities of language with which he/she is also attempting to copy. All this implies a great awareness of sensory cues and increased responsibility for the sense organs.

It is the responsibility of the individual by the time he has reached the teen-age years to make certain that the senses are functioning on an optimal level. Ignorance of the function of the senses, particularly of the things which can go wrong with them, is very widespread. It would, therefore, seem important to attempt to correct this lack of knowledge and understanding as much as possible within the classroom.

### Objectives

1. Identify the sense organs.
2. Value the constant dependency on our senses.
3. Value the importance of proper care of the sense organs.
4. Show that the sense organs are protective measures against the dangers in our external environment.
5. Value the importance of periodic testing for vision and hearing.
6. Analyze the general structure and function of the sense organs.
7. Become aware of the medical and para-medical personnel and services available to assist the individual.

## Major Concepts

1. There are five main or special senses - seeing, hearing, smelling, touching, and tasting.
2. Some other "deep senses" within the body are the sense of balance, the kinesthetic sense, the senses of hunger and thirst.
3. We see when the eyes receive light and send light messages to the brain.
4. Sound is produced by something vibrating.
5. Taste and smell often "go together" and are frequently called the "chemical senses."
6. The sense of touch is actually a group of senses that perceive heat, cold pressure, pain, and so on.
7. Ignorance of proper functioning of the senses may be detrimental to the well-being of the individual.
8. Qualified medical and para-medical personnel should be consulted for any sensory problem.

## Content Outline

- I. The Senses and Their Interrelationships
- II. Special Senses
  - A. Vision (sense of sight)
    - 1. Parts of the eye
    - 2. How we see
    - 3. Common vision problems
      - a. Near-sightedness (myopia)
      - b. Far-sightedness (hyperopia)
      - c. Astigmatism
      - d. Cross eyes
      - e. Conjunctivitis
    - 4. Visual acuity tests
    - 5. Care of the eyes and vision
      - a. Eye disorders
      - b. First-aid for eye injuries
      - c. Eye care and general health
  - B. Hearing (sense of sound)
    - 1. Parts of the ear
    - 2. How we hear
    - 3. How the ear helps maintain balance
    - 4. Common hearing problems
      - a. Ear infections
      - b. Partial or complete deafness
    - 5. Tests of hearing
    - 6. Care of the ears and hearing
  - C. The sense of taste and smell
    - 1. Taste buds in the tongue
    - 2. How we taste substances
    - 3. Cells of smelling sensations in the nose
    - 4. How we smell substances
    - 5. Care of the organs of taste and smell
  - D. Skin sensations
    - 1. Structure of the skin
    - 2. Skin sensations
      - a. Pressure, touch and pain
      - b. Heat and cold
    - 3. How the skin sensations help us
    - 4. Care of the skin
- III. Sensory Perceptions and Good General Health
  - A. Sleep and rest
  - B. Nourishing foods
  - C. Exercise
  - D. Protection of our senses
  - E. Medical check-ups

## Learning and Evaluative Activities

1. Put a number of common objects on a tray. Have the students look at them carefully for a minute or two, then cover them. Have them name as many as they remember seeing.
2. Look at a picture or a painting for 2 or 3 minutes with the whole class. Have them try to reproduce the picture as they look at the original picture. Compare for accuracy.
3. Look at a picture or painting for 2 or 3 minutes with the whole class. Remove the picture or painting from sight. Have students try to reproduce the painting. Compare for accuracy.
4. Set up situations with a few students. Ask the others what happened.
5. Have someone unknown to students walk into class. After they leave, ask the students to describe the person.
6. Show a picture with many things happening (example: picture of accident). Remove picture, ask questions.
7. Invite a speaker from the Sheriff's office to talk on the relationship of impaired vision or hearing and pedestrian or traffic safety.
8. Invite the school nurse to the class to discuss eye care and safety.
9. List the advantages and disadvantages of contact lenses.
10. Why do some people use tinted glasses?
11. Tap a rhythm. Pick one child and ask him to tap it just as you did.
12. Go for a "listening walk". Talk and/or list the sounds you hear.
13. Have students tape familiar sounds and have other students identify those sounds.
14. Assign each child a word. Read a story, have students tap or clap or make gestures as quickly as he can when he hears his word.
15. Read a story and ask questions, first as you go along and later at the end.
17. Demonstrate how sound travels by securing a tuning fork. Strike it gently and quickly place it in a pan of water so that the ends touch the water. It will make a humming sound because the prongs vibrate. The water will move with the vibration.
18. Discuss how the location of sound may be a matter of life or death.
19. Blindfold a student and have him identify various sounds, i.e. whistle, knock on the door.

20. Make a "grab bag". Fill it with common objects. Ask a student to choose an object and identify it by touch.
21. Collect an assortment of things such as an eraser, a bracelet, a pen, a bobby pin, a key, a paper handkerchief. Volunteers may be blindfolded and the objects handed to them, one by one, to identify. This experiment will show how many things can be identified by touch alone.
22. Give some examples of loss of balance (swinging, sudden ascent).
23. Blindfold a student and have him smell a strong substance such as an onion. Remove the onion and replace it with mothballs. Ask the student to indicate: (1) when he no longer smells the onion; (2) when he begins to smell something else, and (3) what he thinks the new substance is.
24. Discuss eye and ear defects which interfere with normal hearing and vision. Also discuss how these defects can be compensated for or corrected.
25. List those things which need both sight and sound for accurate identification and appreciation.
26. List the various sensory functions of the body that are dulled by excessive drinking. Beside each dulled function note a related potential problem.
27. Put the names of several occupations in a box. Have the children pick out one of these and relate the importance of the different senses to the occupation, i.e. pilot, telephone wirer, signalman, coffee taster.
28. Try to have the students describe different items to a person who has never had or has lost the senses.

## Resources

### Books:

About Four Seasons and Five Senses, Ruth Shaw Radlauer; Melmorg Publishers, Inc., Chicago, Illinois, 1960

Junior Science Book of Sound, Anderson, Dorothy 534  
A

Sound, Neal 534  
N

True Book of Sounds We Hear, Podendorf, Illa 534  
P

The Truth About Your Eyes, Derrick Vail, M.D., Collier Books, 1962

We Read About Sounds and How They Are Made, Tannenbaum, Harold E. 534  
T

What is Sound, Reuben, Gabriel H. 534  
R

Why Glasses? The Story of Vision, George John Sands, M.D.; Medical Books for Children; Lerner Publications Company, 241 First Avenue North, Minneapolis, Minnesota 55401, 1960 611  
S

### Films:

Gateways to the Mind, BOCES #833-2011, 60 minutes

Health: Eye Care Fantasy, BOCES (video-cassette), 8 minutes

Human Ear, BOCES #831-341, 9 minutes

Inside/Out Series: BOCES (video cassettes, 15 minutes each)  
A Sense of Joy  
Donna

Introduction to Visual Illusion, BOCES #832-370, 17 minutes

Kevin, BOCES #842-9, 16 minutes

Philip and the White Colt, BOCES #833-134, 23 minutes

Kit:

Practicing Good Health, BOCES #123-29

"You - And Your Ears"

"You - And Your Eyes"

"You - And Your Five Senses"

"You - And Your Sense of Smell and Taste"

"You - And Your Sense of Touch"

HEN:

Sensory Perception Materials, BOCES #HN-21

## DENTAL HEALTH

### OVERVIEW

Of all the professionals today, due to ignorance and misconceptions, the dentist is perhaps the most feared by children and adults. For handicapped children who may have been frightened by medical procedures and personnel in early childhood, this fear is often more intense. The special education classroom with a dentist as guest, or a special trip to a dentist's office as a group are two situations in which the positive role of the dentist and dental hygienist can be emphasized. The dentist could describe to the children how to take care of their teeth and why. Preventive dental care and the role of the dentist as helper can make subsequent visits to the dentist less ominous.

As is true of this entire health curriculum, no unit can be studied in isolation. This is particularly true in the area of dental health. The child's general health and well being, his nutrition, his use of tobacco and other chemical substances, his heredity and other health problems affect the state of his teeth, and he should be made aware of this to the greatest possible extent.

### OBJECTIVES

#### Suggested Pupil Outcomes:

1. Utilize sound protective measures against accidents to oral structures.
2. Value the continuous need to improve dental health status.
3. Understand the structure and functions of the tooth to determine the value of dental care.
4. Identify those practices which affect dental health.
5. Evaluate the factors that contribute to the process of tooth decay.
6. Investigate the diseases associated with poor oral hygiene.
7. Value the role of proper diet in the development and maintenance of dental health.
8. Interpret relationships among proper oral practices, appearance of the teeth and mouth, emotional effects on the individual, and social approval and acceptance of others.

## MAJOR CONCEPTS

1. Teeth have structures to serve specific purposes.
2. Oral structures were meant to serve throughout a lifetime.
3. The teeth are calcified structures fixed in bony sockets in the upper and lower jaws.
4. Food habits influence dental health.
5. Malocclusion is the term applied to irregularities in the position of the teeth and the improper alignment of the teeth upon closing of the jaw.
6. Diseases of the gums and other supporting structures of the teeth are called periodontal diseases.
7. Proper care of the teeth is essential to the individual.
8. Preventive measures for periodontal diseases include proper tooth care, a well-balanced diet, and regular visits to the dentist.
9. Although the exact cause of decay is unknown, many factors contribute to the process of decay.
10. Traumatic injury can crack, loosen, or knock out teeth possibly causing malocclusion and affecting speech patterns.
11. Safe play and work habits must be developed to avoid tooth injury.
12. Missing teeth may cause other teeth to shift positions, causing an interference with the chewing process and destroying the normal symmetry of the face and jaw.
13. Dental personnel should be utilized to guarantee the retention of oral structures throughout the life span of the individual.

4-20-71

## CONTENT OUTLINE

- I. Characteristics of Oral Structures
  - A. Uniqueness of two dentitions
    1. Deciduous
    2. Permanent
    3. Change in number of teeth
  - B. Importance of teeth
    1. Nutrition
    2. Appearance
  
- II. The Anatomy and Physiology of the Tooth
  - A. Structure
    1. Enamel
    2. Dentin
    3. Cementum
    4. Pulp
  - B. Functions of different teeth
    1. Incisors - cutting
    2. Cuspids - tearing
    3. Bicuspid - crushing
    4. Molars, grinding
  
- III. Proper Care of Teeth
  - A. By the individual
    1. Healthful diet
      - a. Foods necessary for maintaining good oral health
      - b. Vitamins and minerals needed for good dental health
      - c. Certain kinds of foods that are detrimental to good dental health
    2. Maintaining oral hygiene
      - a. Proper brushing
      - b. Massaging
      - c. Rinsing the mouth
      - d. Flossing
      - e. Preventing injuries to teeth
      - f. Fluoridation
    3. Regular visits to dentist
  - B. By the dentist
    1. Preventive work
    2. Remedial work
  
- IV. Kinds of Dental Personnel
  - A. Dentist
  - B. Orthodontist
  - C. Oral Surgeon
  - D. Endodontist
  - E. Dental Hygienist

V. Dental Health Problems

A. Malocclusion

1. Definition - What it is
2. Causes - What its causes are
3. Treatment - How it can be treated
4. Prevention - What you can do to prevent it

B. Dental caries

1. Denifition - What they are
2. Causative factors
  - a. Developmental and systemic disturbances
  - b. Dental plaque
  - c. Mouth bacteria
  - d. Acids
  - e. Bacteria
  - f. Food
  - g. Irregular alignment
  - h. Gum disorders
  - i. Poor habits
  - j. Emotional disturbance
  - k. Smoking
3. Treatment - What can be done to correct them
4. Prevention - How they can be prevented

C. Periodontal disease

1. Definition - What it is
2. Some common periodontal diseases
  - a. Gingivitis
  - b. Vincent's infection - trench mouth
  - c. Periodontitis
3. Types of treatments available
4. Key to prevention

D. Traumatic injury

1. Common causes
2. How various injuries are corrected/treated

## LEARNING AND EVALUATIVE ACTIVITIES

1. Discuss and diagram a tooth, showing and labeling each part and naming its function.
2. Discuss how teeth grow by examining a model of teeth and jaw.
3. Examine extracted teeth.
4. Conduct a "sweetless party". (Popcorn, crackers-cheese, potato chips, carrot strips, radishes, celery stuffed with cheese, pretzels, unsweetened fruit juices.)
5. Use "tes-tape" (available at drug stores) in saliva following the eating of certain foods to show presence of sugar in food.
6. Estimate the cost of the "sweet tooth" habit, and compare it with the estimated cost of more wholesome food.
7. Discuss the value of certain foods such as apples, celery, carrots, as tooth cleaners.
8. Discuss irregularities in a jaw resulting from: Loss of 6 year molar, too early loss of deciduous teeth, thumb or finger sucking, nail-biting, mouth breathing.
9. Determine how many class members have had accidents injuring teeth. Discuss how they might have been prevented.
10. List activities which might damage enamel (biting hard objects, opening bobby pins, cracking nuts, chewing pencils, chewing ice, chewing hard candy, pumping drinking fountain, falling off bicycles or skates, etc.).
11. Discuss the decay process through posters on bulletin boards.
12. Make paraffin models. Bite on paraffin which has been slightly warmed. Fill paraffin model with plaster of paris. Illustrate occlusion.
13. Demonstrate proper ways to brush teeth and discuss time for brushing them.
14. Bring in toothpaste advertising. Compare and evaluate.
15. Observe one's own teeth in a mirror to determine how clean they are. Observe any debris by removing some with toothpicks and observing under microscope.

