5th Standard
Personal Hygiene

Fifth Standard (501)

Teaching time: 3 class periods

Life skills Competencies – General [These have been adapted for Personal hygiene.]

At the end of this lesson, the students should be able to demonstrate skills in the following areas:

 ✓ **Problem Solving**
   The student will be able to clearly identify problems related to personal hygiene and sanitation and their causes.

 ✓ **Creative Thinking**
   The students will be able to identify ways to improve or maintain good personal hygiene practices.

 ✓ **Critical Thinking**
   The students will be able to anticipate the consequences of the problem for self, family, and classmates by not practicing good personal hygiene and sanitation.
   The students will be able to assess the advantages and disadvantages of personal hygiene and sanitation practices.

 ✓ **Decision Making**
   The students will be able to identify the best possible solution for him/her based on personal ability and living situation

 ✓ **Communication**
   The students will be able to clearly and directly state opinions and give good reason.
   The students will be able to ask for help and advice, and seek information when needed.

 ✓ **Self Awareness**
   The students will be able to identify personal hygiene and sanitation practices and the need to improve or maintain them.

 ✓ **Interpersonal Relationships**
   The students are able to identify how their personal hygiene and sanitation practices may impact others.

 ✓ **Empathy**
   The students will be able to recognize the needs of others in terms of their own personal hygiene and sanitation practices.

 ✓ **Coping with Stress and Emotions**
   The students will be able to recognize how maintaining good personal hygiene and sanitation will support good self-esteem.

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Personal hygiene requires the cleaning of all parts of the body (face, hair, body, legs and hands). The face and hair have to be cleaned because they accumulate grime, emit bad odours and make oneself dull (?)[reflect one’s self worth (?)]. Skin diseases such as ringworm, scabies, sweat fungi, etc., can also occur. The hands and finger nails have to be cleaned because the germs in between the fingers and finger nails cause contagious diseases such as diarrhea, worms, etc., and epidermophytosis. The teeth and mouth have to be cleaned because they emit bad odours, cause mouth and dental diseases such as cavities, gingivitis, etc., and stomach disorders due to indigestion.

Thus, one’s face hair, body, legs and hands should be cleaned thoroughly, and the teeth brushed properly.

Ears, an important part of the human body, should be kept clean and carefully protected from injury.
Practice of personal hygiene should be carried out as daily, weekly, and monthly activities.

In addition to one’s personal hygiene and cleanliness of one’s home and its surroundings, the classrooms and the school surroundings should also be clean.

Drinking impure water can cause cholera, diarrhea, dysentery, typhoid and hepatitis. Therefore, pure drinking water free from germs and dirt, should be used.

Improper sewage and garbage disposal can lead to the spreading of contagious diseases through rats, mosquitoes, flies, cockroaches and stray dogs. Only fly-proof latrines should be used and garbage disposed of properly.

### Activity (1)

**Objective**

To enable students to explain why personal hygiene needs to be practiced. [To enable students to explain why personal hygiene is important and to examine personal hygiene practices.]

**Teaching/learning activity**

1. The teacher should start the discussion with questions such as “What do you do when you wake up in the morning before you have breakfast and before you come to school?” “How do you take care of your body?” “What is personal hygiene? What are the things that needed to be cleaned?”

2. Then, write the following table on the blackboard. Ask the pupils to discuss in groups and fill in the blanks with the consequences of being unclean and the diseases which the respective parts of the body could contract.

<table>
<thead>
<tr>
<th>Parts of the body to be cleaned</th>
<th>Uncleanliness could lead to</th>
<th>Advantages of Good Hygiene</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Consequences (ill effects)</td>
<td>Diseases</td>
</tr>
<tr>
<td>Face</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Hair</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Body (including legs and hands)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Finger nails and toe nails</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Teeth and mouth</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
3. The result of the group discussion should be written up on the blackboard and the teacher should add the necessary points and explain what effects the lack of personal hygiene may have on others, e.g., causing annoyance.

Discussion Questions:

1. Is it necessary to practice personal hygiene every day? Why?
2. What kinds of diseases can be caused by dirty finger nails? Why?
3. How does a person feel when they do not practice good personal hygiene? Why?
4. Can good personal hygiene help a person feel good about his/her self? How?

Personalization Questions:

1. When do you usually wash your hands? Do you think this is sufficient for disease prevention? Why or why not?
2. When you get up in the morning and before you come to school, what are some personal hygiene habits that you normally practice? Please describe.

Activity (2)

Objective

To enable students to demonstrate good hygiene practices (how to brush their teeth, and wash the face, the hair, the body, the legs and the hands properly).

Teaching/Learning Activity

(Have the students find a partner and demonstrate the following to each other. After they have demonstrated each activity to each other, the teacher may ask the students, “Is your partner taking good care of their body?” The teacher may then ask different students to demonstrate (model) the correct way of doing each activity.)

1. Let each group demonstrate how to do the following properly:
   - wash the face
   - shampoo the hair
   - take a bath
   - brush the teeth

2. If necessary the teacher should demonstrate till all the students know how to do the above properly.

3. The following points should be included:
   - The face should be washed with water and soap.
   - Shampoo should be used to wash the hair.
   - A toothbrush and toothpaste or the twig of a neem tree or fine-grained salt or fine ash should be used to brush the teeth.
   - The body should be washed with water and soap.
   - The legs and hands should be washed with water and soap.
Discussion Questions:

1. Is it necessary to practice personal hygiene every day? Why?
2. Why is it important to use soap or other materials to clean different parts of the body?
3. What kinds of diseases can be caused by dirty finger nails? Why?

Personalization Questions:

1. When do you usually wash your hands? Do you think this is sufficient for disease prevention? Why or why not?
2. When you get up in the morning and before you come to school, what are some personal hygiene habits that you normally practice? Please describe.
3. Do you think the drinking water in the classroom is clean or dirty? When you think drinking water is dirty, what can you do to make clean drinking water?
4. Besides personal hygiene practices, what other habits should you have in order to have good health? Why do you need these habits?

Follow up activity questions:

1. Have your classmates been consistent in their practice of personal hygiene? Why or why not?
2. How can you encourage each other to continue to practice proper hygiene?

Activity (3)

Time (15 minutes)

Objective

To enable students to explain that the ears should be kept clean and that care should be taken to prevent injuries to the ears.

Teaching Aid

Cards and pictures relating to ear hygiene.

Teaching/Learning Activity

1. Divide the students into four groups and give each group a card. Let them read the information on the card and study the pictures.

Fifth Standard

**Ear Hygiene**

The ear which provides the sense of hearing, is an important anatomical part. Children who have lost the faculty of hearing from infancy would be unable to speak properly, and could become unable to speak. It is, therefore, necessary to keep the external organs of the ear clean and to protect the internal ear organs from injury.
As the ear is a delicate organ, care should be taken to avoid injuries. For example, you should not hit the region of the ear; pick it with a pencil, hairpin, or a piece of iron wire, clumsily pull out an animate or inanimate object which has accidentally entered the ear; or let water get into the ear.

In addition, the external organs of the ear should be washed to keep out grime, dust and sand.

2. Let students discuss the following topics in groups:
   - Why the ear is important
   - What precautions should be taken to prevent injury to the ear
   - The reason for keeping the ear clean.

   **Don’t pick your ear**
   **Don’t poke your ear**

   **Don’t hit the region of the ear.**

   **Don’t let water get into the ear.**

**Discussion Questions:**

1. How often do people think about their ears? Why?
2. Why is it necessary to keep your ears clean?
3. Besides hearing, what else does the ear help us do? (keep our balance)

**Personalization Questions:**

1. Have you ever had an earache?
2. What do you think was the cause of your earache?
3. What did you do? Do you think this was appropriate care of your ear? Why or why not?
4. If you suddenly lost your hearing, what do you think your life would be like? Why?

**Activity (4)**

**Objective**

To enable students to describe the daily and weekly activities of personal hygiene.

**Teaching Aid**

The daily and weekly activity chart for personal hygiene.

**Teaching/Learning Activity**

1. The teacher should instruct the students to form groups and fill in the daily and weekly activities to be carried out in the Personal Hygiene Schedule.
If the students’ answers are incomplete, the teacher should add the following points:

- when getting up from bed  wash your face, brush your teeth, clean your mouth
- when bathing  clean your face, body and limbs
- before eating food  wash your hands
- after eating food  wash your mouth and hands
- after going to the lavatory  wash your hands and excretory organs
- when going to bed  brush your teeth and wash your limbs
- every week  clip your finger- and toe-nails
- every month  have a hair cut

Discussion Questions:

1. Is it necessary to practice personal hygiene every day? Why?
2. What kinds of diseases can be caused by dirty finger nails? Why?
3. What kinds of diseases can happen from not brushing your teeth? Why?
4. Which habit is better, washing hands before meals or after meals? Why?
5. What kind of diseases can be caused from not washing hands before eating? Why?
6. What diseases can you get from dirty drinking water? Why?
7. Can diarrhea be cause by dirty drinking water? Why?

Personalization Questions:

1. When do you usually wash your hands? Do you think this is sufficient for disease prevention? Why or why not?
2. When you get up in the morning and before you come to school, what are some personal hygiene habits that you normally practice? Please describe.
3. Will others be affected if you do not practice good personal hygiene daily? Why?
4. Besides personal hygiene practices, what other habits should you have in order to have good health? Why do you need these habits?
5. What are some of the reasons why a person would not practice good personal hygiene?
6. If a friend is not practicing good personal hygiene, what can you do? What can you say to him/her? Please give an example.

Linkage Questions:

1. Besides diarrhea, what other diseases can good hygiene practices help prevent? How?
2. What special hygiene needs do you think people with chronic illnesses, such as HIV/AIDS or TB, have?
3. How can you help people with chronic illnesses take care of their personal hygiene?

Activity (5)

Objective

To enable students to explain:

(a) that it is necessary to use clean water
(b) that it is necessary to keep one’s classroom and school clean for maintaining good health.

Teaching/Learning activity

1. Begin the lesson by asking some students what diseases could result from not using clean water.
2. The teacher should ask the students to present the following facts, through group discussions:
   • What kind of water is suitable for drinking and domestic use
   • Diseases that could be caused by unclean water
   • How the drinking water in the classroom has been treated
3. The teacher should explain the following points:
   • It is necessary to use pure water, that is free from germs not only at home but also in school.
   • Drinking and using impure water, which could contain germs, may cause stomach diseases such as cholera, diarrhea, dysentery, hepatitis A, typhoid, etc.
   • Thus, water should be filtered and kept in a pot which is clean and has a lid. Do not take water from the pot if your hands or cups are dirty.
   • Every day, the water pots and cups in the classrooms should be cleaned and the water changed.
4. Ask some of the students for their opinion on how to ensure the cleanliness of classrooms and school surroundings.
5. The teacher should explain the following points:
   • For the cleanliness of the classroom and school surroundings, in addition to proper garbage disposal, fly-proof latrines, should also be used.
   • The germs in feces cause contagious diseases, especially diarrhea. (Therefore, latrines should be kept at a safe distance from the school. The latrines should be washed and sanitized. Check and see it that they are fly-proof.)
   • In the classrooms and school surroundings, garbage should be collected and properly disposed of. Otherwise, contagious diseases can be contracted through rats, mosquitoes, flies, cockroaches and stray dogs. Rats, mosquitoes and flies can cause plague, dengue and stomach diseases respectively.
   • Garbage from inside the classrooms and school surroundings should be swept and burnt at a spot away from the school. The putrid drains in the school surroundings should be drained off. Otherwise, the breeding of mosquitoes and flies could spread diseases.
6. The teacher should let the students, in groups discuss and present the following:
   • What types of latrines should be used at schools
   • Diseases that could be contracted due to unsanitary latrines
   • Whether or not the latrines at the school conform to sanitation standards
   • In the classrooms and school surroundings, whether or not garbage has been disposed of properly. If not, what diseases could be generated?
   • How to dispose of the garbage in the classrooms and school environs

Discussion Questions:

1. What can happen if we drink unclean water? Why?
2. What diseases can you get from dirty drinking water? Why?
3. Can diarrhea be caused by dirty drinking water? Why?
4. What are the causes of diarrhea? Can it be caused by an unclean environment? How?
5. How can we have a clean drinking water for the classroom?
6. If a student is sick and uses a water class but does not clean it, what are the chances that another student who uses the same water glass will get sick? Why?

Personalization Questions:

1. Do you think the drinking water in the classroom is clean or dirty? When you think drinking water is dirty, what can you do to make clean drinking water?
2. What does your family do to keep its drinking water clean?
3. How can you help your family keep its drinking water clean?
4. What kind of toilet do you use in your house? Please describe how you clean the toilet and how often. Do you think the toilet is sufficiently clean when you are done? Why? Why takes responsibility for cleaning the toilet at home? Why this person?
5. When you think
6. If friends are not practicing good sanitation in the school grounds, what can you do? What will you say to them? Please give an example.

Linkage Questions:

4. What illnesses can be transmitted by an unclean water glass? Why?
5. Can illnesses like HIV be transmitted through an unclean water glass? Why or why not?
6. Can HIV be transmitted through an unclean toilet? Why or why not?
7. When a person is sick with a chronic illness, like HIV or TB, why is it even more important for them to practice good hygiene?
8. How will practicing good sanitation help people with chronic illnesses?

Assessment

Ask each group the following questions:

- State the reason for cleaning the various parts of the body?
- Demonstrate systematically the personal hygiene activities?
- Why is the ear an important anatomical part?
- What points should be adhered to for avoiding injury to the ears?
- How to clean the ear?
- Describe the daily and weekly activities in relation to personal hygiene practice.
- Ask students to explain the reasons for using pure water in the classrooms and school environs, for using pit-latrines, and for proper garbage disposal.
- Ask students to describe how drinking water and water for domestic use is kept, how pit-latrines are used hygienically, how garbage is disposed of properly in the classrooms and school surroundings.

Follow-up Activities (Can also be used as assessment)

1. Have the students find a partner and keep a logbook or chart of their partner’s daily hygiene practices. The partners should:
   - Every day check each other’s face, hair, mouth, teeth, body and limbs to see if they meet the hygienic standards.
   - Every week the groups should mutually check each other to see if they have clipped their finger- and toenails.
[The teacher should supervise to ensure that the daily and weekly routines of personal hygiene have been duly carried out.]

2. Checking whether the pots of drinking water in the classrooms have been placed properly and hygienically. (Each group should take the responsibility in turn.)

3. First let the students observe how the garbage has been collected and disposed of in the school. Should it be found to be unsystematic, they should collectively discuss how to dispose of the garbage with each group taking the responsibility in turn. Regular inspection should be made.

Similarly, each group should take the responsibility, discuss and check whether the water used in the school for drinking and other purposes is hygienic, whether the lavatory is fly-proof and meets sanitation standards. (If necessary, support and assistance of Parent Teacher Association should be sought.)

**Follow up activity questions:**
1. Have your classmates been consistent in their practice of personal hygiene? Why or why not? What can be done better?
2. How can you encourage each other to continue to practice proper hygiene?
3. Which group has been consistent in checking the cleanliness of the pots of drinking water? Are you more confident that the water is clean? Why?
4. How is the garbage at the school disposed? Can you think of a better way to dispose of the garbage?
Physical Growth and Development

Lifeskills Competencies - Physical Growth and Development / Nutrition

At the end of this lesson, the students should be able to demonstrate skills in the following areas:

✓ **Problem Solving**
The students will be able to identify barriers to good nutrition.

✓ **Creative Thinking**
The students will be able to identify ways to eat a variety of foods from the different food groups.
The students will be able to identify alternative food choices when sources of nutrients may be limited, either by supply or by cost.

✓ **Critical Thinking**
The students will be able to assess the nutrient value of the foods they eat.
The students will be able to analyze whether they are eating enough foods from the different food groups.

✓ **Decision Making**
The students will be able to identify realistic choices for a balanced diet to reduce their risk of malnutrition.

✓ **Communication**
The students will be able to ask for additional information on nutrition when needed.
The students will be able to clearly present information about good nutrition to family and friends.

✓ **Self Awareness**
The students will be able to identify personal eating habits that may either contribute to or limit good nutrition.

✓ **Interpersonal Relationships**
The students will be able to identify the dynamics of eating food together with family and/or friends.

✓ **Empathy**
The students will be able to recognize the different nutritional needs of babies, children, adolescents, adults, and grandparents.

✓ **Coping with Stress and Emotions**
The students will be able to distinguish between personal wants (foods which are good to eat) and needs (foods which are nutritious).

We eat various kinds of food every day — cereals, meat, fish, eggs, vegetables, fruits, tubers and bulbs, fat, etc. The food we eat every day may be divided into three groups, namely:

1. The group of foods (containing carbohydrate and fats) that supplies energy to the body. For example, rice, wheat, corn, and different kinds of edible oil.
2. The group of foods containing proteins that helps the growth of the body.
3. The group of foods (containing vitamins and minerals) that protects the body against diseases. For example, dark green edible leaves, yellow fruits, yellow and red vegetables, tubers and bulbs.

In addition, one should drink about six cups of water a day.

Adolescents need to eat food rich in carbohydrates, fats, and proteins every day in adequate quantities.
Activity (1)

Objective

The students will be able to identify foods in the different food groups, energy foods, proteins and vitamins and minerals.

Teaching Aid

Picture cards

Teaching/Learning activities

1. Recall and discuss the three food groups taught in the Fourth standard. Explain:
   (a) that the food group which supplies energy gives carbohydrates and fats;
   (b) that the food group which helps the growth of the body gives proteins; and
   (c) that the food group which protects from diseases gives vitamins and minerals.

2. Then, redisplay the pictures of the three food groups and ask each group of students to classify them again. Ask them to include any other foodstuffs they know even if these are not shown in the pictures. Give suggestions to ensure that the classification of foodstuffs roughly conforms to the following groupings:
   (a) In the energy group — 1. Cereals
                                2. Tubers and bulbs
                                3. Fats, and
                                4. Sweets (sugar, jaggery)

   (b) In the protein group — 1. Meat
                                2. Fish
                                3. Egg
                                4. Beans and pulses
                                5. Milk

   (c) In the vitamins and minerals group — 1. Edible leaves
                                              2. Vegetables
                                              3. Fruits

3. Explain to the students that it is necessary to eat appropriate food in adequate amounts and, emphasize that adolescents need to eat food that could provide enough proteins for their physical growth (gains in weight and height) and enough carbohydrates and fats for energy.

Content Questions

1. How many basic food groups are there? What are they? What types of food are in each group?
2. What types of food do young people like to eat and in what quantities? Is this food good for them? Why or why not?
3. How will a meal that includes food from the 3 food groups help the body?
4. How will a meal that does not include food from the 3 food groups affect the body?
Personalization Questions
1. Do you think you eat enough food from each of the 3 different food groups? Why or why not?
2. When you eat food, do you think about the different food groups? Why or why not?
3. How do you understand a balanced diet? Give an example for a balanced diet?
4. What did you eat yesterday? Do you think you have a balanced diet? Why or why not?
5. From which food group does most of the food you eat come from? Why?
6. From which food group do you eat the least amount of food? Why?
7. Do you have friends that are very healthy and friends that are sick often? What are the differences in the eating habits of these friends.
8. What could you tell your family members and friends that would help their personal nutrition? Please give an example.

Activity (2)

Objective
The students will be able to analyze the benefits of a balanced diet in the prevention of malnutrition.

Teaching Aid
Pictures cards

Teaching/Learning activities
1. Show, side by side, a picture of puny and malnourished children and one of normally growing children. Explain the necessity to eat sufficiently nutritious food as malnutrition hampers growth and development.
2. Then, let the children discuss the following points in groups:
   (a) Why are the children in the two pictures so widely different?
   (b) The probable consequences of malnutrition for children (as much as the students have seen or heard about).
3. Consolidate the results of the discussions with the whole class.

Content Questions
1. If we do not receive all the required nutrients in our diets, what do you think will happen?
2. What symptoms does a malnourished child exhibit? What symptoms are most common in Myanmar?
3. Malnutrition is associated with protein, vitamin and mineral deficiencies. Why are young children most affected by malnutrition?
4. Can you think of another problem that is caused by the lack of another nutrient? (dehydration due to insufficient intake of water).
5. How many glasses of water should a person drink in each day? Why?

Personalization Questions
1. What have you learned from this activity that you did not know before?
2. What are some ways that you can help keep yourself and young siblings from becoming malnourished?
3. What are some ways that you can monitor your own nutrition?
4. Have you ever seen a child with pale colored hair? What do you think was the cause of the discoloration? Why?
5. Did you previously know all of the diseases that could occur from malnutrition? Which ones? Where did you learn about them? With which diseases were you not familiar?
6. Have you ever seen anyone with the symptoms of any of the diseases? What did you think when you saw them? Why?

**Linkage Questions**
1. What do you think are the probable consequences of malnutrition for children? Tell the results of your thinking to the class.
2. What are some ways that you can measure malnutrition in yourself and younger siblings?
3. How do you think, the relationship of physical growth and development and mental development for frail and malnourished children?

**Teacher Notes:**
Malnutrition is a condition resulting form an inadequate supply of total food or nutrients. Protein, vitamins and minerals are usually limited in the diet of those suffering from malnutrition.

Malnutrition can affect people at any age. It is important for everyone to understand the benefits of various nutrients and the diseases that may occur if these nutrients are missing from the diet. Malnutrition in adults can often be reversed by consuming the appropriate foods at the appropriate quantities.

Children are not miniature adults. What are ideal food choices for an adult are probably not right for young children. Their rapid growth and development means that they have high requirements for most nutrients and need about twice as much protein per kilogram of body weight as an adult. A lack of nutrients during growing periods not only prevents children achieving their full growth potential, but may affect the brain. There is no way to compensate for malnutrition during a child’s early years. The following activity will help adults identify symptoms of malnutrition in children.

**Evaluation/Assessment**
1. Have the students place the following foods into the appropriate food groups:

<table>
<thead>
<tr>
<th>Proteins</th>
<th>Vitamins and Minerals</th>
<th>Energy Foods</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
### Answer Key

<table>
<thead>
<tr>
<th>Protein</th>
<th>Vitamins and Minerals</th>
<th>Energy Foods</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Meats and Legumes</strong></td>
<td><strong>Vegetables</strong></td>
<td><strong>Fruit</strong></td>
</tr>
<tr>
<td>Mussels</td>
<td>Mushrooms</td>
<td>Apples</td>
</tr>
<tr>
<td>Squid</td>
<td>Tomatoes</td>
<td>Mangoes</td>
</tr>
<tr>
<td>Eggs</td>
<td>Cauliflower</td>
<td>Grapes</td>
</tr>
<tr>
<td>Beef</td>
<td>Eggplant</td>
<td>Pomelo</td>
</tr>
<tr>
<td>Fish</td>
<td>Bitter Gourd</td>
<td>Custard Apples</td>
</tr>
<tr>
<td>Chicken</td>
<td>Sugar Peas</td>
<td>Lychee</td>
</tr>
<tr>
<td>Shrimp</td>
<td>Shallots</td>
<td>Mangosteen</td>
</tr>
<tr>
<td>Crab</td>
<td>Kale</td>
<td>Rose Apples</td>
</tr>
<tr>
<td>Milk</td>
<td>Bell Peppers</td>
<td>Oranges</td>
</tr>
<tr>
<td>Peanuts</td>
<td>Pumpkin</td>
<td>Pineapple</td>
</tr>
<tr>
<td>Beans</td>
<td>Coriander</td>
<td>Langsat</td>
</tr>
<tr>
<td></td>
<td>Lettuce</td>
<td>Zalacca</td>
</tr>
<tr>
<td></td>
<td>Onions</td>
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<tr>
<td></td>
<td>Garlic</td>
<td></td>
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<tr>
<td></td>
<td>Sweet Peppers</td>
<td></td>
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<tr>
<td></td>
<td>Bird Peppers</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Cucumbers</td>
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<tr>
<td></td>
<td>Cabbage</td>
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</tr>
</tbody>
</table>

2. Have the students plan a 3-day menu of local foods that shows a balanced diet appropriate for adolescents. The menus should show a variety of combinations.

### Follow-up Activity

Have the students keep a “physical growth and development diary” of their weight, height every three months and monitor symptoms of malnutrition for the same period. The students may work in pairs to help examine each other (using the forms attached). The students should also record what they eat on a weekly basis and categorize the foods by food group in order to monitor whether a balanced diet is being maintained.

After the students have developed patterns of monitoring their own physical growth and development, they should then monitor the growth and development of younger siblings at home.