16. Demonstrate relative value of brushing, swishing or chewing raw vegetables. Six students eat chocolate cookies; then have one brush with water, one swish and swallow, one eat apple, one eat carrot, and one eat celery and one does nothing. Compare residue left on teeth.
17. Invite dentist to tell how he can repair broken teeth, or send small group to dentist to prepare report for class on how he makes repairs and cost.
18. Discuss reasons for regular visits to dentist.
19. Make a chart naming different kinds of teeth and showing at what approximate ages they arrive.
20. Survey lunchroom menus for a week. Record foods containing nutrients for dental health and foods that are nature's "toothbrushes".
21. Select some common foods, then figure and chart sugar content. Plan substitutes showing sugar content of substitutes, or show spoonful amounts of sugar found in candy, soft drinks and other foods by placing equivalent quantities in test tubes or other container. Each container should be labelled and placed on exhibit.
22. Diagram and discuss teeth showing progress of decay.
23. Compose scientifically correct commercials.
24. Write safety jungles, limericks, slogans.
25. Make posters to place above drinking fountains.
26. List habits which may lead to malocclusion.
27. Discuss job possibilities of two applicants with equal qualifications except that one has attractive smile and one has improperly cared for and decayed teeth.
28. Discuss reasons for fear of dentists.
29. Draw and label a picture of a tooth, listing the function of each part.
30. Use dilute acid on a chicken bone to show how excess acid helps to decay teeth.
31. Invite a dentist to instruct students in maintaining good dental habits.
32. Have a dental hygienist demonstrate steps in proper tooth brushing.

33. Have children make a collage on varieties of smiles.
34. Construct a bulletin board which illustrates the abrasive quality of the major dentifrices. A good source for information is "Consumer Reports". This magazine often publishes articles on dentifrices.
35. An interesting activity for the entire class is to analyze a mouthwash advertisement. What claims does the ad make? What facts are offered? What does the ad really say? Don't forget to look at the picture that accompanies the advertisement. How is it related to the ad? Do ads for mouthwashes seem to say more than they really do?

## HEALTH STATUS AND DISEASE PREVENTION AND CURE

### Overview

The student who will be leaving school for total or partial independence and perhaps marriage and parenthood, should be helped to develop an understanding of his responsibilities for disease prevention. For some pupils it is very helpful to discuss specific diseases by name in order to talk about prevention and control. However, with some individuals this is impossible and for many retarded students it should be done with great sensitivity in order that it does not become too threatening.

Now matter how it is introduced, all students need to know that they have some very important responsibilities if they want to minimize the chance of serious illness in themselves and their families:

1. Regular check-ups, usually once a year.
2. Reporting to a doctor immediately any physical change which has been observed, especially if it is related to the warning signs of cancer.
3. Eating properly, getting enough sleep, avoiding harmful chemicals, and being aware of the situations in which accidents may occur.

Through the study of communicable and non-communicable disease control, the student can become a well-informed member of the community who will have confidence in right action and will show his recognition of the obligation he has to protect himself and his family. He/she will then insist that other members of society do likewise.

### OBJECTIVES

1. Describe the communicable disease process.
2. Identify fundamental principles of disease prevention
3. Demonstrate personal habits that will protect oneself and others from communicable disease.
4. Describe basic community efforts to minimize the communicable disease problem and improve health status.
5. Differentiate between communicable and non-communicable disease.
6. Describe the body's natural defenses against disease. Conclude that immunization prevents and controls some diseases.

7. Analyze the significance of disease prevention and control. Cite examples of the effects of disease on individuals, families, communities, and countries.
8. Demonstrate ways to protect the individual, his family, and the community from disease.
9. Describe the procedures used to supplement the body's natural defenses.
10. Describe the purpose and use of maintaining personal medical records.
11. Emphasize the importance of periodic medical examinations to reduce the incidence, retard the effects of, and prevent premature disability and death from chronic and degenerative diseases.
12. List the basic steps necessary for body fitness.
13. Describe the roles of various school health personnel in the total school health program.
14. Relate the role of community health personnel in preventing health problems and improving health status.
15. Analyze how the physical, mental, and social dimensions of the individual are related.
16. Define those daily activities which have a positive effect on personal health.
17. Demonstrate that one's physical, mental, and social development is individualized.
18. Describe how growing and developing occurs unevenly for body parts, systems and functions.
19. Compare the role of the school health team with community health personnel in respect to prevention and control of various health problems.
20. Identify appropriate means of assessing mental, physical, and social fitness.
21. Demonstrate a recognition of the value of periodic health assessments through appropriate participation.
22. Evaluate personal health practices as they relate to health status.
23. Express an awareness of individual factors involved in the spread of V.D.

## MAJOR CONCEPTS

1. All communicable diseases are caused by infectious agents.
2. The body has built-in defense mechanisms to combat disease.
3. There are many kinds of communicable diseases capable of being transmitted from person to person.
4. Many diseases, such as degenerative diseases, which attack man, cannot be transmitted from one person to another.
5. There are many different causes of diseases.
6. Age, sex and heredity sometimes influence an individual's susceptibility to disease.
7. Some disease control measures are very specific (immunization) while others are very general (sanitation).
8. A variety of organisms are involved in the spread of disease.
9. Identification and acceptance of known preventive and remedial measures makes it possible to control disease.
10. The individual is responsible for maintaining good medical practices.
11. There are various health programs available to assist the individual in assuming more responsibility for maintenance of good health.
12. Getting a clear picture of oneself will help one to better understand oneself and others.
13. The individual has a definite responsibility for his personal health and fitness.
14. Factual knowledge is essential in making decisions regarding one's health status.
15. It is important for the individual to appreciate, understand and take into careful consideration the findings of the many people concerned with his health status. (Physician, nurse-teacher and dental hygiene teacher, etc.)
16. There are many people in the school family who help the student keep well and contribute to his growth and development.
17. Great differences exist in height, weight and body build among children - all of whom may be quite healthy but growing in the way that is right for them.

18. Physical fitness is well established today as an essential quality for anyone desiring to make the most of himself and his life.
19. Physical fitness includes health practices other than exercise.
20. Participation in a variety of physical activities promotes the development of body symmetry.
21. Social, mental and emotional values may be derived from participation in a variety of physical activities.
22. The health examination is valuable in detecting early signs of defects, disease and growth variations.
23. There are many tests available to help one detect various defects and understand one's health status better.
24. Physical activity should be planned as part of one's daily routine.
25. There is a positive relationship between practicing desirable health practices and body fitness.
26. Sleep, rest, and relaxation prepare the body for work and play.
27. Engaging in hobbies, or changing one's activities helps one to relax.
28. When posture is good, the bones and muscles are aided in working properly to keep the body in balance.
29. Each individual has a characteristic way of standing, sitting, and walking which is determined by learning and the way his or her body is made.
30. Good body dynamics are important in work and play.
31. The skin and its appendages are often indicators of one's health.
32. Regular bathing removes perspiration, oil, and dirt from the skin.
33. Proper care of the hair keeps it clean, healthy and attractive.
34. Proper care of the nails is important to grooming and the prevention of infection.
35. V.D., as an infectious disease increasingly prevalent in today's society, needs to be combatted on all fronts.
36. Many diseases, such as degenerative diseases, which attack man cannot be transmitted from one person to another.

## CONTENT OUTLINE

- I. Appraising a Person's Health
  - A. Indicators of positive health behavior
    - 1. Responsibility to self and others
    - 2. Responsibility of the classroom teacher
    - 3. Responsibility of the parent
  - B. Personnel interested in the health status of the individual
    - 1. Health service staff
      - a. Physician
      - b. Nurse-teacher
      - c. Dentist
      - d. Dental hygiene teacher
    - 2. Other school personnel
      - a. Psychologist
      - b. Guidance counselor
      - c. Speech therapist
      - d. Reading specialist
      - e. Social worker
      - f. Attendance teacher
  - C. Assessment of health status and physical fitness
    - 1. Health examinations/appraisals
    - 2. Tests and evaluation
      - a. Vision screening
      - b. Hearing screening
      - c. Dental screening
      - d. Physical fitness tests
    - 3. Evaluative checklist of daily living activities
- II. Perspectives on Health
  - A. Exercise
  - B. Nutrition
  - C. Sleep, rest and relaxation
  - D. Caring for our senses
  - E. Avoiding habit-forming and addicting substances
  - F. Safety in everyday activities
  - G. Caring for the skin, hair, and nails
  - H. Good posture habits
- III. The Hidden and Obvious Nature of Disease
  - A. Kinds and types
    - 1. Communicable diseases
      - a. Definition
      - b. Transmission
        - 1. Direct contact
        - 2. Indirect contact
    - 2. Non-communicable diseases
  - B. Causes of diseases
  - C. Common communicable diseases
  - D. Common chronic and/or degenerative diseases
    - 1. Arthritis
    - 2. Cardio-vascular disorders
    - 3. Cancer

#### IV. Venereal Diseases

##### A. Syphilis

1. Cause and symptoms
2. Complications
3. Diagnosis, treatment and prevention

##### B. Gonorrhea

1. Cause and symptoms
2. Complications
3. Diagnosis, treatment and prevention

##### C. Control of spread

1. Individual's responsibility
2. Early diagnosis and treatment
3. Cooperating in case-finding

#### V. Modern Disease Control

##### A. Immunization

##### B. Public health measures

1. Sanitation
2. Research
3. Diagnostic techniques

##### C. Health education

1. School
2. Home
3. Public health education

##### D. Treatments

1. Medical
2. Surgical
3. Rehabilitation

##### E. Significance of disease to the individual

1. Personal efficiency
2. Longevity
3. Happiness

## LEARNING AND EVALUATIVE ACTIVITIES

1. Have students devise a checklist for self-evaluation of health. At the end of the unit, have children go over lists again. How would they change it?
2. Have the class develop an inventory of characteristics of a health-educated individual. Include personal living, social relations in the community.
3. Invite a pediatrician and/or psychologist to class to discuss how individuals grow and develop physically and emotionally.
4. Read stories of great Americans who overcame physical handicaps and became an inspiration to others.
5. Discuss some current figures who are accomplishing in spite of handicaps.
6. Discuss the reasons for visits to the physician, dentist, dental hygienist, school nurse and school psychologist.
7. Have the class name and describe other health personnel.
8. Have the class discuss the topic: "Why the individuals concerned with health services are so important to the individual and the community."
9. Discuss the values of an annual health examination.
10. Display doctor's instruments or pictures of them. Allow pupils to listen to the heart and lungs with stethoscope.
11. Report on the function of the skeletal and muscular systems.
12. Review health practices necessary for good health - correction of defects, avoid injury and disease, proper nutrition, proper habits of sleep and rest, and vigorous physical exercise.
13. Explain how muscles develop in size, strength, and efficiency.
14. Discuss the effect of exercise on the heart, circulation and respiration.
15. Discuss the effect of lack of exercise; muscles are meant to be used; with disuse muscles atrophy.
16. Discuss: "How can people get the exercise they need living in this mechanized society?"
17. Discuss question such as "What is disease?"

18. Introduce terms used in discussion of communicable disease:  
Susceptibility - the condition for establishment of an infection by invasion of virus or bacteria  
Resistance - the condition of lessened susceptibility that may result from immunization, changed nutritional status, and influences of age, sex and heredity.  
Infection - the process by which a microbial organism invades and establishes a parasitic relationship with a host.

19. Encourage discussion of pupil's ideas about the problems Man has had to conquer in the war against disease. Explore their knowledge about the work of such "health heroes" of the past as Jenner, Pasteur, and Lister.

The first successful disease-fighting chemical Ehrlich produced was Salvarsan (the antisyphilis drug). Syphilis, should pupils ask, is a venereal disease, often called VD, which is spread by skin-to-skin contact, as in intimate sexual contact. Syphilis and gonorrhoea are the most common venereal diseases; they are spread by close intimate contact, generally though not exclusively by sexual contact, with someone who has the disease. (See VD: Facts You Should Know by Andre Blanzaco, M.D., published by Scott, Foresman and Company, 1970.)

20. Stress that the immunity acquired from having a disease is more effective than the protection achieved by vaccines. Naturally acquired immunity lasts longer, often for a lifetime. But having a disease carries with it certain dangers. Thus, measles may have complications that lead to deafness or blindness. The use of vaccines to keep people from having communicable diseases represents a giant step forward in preventive medical care.

21. Ask pupils to tell what they would look for if they were sanitary inspectors: at a restaurant, at a dairy, at a dairy farm, at a food store.

Pupils may wonder why pasteurization is necessary if safety precautions are taken at the dairy farm and en route to the dairy. It is necessary because some milk is still handled under conditions that are not ideal. Improper cooling or inadequate protection against flies, dirt, and droplet infection are among the conditions that may exist. Thus, pasteurization is an essential safeguard, not a substitution for cleanliness.

22. The class might take a trip through a local restaurant or food store at an off-hour. The purpose would be to elicit information about the procedures used for maintaining cleanliness, for preventing food spoilage, and for obtaining certification. If the entire class cannot go, an individual might volunteer to make the trip with his parents and report to the class.

23. Bacteria Experiment: Show that germs "like" a warm, moist, and dark atmosphere in order to thrive and multiply.

Crush several dried beans.

Place half of the beans in each of two containers. Cover with water. Store one of the containers in a warm, dark place and the other one on the classroom sill. After several days note the results.

Secure two apples. Peel them and place one in a dark, moist warm place; leave the other exposed to the air and sunlight. Note the results in a few days.

24. Discussion concerning how students contract athlete's foot in school.
25. Have students write a list of communicable diseases they have had. Separate them into bacterial, fungal or viral diseases.
26. Class discussion of all possible ways to prevent spread of disease. Review with boys and girls the things they can do to help keep from spreading disease germs: wash their hands before eating and after using the toilet; cover coughs and sneezes; keep pencils and fingers out of the mouth; use their own towels and washcloths; avoid drinking from a common drinking cup; and stay home from school if they have a cold.
27. Have nurse-teacher visit classroom and discuss current immunizations. Ask her to relate this information to the immunization data on pupil cumulative health records.
28. To demonstrate the need for refrigeration in preserving foods, obtain two glasses of milk and cover them. Put one in the refrigerator and leave the other outside at room temperature. Compare the milk in each glass for several days noting the difference in appearance, texture and taste.
29. Discuss non-communicable diseases - 4 main categories:
  - Deficiency diseases - due to a lack of essential nutrients (i.e. scurvy)
  - Hereditary diseases - resulting from faulty genes (mongolism, hemophilia)
  - Constitutional diseases - due to a dysfunction of an organ or tissue (i.e. diabetes)
  - Traumatic diseases - (fractures, burns)
30. Write a story about a communicable disease that either you, or someone you know, has had. Tell what it was, how you caught it, what happened to you, and whether or not you spread it to someone else.
31. Find at least 10 different pictures which show unsanitary conditions or conditions that would make it easy for disease germs to spread.
32. You have probably been vaccinated for many different diseases. Check with your parents and see if you can make up a chart showing each disease you were vaccinated against, and the date when you were vaccinated.

## RESOURCES

### Books:

Your Wonderful Body, Robert J. R. Follett; Follett Publishing Company,  
Chicago, Illinois, 611  
F

What is a Human, Melvin L. Alexenberg; Benefic Press, Chicago, Illinois,  
1964, 612  
A

### Films:

About the Human Body, BOCES #831-1, 15 minutes

Be Fit and Live, BOCES #832-275, 18 minutes

Exploring Your Growth, BOCES #831-52, 11 minutes

Heart: How It Works, BOCES #831-389, 11 minutes

Heart, Lungs, and Circulation, BOCES #831-65, 11 minutes

Hemo, The Magnificent, BOCES #833-2014, 59 minutes

Human Body: Circulatory System, BOCES #832-21, 13 minutes

Human Body: Nervous System, BOCES #832-32, 13 minutes

Learning About Our Bodies, BOCES #831-80, 11 minutes

#### Mechanics of Life Series:

Blood and Circulation, BOCES #831-256, 9 minutes

Bones and Joints, BOCES #831-257, 9 minutes

Breathing and Respiration, BOCES #831-258, 9 minutes

Muscles and Movement, BOCES #831-260, 10 minutes

Physical Fitness and Good Health, BOCES #831-192, 10 minutes

Steps Toward Maturity and Health, BOCES #831-191, 10 minutes

Take Joy, BOCES #833-2020, 10 minutes

VD Questions, VD Answers, BOCES #832-189, 15 minutes

### HENS:

Communicable Diseases, BOCES #HH-5

Heart Disease Materials, BOCES #HH-17

## DRUGS, TOBACCO AND ALCOHOL

### Overview

As a child approaches his teen-age years, his horizons expand. He not only has a greater range and variety of experiences, he finds that the old familiar happenings and relationships may take on new meaning.

If watching his friends smoke marijuana at a party is new, seeing his father smoke cigarettes as he has always done may make him stop and think. Why is one alright to do, and the other not?

It is also difficult for a young person to see the difference between medication and pills. In this case, the student should learn: Don't take medication except when it is given by a responsible adult. Don't take more than you are given. Don't share your medicine with another person, and don't use anyone else's ever.

Students may already be aware of some of the social and domestic problems of alcoholism. They need to be helped to see the positive steps toward physical and mental health which can be taken, beginning in childhood, to prevent alcoholism.

It is also important that educators present information concerning the use of tobacco. This should be done in a factual manner while attempting to guide pupils toward responsible and healthy behavior.

The purpose of this unit is to aid the teacher in dealing with some complex social problems. But, because these problems are complex and affect each individual differently, it is difficult to do more than offer suggestions for present behavior and guidelines for the future.

## Objectives

1. Evaluate the factors pertaining to the establishment of the smoking habit.
2. Identify biased information in cigarette and tobacco advertising.
3. Express an understanding and awareness of the potential health hazards associated with smoking as they pertain to the individual and society.
4. Through the sufficient understanding of the smoking problem, make an intelligent personal decision whether to smoke or not to smoke.
5. Analyze the effects of a "smoking environment" on a non-smoker and a smoker.
6. Define the differences between ethyl and methyl alcohol.
7. Express that the drinking of alcoholic beverages is an accepted cultural practice for many people in the United States.
8. Analyze the emotionalism associated with the use of alcoholic beverages arising out of the controversies about it; when, how, where, and by whom they should be used.
9. Distinguish between acceptable and unacceptable drinking patterns.
10. Accept responsibility for drinking behavior if the decision is made to use alcohol.
11. Evaluate the serious social problems resulting from the inappropriate use of alcohol.
12. Show, explain and illustrate the effects various media advertising may have upon the individual and his decision whether to drink or not.
13. Relate basic factual information concerning the nature and characteristics of stimulant, depressant, and hallucinogenic substances.
14. Develop an awareness that drugs and household chemicals have proper uses, but that their potentially dangerous nature demands the student's respect.
15. Identify some of the personal problems related to the misuse of dangerous substances.
16. Express basic understandings of the laws governing drugs.
17. Use prescribed drugs and volatile substance in a sensible manner which will contribute to long-range good health for himself/herself and for those in the community.
18. Note the influence of peers and/or family on the individual's use of drugs.

19. Examine how the media influences the use of over-the-counter drugs.
20. Describe some of the beneficial uses of various drugs.

#### Major Concepts

1. The person's decision about smoking is one of several important decisions in his life and should be based on a firm foundation of scientific knowledge.
2. Smoking becomes a habit.
3. The hazards of smoking are many.
4. During the growing years, smoking interferes with one's normal growth because of the depressing effect of tobacco on the appetite.
5. Early users of tobacco were not aware of the consequences of smoking.
6. There are a number of reasons for not smoking.
7. Smokers help to pollute the environment for non-smokers.
8. Tobacco production and distribution has become a very important aspect of our national economy.
9. There are different types of alcohol.
10. Ethyl alcohol is found in alcoholic beverages.
11. Methyl alcohol is highly poisonous.
12. Ethyl alcohol is usually obtained from the fermentation of fruits and grains.
13. Social drinking is acceptable in modern America.
14. Alcohol affects the body in many ways.
15. The motivations for drinking or abstaining from drinking vary with each individual.
16. The use of alcoholic beverages may result in personal, community, health and safety problems.
17. Drugs are medical tools that may have many benefits when properly used.
18. Drugs may be classified according to their effects.
19. Drugs and other substances, if misused, may be harmful.

20. Behavior patterns of the individual influence present and future health.
21. Production, distribution, and use of drugs are controlled by law.
22. A variety of factors influence the decision - to use/misuse a substance that is capable of modifying mood and/or behavior.
23. Individual acceptance of responsibility is essential to the wise use of drugs.
24. A knowledge of drugs - what they are, what their benefits are, and how they should be used - is important in avoiding misuse.