Picture

**PHYSICAL GROWTH**
Measuring Malnutrition in Children

Start with measurements first:

1. Height (in centimeters)
2. Weight (in kilograms)
3. Arm circumference:
   A. In measuring this, always measure the left arm which should be hanging loosely next to the body. Wrap the tape around the arm at the midpoint between the shoulder and the elbow, measuring snuggly but without pulling or pinching the skin.
   B. Although this method is not as accurate as the weight by age, or weight by height charts, it is still a good indicator of malnutrition. 14 cm is said to be the critical measurements. With less than 14 cm, suspect malnutrition. Between 13.5 – 12.5 cm is considered moderately malnourished, while a measurement falling under 12.5 cm is severely malnourished. This measurement should only be considered pertinent for those children aged 1-6 years.

After taking the measurements, sit the child down in front of you so that he or she is facing you; give an encouraging word, “This will not hurt at all.”

4. Hair: check for discoloration and/or sparseness.

5. Eyes:
   A. First look for Bitot’s spot, which will appear as a white foamy raised spot on either side of the iris (the colored part of the eye).
   B. Examine the glossy covering of the eye, looking for signs of extreme dryness, which is called corneal xerosis.
   C. Look into the iris, examining the usually dark color looking for signs of whiteness, haziness or dullness. These are indicators of keratomalacia.
   D. Lastly, pull the lower lid slightly down to examine the color inside the lid. As this is usually deep pink color, look for a very pale, nearly white color.

6. Face: Take a swift glance observing the face, looking for unusual swelling.

7. Mouth:
   A. Look at the corners of the mouth for cracking and extreme dryness. If present, record this as active. If scars are apparent, record this also.
   B. Open the child’s mouth and look for a sore, swollen red tongue.
8. Thyroid Enlargement:

Have the child unbutton the first button of his/her shirt so the neck is fully exposed. Have the child lean their head back and swallow, while you look for enlargements on either side of the Adam’s apple. Place your thumbs on both sides of the Adam’s apple and palpate in a slow and firm up-and-down motion, feeling for an enlargement.

**Goiter Classification:**

- **Grade 0**
  - No goiter

- **Grade 1a**
  - Goiter detectable only by palpation and not visible even with neck fully extended.

- **Grade 1b**
  - Goiter palpable and visible when neck is fully extended.

- **Grade 2**
  - Goiter visible with neck in normal position; palpation not necessary

- **Grade 3**
  - Very large goiter, recognizable at a distance.

9. Skin:

A. Look for *flaky paint* (sloughing) skin, very dry and peeling off in layers.

B. Look for goose-flesh, the sign of *follicular hyperkeratosis* (Raised bumps at the site of the hair follicle).

10. Legs:

A. Look for legs that are bowed, or knock-kneed.

B. Check to see if the feet are swollen. If you are unsure, palpate the anklebones to feel for swelling.
<table>
<thead>
<tr>
<th>Name</th>
<th>Nutrient Deficiency</th>
<th>Recommended Daily Intake - Thailand</th>
<th>Nutrient Deficiency</th>
<th>Foods Containing Nutrient</th>
</tr>
</thead>
<tbody>
<tr>
<td>Sex</td>
<td>1. Height</td>
<td></td>
<td>Protein</td>
<td>Meat, eggs, milk, legumes, poultry, fish, nuts</td>
</tr>
<tr>
<td></td>
<td>2. Weight</td>
<td></td>
<td>Vitamin A</td>
<td>Liver, butter, milk, squash, mango, green vegetables, papaya, tomato, pumpkin, spinach, chili pepper, eggs</td>
</tr>
<tr>
<td></td>
<td>3. Arm Circumference</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>4. Hair Discolored/Sparse Protein 14-25 gm</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>5. Eyes, Bitot's Spot</td>
<td>Vitamin A 400-700 RE</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>Exophalamos</td>
<td>Vitamin A 400-700 RE</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>Keratomalacia</td>
<td>Vitamin A 400-700 RE</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>Pale inner eyelid</td>
<td>Iron 4 mg</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>6. Face Swollen</td>
<td>Protein 14-25 gm</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>7. Mouth: Angular Stomitus</td>
<td>Vitamin B2 0.8-1.2 mg</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>Active</td>
<td>Vitamin B2 0.8-1.2 mg</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>Scar</td>
<td>Vitamin B2 0.8-1.2 mg</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>Swollen Tongue</td>
<td>Vitamin B2 0.8-1.2 mg</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>8. Goiter</td>
<td>Iodine 60-110 mcg</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>Grade</td>
<td></td>
<td>Iodine</td>
<td>Seafood, iodized salt</td>
</tr>
<tr>
<td></td>
<td>9. Skin: Flaky Paint/Sloughing</td>
<td>Vitamin B2, Niacin (B3) 0.8-1.2mg/9-16mg</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>Follicular Hyperkeratosis</td>
<td>Vitamin A 400-700 RE</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>10. Legs: Bowed</td>
<td>Vitamin D, C, Calcium 400 Iu/20 mg*/500</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>Knocked-kneed</td>
<td></td>
<td>Vitamin C</td>
<td>Oranges, lemons, tomatoes, melons, cabbage, broccoli, strawberries, potatoes, green vegetables</td>
</tr>
<tr>
<td></td>
<td>Swollen Feet</td>
<td>Vitamin D, C, Calcium 400 Iu/20 mg*/500</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>11. Edema – press down</td>
<td>Vitamin B1, B2 0.7-1.2 mg/0.8-1.2</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>Present (+)</td>
<td></td>
<td>Calcium</td>
<td>Milk, ice cream, broccoli, turnips, chicken bones</td>
</tr>
<tr>
<td></td>
<td>Absent (-)</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>Not Checked (0)</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
1. Height
2. Weight
3. Arm Circumference
4. Hair Discolored/Sparse
5. Eyes: Bitot's Spot, Exophalamus, Keratomalacia
6. Face Swollen
7. Mouth: Angular Stomitus, Active, Scar, Swollen Tongue
8. Goiter, Grade
9. Skin: Flaky Paint / Sloughing, Follicular Hyperkeratosis
10. Legs: Bowed, Knocked-kneed, Swollen Feet
11. Edema – press down

Preschool children (newborn to 5 years), particularly in the Northeast, are most often affected by protein-calorie malnutrition. The term ‘protein-calorie malnutrition’ may cover a whole range of mild to severe cases of malnutrition manifested in kwashiorkor (stunting) or marasmus (wasting). Kwashiorkor is the result of a diet low in protein but sufficient in carbohydrate calories. Marasmus results from a deficiency of both calories and protein.

Preschool children may be affected by Vitamin A deficiency. Common symptoms include night blindness (inability to see in dim light) and Bitot's spots (white foamy plagues in the outside corners of the eyes.)

If the inner eyelids are pale or whitish in color the person may be affected by Iron deficiency.

School-aged children may be affected by Vitamin B2 deficiency. Classic signs of this deficiency are angular lesions (cracks or sores in the corners of the mouth).

School-aged children may be affected by iodine deficiency, particularly those in mountainous regions of the North or rural areas of the Northeast. Goiter is iodine deficiency in its most severe form.

May be caused by a Vitamin B2 (see above) or Niacin (Vitamin B3) deficiency, can lead to pellagra (dermatitis, diarrhea and dementia).

Vitamin C deficiency may cause joint pain, and muscular weakness. Vitamin D deficiency may result in rickets, from which bones fracture easily and are misshapen. Without vitamin D calcium cannot be used. With a loss of calcium bones become less dense and lose their strength.

Infants and pre-school children may be affected by Thiamin (Vitamin B1) deficiency. The symptoms of Thiamin deficiency in mild cases are non-specific and involve heart, respiratory and central nervous systems. Severe deficiency results in Beriberi, a disease in which nerve cells become inflamed and no longer function and fluid may accumulate in feet, ankles and legs and around the heart. Death can occur.
Mental development

Fifth Standard (503)       Teaching time: (1) class period

Lifeskills Competencies – Mental Health

At the end of this lesson, the students should be able to demonstrate skills in the following areas:

✓ **Problem Solving**
  The students will be able to identify barriers to good positive mental health.

✓ **Creative Thinking**
  The students will be able to identify appropriate ways of dealing with their emotions and stress.
  The students will be able to identify appropriate way of building and maintaining positive self-esteem.

✓ **Critical Thinking**
  The students will be able to assess the advantages and disadvantages of rational thinking versus emotional thinking.
  The students will be able to analyze the behaviors that may either build and support positive self-esteem or contribute to low self-esteem.

✓ **Decision Making**
  The students will be able to determine realistic goals and expectations for themselves and the appropriate method for reaching those goals and expectations based on personal abilities and living situation.

✓ **Communication**
  The students will be able to assert personal wants and needs.
  The students will be able to ask for help and counseling from others and will be able to provide help and counseling to others when needed.
  The students will be able to express their emotions and stress in a positive manner.

✓ **Self Awareness**
  The students will be able to determine realistic goals and expectations for themselves based on personal abilities and living situation.

✓ **Interpersonal Relationships**
  The students will be able to identify trusted individuals from whom they may seek help, counseling or correct information, and from they will receive appropriate feedback.

✓ **Empathy**
  The students will be able to recognize the needs and feelings of others and be able to respond to these needs and feelings in an appropriate manner.

✓ **Coping with Stress and Emotions**
  The students will be able to identify effective ways of dealing with their emotions and stress.

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**Emotional changes**

School children between 10 and 13 years of age are in their transition from childhood to youth. At this age emotional changes occur, such as, being easily angered by trivial matters, being overtaken by sadness, worrying about their figure and appearance, wanting to do what is prohibited by adults, etc.

Mental changes occur naturally. You have to restrain yourself to avoid extremes. When you are excited, angry or sad it is important not to make a hasty response and to be patient.
Activity (1)

Objective

To enable students to relate their emotions such as getting angry due to trifles, feeling sad for small things, worrying about their appearance, wanting to do what is prohibited by adults.

Teaching/ Learning Activity

1. Ask the pupils to separate into 4 groups and give the questions mentioned below to each group, instructing them to think and answer from their own experience. Get one answer from each group. Let four children answer each question in turn.
   (a). When and under what circumstances are you angry or short-tempered? What do you usually do when you are angry or short-tempered?
   (b). When and under what circumstances do you feel sad? What do you usually do when you are sad?
   (c). Some of you may have a body or appearance significantly different from others. For example, you may be tall, or plump, or dark-complexioned. How do you feel when you become aware that your features differ significantly from those of the others?
   (d). What kind of things do adults forbid you to do? How do you feel when you are so prohibited? What do you happen to do when so prohibited?
2. The teacher should record the answers given by the pupils on the blackboard.
3. Based on the students’ answers, the teacher should explain as follows:
   Between the age of 10 and 13, students begin their transition from childhood to adulthood accompanied by natural and physical changes. Based on the physical changes, they usually experience fear and anxiety. These changes are part of the normal, natural process which makes growth possible. Everyone experiences this change.
   Together with physical development, mental changes also occur. (e.g. feelings of anger or sorrow, rapid changes of mind, desire to do what adults, etc forbid.) Most people will not like to be friends with a selfish person, however good-looking, while they would willingly associate with a person who is clean, tidy and sympathetic even though he or she may not be good-looking.

Content Questions

1. Are all young people like this? Why or why not?
2. Do young people learn their behavior? If so, from whom do they learn behavior patterns?
3. Do you think appearance is the most important quality for young people? Why? Why not?
   What other qualities are important in a person? Why? What qualities should be more important than appearance? Why?
4. What do young people learn from television and video? Do you think this has any influence on a young person’s behavior? Why or why not?
5. Is it easy or difficult for young people to not follow the crowd? Why or why not?
6. How do you think gender will affect how young people deal with their emotions?

Personalization questions

1. In comparison to the general characteristics of teenager, what is different about you?
2. What about the way you look? How do you think you should look? Why?
3. What about the way you feel? Is it easy or difficult to control your feelings and emotions? Why or why not?
4. What about the way you behave? Is your behavior similar to that of your friends, family members, or other? Why do you think this is so?
5. If you could change anything about yourself today, what would you change? Why?

Activity (2)

Objective

The students will be able to discuss ways in which young people are able to control their emotions. To be able to explain that students should control their emotions.

Teaching/Learning activity

1. Let the students discuss, in groups, the answers from Activity (1) recorded on the blackboard. Instruct them to critically discuss whether each of the emotional responses is fit and proper.
2. Let each group present the discussion results to the whole class and then organize a general discussion with all the pupils.
3. Then, the teacher should explain the necessity to control such emotions.

Controlling Emotions

1. Learn what situations cause you to lose control or make you angry.
2. Monitor the feeling you have in stressful situations.
3. Instruct yourself to breathe deeply and relax when stressful feelings begin to arise.
4. Reword angry feelings so that they can be expressed in a non-offensive manner to others.
5. Praise yourself for controlling emotional outbursts.