## CONTENT OUTLINE

- I. Developing the Smoking Habit
  - A. Habit forming
    1. Taught by others
    2. Learned through experiences
  - B. Desirable and undesirable habits
    1. Desirable habits
      - a. Effective automatic behavior
      - b. Personal satisfaction
    2. Undesirable habits
      - a. Decreased personal effectiveness
      - b. Personal frustrations
  - C. Reasons for development of the smoking habit
    1. Curiosity
    2. Peer pressure
    3. Imitation of adult behavior
    4. Other
  
- II. Physiological effects of tobacco
  - A. Respiratory system
    1. Ciliary action
    2. Mucous membrane
  - B. Circulatory system
    1. Pulse
    2. Blood pressure
    3. Coronary circulation
  - C. Digestive system
    1. Appetite
    2. Salivation
  
- III. Health Hazards
  - A. Lung Cancer
  - B. Chronic bronchitis
  - C. Emphysema
  - D. Ulcers
  - E. Coronary artery diseases
  - F. Physical performance
  
- IV. Pollution for the Non-smokers
  - A. Physiological effects of a "smoke-filled" environment
  - B. Psychological effects of a "smoke-filled" environment
  
- V. Your Decision about Smoking
  - A. Important consideration
    1. Effects of smoking on one's health
    2. Effects of smoking on physical performance
    3. Expense of smoking
    4. Smoking habits may last your lifetime
    5. Safety implications of smoking
    6. Attitudes of parents and other family members
    7. Attitudes of and pressures from friends
    8. Uniqueness of the individual

- B. Making the right decisions
  - 1. A mature decision based on a clear understanding of tobacco and its use
  - 2. The extent to which a person is "grown up" is not measured by his decision to smoke
  
- VI. The Nature of Alcohol
  - A. Alcohol as a substance
    - 1. Ethyl - beverage - fermentation of fruits and grains
    - 2. Methyl - by-product of wood
    - 3. Denatured - ethyl plus an additive
  - B. Alcohol as a drug
    - 1. Type of drug: mind-altering
    - 2. Basic action: depressant
  
- VII. Uses of Alcohol in Modern Society
  - A. Variety of purposes for alcohol
    - 1. Celebrations
    - 2. Parties
    - 3. With meals
    - 4. Self-medication
    - 5. Escape
  - B. Prevalence of drinking in the United States
    - 1. Number of people who drink
    - 2. Number of people who do not drink
  - C. Society's ambivalent attitudes about alcohol
    - 1. Minimal legal controls
    - 2. Drinking practices
    - 3. Advertising and other enticements
  
- VIII. The Effects of Alcohol on the Body
  - A. Absorption into the blood stream
  - B. Oxidation - break down in the liver
  - C. Elimination - breath, perspiration and urine
  
- IX. The Adolescent and Beverage Alcohol
  - A. Reasons for drinking
    - 1. Curiosity
    - 2. Peer pressure
    - 3. Adventure
    - 4. Imitation of adults
    - 5. Unaware of dangers
    - 6. Other
  - B. Reasons for not drinking alcohol
    - 1. Personal reasons
    - 2. Religious training
    - 3. Parental pressures
    - 4. Other
  
- X. Problems Associated with Alcohol
  - A. Personal
    - 1. Sickness
    - 2. Nervous disorders
    - 3. Self-concept

- B. Family
  - 1. Financial
  - 2. Social
  - 3. Parental
  - 4. Marital
- C. Community
  - 1. Unemployment
  - 2. Provision of alcohol treatment facilities
  - 3. Crime and alcohol
  - 4. Alcohol-related court cases
  - 5. Police

XI. Classification of Drugs

- A. Addicting drugs
  - 1. Opium and its derivatives
  - 2. Barbiturates
  - 3. Synthetics
  - 4. Alcohol
- B. Non-addicting drugs
  - 1. Stimulants
  - 2. Hallucinogens
  - 3. Tranquilizers
  - 4. Deliriants
- C. Other common substances
  - 1. Tobacco
  - 2. Household products
  - 3. Toxic solvents

XII. The Effects of Misused Drugs

- A. Methods for misusing drugs
  - 1. Swallowing
  - 2. Inhaling
  - 3. Injecting
- B. Potential consequences
  - 1. Nausea and vomiting
  - 2. Suffocation
  - 3. Poisoning
  - 4. Organic damage
  - 5. Mental damage
  - 6. Death
- C. Other dangers associated with misuse of drugs
  - 1. Tolerance
  - 2. Development of dependence
  - 3. Personality changes

XIII. How the Behavioral Pattern of the Individual Influences Drug Usage

- A. Causes of drug misuse
  - 1. Curiosity
  - 2. Sociability
  - 3. Peer pressure
  - 4. Rebellion
  - 5. Boredom
  - 6. Excitement
  - 7. Other

- B. Future effects of drug misuse
  - 1. Psychological dependence
  - 2. Physiological dependence
  - 3. Physiological damage
  - 4. Possible effects on offspring
  - 5. Long range effects

XIV. Production and Distribution of Drugs

- A. Soft drugs - many produced legally and sold to black markets
- B. Hard drugs - controlled by the American crime syndicate
- C. Present laws governing illegal use of drugs

## LEARNING AND EVALUATIVE ACTIVITIES

1. List a number of diseases that are commonly believed to be caused or aggravated by smoking. Examples are coronary artery disease, ulcers, high blood pressure, anxiety, atherosclerosis, cancer of the lungs, mouth, esophagus, larynx, bladder, and Buerger's disease.
2. Make a bulletin board display of cigarette advertisements and analyze the type of appeals which they utilize.
3. Ask each student to survey at least ten persons who smoke more than a pack of cigarettes a day and ask them if they wish they could stop smoking. Have they ever tried to stop smoking? What advice would they give to a young person who does not yet smoke?
4. See if anyone can propose one good reason for using tobacco. How many reasons can the class list not to use it? Choose another poor habit - for example, obtaining only three hours sleep each night. If they can not find even one good reason for losing sleep, would they be likely to adopt this poor habit?
5. Stage skits to illustrate why a young person might begin to smoke.
6. Survey one or more grades in your school to determine the extent of smoking among teen-agers. Make the questionnaire anonymous, requiring only the age of the respondent, age when he started to smoke, amount smoked, and perhaps the reason why. Tabulate answers. Determine how much they spend. Display in school.
7. Make bulletin board charts showing the amount of money spent by one person if he smokes one pack a day, a week, etc. Using current cigarette prices, calculate the total yearly cost of smoking one pack of cigarettes a day. Then calculate the cost for a lifetime.
8. Make a bulletin board showing the amount of money spent on tobacco in comparison to medical expenditures, food for the family, recreation, etc.
9. Initiate student panel discussion on "Things on Which We Are Dependent." Make a differentiation between helpful and harmful dependence.
10. Construct a smoking machine.
11. Construct a graph showing the rise in death rates from the major diseases associated with smoking.
12. Skit showing how individuals are talked into the use of tobacco by peer pressure.
13. Have students prepare a brief essay describing their personal reasons for making a decision about smoking.

14. Invite the school physician or nurse-teacher to speak to your class about the increase in lung cancer, heart disease and other illnesses associated with smoking.
15. Suggest that students record the pulse rates of their smoking family members (while sitting) before and after smoking a cigarette. Graphs can be developed to record the variations in rates. Compare findings of class.
16. Make a bulletin board showing the use of alcohol in industry and medicine.
17. Discuss the effect of alcohol on behavior: include and explain why alcohol appears to be a stimulant on the body.
18. Students may formulate a social situation in which a teen-ager might find himself tempted to drink. Discuss the alternatives and recommend solutions for the individual.
19. Have local police department demonstrate the balloon test procedure, etc. for alcohol consumption.
20. Feed ethyl alcohol to goldfish by pipette. Using different dosages, watch behavior.
21. Have students examine labels on bottles in the kitchen and medicine cabinet for alcoholic content.
22. Collect advertisements concerning alcoholic beverages and analyze them in class.
23. Compare the cost of beverage alcohol and the cost of nutritious foods.
24. Create posters: Uses of alcohol (preservative, disinfectant, drug).
25. Have pupils make a scrapbook to include pictures and articles concerning the problems created by the use of alcohol.
26. List the reasons teen-agers and adults give for drinking. Evaluate them.
27. It's not uncommon for people to make generalizations about others because of their appearance or way of acting. This is known as stereotyping - thinking or talking about a person as member of a group rather than as an individual. Often stereotyping leads to misunderstandings. Role-play a situation in which an innocent, long-haired, jean-clad, bare-footed young person is accused of being a drug-using "hippie" by an older person. When completed, have the class discuss their feelings.

28. Make a collage of people who are taking risks. For example, people who are: working in a dangerous situation, athletes, daredevils. Then have the class explain how these risk situations are different from the risks of people who abuse drugs. Questions to help start the discussion might be:

Who has the greater control?  
Who is taking the greater chance?

29. Invite a narcotic agent or an attorney to discuss the laws concerning drugs.

30. Two games to improve one's self-concept:

The IALAC Story - I am Loveable and Capable. A motivational game to evaluate one's self-image.

This story is about people who have bad days and by the end of the day do not feel very loveable and capable. Discuss at the end how the person and others contribute to these feelings.

Circle of Praise -

Choose one person to sit in the center of the circle. The people on the outside of the circle compliment the person in some way. Only good things are said and compliments may not be repeated.

31. Ask a physician to discuss how treatment with modern drugs affects illness.
32. Invite a nurse to discuss constructive use of medicines. Stress not taking someone else's medication, etc.
33. Invite a pharmacist to talk about the dangers and penalties of misuse of prescription drugs.
34. Have students collect warning labels from harmful substances. Discuss.
35. Discuss how great harm can result from "taking a dare" involving the use of unknown substances, candy from strangers, etc.
36. Discussion of reading information on prescription labels.
37. Have students list potentially dangerous substances they find around their home and tell where they are stored and where they should be kept.

## RESOURCES

### Books:

- Hidden Persuaders; Vance Packard, David McKay Co., Inc. 1957
- Teenager and Smoking, Milgram, Rosen Publishing, 1972
- You and Smoking: It's Really Up to You, Diane Gess, Ramapo House
- Alcohol: Our Biggest Drug Problem, Joel Fort, M.D., McGraw-Hill Company, 1973
- Atlas of Wines, Hugh Johnson
- Encyclopedia of Wines and Spirits, Alexis Lichine
- Drugs from A to Z, Richard Lengeman, 1969
- I Am Loveable and Capable, Sidney Simon, Arugs Communications, 7440 Natchez Avenue, Niles, Illinois 60648
- Juice Use, Sol Gordon, Ed-U-Press, 760 Ostrom Avenue, Syracuse
- Mary Jane vs. Pennsylvania, Ralph Finn, 1970
- Physician's Desk Reference, Litton Publication, Inc., Oradell, N.J. 07649
- Teaching About Drugs-Curriculum Guide in Drugs K-12, American School Health Association; Pharmaceutical Manufacturing Association, 2nd Edition, 1971
- The Pleasure Seekers, Joel Fort, M.D., 1969
- The Secret War Against Dope, Andrew Tully, Coward, McCann and Geoghegan, Inc., 1973
- Uses of Marijuana, Solomon H. Synder, M.D., Oxford University Press, 1971

### Films:

- Barney Butt, BOCES #832-277, 13 minutes
- Is Smoking Worth It?, BOCES #832-365, 16 minutes
- Smoke Screen, BOCES #831-379, 5 minutes
- Smoking, It's Your Choice, BOCES #832-414, 15 minutes
- Smoking Past and Present, BOCES #832-366, 15 minutes
- Time For Decision, BOCES #832-367, 16 minutes

Time To Stop Is Now, BOCES #831-394, 4 minutes  
TV Messages on Cigarette Smoking, BOCES #832-371, 12 minutes  
Alcohol and You, BOCES #833-55, 28 minutes  
Curious Habits of Man, BOCES #832-58, 13 minutes  
Health Wreckers, BOCES #832-416, 13 minutes  
Almost Everyone Does, BOCES #832-122, 14 minutes  
Drugs and the Nervous System, BOCES #832-88, 16 minutes  
Drugs: The First Decision, BOCES #831-261, 9 minutes  
I Think, BOCES #832-120, 19 minutes  
Journey in Time, BOCES #833-85, 26 minutes  
Marijuana, BOCES #833-56, 34 minutes  
The Perfect Drug Film, BOCES #833-86, 31 minutes  
Up Pill - Down Pill, BOCES #833-70, 24 minutes

Filmstrips and Cassettes:

I'll Choose the High Road, BOCES #392-13  
Professor Persuader, BOCES #392-15  
Smoking and Children, BOCES #392-1  
To Smoke or Not To Smoke, BOCES #392-17  
Alcohol & Children, BOCES #392-2, 15 minutes  
Drugs and Children, BOCES #392-3, 30 minutes

Articles:

"Alcoholism - New Victims, New Treatments", Time Magazine, April 22, 1974

Pamphlets:

American Cancer Society  
American Heart Association

HEN:

Smoking, BOCES #HN-22, Parts I and II

Alcohol Education Materials, BOCES #HN-1, Parts I and II

Drug Education Information, BOCES #HN-9, Parts I and II

## MENTAL HEALTH

### OVERVIEW

Deeply-felt happiness is a constituent of mental health. Men and women who have a sense of well-being, a zest for working and playing, an ability to derive the utmost satisfaction from personal relationships may be said to be mentally healthy.

Mental health is far more than the absence of mental illness; it is the way that each person harmonizes his desires, ambitions, abilities, ideals, feelings and his conscience in order to meet the demands of life and face the reality of death.

It is particularly important to emphasize that individuals can improve their lives by defining the things they want for themselves and working toward them. Defining what they want should not be seen as a chance to list the material things they would like to buy, but to enumerate the practices and values which they feel will lead toward mental health and happiness. Among these might be: having a job and doing it well; being loyal to friends; treating one's spouse with love and respect; and taking good care of one's children.

### OBJECTIVES

#### Suggested Pupil Outcomes:

1. Develop the attitudes and behaviors conducive to good mental health.
2. Recognize mental health as one aspect of total health.
3. Express understanding of one's value system and how others view oneself.
4. Develop one's fullest capacity to love, respect, and be happy.
5. Demonstrate understanding and emotional control by adequately meeting situations that occur in one's environment.
6. Understand the uniqueness of each person based on heredity and environment.
7. Analyze the psychological and physiological changes which are taking place in one's body and how each individual's maturation rate varies.
8. Describe how needs may be a motivating force in one's behavior.
9. Develop and discuss ways of dealing with the feelings brought about by the death of a loved person or pet.

## MAJOR CONCEPTS

1. Personality is the totality of the individual.
2. All human beings have many needs in common.
3. Emotions are normal feelings experienced by everyone.
4. Any given emotion may be expressed in either a positive or negative manner.
5. Individuals have varying capacities and abilities for living and working together.
6. Personality traits are not inherited but potentialities for learning skills are.
7. Body structure and function affect individual behavior and one's relationship with others.
8. All people should have some insight into their own capabilities, strengths, and weaknesses, and how to use these for further growth.
9. Help is available to assist in resolving mental health problems.

## CONTENT OUTLINE

- I. The Individual as an Unique Entity
  - A. Heredity
    - 1. Fertilization
    - 2. Sex determination
    - 3. Autosomal inheritance
  - B. Environment
- II. The Totality of the Individual
  - A. Physical factors
  - B. Behavior
    - 1. Drives
    - 2. Urges
  - C. Individual traits
    - 1. Desirable
    - 2. Undesirable
  - D. Continuous growth of personality throughout life at varying rates
    - 1. Self-image
    - 2. Self-confidence
    - 3. Self-motivation and discovery
    - 4. Respect and trust for others
    - 5. Acceptance of occasional failure
    - 6. Learn decision-making
    - 7. Control emotions
    - 8. Learn compassion
    - 9. Know how and when to share
- III. Fundamental Needs of the Individual
  - A. Physical needs
    - 1. Nutrition
    - 2. Shelter
  - B. Emotional needs
    - 1. Love
    - 2. Security
    - 3. Independence
- IV. Behavioral Responses to Living and Working
  - A. Success
  - B. Frustration
- V. Fundamental Emotions
  - A. Love
    - 1. Self love
    - 2. Love of parents and family
    - 3. Love for a friend
    - 4. Heterosexual love
    - 5. Homosexual love
    - 6. Love for animals
  - B. Fear
    - 1. Superstition
    - 2. Anxiety
    - 3. Phobia
  - C. Anger
  - D. Etc.

- VI. How We Cope With the Loss of Significant Others?
  - A. Death
  - B. Divorce
  - C. Separation
  
- VII. Death as a Finality
  - A. Causes of death: anytime, any age
    - 1. Disease
    - 2. Suicide
    - 3. Accident
  - B. Emotions dealing with death
  - C. Determination of death
  
- VIII. Assistance in Resolving Mental Problems
  - A. Family medical physician
  - B. Mental health clinic
  - C. Religious consultant
  - D. Guidance personnel

## LEARNING AND EVALUATIVE ACTIVITIES

1. In small groups have students discuss the differences and similarities in the way males and females express sadness, fear, affection, etc. Why?
2. Discuss the reactions boys and girls experience from love stories, horror movies, etc. Why?
3. Ask each child to write a short paper titled, "Why X Is My Best Friend". List on the board the qualities of friendship.
4. Use the board to list as many sentences as possible that demonstrate different uses and meanings of the word "love".
5. Ask the students to give illustrations of how their parents showed love and affection to them from early childhood to the present. Ask the students how they returned this love and affection.
6. Discuss the importance of friendship, the qualities of friendship and how to be a good friend.
7. Discuss this question, "Is it necessary for me to do everything that my friends do and am I strong enough to refuse?"
8. A great deal can be learned about emotional behavior from role-playing situations. A group of students can write a short skit to show how friction can develop between two friends. They might use a situation in which a decision made by one is rejected by the other. If the skit ends with the two friends angrily walking away from each other, members of the class can then suggest ways in which the conflict might have been resolved and the friendship saved. This same technique can be used with a conflict plot, i.e. teenager and parent, teenager and teacher.
9. An interesting debate can be built around the song entitled "Patterns" in which Paul Simon tells of the patterns that govern and direct his life. The debate would deal with whether or not our lives are governed by fixed patterns.
10. Dramatize or discuss negative emotional behavior. Discuss constructive outlets for "pent up" anger; letting off steam, preventing tantrums.
11. Discuss worry; what causes it; how to avoid it; how to accept it.
12. Discuss Charlie Brown's book "Friendship Is..." - the give and take in a relationship.
13. Discuss different types of friendships. (Older people, younger, sharing of an interest; community; school.)

14. Have the students respond to, "The traits I like or dislike in a friend."
15. Arrange a hobby show in class to demonstrate display and explain hobbies.
16. Have students demonstrate how to solve a class, school or community problem.
17. Make a list of things about yourself you would like to improve and how you will go about it.
18. Have children make a collage showing life versus death.
19. Class discussion allowing students to express their feelings on a death experience they have encountered.

## RESOURCES

### Books:

The Controllers, Jim Cole; Shields Publishing Company, 1971. 150  
C

The Facade, Jim Cole; Shields Publishing Company, 1970. 150  
C

Helping Your Child to Understand Death, Anna Wolf, 1973

The Helpers, Jim Cole; Shields Publishing Company, 1972. 150  
C

Values Clarification, Sidney Simon et al; Hart Publishing Company,  
1972. 371.3  
S

Walk in My Mocassins, Mary Phraner Warren; Westminster Press,  
Chicago, Illinois

### Films:

Barbara, BOCES #831-188, 7 minutes

Friends, BOCES #832-295, 18 minutes

Growing Pains, BOCES #832-297, 13 minutes

Hello Up There, BOCES #831-201, 9 minutes

I Just Don't Dig Him, BOCES #831-212, 12 minutes

Inside/Out Series: BOCES (video cassettes), 15 minutes each

Because It's Fun

Bully

But Names Will Never Hurt?

Can Do/Can't Do

Getting Even

How Do You Show

I Dare You

Jeff's Company

Just Joking

Lost is a Feeling

Must I/May I

Someone Special

When is Help

Yes, I Can

Films: (Con't.)

Love to Kill, BOCES #832-215, 16 minutes

Rock in the Road, BOCES #831-136, 6 minutes

Social Side of Health, BOCES #831-193, 10 minutes

Trick or Treat, BOCES #832-128, 15 minutes

Understanding Stresses and Strains, BOCES #831-190, 10 minutes

What Should I Do Series:

The Fight, BOCES #831-278, 6 minutes

The Game, BOCES #831-278, 6 minutes

Lunch Money, BOCES #831-280, 6 minutes

The New Girl, BOCES #831-282, 6 minutes

The Project, BOCES #831-281, 6 minutes

Why You Are You, BOCES #831-270, 9 minutes

Walls and Windows, BOCES #832-341, 13 minutes

You See, I've Had a Life, BOCES #842-52, 32 minutes

Kits:

Dimensions of Personality Series: with adaptations

Here I Am, BOCES #123-9 (4th grade)

I'm Not Alone, BOCES #123-10 (5th grade)

Becoming Myself, BOCES #123-11 (6th grade)

DUSO II, BOCES #123-18

Posters Without Words, BOCES #123-16

Search for Meaning, BOCES #123-12, value clarification activities  
with adaptations

Games:

Can of Squirms, (High School), BOCES #110-16

Feelin', BOCES #110-24

The Ungame: Tell It Like It Is, BOCES #110-29

Games: (Con't.)

Why Am I Afraid To Tell You Who I Am?, BOCES #110-12

You!, BOCES #110-23

HEN:

Mental Health Materials, BOCES #HN-18

## TEACHER REFERENCES

"Emotional Problems in Mental Retardation - Utilization of Psychiatric Services", J.Q. Simmons, Pediatric Clinic of North America, 15:957, 1968

"The Mentally Retarded Adolescent: A Review of the Characteristics and Problems of 44 Noninstitutionalized Adolescent Retardates", Pediatrics, 38:845, 1966

Mental Retardation: It's Social Context and Social Consequences, F. Farber; Boston, Houghton, 1968

"Psychopathology and Mental Retardation', I. Philips, American Journal of Psychiatry, 124:29, 1967

## FAMILY LIFE

### OVERVIEW

Mentally retarded persons share with the rest of mankind an interest in closeness, physical contact, affection, and "being in on things."

For the retarded individual a normal sex life may be difficult to incorporate into the role assigned him by society. In a complex, technological and largely urban society, he is often treated as ward or child. Yet, almost all educable mentally retarded students are capable of having sexual relations, marrying and raising families. They have the same physical and emotional needs, drives and desires as those in regular classes. On the other hand, they often fail to receive information about sexuality in the home.

This unit not only includes activities that can lead to a knowledge of physiological and psychosexual facts of reproduction, but also includes activities that can help pupils to develop positive attitudes and practices with a view toward better understanding of self, a mature adulthood and a happy family life. Further, this unit is intended to satisfy the students' desire to understand the biological man and to develop some knowledge of acceptable social and sexual behavior.

The concept of appropriate time and place for various types of behavior, for example, can certainly be learned by most retarded persons. It is indeed also possible for them to achieve a happy, healthful, ethical, and fruitful family life.

The individual who teaches this unit should be one who is known to the pupils and respected by them. A sense of trust is important for students in discussing such personal topics as pre-marital sex, abortion, family planning and contraception, divorce, and marital instability, etc. The teacher also has to know his students in order to make decisions about what teaching techniques he will use, and the thoroughness with which he will handle various topics.

In preparing this guide, the writers were especially conscious of the tremendous range in ability among special education students. Sex education is especially important to those who are the most seriously handicapped, because it can help them avoid being sexually exploited, as well as avoid committing blatantly inappropriate actions themselves.

Factual information and positive feelings about human sexuality are the goal of this unit. Issues are presented in view of the fact that students have responsibility to themselves, their peers, and society in relation to their sexuality.

## OBJECTIVES

1. Develop an awareness of the family structure and perceive his/her role as a marriage partner, parent, and mature adult in society.
2. Compare the physical differences between males and females.
3. Identify the physical changes which take place in boys.
4. Identify the physical changes which take place in girls.
5. Identify the emotional changes which take place in girls and boys.
6. Analyze the psychological and physiological changes which are taking place in one's body and how each individual's maturation rate varies.
7. Express an awareness of the relationship between sexuality and physical and emotional behavior.
8. Discuss with dignity and without embarrassment or guilt the problems of growing up sexually.
9. Build a wholesome attitude toward sex.
10. Understand the interrelationships of heredity and environment and utilize this knowledge in forming attitudes and behavior.
11. Understand that biological sexuality is only one phase of total maturity.
12. Explain that sexual intercourse may create life.
13. Be able to deal appropriately with personal sex-related situations such as menstruation, nocturnal emissions, masturbation, petting, and personal hygiene.
14. Understand that the relationship of human mating to mutual love and affection is most appropriately expressed in marriage.
15. Appreciate the need for good medical care during pregnancy.
16. Accept one's roles and responsibilities as a family member.
17. Develop and express an understanding and appreciation of the significance of a happy and effective family life in present day America.
18. Maintain positive standards of behavior based upon the progressive acceptance of moral responsibility for his/her own sexual behavior as it affects others as well as himself/herself.