Coping with Sad Feelings (or Depression)

1. Identify what situations tend to make you sad.
2. Acknowledge sad feelings when they arise.
3. Report your feelings to a caring adult or peer.
4. Find alternative activities that you enjoy and engage in them. Get outside for fresh air and sunshine.
5. Avoid isolating yourself or withdrawing from friends or relatives.
6. Discuss feelings openly and frankly.
Expressing Feelings Appropriately

1. Remain calm and relaxed.
2. Look at the person you are talking to.
3. Describe the feelings you are currently having.
4. Avoid statements of blame and profanity.
5. Take responsibility for feelings you are having.
6. Thank the person for listening.

Teenage students are at the threshold of their transition from childhood to adulthood. At this age, both their physical organs and mental state are in a state of flux. They crave for intimate friendship and imitate others. They also become interested in the opposite sex and willing to do things forbidden by the parents.

Students reach the zenith of their intellectual development at this age and are ready for learning any subject; yet, they still lack various life experiences. Therefore, it is necessary to give careful consideration to emotional changes rather than making hasty decisions. When a problem arises, it is important to have patience in making a decision. Emotions should not be allowed to run wild. You should control yourselves.

It should also be explained that mental relief could be obtained by sharing one’s feelings with someone and asking for his/her help.

Content Questions

1. What kinds of emotional changes occur in teenagers? Is it normal or not? How do these changes influence teenagers life?
2. Some emotional changes when become extreme, they can cause psychological disturbances. What are they? How to control those changes?
3. What make teenagers feel very sad or happy? What do they usually do when very sad or happy? What happen? Why?
4. What are the things adult prohibited teenagers to do? Why do they do that? If you do those what are the consequences?
5. What are the qualities that teenagers lack? How to improve it?

Personalization questions

1. What make you feel sad? What do you usually do then? Why do you do that? What are the consequences? Did you approach anyone? If so what happen?
2. What make you angry? What do you usually do? Why do you do that? What are the consequences? Did you approach anyone? If so what happen?
3. Have you ever done anything that your parents or elders have prohibited you from doing? If so, why do you think you went against their wishes? What happened? Please explain.
4. Have you ever help your friend who was sad or angry? What did you do? What happened?
5. When your emotions are unsettled how do you control them? Are you able to change negative thinking to positive thinking? If so, how? What do you think are the advantages and disadvantages of doing so?
**Linkage questions**
1. When teenager is emotionally unsettled what can he or she do to get their emotions back in balance to make good decisions? (Talk to a trusted individual – counseling)
2. How can our emotions place us at greater risk of HIV and hepatitis B infection?
3. How can our emotions place us at greater risk of alcohol and drug/substance use?
4. How can our emotions affect our personal growth and development?

**Evaluation/Assessment**
1. Have students brainstorm the emotional changes and emotions that are common in teenagers?
2. The teacher will write the list of emotions on the blackboard. The teacher should also any of the following which may be missing: loved, afraid, worried, sad, patient, confused, scared, angry, hurt, embarrassed, jealous, ashamed, frightened, excited, mixed up, guilty, mean, comfortable, moody, discouraged, frustrated, brave, awful, sensitive, terrible, gloomy, helpless, bad different, happy, elated, hateful, and depressed. Make enough so that each group of four to six youth has one complete set of words.
3. Discuss the concept of emotions that help versus emotions that hinder. Emotions that help us are ones we usually like to experience; they energize us and result in positive things. Emotions that hinder are ones that result in negative relationships with others, negative feelings toward self, bad moods, or perhaps troublesome behavior.

<table>
<thead>
<tr>
<th>Help</th>
<th>Hinder</th>
<th>Help or Hinder</th>
<th>Reason</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

4. Have each student categorize the emotions into the following categories: Emotions that help, Emotions that hinder, Emotions that can help or hinder. The student should also give reasons or examples of why they have categorized the emotions as they have.

**Follow-up**
Have the students keep a journal of how they have reacted to emotional situations during one week and report back to class.

**Follow-up questions**
Were they able to control their emotions? How did their emotions influence the decisions they made? How did their emotions and the decisions they made affect their relationship with family and friends? If they were in the same situation again, what would they do differently?
Tuberculosis

Fifth Standard (504)  Teaching time: (2) class periods

Lifeskills Competencies – Communicable Disease

At the end of this lesson, the students should be able to demonstrate skills in the following areas:

✓ Problem Solving
  The students will be able to identify factors of risk and vulnerability that may place a person at risk of infection with Tuberculosis.

✓ Creative Thinking
  The students will be able to identify behaviors and methods of preventing infection with Tuberculosis, including protective factors.

✓ Critical Thinking
  The students will be able to assess the advantages and disadvantages of the various methods of prevention in relation to personal behavior

✓ Decision Making
  The students will be able to identify realistic behaviors and methods to reduce the factors of risk and vulnerability that may place a person at risk of infection with Tuberculosis.

✓ Communication
  The students will be able to provide information and discuss issues related to Tuberculosis in a clear and direct manner.
The students will be able to ask for help and advice or seek additional information on Tuberculosis, when needed.

✓ Self Awareness
  The students will be able to assess personal risk for infection with Tuberculosis.
The students will be able to assess the impact of infection with Tuberculosis on their personal goals and expectations.

✓ Interpersonal Relationships
  The students will be able to identify the impact of infection with Tuberculosis, on the self, family, community and society.

✓ Empathy
  The students will be able to recognize the needs and feelings of persons with Tuberculosis.
The students will demonstrate support for persons with Tuberculosis.

✓ Coping with Stress and Emotions
  The students will be able to distinguish between appropriate behavior and physical and emotional needs and desires.
The students will be able to distinguish between peer pressure and personal needs.

Tuberculosis is one of the endemic diseases in Myanmar. It afflicts persons irrespective of age and is contagious. However, given proper and prolonged treatment, it is curable. Usually, the symptoms of lung TB include: (1) chronic cough, (2) discharge of phlegm, (3) chronic fever, (4) loss of weight (5) coughing up blood, (6) night sweat, etc.

Lung TB is communicable through the coughing or sneezing of persons suffering from it. Thus, when symptoms such as chronic cough or loss of body weight are found, a doctor should be consulted.
However, the contagion can be prevented by adhering to the following methods:-

(1) Cover the mouth and nose with a handkerchief when persons suffering from lung TB cough or sneeze.
(2) The patient should spit the spittle containing mucus phlegm into a heat-resistant spittoon with a lid.
(3) Then, place the spitoon on the stove till its contents are boiled hard and empty the contents into the latrine.

Lung TB can bring about ill effects such as loss of life, hefty medical expenses, increasing family burden, inability to attend school regularly, absence from work, etc. However, the disease is curable given the timely, effective and proper treatment by a doctor.

Moreover, rather than neglecting or abandoning the patient, he/she should be assisted and cared for with patience, kindness and sympathy till the treatment is completed.

Activity (1)

Objective

The students will be able to identify some of the initial symptoms of TB and the importance of seeking medical attention.

Teaching Aid

U Tun Maung, an illustrated story (part 1) Charts.

Teaching/Learning Activity

1. Ask the students to describe the nature of communicable disease in general and the communicable diseases they know.
2. If the diseases mentioned by the students do not include pulmonary TB, begin the lesson by saying that lung TB is also a disease that can be transmitted from one person to another.
3. Ask the students to form into small groups and let them study the lung TB charts. Ask them to discuss what usually happens if a person is infected with TB.

1. U Tun Maung is a factory worker who has to commute by bus.
2. One day, U Tun Maung had a cough and took the cough mixture he had at home.
3. Many days passed but his cough did not get better.
4. U Tun Maung sweated profusely at night, became thinner and also lost his appetite.
5. Later, he sometimes coughed up blood.
6. Finally, he went to see the doctor as he felt pain in the chest and was out of breath. The sputum and X-ray tests showed that U Tun Maung had contracted pulmonary TB.

Let’s discuss:
1. Why, in your opinion, did U Tun Maung contract pulmonary TB?
2. What happens when a person is infected with pulmonary TB? Please explain.
3. How did U Tun Maung know that he had pulmonary TB?
4. What would you suggest if you come across a person who has the same symptoms as U Tun Maung?
5. Discuss again with the class the results of the group discussions.
6. The teacher should explain that pulmonary TB is an endemic disease widespread in Myanmar and since it can easily infect persons irrespective of age, the nearest doctor should be consulted as soon as symptoms appear such as chronic cough for more than three weeks, discharge of phlegm, coughing up blood, and loss of body weight. The teacher should also add that one should not give treatment with folk-medicine.

Part (1)

<table>
<thead>
<tr>
<th>U Tun Maung is a factory worker Who has to commute by bus.</th>
</tr>
</thead>
<tbody>
<tr>
<td>One day, U Tun Maung had a cough and took the cough mixture he had at home.</td>
</tr>
<tr>
<td>But the condition of his cough did not improve.</td>
</tr>
<tr>
<td>He sweated profusely at night, got thinner and lost his appetite.</td>
</tr>
<tr>
<td>Later, he coughed up blood sometimes.</td>
</tr>
<tr>
<td>Finally, he got chest pain and was out of breath...When he went to see the doctor, U Tun Maung was told that he had contracted lung TB.</td>
</tr>
</tbody>
</table>

Content Questions
1. Where was U Tun Maung probably infected by TB? Why?
2. Did U Tun Maung originally think that his cough was caused by TB? Why or why not?
3. Does coughing mean that someone is infected with TB? Why or why not?
4. What are some of the symptoms of TB? Are these symptoms also symptoms of other diseases? Which diseases?
5. When U Tun Maung’s condition did not get better, what did he have to do? Why is it important to seek proper medical attention?

Personalization Questions
1. Have you ever had a bad cough? What did you do? Did you think TB might be the cause? Why or why not?
2. How do you think a person can know for sure whether they have TB?
3. When do you think U Tun Maung should have gone to see the doctor? Did he wait too long? Why?
4. Do you think that you could be infected with TB sometime in your lifetime? Why or why not?
5. Even though we have not learned about the transmission of TB yet, what do you think you could do to help protect yourself from TB?
6. What do you think U Tun Maung will do after he has been told that he has TB? Why?

**Activity (2)**

**Objective**

The students will be able to identify how lung TB is transmitted and methods of prevention.

**Teaching Aid**

Charts showing the ways of pulmonary TB transmission and methods of prevention

**Teaching/Learning Activity**

1. Let students study the charts showing the ways of pulmonary TB transmission and ask questions.
2. Ask them also to relate the methods of preventing pulmonary TB after letting them study the charts.
3. The teacher should add details, if necessary.

**Ways of Lung TB Transmission**

<table>
<thead>
<tr>
<th>Coughing</th>
<th>Sneezing</th>
<th>Spitting Phlegm</th>
</tr>
</thead>
</table>

When a pulmonary TB patient coughs, sneezes or spits, the phlegm and mucus that come out contain TB germs which spread into the air. A person may get TB by inhaling that air.

**Methods for prevention**

1. Your nose and mouth should be covered with handkerchief/hand when you cough/sneeze.
2. When you have been in a room with a person who is sick with TB or illness, you should always wash your hands before eating.
3. The phlegm/sputum of the TB patient should be kept in a heat-resistant spittoon, well covered with a lid. The spittoon should be heated on a stove till the contents are boiling well and it should be emptied into the latrine.
4. Since sunrays can kill the germs, rooms of houses should be arranged to have sunshine and fresh air (good ventilation).
5. Babies, from newborn to 3 months old should have one inoculation of BCG-TB vaccine.

Content Questions
1. If someone is coughing for more than 3 weeks what could be the causes? What should the person consider might be the cause? What does the person or the family do? Why?
2. Which diseases can be transmitted through coughing? How does the transmission happen? How can transmission be prevented?
3. If someone in the family has pulmonary TB, can he transmit the disease to other family members? What are the ways that you can prevent transmission, even if you are living in the same household? What are the consequences for family if proper precautions are not taken?
4. Why is it important to practice good hygiene?
5. Is there any vaccine to prevent pulmonary TB?

Personalization Questions
1. When you cough or sneeze what should you do? Why?
2. If someone is openly coughing or sneezing what would you do? Why?
3. If you are going to take care of the person having pulmonary TB, how would you help him? Why? What precautions would you need to take?
4. Would you be afraid of getting TB if a family member already had TB? Why or why not?
5. Why do you think it is important to vaccinate children against TB?