## MAJOR CONCEPTS

1. Human sexuality, which involves our growth and development, as well as the complex drives associated with love and marriage, is the basis for many facets of our behavior.
2. There are many anatomical and physiological differences between the human male and female.
3. Masturbatory experiences may follow genital handling upon reaching maturity.
4. Seminal or nocturnal emissions (wet dreams) are a normal occurrence in boys.
5. The menstrual cycle is a natural event in the life of a young girl which indicates she has reached one new area of maturity.
6. The human fetus develops in a unique manner.
7. There are various types and stages of love.
8. The responsibility and privileges in dating during the transition from adolescence to adulthood allow boys and girls to develop understanding of each other.
9. Some love has no sex in it at all, like the love of a grandson for his grandmother. Some sex has no love in it, like the sex a girl gives a man who pays her for it.
10. Love means sharing -- sharing thoughts, pleasures, activities, things, problems -- and, at appropriate times, sex.
11. Love means caring - each takes care of and wants the best for the other.
12. It is not unmanly or unwomanly to say no to premarital intercourse.
13. Each of us assumes various roles and responsibilities as a member of a family.
14. The very involvement of a child in the joys and sorrows of the family can be a source of maturation.

## CONTENT OUTLINE

- I. Growth and Development
  - A. Understanding our changing body
    - 1. Infancy
    - 2. Early childhood
    - 3. Preadolescence
    - 4. Adolescence
    - 5. Maturity
    - 6. Change of life (menopause)
    - 7. Old age
  - B. Everyone is unique
- II. Maturation
  - A. Physical changes
    - 1. Female: external changes
      - a. Breast development
      - b. Pelvic change
      - c. Development of pubic and axillary hair
    - 2. Male: external changes
      - a. Voice changes
      - b. Development of beard
      - c. Enlargement of sexual organs
      - d. Development of pubic and axillary hair
    - 3. Female: internal changes
      - a. Menstrual cycle
      - b. Endocrine balance
    - 4. Male: internal changes
      - a. Hormone production
      - b. Growth of sex glands (testicles)
  - B. Emotional changes
    - 1. New urges and feelings
    - 2. Emotional responses
      - a. Peer relationships
      - b. Dating relationships
    - 3. Value and interest change
    - 4. Awareness of identity
- III. Human Reproduction
  - A. Male reproductive system
    - 1. Structure and functions
    - 2. Male hormones
  - B. Female reproductive functions
    - 1. Structure and functions
    - 2. Female hormones

IV. Sex-Related Topics Often Discussed by Teenagers

- A. Masturbation
- B. Wet dreams (nocturnal emissions)
- C. Homosexuality
- D. Promiscuity
- E. Prostitution
- F. Rape
- G. Sexual molestation or exploitation
- H. Incest
- I. Parental seduction
- J. Sodomy
- K. Contraception and/or family planning
- L. Etc.

V. Responsibilities and Privileges in Dating

- A. Influential factors in dating behavior
  - 1. Family influence
  - 2. Peer pressure
  - 3. Mass media
- B. Disadvantages of early dating
  - 1. Limits emotional growth
  - 2. Curtails relationships with others
- C. Dating considerations
  - 1. Asking for a date
  - 2. Accepting or rejecting a date
  - 3. Going steady
    - a. Advantages
    - b. Disadvantages
- D. Dating behavior
  - 1. Kissing
  - 2. Making out
  - 3. Sexual intercourse
    - a. Emotional implications
    - b. Social implications

VI. The Family Unit

- A. What are roles in the family?
  - 1. Father
  - 2. Mother
  - 3. Children
  - 4. Extended family members
    - a. Grandparent(s)
    - b. Aunt(s) and Uncle(s)
    - c. Foster children
    - d. Etc.
- B. How do we cope with the addition of a significant other to the family?

## LEARNING AND EVALUATIVE ACTIVITIES

1. Select two boys of equal height, two girls of equal height and compare their school health records for their individual rates of growth.
2. Discuss the physical changes from boy to man and girl to woman.
3. Discuss the need of proper body care and good grooming: sleep, exercise, proper diet, personal hygiene, etc.
4. Discuss awkwardness and lack of coordination as a characteristic of this age group.
5. Discuss the condition of acne and the importance of good skin care.
6. Discuss the advantages of giving birth to a baby in the hospital instead of at home.
7. Ask the students to give illustrations of how their parents showed love and affection to them from early childhood to the present. Ask the students how they returned this love and affection.
8. Discuss the characteristics boys and girls look for in dating partners.
9. Make a list of "What Your Family Expects of You" and compare it with a list of "What Your Friends Expect of You", i.e. telephone use, hair style, dress code, curfew hours, etc.
10. Ask the students to develop independent lists on how they would like the other sex to behave in boy-girl relationships. Follow this with an open discussion.
11. Role-play a boy whose parents say he is too young to date.
12. Role-play a girl whose parents say she is too young to date.
13. Ask the class to list the advantages and disadvantages of "going steady".
14. Discuss the differences between love and infatuation.
15. Discuss the anatomy and physiology of the reproductive system of selected lower mammals and compare them with the human reproductive system.
16. While using transparencies of male and female skeletal and muscle systems, discuss the similarities and differences. Emphasize how these differences are related to different roles in life.
17. Discuss pregnancy, duration of pregnancy, no difference in pregnancy because of ethnic group, all ethnic groups fertile with one another.

18. Relate how parental hereditary characteristics are transferred to offspring.
20. Ask the children who have younger brothers and sisters to tell the class how these younger children are unable to do things the other older children can do.
21. Discuss all myths and misconceptions they have heard about sexual development, menstruation, nocturnal emissions, masturbation, etc.
22. To illustrate animal birth from eggs within the body provide the classroom with a pet (mouse, rabbit or hamster).
23. Provide a question box for the students who are reluctant to ask questions in class.
24. Show students transparencies or charts of a boy and girl during the preadolescent and adolescent period of their lives. Have students discuss the observable differences. Discuss the following physical, chemical (hormonal) and personality changes that occur during puberty:

MALE - Deepening of the voice, enlargement of the testicles, sperm cell production, ejaculation, increased production of androgens, pubic hair, axillary hair, beard appears, surge in growth, cardiovascular and respiratory growth, increased shoulder breadth, larger chest cavity, increased muscular definition, greater agility and motor coordination, development of reaction speed and perceptual-motor skills, changes in metabolism, members of the opposite sex become increasingly attractive, many new relationships and problems develop, masturbatory experiences, heterosexual activity likely to begin.

FEMALE - Voice deepens slightly, changes in metabolism, increased production of estrogens, pubic hair, axillary hair, onset of menarche, ovulation, breast development, deposition of fat in skin, development of heterosexual feelings, masturbatory experiences not as likely as in male.

Stress the reasons for the changes and why they are necessary for maturation.

25. Set up a family unit in class. Have each student experience each role with different situations: a. financial problem, b. social problem, c. medical problem.
26. Game: Life

27. Role-play:

- A.) A 16 year old girl and her boyfriend tell her parents she is pregnant. Her father throws her out of the house. (This exercise helps students face the reality of pregnancy. They can fantasize about the joy of having a baby, but the prospect of telling parents about a pregnancy is not so pleasant.) (Variation: Same situation, but parents ask the girl what she is going to do.)
- B.) A boy tells a girl he loves her the first time he sees her. She believes him and says she also loves him. (Variation: She does not believe him.)
- C.) A boy is propositioned by a homosexual while riding on a bus. He rejects the advances. (Variation: A girl is propositioned by a lesbian while riding on a bus. She rejects the offer.)
- D.) A man or woman (stranger) offers a boy or girl a ride home. He/she refuses the offer.

28. As we all know, it is important for teenagers and their parents to communicate. This is a simple and interesting way to illustrate to the young people in your classroom the communication gap and some possible solutions. On a piece of paper, have the students write fifteen things which are important to them. When this is completed, draw three columns next to the list. In the first column have the students check the items which they do not discuss with anyone. In the second column, check those which are discussed with friends only. In the third, check off the things which are discussed with their parents. When the list is completed, use this as a jumping off point for classroom discussion.

## RESOURCES

### Books:

Health: A Quality of Life, John Sinacore; MacMillan Company

Health for Effective Living, Johns, Sutton, Webster; Mc-Graw-Hill Company

Love and the Facts of Life, Evelyn Duvall, 1963

Marriage and Family Living: A Self-Other Fulfillment, Porterfield; Davis Publishers

Modern Health, Otto, Julian, Tether; Holt, Rinehart and Winston

Reproduction, Sex, and Preparation for Marriage, Lawrence Crowley, 1973

Secret World of the Baby, Beth Day, 1968

Tune Into Health, Telice and Carolan, College Entrance Book Company

Twins, Marguerite Rush Lerner, M.D.; Medical Books for Children; Lerner Publications Company, 241 First Avenue North, Minneapolis, Minnesota 55401, 1961. 612.6

L

### Films:

About Conception and Contraception, BOCES #831-374, 11 minutes

Adolescent Sexual Conflict: Are We Still Going to the Movies?, BOCES #832-373, 14 minutes

Boy to Man, BOCES #832-27, 16 minutes

Girl to Woman, BOCES #832-28, 16 minutes

Growing Embryo, BOCES #832-92, 17 minutes

Growing Pains, BOCES #832-297, 13 minutes

Have a Healthy Baby, BOCES #832-90, 16 minutes

Homosexuality: What About McBride, BOCES #832-300, 14 minutes

How To Say "NO" To A Rapist...And Survive, Part I - BOCES #833-150, 26 minutes, Part II - BOCES #833-151, 26 minutes

Human Reproduction, BOCES #832-53, 20 minutes

I Just Don't Dig Him, BOCES #831-212, 12 minutes

Then One Year, BOCES #832-337, 19 minutes

You!, BOCES #832-419, 17 minutes

Kit:

Posters Without Words, BOCES #123-16

Filmstrips and Cassettes:

Family Planning Today, BOCES #333-98, 30 minutes

Growing Into Manhood, BOCES #333-90, 26 minutes

Growing Into Womanhood, BOCES #333-91, 26 minutes

Mental Retardation and Sexuality, 20 minute filmstrip with record.  
\$20.00 purchase, \$5.00 rental. Order from Planned Parenthood  
Association of Southeastern Pennsylvania, 1402 Spruce Street,  
Philadelphia, Pennsylvania 19102

Pamphlets:

ABC's of Birth Control, BOCES #P-96

Birth Defects - Guide on Human Chromosome Defects, BOCES #P-11

Confidential, BOCES #P-121

The Family Planning Clinic, BOCES #P-93

Genetic Counseling, BOCES #P-119

Leaders Alert Bulletin (25) Pre-Natal Care To Prevent Birth Defects,  
BOCES #P-115

Leaders Alert Bulletin (27) Progress in Prevention of Birth Defects,  
BOCES #P-116

The Modern Baby, BOCES #P-86

Modern Methods of Birth Control, BOCES #P-95

Selected New York State Abortion Clinics, BOCES #P-94

Teen Questions About Sex - And Answers, 1973. Planned Parenthood  
Center of Syracuse, Inc., 1120 East Genesee Street,  
Syracuse, New York 13210

To Be A Mother - To Be A Father, simple and basic discussion with  
diagrams on family planning; 1973. Planned Parenthood  
Federation of America, Inc., 810 Seventh Avenue, New York,  
New York. 10019, Price: \$.25

Travel Time, Nine Months, BOCES #P-113

Games:

Body Talk, BOCES #110-25

Can of Squirms, (High School), BOCES #110-16

The Ugame: Tell It Like It Is, BOCES #110-29

HEN:

Family Life Education, BOCES #HN-12

Chart:

Human Reproduction, BOCES #CH-3

Model:

Human Development, BOCES #MO-1

## CONSUMER, COMMUNITY, ENVIRONMENTAL AND PUBLIC HEALTH

### OVERVIEW

As youth reach the age when they can find the concept of "environment" meaningful, the idea of "community" can be presented; because the two are related. The persons within one's immediate environment make up the community in which one lives. Just as it is each person's responsibility to protect his environment, it is also his responsibility to act in such a way that he will not cause harm to the community and indeed that he will contribute to it, if possible. Similarly, he needs to know such basics as: we do not throw soft drink cans out of the car window; we do not take things from stores without paying for them; we do not play music loudly late at night which might bother the neighbors, and we do not go to school when we are sick with something that might spread to other people.