Activity (3)

Objective
1. The students will be able to assess the possible impact of TB on the family.
2. The students will be able to identify the proper precautions for the prevention of infection with TB and appropriate measure for the care and treatment of persons with TB.

Teaching aid

U Tun Maung. Illustrated story (part 2) Charts

Teaching/ Learning Activity

1. Ask students to go on reading the continuation of U Tun Maung’s illustrated story (part II)
7. The doctor explained to U Tun Maung that he would need to take prolonged treatment, lasting for months, until lung TB is completely cured and prescribed the medicines.

8. After taking medicines for about 3 weeks, U Tun Maung’s condition improved and he returned to work. He stopped taking the medicines because they were expensive.

9. Within a few months, U Tun Maung was out of breath again as before, and even vomited blood and had to be hospitalized. He had to take invalid pension because he could no longer work on the tiring job.

10. The economic condition of the family became shaky due to the reduction in income and high costs of medicines for U Tun Maung.

11. Because her parents’ economic condition had worsened, the eldest daughter had to leave University and get a job to help the family in some way.

12. The youngest son, who was attending middle school, was frequently absent from school and even failed in the examination because he had to do the house chores in his mother’s place.

Part (2)

The doctor told U Tun Maung that he needed prolonged treatment to cure the disease completely and prescribed the medicine.

After receiving treatment for three weeks, his condition improved and he returned to work. However, he discontinued the treatment due to the high cost of medicine.

Within a few months, he was out of breath again as before, even vomited blood, and had to be hospitalized. He had to take invalid pension as he could not work any more.

Reduced income together with the high costs of medicines made the family’s economic condition shaky.

The eldest daughter had to leave University and get a job to help earn an income.

The youngest son, who was attending middle school, had to help with house chores in his mother’s place, so he was absent from school and failed in the examination.

Let’s discuss.
1. What are the possible consequences of pulmonary TB infection?
2. Why did U Tun Maung’s condition become worse?
3. How should a pulmonary TB patient be assisted and cared for?

3. The results of the discussions should be reviewed together with the class again.
4. The teacher should go on and explain that supervision should be made to ensure that pulmonary TB patients take their medicines regularly; that family members should monitor and help arrange for taking medicines regularly as prescribed by the doctor; that a mere relief should not be taken as a complete cure and that the patient should take complete treatment from a doctor.

Content Questions
1. How is pulmonary TB transmitted? What are the different ways that transmission be prevented?
2. Why does U Tun Maung stop taking the medicine used to treat his TB? Was it a good decision to do so? Why?
3. If someone does not finish a full treatment course for pulmonary TB, what can happen? What will be the consequences?
4. Was it a good idea for U Tun Maung to return to work without taking his medication?
5. If U Tun Maung returned to work and still took his medication, could he easily spread the infection to others? ( - No - ) Why? (See Teacher’s Note)
6. How could U Tun Maung’s family helped him fight his TB?

Personalization Questions
1. Do you think it is always possible to tell if a person has pulmonary TB by their cough? Why?
2. Do you think it is possible to care for a family member with TB at home? Why or why not?
3. If you were to take care of someone in your family with pulmonary TB what would you advise other family members to do and what precautions would you take in order to prevent infection? Why?
4. If someone in your family were infected with TB what do you think the impact would be on your family?
5. What could you say to your family members to help them prevent infection with TB? Please give examples.

Linkage Questions
1. What are the local traditions of caring for a person with TB?
2. How can the practice of good hygiene and sanitation help prevent TB?
3. How will smoking affect a person with TB?
4. Persons with HIV/AIDS are more highly susceptible to infection with TB but does this mean that persons with TB are also infected with HIV? Why or why not?
5. Why do families and communities have a tradition of caring for its members with TB and other chronic illness in the home and community but are afraid to care for a person with HIV/AIDS even though HIV is more difficult to transmit to others?

Assessment Activity
TB Myth or Fact
Objective: 1. To assess students knowledge levels on TB
Materials: The following myth or fact statements:
TB Myth Or Fact Statements

1. The germ (bacteria) that causes TB can remain in active in body tissues for many years.
2. If you sit next to someone with TB you will be infected with TB.
3. Droplets containing TB bacteria from coughing or sneezing can survive in both darkness and in sunlight.
4. An individual may be infected and develop TB after inhaling droplets containing TB bacteria just once.
5. A person has the greatest chance of developing TB within 1-2 years of infection. This chance then lessens as time goes by.
6. You can tell if someone has TB by the way they cough.
7. The amount of TB bacteria a person is exposed to and the strength of their immune system will determine if that person will get TB.
8. Good ventilation can help reduce the possibility of TB infection.
9. A person will develop TB within a week after infection.
10. TB is an incurable disease.
11. Incorrect use of medicines can help make the TB bacteria stronger and resist treatment.
12. If you think you have TB, you do not need to see a doctor until you start to show symptoms.
13. If you start treatment for TB and feel better after a few weeks, you can stop treatment.
14. A person may become infected and ill with TB more than one time in their life.
15. A person with AIDS is at greater risk of infection with TB.

Assessment Activity

1. Divide the class into 2 or more teams.
2. The first participant from each group draws a slip of paper from the box and reads the statement to him/herself.
3. The player must answer “Myth” or “Fact” so that everyone can hear their answer. The teacher will then read the statement aloud and have everyone help answer whether the statement is true or false and why (Remember to have the participants answer first. Read the statement and allow the players help each other discover the answer by stating their reasons. This will help check for understanding as well.)
4. The teacher reveals the correct answer.
5. Teams alternate choosing questions until time is up or the statements are all read and answered.
6. Conclude activity and open additional discussion if necessary.
7. The teacher may choose not to use all of the myth or fact statements. He/she may choose the statements most appropriate for the group.

For Additional Information TB see Teacher’s Note
Myth or Fact Game

<table>
<thead>
<tr>
<th>Answer Key</th>
</tr>
</thead>
</table>

Follow-up Activity

We should not be afraid of persons with TB. Many families and communities have experience in caring for its members who have TB. We need to know about it because we want to prevent getting it and we want to know how to help ourselves and our family members who may get TB.

1. Have the students discuss with family members or other elder members of the community about the traditions of caring for a family member with TB in the home environment.
2. Have the students discuss with health care providers the situation of TB in the community.
3. From the information that the students gather from the community and from the information provided in this lesson, have the students develop a campaign for providing information to family, friends, and other community members on the prevention of TB and the care of persons with TB. The campaign may include cartoons, posters, slogans, dramas or role-plays, etc.
4. Coordinate with the PTA or the local Red Cross Chapter so that the campaign may be carried out in the community.

Teacher’s Note

Tuberculosis (TB)

TB is a common disease that many people have. There will be more people with TB in the future because persons living with HIV/AIDS can easily become ill with TB because of a weakened immune system. It is important to know how to prevent TB while you are in detention and how to take care of yourself and members of your family who may have TB when you are back home.

What is TB?

Tuberculosis (TB) is a chronic (long-lasting), contagious disease that is caused by a bacterial infection. It can be cured with the correct treatment. It most often strikes young adults (15-35), especially those who are weak, poorly nourished, or who live with someone who has the disease.

TB usually affects the lungs and causes coughing and spitting. When it is severe people may cough up blood. Especially in children, young people and those with AIDS, tuberculosis can also affect bones, brain, lymph nodes and other parts of the body. The symptoms of TB can appear in many different ways.

In many parts of the world, by the time they reach adulthood most people have bee infected by the bacterium that causes tuberculosis (Mycobacterium tuberculosis). However, if they are
healthy their body’s defenses – the immune system – will have prevented the bacteria from causing tuberculosis. In this case, people are usually unaware that the tuberculosis bacteria are in their body, and they feel well.

We should not be afraid of persons with TB. Many families and communities have experience in caring for its members. We need to know about it because we want to prevent getting it and we want to know how to help ourselves and our family members who may get TB.

We can get TB when the TB germs, bacteria, enter our bodies. This can happen when a person with TB sneezes or coughs into our face or near to us, not just one time, but frequently or for an extended period of time.

**Can TB be cured?**

TB can be cured with medicines. These medicines make a person feel better within a couple of weeks. But the TB germs will remain in the body until all the medicine is taken. This usually means that a person must take TB medicine for more than six months to be totally cured. People with TB need the help and support of friends and family to keep taking the TB medicines throughout the entire treatment. If the medicines are not taken according to the doctor’s recommendations, the germs may become stronger, making it even more difficult for a person to be cured.

As tuberculosis is treatable with medicines, is highly dangerous if not treated, and can be passed on to others, it is important for people to get a prompt diagnosis through a sputum examinations and/or chest x-ray.

There are many people who are ill with TB. If you feel that you may have TB, you should ask to see a doctor. If you think a friend has TB, you should encourage them to see a doctor and encourage them to finish all of their medicines.

**What are some of the common symptoms of a person with TB?**

- Chronic cough (lasting more than three weeks), often worse after waking up
- May cough up blood.
- Loss of weight and increase of weakness.
- Fever
- Sweating at night
- Pain in the upper back or chest
- Loss of appetite (don’t feel like eating food)

**How do we know that someone is infected with TB?**

If a person has the above symptoms, she/he may have TB. However, some of the above symptoms can by caused by other diseases also. To make sure, one should go to see the doctor.
The doctor will check the person's sputum (spit) for TB germs, take a chest X-ray to look for TB, or use a special skin test to see if the person has been exposed to TB germs. If there is TB, the doctor will provide the right medicine against TB. Some people may have the disease in their bodies without showing any symptoms.

Tuberculosis is contagious, particularly when there is prolonged contact with a person with the disease. To prevent TB from spreading to others, everyone should be asked if they have a cough and have their sputum tested with the local health center.

How to help people who are ill with TB and how to prevent TB

1. If anyone is coughing continuously for more than three weeks, take the person to see a doctor.
2. If the doctor gives medicines, the person should take the medicines strictly, following the doctor’s orders. For example, when to take medicine, and how much medicine to take.
3. Many people have TB germs, and it may not hurt them until their body becomes weak because of sickness or old age. These people should also seek treatment for TB so they don’t get sick later.
4. Persons with TB need other family members to show love and care for them. This means helping the person take medicine regularly and in the right amounts. It is important to help the person with TB by making the medicine part of everyday life and easy to take.
5. Persons with TB must avoid things that can make the symptoms worse, for example, smoke, anxiety or stress, hard physical work.
6. A person with TB should lie with the head raised on a pillow, or sit up with a pillow to support the back to help breathing.
7. Drinking Chinese tea or herb tea with a little sugar or honey can help reduce coughing.
8. When coughing, try to cough through a window so that the germs are released outside and not into a confined space.
9. When coughing in a closed room do not stand near the ventilation ducts as this may help spread the germs to others in the room.
10. For general good health, everyone should cover their mouth and nose with handkerchief or hands when coughing. Wash hands thoroughly afterwards to prevent spreading germs to others.
11. Spit from persons with TB should be put in a container with a lid. Put boiling water in the container to kill the germs before pouring it down the toilet.
12. You can be ill with TB more than one time in your life if you become infected with the disease again.
Some Principles for Preventing Tuberculosis

- Everyone – without exception – should be tested and seek health care if coughing for three weeks or more.
- Everyone – without exception – should cover their mouth when coughing.
- Everyone – without exception – should avoid being in an unventilated space with a person who has been coughing for more than three weeks.

Tuberculosis Treatment

There are many effective treatments available to cure tuberculosis. Treatment always includes at least two different medicines. If only one is used, the tuberculosis bacteria may become resistant (insensitive to it – stronger) to it. Treatment stopped too early is dangerous to both the individual and others because this can also lead to the development of tuberculosis bacteria that are resistant to drugs. Drug resistant tuberculosis is much more difficult and expensive to cure. Therefore, it is extremely important to ensure that people take all the medicines they are given for the treatment of TB, and that they complete the full course. The medicines, if taken properly, will prevent this infection from spreading among people who live together.

It is very important the medicines are taken regularly, and exactly as prescribed. People taking anti-tuberculosis medication will begin to feel better but must still take their medication until the course is completed, otherwise symptoms will reappear and they will again become infectious to people around them. Friend and family members can help patients take their medication by reminding them. This is important to the whole family and not only to the patient with TB. It can take many months to cure TB completely. Nobody should ever stop taking their medicines, even is they feel better, instructed to do so by a doctor, or unless the side-effects, such as reddening of the eyes, unusual itching or a widespread rash, appear. If you have these side-effects, see a doctor, stop taking the medicines and see a doctor as soon as possible.

Important

Be sure that people with tuberculosis know:

- Which medicines they must take to cure tuberculosis.
- How to take the medicines.
- For how long they need to take them.
- What side-effects they should watch for.
- That prompt, complete treatment will cure tuberculosis.
- That prompt, complete treatment is the best way to prevent further spread.
Children

All newborn babies and young children should be immunized against tuberculosis with BCG vaccine. This may cause a spot or slight wound at the point of injection which will usually heal in some months without any treatment. The vaccine gives good protection against the serious childhood forms of the disease. However, if a child is ill at birth or has clinical symptoms of AIDS, they should not receive BCG vaccine.

If the main problems experienced are with breathing, a person with TB should avoid the things that can make their symptoms worse, for example, anxiety, strenuous activity, smoke, dust, aerosol sprays and smoking of any type. Persons with TB should also avoid lying flat, and instead should sit up or lie with their head raised.
Lifeskills Competencies – Substance Abuse, including Alcohol and Tobacco

At the end of this lesson, the students should be able to demonstrate skills in the following areas:

 ✓ Problem Solving
   The students will be able to identify factors of risk and vulnerability that may place a person at risk substance addiction or abuse.

 ✓ Creative Thinking
   The students will be able to identify behaviors and methods of preventing addiction or abuse, including protective factors.

 ✓ Critical Thinking
   The students will be able to analyze the behaviors and methods that may help protect them from substance addiction or abuse.
   The students will be able to identify the socio-economic and cultural impact of substance addiction or abuse.
   The students will be able to assess the relationship between substance abuse and infection with HIV and Hepatitis.

 ✓ Decision Making
   The students will be able to identify realistic behaviors and methods to reduce the factors of risk and vulnerability that may place a person at risk of substance addiction or abuse.

 ✓ Communication
   The students will be able to ask for help and advice or seek additional information on substance abuse, alcohol and tobacco.
   The students will be able to demonstrate skills in refusing invitations to use drugs, alcohol and tobacco and skills to negotiate quantities of alcohol to be consumed.
   The students will be able to provide information and discuss issues related to substance abuse, alcohol and tobacco in a clear and direct manner.

 ✓ Self Awareness
   The students will be able to assess personal risk for substance addiction or abuse.
   The students will be able to assess the impact of substance addiction or abuse on personal goals and expectations.

 ✓ Interpersonal Relationships
   The students will be able to identify social influences that may place them at risk for substance addiction or abuse.
   The students will be able to identify the impact of substance addiction and substance abuse on the self, family, community and society.
   The students will be able to identify social and cultural factors that may aid in the prevention of substance addiction or abuse.

 ✓ Empathy
   The students will be able to recognize the needs and feelings of persons who are affected [family, friends, etc.] by substance addiction or abuse.
   The students will be able to recognize that some people may be more vulnerable to substance abuse and alcohol than others.

 ✓ Coping with Stress and Emotions
   The students will be able to distinguish between peer pressure and personal needs/expectations.
   The students will be able to assess short-term euphoria from substance use versus long term impact on health and personal goals and expectations.
Narcotic drugs mean the chemical drugs including cigars, cheroots, cigarettes, marijuana, cocaine, opium and opiate products, amphetamines, pethidine, etc. All users of narcotic drugs, whether they take them orally, by inhaling or by intravenous injection, become addicted and suffer from laziness and sluggishness, loss of memory and mental depression. They usually contract hepatitis, tuberculosis, arteriosclerosis, septicemia and HIV/AIDS.

Persons addicted to drugs develop a dependency to them over time. They need to keep using the drugs in order to prevent the symptoms of withdrawal. Moreover, the amount of drug used will need to increase in order to maintain the same level of euphoria attained on first drug use or they may need to switch to a stronger drug. Because of this, narcotic drug addicts are constantly in need of money and so they try to get money by any means, even steal and rob. They squander their parents’ wealth till the parents are ruined.

The best way to counter the narcotic drug menace is to abstain completely from smoking — not even a cigar, cheroot or cigarette.

**Activity (1)**

**Objective**

The students will be able to identify various narcotic drugs, their origin, and how they are commonly used.

**Teaching Aids**

Pictures and diagrams

**Teaching/Learning Activities**

1. Ask the students to come up with a definition of narcotic drugs.
2. Then, have the students brainstorm the names of the narcotic drugs with which they are familiar. The teacher will write the names of these drugs on the blackboard in a column.
3. Next, the teacher will ask the students where each of these drugs comes from. Are they a natural product (produced in plants) or are they synthetically manufactured from different chemicals? [The students may not know all of the answers but the teacher should give them the opportunity to discuss first. The teacher will also gain some important information on how much knowledge the students already have about narcotic drugs]
4. Then, let the students study the pictures of narcotic drugs that are commonly found in Myanmar and then answer the following questions;
   (a) From what plant is opium obtained?
   (b) What narcotic drugs can be produced from opium?
   (c) From what plant is marijuana obtained?
   (d) From what material is cocaine produced?
   (e) What are the different synthetic drugs that you have heard of?
5. Summarize the answers with the whole class again.
6. Ask the students how they think the different drugs are used and which drugs will have greater negative effects on the individual, family, and community.
7. The teacher should make an overall review of the students’ answers and then lead further discussion using the content and personalization questions. In the discussion the teacher may also provide a definition of narcotic drugs and additional information on the method of use.

**Different Kinds of Narcotic Drugs**

<table>
<thead>
<tr>
<th>Opium plant</th>
<th>Marijuana plant</th>
<th>Coca plant</th>
<th>Synthetic Narcotic Drugs</th>
</tr>
</thead>
<tbody>
<tr>
<td>Raw Opium</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Opium Oil</td>
<td>Marijuana leaf</td>
<td>Coca leave</td>
<td></td>
</tr>
<tr>
<td>Heroin Powder</td>
<td>Marijuana</td>
<td>Cocaine powder</td>
<td></td>
</tr>
<tr>
<td>Opium black/residue</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

**Content Questions**

1. What are narcotic drugs? Please explain / give a definition.
2. What substances do young people use in the local area? Are these readily available? Why?
3. Why do young people want to use these drugs?
4. How do young people in the local usually use these drugs? Please explain.
5. What do you think will be the effect of these narcotic drugs on the lives of the young people? Please explain.

**Personalization Questions**

1. Do you think that you would recognize the different narcotic drugs if you saw them? How?
2. What do you think you would do if a friend offered you a tablet, liquid, or something to smoke if you didn’t know what it was? What would be the safest thing for you to do?
3. Do you think that the way in which a narcotic drug is used can have a different impact on the individual, family, and community? Why?
4. Do you think that the way in which a narcotic drug is used can have an effect on how quickly a person becomes addicted? Why?
5. What do you think may be some of the effects on health, economics, relationships, etc caused by these drugs?
**Teacher Notes:**

**What are narcotic drugs?**

A narcotic drug is any substance that when taken by a person modifies perception, mood, thinking (cognition), behavior or motor functions. This definition is broad; it includes both licit (legal) and illicit (illegal) substances, those that can lead to dependence (of the individual).

**What substances do young people use?**

The students may provide a variety of names of different drugs. The teacher should try to have the students determine which names actually refer to the same drug. It is common to find that a substance has a generic name, a trade and at least one street name. The names are not so important. What is important is to be able to recognize the local substances. The following table is for the teacher’s reference.

<table>
<thead>
<tr>
<th>Name</th>
<th>Examples</th>
</tr>
</thead>
<tbody>
<tr>
<td>Alcohol</td>
<td>wine, beer, spirits, home-brew, some medicinal tonics and syrups (e.g. cough syrups), some toiletries and industrial products (e.g. aftershave).</td>
</tr>
<tr>
<td>Nicotine</td>
<td>Cigarettes, cigars, pipe tobacco, chewed tobacco, snuff.</td>
</tr>
<tr>
<td>Cannabis</td>
<td>Marijuana, ganja, hashish, bhang.</td>
</tr>
<tr>
<td>Stimulants</td>
<td>Cocaine, crack, khat and “designer” substance such as amphetamines and methamphetamines, ecstasy.</td>
</tr>
<tr>
<td>Opioids</td>
<td>Codeine, heroin, morphine, opium, buprenorphine, methadone, pethidine.</td>
</tr>
<tr>
<td>Depressants</td>
<td>Sleeping pills, benzdiazepine, methaqualone, barbiturates, chloral hydrate.</td>
</tr>
<tr>
<td>Hallucinogens</td>
<td>LSD, mescaline, psilocybin, peyote, ayahuasca.</td>
</tr>
<tr>
<td>Volatile inhalants</td>
<td>Aerosol sprays, butane gas, petrol/gasoline, glue, paint thinners, solvents, nitrites.</td>
</tr>
</tbody>
</table>

**What are the different methods of use?**

Substances can be taken into the body by many different means. The methods by which substances are taken influence how quickly the substance can produce its effects and also the different health consequences that the individual may experience. It is important to note that the same type of substance may produce the effect faster or more slowly depending on where, specifically, the substance is introduced. For example, injecting the substance into the muscle will not produce the effect as quickly as injecting it into the vein. Absorption through the mucous membrane of the nose is faster than absorption through other mucous membranes. Below are common ways that people take substances.
• Injected with a needle under the skin, into a vein or muscle.
• Smoked or inhaled through the mouth or nose.
• Placed on a mucous membrane (the nose or under the eyelid).
• Chewed, swallowed or dissolved in the mouth.
• Rubbed into the skin.

**Activity (2)**

**Objective**

The students will be able to analyze the characteristics of a drug user and the effects of drug use over time.

**Teaching Aid**

Pictures of people of different health, economic and social statuses.

**Teaching/Learning Activities**

1. Introduce the lesson by asking the following questions.
   • Have you personally come across a drug user? (or)
   • Have you seen one in the video films or pictures? (or)
   • Have you read about drug users in illustrated story books?
   • What have you noticed about drug users? Mention all the points that you can remember.
2. Ask the students how they might identify a person who uses harmful drugs. Some of the students may suggest stereotypical traits such as appearance or behavior. Explain that while these traits may identify some people, it is difficult to identify people who decide to use drugs.
3. Show the class pictures cut from magazines that show different kinds of people, such as athletes, teachers, doctors, business people, entertainers, truck drivers, street vendors, etc. Have the youth indicate if they think any of the people in the pictures might be using drugs. [Most of the youth will probably say that the people in the pictures do not look as if they are using drugs.]
4. Explain that some people of all cultures, gender, and occupations and decide to use drugs. Explain that some time in their lives, most people are faced with the decision of whether or not to try a drug. The drug may be alcohol, tobacco, or any kind of illegal such as marijuana, or methamphetamine (Ya-Ba). Regardless of who a person is, how he looks, or what he does, the choice of whether or not to try a drug is something that the person must face. [The teacher may then ask the students to look in a mirror and then explain that the person the student sees will also have to make some important decisions about drug use.]
5. Ask the students to describe what they would do if they were asked to try a drug. Explain that they have the right to make a responsible decision and that the only responsible decision is to avoid using drugs. Explain that the people in the pictures are no different from anyone in the group. During their lifetime they had to make decisions. Point out that if these people had chosen to use drugs, they might not have been able to accomplish whatever success they have enjoyed.
6. The teacher should then explain that although we cannot readily recognize persons who will decide to use narcotic drugs, the longer a person uses drugs, the more we may be able to
recognize some of physical and social associated with of drug use in those persons. Moreover, the longer a person uses drugs the greater the effects that the drug user may have to face. Can summarize these through the use of the following table:

<table>
<thead>
<tr>
<th>Effect on</th>
<th>Supplemental Diseases</th>
</tr>
</thead>
<tbody>
<tr>
<td>Body</td>
<td>Mind</td>
</tr>
<tr>
<td>Dazed (inert)</td>
<td>Indolent</td>
</tr>
<tr>
<td>Coma</td>
<td>Loss of Memory</td>
</tr>
<tr>
<td>Loss of life</td>
<td>Depressed, Selfish</td>
</tr>
</tbody>
</table>

2. To conclude the activity, the teacher should ask the students to suggest what they think are some of the short term and long term consequences of drug use.

**Content Questions**

1. What are the visible characteristics of a person addicted to drugs? Are some of these characteristics related to the effects of drug use?
2. Do all person addicted to drugs always look or act this way? How do you know?
3. Do you think the effects of drug use are more serious in the short-term or long term? Why?
4. What types of drugs are common for young people to become addicted to? Why these drugs and not others?
5. When people use drugs, do you think they think about the possible consequences? Why? If they do think about the consequences, why do you think they use drugs anyway?
6. What are some important factors that influence the effect/consequences of narcotic drug use?
7. If a young person who uses drugs decides to use them for a short time in order to avoid the long term effects, do you think that young person will be able to quit their addiction easily? Why?
8. Besides effect on body, mind and risk of various diseases, how can drug use effect a person reaching their personal goals and expectations in life?