There are many things young people can do to contribute to the life and health of the community. They can practice good environmental habits as individuals and participate in community activities such as picking up rubbish in community parks. They can tell their families about recycling. They can ride a bicycle or use public transit instead of always driving or being driven in the family car.

Awareness of environmental issues is the place to start in learning to become a wise consumer. The attitude of "use it once and throw it away" which is promoted by the manufacturers of paper products, toys, and household goods can better be resisted by the young person who understands that this practice contributes to the destruction of the environment.

Consumer, environmental and public health are closely related, and recognizing their interrelationships gives impetus to efforts which can be made to further them.

### OBJECTIVES

#### Suggested Pupil Outcomes:

1. Express an understanding of the roles, responsibilities and training required in health careers.
2. Cite not only the financial but humanitarian rewards of health occupations.
3. Express an awareness of future opportunities in health careers.
4. Know how to select and evaluate competent medical, dental, and other health personnel and services.

5. Appreciate and understand the functions of consumer organizations and health agencies and their responsibilities in supporting and promoting health programs.
6. Relate emotions, family patterns and values which influence the selection and use of health information.
7. List some purposes of advertising.
8. Discriminate between reliable and unreliable health information and advertising.
9. Develop criteria for evaluating health advertising.
10. Describe ways in which false advertizing is dangerous to the health of consumers.
11. Identify misleading statements and claims in health advertising.
12. Evaluate the use of testimonials and guarentees in health advertising.
13. Evaluate deceptive packaging techniques and higher costs.
14. Avoid the dangers of medical neglect, self-diagnosis and self-treatment.
15. Identify the factors that influence self-medication.
16. Distinguish between prescription and over-the-counter drugs.
17. Evaluate the practice of using another person's medication.
18. Define the basic concepts relating to the environment.
19. Express an awareness of the uses and misuses of water, land, and air.
20. Identify the elements within the environment that can be harmful.
21. Understand the interrelationship between man's health and his biological environment.
22. Define the physical limitations of our natural resources.
23. Discuss the natural resources in our area.
24. Demonstrate an understanding of the concept of ecological balance as related to our community.
25. Explain how man can destroy or preserve the earth's beauty.
26. Describe how contamination is a threat to man's health and future existence.
27. Analyze the role of the people in the family, school, community and nation that cooperate to protect the environment.
28. Recognize how public agencies work to protect the health of the community.

## MAJOR CONCEPTS

1. It is the individual's responsibility to learn to measure the reliability of the great variety of health products and services available.
2. A person should be able to select qualified and competent medical, dental, and allied health personnel and services.
3. Emotions, family patterns and values influence selections and use of health information, products and services.
4. Evaluations of standards, health products and health services require critical thinking.
5. The quality of a product may mean spending more - a bargain is not always a saving of money.
6. Accurate information on labels, in advertising and promotions are consumer rights.
7. There are many opportunities available in the area of health.
8. Some health products are inferior or unneeded.
9. Many health agencies and organizations serve, protect and inform the consumer.
10. Self-diagnosis and treatment can endanger health.
11. The Food and Drug Administration and the Federal Trade Commission are responsible for the safety, effectiveness, and advertising of prescription and over-the-counter drugs.
12. Our immediate surroundings, including the people, have an effect on us.
13. Man depends on the world around him in order to survive.
14. Human life depends on water and air.
15. The environment has a significant effect on individual and community health.
16. Improper sewage or waste disposal can contribute to the transmission of disease.
17. We depend upon many people for safe water and air.
18. People must be protected against diseases borne by food.
19. Public Health services help to maintain a healthy community.

## CONTENT OUTLINE

- I. The Individual as a Health Consumer
  - A. What is a health consumer?
  - B. Who are health consumers?
  - C. How are health consumers important?
    1. Influence on the kinds of health services and products made available
    2. Prices of items are affected by consumer actions
    3. Influence on the quality of health services and products
  - D. What special problems do health consumers face?
    1. Deciding when to seek health services
    2. What health problems can be treated without visiting a doctor
      - a. Self-medication
      - b. The hazards of treating oneself for illnesses
  - E. How to be an intelligent health consumer
    1. Purchasing and using drugs and medicine
      - a. Prescription medicines
      - b. Non-prescription medicines
        1. Labeling
        2. Limitations of use
        3. Other pertinent information
    2. Choosing medical and dental care
      - a. Types of medical doctors
      - b. Health-related occupations
      - c. How to choose a doctor and dentist
    3. Making the most of the health dollar
      - a. Knowing what is needed before buying
      - b. Comparing values and checking the quality of products and services
      - c. Following the advice of your physician
      - d. Buying health products in sensible quantities
      - e. Watching for opportunities for buying or taking advantage of services or products
      - f. Keeping records of all costs of health purchases
- II. Ethnics in Health Advertising and Promotion
  - A. Definitions of important terminology
    1. Advertising
    2. Promotion
  - B. The purposes of advertising
    1. Increasing consumer demand
    2. Educating the consumer
    3. Developing large-scale distribution
  - C. The responsibilities of advertisers to consumers
    1. Advertising and truthful claims
    2. Advertising messages in good taste
    3. Advertisements and respect for the privacy of the individual
    4. Advertising on labels and its accuracy
  - D. The responsibilities of advertisers to the industry
    1. Respect for copyrights
    2. Trademarks - their meaning and use
    3. Advertisers and avoidance of the use of libelous statements
  - E. The advertising industry and control of the activities of its members

### III. Undesirable Promotional and Advertising Techniques

- A. General criticisms of health advertising
  - 1. Claims are distorted beyond that which is approved in the products final printed labeling
  - 2. Deceptive research claims
  - 3. Encourage unnecessary purchases
  - 4. Stimulate emotional rather than rational buying
  - 5. Advertising increases the cost of health products
  - 6. Advertising language is often confusing and meaningless
  - 7. Health product ads often contain more half-truths than truths
  - 8. Other criticisms
- B. Deceptive health advertising
  - 1. False advertising
    - a. Claims must be proven by manufacturers
    - b. Controlled by special agencies
    - c. Dangerous to health consumer
  - 2. Misleading statements and claims
    - a. Pseudo-medical endorsement
    - b. Omission of facts
    - c. Peculiar use of words
  - 3. Testimonials
  - 4. Guarantees
  - 5. Incomplete labeling
  - 6. Deceptive packaging
  - 7. Exploitation of special groups
    - a. Children
    - b. Teenagers
    - c. Older population
  - 8. Other deceptive techniques
    - a. Fictitious bargain
    - b. The "favored few"
    - c. Bait advertising
- C. How the consumer can evaluate health advertisements
  - 1. Information about the product should be know to the consumer
  - 2. Guides for evaluation
    - a. Does the product have demonstrated value?
    - b. Of what does the product consist?
    - c. Is the price comparable to other similar products
    - d. Is proof provided?
    - e. Is the product known to be harmless?
    - f. Are unclear statements made?
    - g. Does the advertising have any special appeal?
    - h. Do I need to buy this product?
    - i. Does the advertiser resort to the use of testimonials?
    - j. Do you get the impression (from the ad) that if you do not select this product you won't be like other people?

- IV. Evaluating Health Information
  - A. Reliable sources
    - 1. Medical doctors
    - 2. Dentists
    - 3. Health department
    - 4. Pharmacists
  - B. Unreliable resources
    - 1. Mass media
      - a. T.V.
      - b. House to house peddling
      - c. Newspaper
      - d. Mail order gimmicks
    - 2. "Friendly" advice
  - C. Consumer motivation
    - 1. Motives
    - 2. Consumer purchasing patterns
    - 3. Teenage consumer
  
- V. Relationship of Health Information to Personal Health Status
  - A. Proper medical care
    - 1. Regular medical check-up
    - 2. Use of prescription drugs
  - B. Unreliable health related practices
  
- VI. Agencies Responsible for Human Health
  - A. Food and Drug Administration
    - 1. Safety of drugs
    - 2. Effectiveness of drugs
    - 3. Advertising claims of medical practitioners
  - B. Federal Trade Commission
    - 1. Validity of over-the-counter drug advertising
    - 2. Removal of products from the market if false claims are not corrected
  
- VII. Fraudulent Consumer Information
  - A. What is a quack?
    - 1. Recognizing a quack
    - 2. Common quack approaches
    - 3. Hazards of quackery
  - B. Why people consult medical frauds
    - 1. Fear
    - 2. Lack of information
    - 3. Emotional appeals of nostrums and devices
    - 4. Specific cases and kinds of quackery
  
- VIII. Is There a Career for You?

- IX. Components of Man's Environment
  - A. Physical factors
    - 1. Water
    - 2. Air
    - 3. Soil
    - 4. Climate
  - B. Biological factors
    - 1. Harmful and beneficial plants
    - 2. Harmful and beneficial animals
  
- X. Man's Relationship to His Environment
  - A. Air
    - 1. Need for oxygen
    - 2. Pollutants
  - B. Water
    - 1. Uses
    - 2. Pollution
  - C. Soil
    - 1. Need for uncontaminated soil for good food growth
    - 2. Urban sprawl taking needed soil areas
  - D. Noise
    - 1. Sources
    - 2. Effects on hearing
  - E. Sewage
  - F. Garbage and refuse
  - G. Chemicals
    - 1. Lead
    - 2. Mercury
    - 3. Pesticides
    - 4. Other
  - H. Housing
  - I. Food
    - 1. Old methods of handling
    - 2. Modern food handling
    - 3. Food laws
    - 4. Milk sanitation
    - 5. Pasteurization
    - 6. Food contamination
    - 7. Transmission of disease by food
    - 8. Protecting our food
  - J. Insects and Rodents
    - 1. Scope of problems
    - 2. Modern control
    - 3. Individual responsibility
  
- XI. Agencies Who Work to Keep Our Community and Environment Healthy
  - A. Board of Health
    - 1. Communicable disease control
    - 2. Vital statistics
    - 3. Sewage disposal
    - 4. Garbage disposal
    - 5. Milk and water control

- XI. B. State Health Department Controls
  - 1. Air Pollution
  - 2. Water Pollution
  - 3. Industrial Wastes
  - 4. Enforcement of Sanitary Laws
- C. Federal agencies
  - 1. Department of Health Education and Welfare
  - 2. Department of Agriculture

## LEARNING AND EVALUATIVE ACTIVITIES

1. Develop a set of standards with the class for evaluating health products and services.
2. Display items or labels from products that are available.
3. Construct posters illustrating various medical specialists.
4. Develop a bulletin board display illustrating the health protections afforded by community agencies.
5. Analyze advertisements for "sense appeal". Determine which sense the advertisement is directed toward; what claims are made; how realistic the claims are, and whether the advertising message is direct or implied.
6. Many health products are advertised seasonally and in certain types of media. Using ads from magazines, prepare a display of these ads. Group the ads in such a way that the viewer can recognize the seasonal nature of the ad, as well as the age group for whom the product is intended. For example: nose drops and cough remedies in the winter and suntan lotions in the summer.
7. Is there a difference in the techniques used by tobacco advertising agencies and the ones used by liquor advertising agencies? Using pictures from magazines and newspapers, compare the advertising techniques of these two agencies.
8. Bring an empty OTC drug bottle to class and an advertisement for this product. Read the wording on the box or label carefully to the class. Ask the following questions:
  - What precautions are suggested?
  - Are possible side-effects mentioned?
  - Is there an indication that the drug could be poisonous? Is so, is an antidote specified?Now read the ad to the class. Are side-effects, precautions, or possible poisonous properties mentioned?
9. On a poster board, make a copy of a label from a prescription drug. Use this display to discuss the usefulness of a prescription. You may find that many of the young people in your classroom do not understand the purpose of all the items on the label or why it is important to take the drug in its entirety at the times which were directed by the doctor unless side-effects occur.
10. Discuss the role of the Food and Drug Administration.
11. Compare contents of the same product obtained at high and low prices and quality of items purchased in a discount store.
12. Tape record radio or T.C. commercials relating to children's health.