**Personalization Questions**

1. Have you ever known someone addicted to drugs? Did they show what you think are typical characteristics of a drug user?
2. How did they look and what type of behavior did they have?
3. Do you think you would know if your friend is a drug user or not? How?
4. What would be your first reaction if one day you felt sad and a friend offers you some pills to try so that you will feel better? Why? What would you say to him or her?
5. Do you think that someone in your family or one of your friends could be come become addicted to drugs? Why do you think they could be come addicted? And, what are the reasons for addiction?
6. If a family member or a friend becomes addicted to drugs, what do you think would be the impact on you even though you do not use drugs? Why?
7. If you were to become addicted to drugs, what do you think would be the impact on your family and friends? Why?
**Teacher Notes:**
Here it is important to stress the fact that while there are many desired effects associated with substance use, these effects are out-weighed by the negative consequences of use. The effects of substances can be short or long-term. Short-term effects occur shortly after the substance is taken into the body, and these are influenced by the dose, the method of administration and whether or not the substance is used in combination (with other substances). The long-term effects are usually due to damage to the body organs. Other important factors that influence the effects are the individual, the substance and the setting in which the substance is used. For the individual, this includes the person's physical condition and state of mental health, their expectations about the substance, and their past experiences with the substance. Substance related factors that influence effect include the dose and method of administration. Lastly, factors involved in the setting can include expectations of others and the nature of materials used to take the substance into the body. Consider the examples of a group of young people at a party or an environment where the sharing of needs takes place.

The following two boxes summarize what is known about the effects of the common substances – for teacher’s reference only.

<table>
<thead>
<tr>
<th>Substance</th>
<th>Short-term effects</th>
<th>Long-term effects</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>a) Alcohol</strong></td>
<td>Short-term effects include doing things that normally one would stop oneself from doing, possible loss of physical co-ordination, unclear vision, slurred speech, making poor decisions and memory impairment. Excessive drinking over a short period of time can cause headache, nausea, vomiting, deep unconsciousness and death.</td>
<td>Drinking large amounts of alcohol regularly over a lengthy period of time can cause loss of appetite, vitamin deficiency, skin problems, depression, loss of sexual drive and memory, and liver and brain damage. Alcohol consumption during pregnancy can lead to Foetal Alcohol Syndrome. Tolerance and dependence also develop.</td>
</tr>
<tr>
<td><strong>b) Nicotine</strong></td>
<td>Some short-term effects are: a feeling of alertness just after using tobacco and then relaxation afterwards; increase in heart rate and a temporary rise in blood pressure. Dizziness, nausea and reduced appetite also occur.</td>
<td>Long-term nicotine use can cause heart and lung disease, blockage of arteries (peripheral vascular disease), hypertension, bronchitis, cancer of the lung, cancers of the mouth (with pipe smoking and tobacco chewing).</td>
</tr>
<tr>
<td><strong>c) Cannabis</strong></td>
<td>Cannabis may make the individual feel euphoric at first and then relaxed and calm. Feelings of wellbeing and relaxation, loss of inhibitions, muscle co-ordination and concentration. There may be increased heart rate, redness of the eyes and increased appetite. Large quantities can cause panic, hallucinations, restlessness and confusion. Large doses can also change physical perceptions, similarly to hallucinogens.</td>
<td>Regular use over a long period of time increases chances of dependence, causes impairment of cognitive functions and may worsen existing mental problems.</td>
</tr>
<tr>
<td><strong>d) Stimulants</strong></td>
<td>Short-term effects include enhanced or increased central nervous system activity; experiencing brief intense feeling of intoxication and exaggerated feelings of confidence. Soon the mood quickly changes to a low feeling, and may prompt the person to repeat the dose. Overdose is more common with crack than with other forms of cocaine.</td>
<td>Long-term effects include inability to sleep, irritability, mental health problems, and becoming suspicious and distrustful of others (paranoia).</td>
</tr>
<tr>
<td><strong>e) Opioids</strong></td>
<td>These produce detached and dreamy sensations, sleepiness, and constriction of the pupil of the eye, nausea, vomiting and constipation. Overdose leads to unconsciousness, failure to breath and death.</td>
<td>Tolerance and physical and mental dependence can develop quickly. Stopping use results in the withdrawal syndrome.</td>
</tr>
</tbody>
</table>
Substance | Short-term effects | Long-term effects
--- | --- | ---
f) Depressants | Effects are similar to alcohol. They slow down a person's thinking and movements and decrease the ability to concentrate. They cause effects such as slurred speech, sleepiness, problems with coordination; and they cause “hangovers”. Low doses reduce feelings of anxiety, while higher doses cause sleepiness. Consumption of alcohol (at the same time) increases their effect, and repeated doses cause toxicity because the substance cannot be broken down (metabolized) quickly. Accidents and suicide are common. | Substances in this category can lead to dependence, inability to learn and problems with coordination. Convulsions can occur when the substance is withdrawn. |
g) Hallucinogens | Hallucinogens can alter a person's mood, the way the person perceives their surroundings and the way the person experiences their own body. Things may look, smell, sound, taste, or feel different; and one may see, smell, taste, hear or feel things that do not exist. For example, the individual may see colours, lights or images; or have an altered awareness of things happening inside or outside their body. Other short-term effects are feelings of panic, fear or anxiety. A "bad trip" usually refers to an unpleasant and disturbing mental/emotional state caused by hallucinogens. Accidents and suicide are common. | Tolerance can develop. Many individuals who have used hallucinogens report feeling effects produced by the substance days or even months after last taking the substance. These replays of past effects are often called “flash backs”. Regular use of hallucinogens can decrease memory and concentration. The flashbacks can also result in disorientation, anxiety and distress. |
h) Volatile inhalants | The individual feels uninhibited at first and drowsy later. With continued inhalation, hallucinations may occur. Other effects include feelings of happiness, relaxation, sleepiness, poor muscle coordination, slurred speech, irritability and anxiety. The most immediate danger to the individual is "sudden sniffing death". | Although little is known about volatile substances, regular long-term use may lead to nose bleeds, skin rashes around the mouth and nose, loss of appetite and lack of motivation. Some of the solvents are toxic to the liver, kidney or heart; and some may cause brain damage. Little is known about the long-term effects of regular inhalant use. |

**Important factors that influence the effects of drug use**

The effects of a substance differ for each individual and from occasion to occasion. They depend on a variety of factors involving the individual, the substance and the environment. Some effects are “desirable” to the individual using the substance. For example, the immediate feelings of exaggerated confidence and happiness, loss of inhibitions, desire to sleep and reduction of pain or fear. These desired effects are short-lived and are outweighed by the enormous problems that result from the use of these substances. The desired effects can also lead to serious health and social consequences. For example, substance-induced loss of inhibitions could cause an individual to engage in risky behaviour that they would not normally have undertaken. Although some effects are desired, in the sense that they are sought after, they are not desirable in the more general sense. Below is an illustration on how these factors may interact.

**The individual**

Factors that influence the effects of substances include the person's age, gender, physical condition and state of mental health; the person's expectations about the substance; the effect of the substance; and the person's past experiences with the substance.
The substance

The type of substance, the dose, how it is taken and whether it is used in conjunction with another substance (polysubstance use) all influence the effect. The combined effects of substances makes them even more dangerous.

The environment

The social and physical setting where the substance is taken also influences the effect. This includes the interpersonal atmosphere and group expectations. For example, if the setting is a group of young people at a disco, some of them may have the primary objective of being there to "enjoy" themselves which for them includes using substances.

Others may be influenced to experiment. The social and physical setting will have an influence on how much is taken, by what means and in what combination, to produce the desired effect. The substance commonly known as ecstasy has been shown to have enhanced adverse effects when taken in confined hot environments such as discos. This is another more specific example of how the environment may influence the effects of substances.

All these factors interact!

Use of substances may cause other problems related to nutrition, pregnancy and mental status.

Malnutrition

In general, any person using substances frequently can easily overlook the importance of good nutrition. Some young people, especially street children, use substances to relieve hunger. This can lead to further malnutrition.

Mental problems

Some psychoactive substances are used in the treatment of mental health problems. However, if the same substances are used outside supervised health care, or in combination with other substances, this could result in a worsening of the mental condition. Substance use also limits the development of constructive coping strategies, making the individual more vulnerable to crime and other forms of abuse.

Pregnancy

All psychoactive substances taken by the mother during pregnancy can reach the unborn baby. These substances can have effects on the mother, the unborn baby and the newborn.

Effects on the mother:

No safe levels of alcohol intake during pregnancy have been established. Drinking alcohol during pregnancy can lead to miscarriage.

LSD can increase the chance of miscarriage and complications during pregnancy.

If the mother stops using opioids suddenly, she could experience withdrawal problems.
**Effects on the unborn baby and newborn**

It is possible that the baby of a mother using psychoactive substances may be born with physical deformities.

Drinking alcohol during pregnancy can cause slowed development in the unborn baby and mental disabilities in the newborn ("foetal alcohol syndrome").

Smoking during pregnancy can reduce the amount of oxygen available to the unborn baby and may affect growth and development before and after birth, resulting in low birth weight.

If a mother who is pregnant or breastfeeding suddenly stops using an opioid, the baby may experience withdrawal. Withdrawal in a newborn is a serious problem.

**Activity (3)**

**Objective**

The students will be able to analyze the economic impact of drug use on the family.

**Teaching Aid**

Illustrated Story

**Teaching/Learning Activity**

1. Ask the students to read the following illustrated story. Ask them to answer the questions in groups.

   Hein Htet was a clever and well-behaved student. Being the only son, his parents pampered him. Through undesirable relationships with some friends he became a drug addict and began selling his watch and bicycle when he needed money to buy narcotic drugs, lying to his parents that the articles were lost or stolen. His parents were in the dark about what actually happened. He demanded more and more pocket money from his mother more frequently. Later on as his pocket money became insufficient, he went after his mother to her stall and stole money at the slightest opportunity. At first, the mother was unaware, and subsequently, he went so far as to sell off the things in the house. Only then was he suspected and inquiries revealed that the amount Hein Htet squandered equaled the annual earnings of his parents.

2. Let’s discuss.
   1. How do drug addicts try to get money?
   2. How much money do you think Hein Htet squandered on drugs?
   3. How much money do you think drug addicts have to spend at a time?
   4. For what purpose could that money be used beneficially?

Each group will present its findings to the class and the teacher should recapitulate the outcome of the discussion with the whole class again.
3. Then the teacher should continue and explain that drug users need more and more money as their addiction grows. Personal income cannot support this addiction so that many drug users turn to through theft or robbery, even of the family, so that the parents and others in the family are left in ruin.

Hein Htet was a clever and well-behaved student. Being the only son, his parents pampered him.

Hein Htet became addicted to drugs because of bad association.

In want of money for drugs, he sold off his watch and bicycle and lied that they were stolen or lost. His parents were in the dark about what actually happened.

He asked for pocket money more often and wanted more than he usually got.

Later on, his pocket money became insufficient and he went after his mother to her stall to steal money at the slightest opportunity. His mother was not aware of it.

Finally, he went so far as to sell off the things in their house. Only then was he suspected and inquiries revealed that the money Hein Htet squandered almost equaled the income of his parents earned in a year.

**Content Questions**
1. How did Hein Hlet get money for drugs? Why?
2. What are the consequences for his family?
3. Why do you think Hein Hlet’s family did not notice anything was amiss until it was already too late?
4. What do you think Hein Hlet’s family should do after they found out about his drug use?

**Personalization Questions**
1. Have you ever seen anyone exchange household goods for money? In what cases do most people exchange goods for money in this way? (perhaps at a pawn shop when the family has financial difficulty, i.e. to pay off debts).
2. For what other reasons do people pawn goods? (to get money for gambling)
3. How is gambling like using drugs? How is the person affected? (psychologically and economically)
4. Like a gambler, a person who uses drugs is affected both psychologically and economically, but what other effects do you think a drug user must face?
5. Do you think that using drugs is worth the risk of what may happen? Why?
6. If a friend offers you something that he says will make you feel better, what things should you think of first before making a decision to use the drug?
7. What do you think you would say to the friend who is offering you the drugs? Please give an example.
Activity (4)

Objective

The students will be able to analyze how drug dependency increases over time for people who become addicted.