13. Interview a representative of the Better Business Bureau on the gullibility of the public and how the consumer is being protected.
14. Show how technological advances may further upset our ecology.
15. Make a bulletin board showing how man interacts with his environment.
16. Discuss and list the effects of no water, air, food on society.
17. Make models showing an unpolluted water supply and a polluted water supply.
18. Take a field trip to discover how many industries are polluting the atmosphere.
19. Have the students find evidence of air pollution in Cortland County.
20. Discuss pollution of the Tioughnioga River and the effects the new sewage treatment plant will have on the quality of the water.
21. Discuss the various ways that the effect of temperature affects man's health.
22. List the atmosphere conditions which effect an individual's performance in daily activities (temperature, humidity, cloudy or bright).
23. Take colored water, place celery in it, watch the water go into the celery just as insecticides can get into our food from the soil.
24. Develop in the students an interest in recycling of materials.
25. Examine specimens from streams and ponds in the area in order to see the number of organisms that grow in the water.
26. Make a word collage for the bulletin board related to a clean environment.
27. Discuss household and field pests (rats, mice, roaches, flies, other rodents).
28. Discuss how disease can be transmitted by pets.
29. Construct a list of diseases for which vaccines are available and chart pupils in class who have been immunized for each.
30. Have students ask or help parents check filters in air conditioners, humidifiers, stove hoods, furnaces, etc.
31. Arrange a trip to a water treatment plant or to a conservation area.
32. Consult the local health officer and report on morbidity and mortality statistics of the community as related to air or water pollution. Compare with different kinds of communities.
33. Invite a public health official to explain how the agency protects the individuals in environmental health.
34. Visit hospitals, restaurants, factories, etc. to observe laws being enforced.

## RESOURCES

### Books:

- Careers in the Health Field, Lee; Messner Publishing, 1973
- Chinese Acupuncture, Dr. Wee Wei Ping, 1973
- Devils, Drugs and Doctors, Howard Haggard, 1946
- Earth Medicine - Earth Foods, Michael A. Weinter, 1972
- Environmental Health, P. Walton Purdom; Academic Press, New York
- Fraud, E.J. Kahn Jr., 1973
- The Great Patent Medicine Era, Adaline Heckplinger, 1970
- The Golden Age of Quackery, Stewart Holbrook, 1959
- The Hidden Persuaders, Vance Packard; David McKay Co., Inc., 1957
- The Indian Folk Medicine Guide, J.I. Lighthall
- Medicines From the Sea, James R. Berry, 1972
- The Medicine Show, Consumer Reports, 1971
- The Silent Spring, Rachel Carson
- Two Hundred Million Guinea Pigs; New Dangers In Everyday Foods, Drugs, and Cosmetics, John G. Fuller, 1972

### Films:

- Acupuncture, An Exploration, BOCES #832-280, 16 minutes
- Air is for Breathing, Shell Oil Company, Color, Free Loan
- Brand Names and Labeling Games, BOCES #831-358, 9 minutes
- Buy and Buy (Inside/Out), BOCES (video cassette), 15 minutes
- Cities in Crisis, BOCES #832-70, 21 minutes
- Consumer Power: Advertising, BOCES #832-183, 22 minutes
- Cry of the Marsh, BOCES #832-237, 12 minutes
- Ecology: Checks and Balances, BOCES #832-249, 14 minutes

Films: (COn't.)

The Great American Trash Can, American Glass Container Company,  
Free Loan

Is a Career in Health Services for You, BOCES #832-309, 14 minutes

Just One Place, BOCES (video cassette), 15 minutes

Label Logic, BOCES #832-30, 18 minutes

Our Wilderness, BOCES #831-274, 10 minutes

Peace and Voices in the Wilderness, BOCES #831-235, 9 minutes

Preserving Our American Wilderness, BOCES #831-275, 10 minutes

This is Fraud, BOCES #831-351, 9 minutes

Two Yosemites, BOCES #831-179, 10 minutes

You Belong, BOCES (video cassette), 15 minutes

Kit:

Persuasion Box, BOCES #123-27

Filmstrips and Cassettes:

Commitment, filmstrip and record, International Paper Company,  
Free Loan

Wildlife Ecology, BOCES #392-6

Witchcraft to Modern Medicine, BOCES #392-7

Games:

Earth Resources Monitoring From Space, BOCES #110-32

Pollution, BOCES #110-8

Other Sources:

New York State Conservation Department  
Niagara Mohawk Power Corporation

## SAFETY AND FIRST AID

### OVERVIEW

Knowledge about what one is doing, whether it is how to do something or the limitations of an action or equipment, enters into accident prevention. Attitudes, some of which are not obvious, guide behavior and lead one into or away from hazardous situations. Young people, regardless of their mental abilities, need to become aware of activities associated with safe and unsafe living.

The ability to work with one's hands is important indeed. It should be an area of emphasis for the mentally handicapped as preparation for later, more specific, vocational training. Using the hands, as is necessary for practicing first aid, is a good way to supplement learning. Direct involvement in the environment through manual work can be one area where the mentally retarded pupil has the opportunity to excel. Therefore, safety measures and first aid in case of accidents are important to consider in order to make the experience of manual work as worthwhile as possible.

The educable mentally retarded are certainly capable of and, therefore, should be taught simple, but effective, first aid procedures for minor injuries and for as many of the major emergencies as their individual capabilities will permit.

Leadership for safety education must originate within the school through direct and indirect experiences. Indirect experiences come through living in a safe environment, both at work and at play. Direct experiences come through class instruction in safety and participation in communicating the rules of safety to others. Safety must be an integral part of any curriculum which stresses direct involvement.

### OBJECTIVES

#### Suggested Pupil Outcomes:

1. Understand and express the idea that accidents are caused by human and environmental factors.
2. Recognize that there is a relationship between one's activities, attitudes, emotions, and accidents.
3. Identify unsafe situations and learn to avoid them.
4. Identify common safety hazards in one's home, school and community.

5. Practice behavioral traits which will enhance the safety of oneself and others.
6. Define the specific roles of the people directly related to the promotion of safety in the school and community.
7. Identify areas of risk to individual and group safety that might occur specifically during holiday time.
8. Identify areas of risk to individual and group safety that might occur during a particular season of the year.
9. Define some hazards to the pedestrian, the bicyclist, the bus passenger, and the automobile passenger and ways to avoid them.
10. Express in one's own words the idea that first aid is immediate, temporary help given to the victim of an accident, sudden illness, or a disaster until medical help is obtained.
11. Demonstrate the effective use of basic first aid equipment/supplies.
12. Employ basic first aid procedures in simple emergency situations.

## MAJOR CONCEPTS

1. A responsible person prepares himself for emergencies and disasters.
2. Knowledge and practice of safety rules in recreational activities helps prevent accidents.
3. A knowledge of the cause and kind of accidents can help individuals plan for more responsible action.
4. Many home accidents can be eliminated by the action of individual family members.
5. Fire prevention is part of civic and individual responsibility.
6. Appropriate responses to hazardous and emergency situations should be studied and practiced.
7. The individual should be able to recognize and handle the minor emergencies which occur in everyday living which require first aid.

## CONTENT OUTLINE

- I. Home Safety
  - A. Falls and their prevention
  - B. Burns and scalds and how to avoid them
  - C. Poisoning (gas)
  - D. Poisoning (solid and liquid)
  - E. Electrical problems and emergencies
    1. Safety devices
    2. Signs of trouble
  - F. Other miscellaneous home hazards
- II. Outdoor Safety
  - A. Winter sports activities
    1. Safe ice skating
    2. Safety on the ski slope
    3. Sledding and tobogganing
  - B. Summer sports
    1. Baseball
    2. Kite flying
    3. Nature's hazards
      - a. Snakes
      - b. Poisonous plants
      - c. Thunder and lightning storms
- III. Emergencies Which Affect Young People
  - A. Safe behavior and attitudes
  - B. Specific places where safety is important
    1. Home
    2. School
    3. Teenage jobs
      - a. Babysitting
      - b. Agriculture
      - c. Lawn mowing
    4. Recreation
      - a. Swimming
      - b. Biking
      - c. Motorcycling
      - d. Skiing
      - e. Camping
      - f. Hiking
      - g. Hunting and fishing
    5. Pedestrian safety
  - C. Specific emergencies and what to do
    1. Fire
    2. Weather
    3. Poisonings
      - a. Drugs
      - b. Toxic gases
      - c. Household chemicals
    4. Asphyxiation
    5. Near electrocution
    6. Explosives

IV. Emergency Care of Minor Injuries

- A. Bee stings and insect bites
- B. Blisters
- C. Fainting
- D. Heat stroke
- E. Nosebleed
- F. Earache
- G. Slivers
- H. Convulsions

V. The First Aider's Personal Responsibilities in Emergencies and Disasters

- A. Calmly take charge
- B. Check for sources of immediate danger
- C. Administer needed first aid of which you are capable
- D. Call for help as soon as possible, if needed

## LEARNING AND EVALUATIVE ACTIVITIES

1. Have a member of local police department explain rules and regulations concerning equipment and operation of bicycle.
2. Collect and discuss news articles on home accidents and ways in which these accidents might have been prevented.
3. Collect data on the causes of fires in homes, public buildings and forests.
4. Discuss the following in relation to camping; fire hazards, drinking water, axe and knife safety, hiking, poisonous plants, wild animals, getting lost in woods, keeping and leaving a clean campsite.
5. Completed a home fire hazard check list and make as many corrections as possible.
6. Prepare an exhibit of hazardous objects or materials found in homes such as metal toys with sharp edges, rugs without rubber backing, oily rags improperly stored, and easily accessible poisonous substances.
7. Participate in fire drills. Discuss ways to improve fire drills. Notice location of fire safety equipment in building.
8. Display of recreational equipment such as canoe, gun, skates, sled, skis, bat, fish hook, etc.; select one item and write good safety practices for using that item.
9. Make posters of swimming rules.
10. Put up bulletin board display illustrating safe swimming practices.
11. Make a list of important telephone numbers for use in emergency.
12. Invite a nurse or physician to speak to class about importance of first aid and basic procedures.
13. Discuss how, by using improper action, additional damage may be done to an injured person.
14. Discuss pupils' camp experiences in relation to first aid in emergencies.
15. Have the students divide up in pairs and practice taking a pulse.
16. Demonstrate how a compress or a bandaid can be removed from its sterile packaging and applied to an injury without contamination. Allow the students to practice on each other.
17. Many people are affected by the secretions of certain plants - poison ivy, poison oak, and poison sumac. Prepare a bulletin board display which will help people to protect themselves from contact with these plants.

18. Have the students do a home safety check and list safe and unsafe practices carried out in the home.
19. Plan a "brainstorming session" for the class and discuss the ways in which the positive approach to safety contributes to the improvement of society.
20. Bulletin board - newspaper clippings of accidents which were caused by various unsafe practices.
21. Discuss the common hazards and accidents which occur in the home. Have the class conclude how they could be corrected or have been prevented.
22. Group reports to the class describing safety precautions for their favorite recreational activities.
23. Have the students make safety posters.
24. Group report of safety precautions that should be followed before, during, and after a severe storm.
25. Have the students draw a diagram of the emergency escape routes from their bedrooms to safety.

## RESOURCES

### Books:

Health and Growth Series - Grade 8, Healthful Living Program,  
Scott Forseman and Company, Glenview, Illinois 60025

Safety for Teenagers, Scott, Forseman and Company,  
Glenview, Illinois 60025

Standard First Aid and Personal Safety, American Red Cross manual

### Films:

And Then It Happened, BOCES #832-229, 18 minutes

Fire: Two Ways Out, BOCES #831-365, 11 minutes

Ice Safety, Boy Scout Office, Central Avenue, Cortland, New York

Liquids Can Burn, BOCES #832-319, 13 minutes

Mini-Bike, BOCES #833-110, 27 minutes

One Got Fat, BOCES #832-200, 15 minutes

Safe in the Water, BOCES #832-332, 15 minutes

Survival Kit Part I, BOCES #831-329, 10 minutes

Survival Kit Part II, BOCES #831-330, 10 minutes

To a Babysitter, BOCES #832-338, 14 minutes

### Kits:

Practoplasts, BOCES #123-21

Resusci-Anne, BOCES #123-20