The students will be able to analyze choices in the prevention of drug addiction.

Teaching Aid

Broom handle or meter stick

Teaching/Learning Activities

1. Ask students to recount the effects of using narcotic drugs discussed in Activities (2) and (3). The facts recounted should be recorded on the blackboard.
2. Tell the students that there is a saying, “Smoking is the origin of narcotics,” and ask them if they think it is true and to give reasons for the way they think.
3. Explain to the students that smoking has many harmful effects but that most smokers remain smokers. However, a percentage of smokers may not achieve the effects they desire from smoking, the feeling of euphoria or the “high,” so that they may be more willing to experiment with other drugs in order to attain that high. When using other drugs, the same thing may happen. When the drug is first used, the user may feel euphoria. Later, it becomes more difficult to get the desired effect because the body has adjusted to the substance used. The person must either take larger quantities of the drug, change the way they use the drug (e.g. from taking methamphetamine in table form to injecting methamphetamine), or switch again to a stronger drug.
4. Next ask for two volunteers. Give each volunteer a broom handle or a meter stick.
5. Instruct the two volunteers to place one end of the meter stick on the floor, bend at the waist and take a close look at the upper end of the meter stick.
6. In that position, the volunteers must spin around 3 or 4 times. After spinning ask them how they feel. (Some students may become very dizzy so ask other students to “spot” them so that they do not fall into desks or chairs).
7. Ask the volunteers to wait a few moments until their dizziness clears and then ask them to spin around the broom handle the same number of times again. Did they feel as dizzy as the first time? Most often they will not feel as dizzy or some students may not feel dizzy at all.
8. Explain that the reduction in dizziness is because the body has adjusted to the situation. If someone takes drugs, their body will become adjusted to the drug so that the person will have to take more and more of the drug, change the way they use the drug, or take a stronger drug in order to get the desired effect or euphoria, but at higher cost to the person’s health, relationships, economy, etc.

Content Questions (to the volunteers)

1. How did you feel after spinning around 3-4 times the first time? Do you think feeling this way could have an effect on the decisions you make? How?
2. Were you able to be in control of your motor skills while you were dizzy? Why?
3. How did you feel after spinning around the same number of times a second time? Why do you think the feeling was not the same as the first time?
4. Did you have more control over your motor skills the second time? Why?
5. How do you think this activity relates to drug use?

**Personalization Questions**

1. Have you ever noticed the number of cigarettes a person smokes? When did that person smoke more cigarettes, when they first started smoking or now? Why do you think they smoke more cigarettes now?
2. Have you ever noticed that a person who has many years of experience drinking alcohol can drink a lot more than a person who just started drinking? Why do you think this is so?
3. If a person uses drugs over time, the desired effect from the same amount of drug over time becomes reduced because the body adjusts to the drug. If the drug user still desires the same effect, what do you think they would have to do? [take more of the drug, change to a more effective use of the drug, or change to a stronger drug]
4. Do you think this causes the drug user to become dependent on drug use? Why?
5. If a person takes a larger amount of drug, changes to a more effective way of using the drug or changes to a stronger drug, do you think the effect of using drugs will increase or decrease? Why? Will it become easier or more difficult for a person to stop using drugs? Why?
6. What would you say to a friend who is considering using drugs? Why? What do you think would be important information for that person to hear? Why?
7. What do you think are some ways to protect yourself from drug dependency and the effects of drug use? What are some of the advantages of not getting involved with drugs in the first place?

**Teacher Notes:**
The activity may be varied slightly to put more emphasis on the effect of drug use on motor skills. Ask for one group of 5 volunteers to stand in a straight line. Give the first person in the line the broom handle/meter stick. The teacher will instruct each person to spin around the broom handle, 2 times, one person at a time. The teacher will also give the stunts a task to complete after they have completed the assigned number of spins. [Tasks: Walk in a straight line and sign his/her name on a piece of paper at the other end of the room; walk in a straight line and alternate touching their nose with their right and left index fingers; hope on one leg to the other end of the room and sign their name; walk through an obstacle course of desks and chairs; etc.] The second person will spin 3 times, the third person 4 times, etc. (for the higher number of spins, the teacher should ask some of the other students to help “spot” the person spinning in case they become very dizzy and begin to fall.) After each of the volunteers has taken a turn, interview each person about their feelings after spinning around the broom handle and their ability to perform the simple tasks. The teacher should explain in more detail that the dizzy feeling that the participants get is similar to the effect of alcohol and using narcotic drugs. These substances directly effect our motor skills but can also affect our ability to think clearly and rationally. The number of spins may reflect the amount of alcohol consumed or the progression of addiction based on the frequency of taking drugs.

**Linkage Questions**

1. How can narcotic drug use affect a person’s nutrition (and thereby personal growth and development)?
2. How can narcotic drug use affect a person’s mental health? Why?
3. What diseases can you be at greater risk of getting if you use drugs? Why?
4. Why are users of drugs of any kind at greater risk of HIV and STD infection? Please explain.
5. How will narcotic drug use affect our decisions concerning personal safety and prevention of pregnancy, HIV or other infections?
6. How can a woman’s pregnancy and the unborn child be affected by drug use?

Assessment

Myths and Facts about Drugs

Objectives
The students will analyze the things they have learned about drugs from this lesson and apply this knowledge to what they have heard.

Teaching Aid
“Myth and Fact Statements” and information/answer key for myth and fact statements.

Teaching/Learning Activities
1. Explain that this activity will test participants’ knowledge about drugs and their effects on health from this lesson and apply it to what they may have previously believed about drugs. Go over the following directions:
   - Divide the students into two or more. These teams will compete to see which knows the most accurate information about drugs. Teams get a point for each correct answer.
   - Individual team members will take turns drawing “myth or fact” statements about drug use from a container or bag. Come the statements are true and others are just myths.
   - After reading a statement, the team member should consult with the entire team on the best answer. There is a time limit to answer.
2. Have participants form teams on opposite sides of the room and come up with team names.
3. After teams are named, have a member from one team draw a statement, read it to the team and confer for an answer. If the answer is correct, give the team a point. Additional information about why the statement is a myth or a fact gets an additional point. If the team cannot give the reason for their answer, another team can provide the answer and get a point.
4. When the teams do not know the correct answer, provide additional information from the Myth and Facts about Drugs information/answer key.
5. Ask members of the other team to draw statements, and repeat the process. Alternate statements until every participant has had a turn. Keep the activity moving; do not allow too much time for answers (30-60 seconds). Do encourage discussion about the statements.
Myth and Fact Statements

1. You cannot become addicted to alcohol; it is not a drug.
   
   **Myth.** Alcohol is a drug, as is any substance that affects the mind or body.

2. More youth use alcohol and other addictive substances.
   
   **Fact.** Alcohol is the most frequently used substance among teenagers. In many countries in Southeast Asia, approximately 50% of males and 20% of females begin drinking before 20 years of age.

3. Driving after using marijuana is much safer than driving after drinking.
   
   **Myth.** Like alcohol, marijuana affects motor coordination, slows reflexes and affects perception (the way we see and interpret events around us). Any of these changes increases the likelihood of an accident while driving.

4. Alcohol affects some people more than others.
   
   **Fact.** Factors that influence how alcohol affects the individual include: body weight, amount of alcohol consumed, the presence of other drugs in the system, the general health of the individual at the time and how recently the person ate.

5. Many adults addicted to dangerous drugs feel that smoking marijuana or using other drugs was the first step to their addiction.
   
   **Fact.** Usually people who become addicted to strong drugs start with drug that they feel that they can control, like marijuana or amphetamines.

6. If you use non-IV drugs you will not be at risk of HIV infection.
   
   **Myth.** Drinking alcohol or using other drugs can inhibit your ability to use condoms correctly or they may make us forget to use condoms at all.

7. Drugs help people handle their problems.

8. Marijuana is not harmful.

9. Smoking cigarettes every now and then is not harmful.

10. Heroin is addictive.

11. Alcohol becomes a problem only after years of use.

12. Taking amphetamines or methamphetamines only once is not addictive.
Myth. Drugs help people forget about their problems or reduce the pain caused by problems. The problems do not go away; however, they often get worse.

8. Marijuana is not harmful.

Myth. Although research is ongoing, many experts believe that long-term use of marijuana is potentially dangerous and may lead to a decrease in motivation, memory loss, and damage to coordination, impaired judgement, damage to the reproductive system and throat and lung irritation.

9. Smoking cigarettes every now and then is not harmful.

Myth. Addiction to nicotine is quick. People who smoke for any period of time have a greater risk of lung cancer and other lung diseases, cancer of the tongue and throat and heart diseases.

10. Heroin is addictive.

Fact. A person can be addicted to heroin easily and creates both a physical and psychological dependence.

11. Alcohol becomes a problem only after years of use.

Myth. When a person takes a drink, alcohol immediately slows reaction time, affects balance and decreases coordination.

12. Taking amphetamines or methamphetamines only once is not addictive.

Myth. A person can become addicted after only one use.

Follow-up Activity
Have the students work in small groups. Have each group list all of the sources of information and activities related to drug abuse prevention that they have seen on TV, at the movies, in newspapers, magazines, cartoons, or on the radio. After the groups have made their lists, they students should discuss and answer the following questions:

- Who do they think were the target audience(s) of the messages?
- Were any of the messages targeting young people? Which ones?
- Which messages do they think is the most effective method for reaching young people in your community? Why?
- What do you think are the key messages for young people? Why?
- What do you think is the best way to give these messages to young people? Why?
- If you were to design a program to give drug prevention messages to young people, what would you do? Please explain in detail.

Have each group present its public service messages to the other groups.
Let’s Decide to Study Regularly

Fifth Standard

Teaching time: (1) class period

_Lifeskills Competencies – General_

At the end of this lesson, the students should be able to demonstrate skills in the following areas:

- **Problem Solving**
  The student will be able to clearly identify problems and their causes.

- **Creative Thinking**
  The students will be able to identify at least 3 possible solutions to a problem.

- **Critical Thinking**
  The students will be able to anticipate the consequences of the problem for self, family, and community.
  The students will be able to assess the advantages and disadvantages of each possible solution.

- **Decision Making**
  The students will be able to identify the best possible solution for him/her based on personal ability and living situation.

- **Communication**
  The students will be able to clearly and directly state opinions and give good reason.
  The students will be able to ask for help and advice, and seek information when needed.

- **Self Awareness**
  The students will be able to identify realistic goals and expectations based on personal ability and living situation.

- **Interpersonal Relationships**
  The students are able to identify the benefits and limitations of living together in society.

- **Empathy**
  The students will be able to recognize the needs of others, provide support and/or compromise.

- **Coping with Stress and Emotions**
  The students will be able to distinguish between rational thinking and emotional thinking.

There are two ways to study. One is to study your lessons regularly from the beginning of the school term and the other is to cram when the final examination draws near. The advantages of studying the lessons regularly from the beginning of the year and the disadvantages of cramming when the examination is near have to be borne in mind and the decision should be made to reject the temptation to rely on cramming rather than study regularly.

**Activity (1)**

**Objective**

The students will be able to analyze the advantages and disadvantages of studying regularly from the beginning of the term or when the examination draws near.

**Teaching Aid**
Teaching/Learning Activities
1. Let the students form into small groups, each consisting of 5 to 8 pupils and ask them to discuss the advantages of studying regularly from the beginning of the year and the disadvantages of studying with interest only when the examination is near. Ask the group leaders to record the advantages and disadvantages separately.
2. Let each group select a representative to present the recorded information to the whole class.
3. The teacher should record the information presented by each group in the form of a table, as shown below, and make an overall appraisal.

<table>
<thead>
<tr>
<th>Advantages of studying regularly</th>
<th>Disadvantages of studying regularly</th>
</tr>
</thead>
<tbody>
<tr>
<td>All the lessons can be digested and memorized</td>
<td>Sometimes cannot remember all of the material at examination time.</td>
</tr>
<tr>
<td>No need to worry about the examination because all lessons have been digested.</td>
<td>Have many household responsibilities that make it difficult to study regularly.</td>
</tr>
<tr>
<td>Can answer well in the examination.</td>
<td></td>
</tr>
<tr>
<td>Sure to pass the examination.</td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Advantages of delaying studying until the examination is near</th>
<th>Disadvantages of delaying studying until the examination is near</th>
</tr>
</thead>
<tbody>
<tr>
<td>Can spend time during the term doing other activities.</td>
<td>Adversely affects health.</td>
</tr>
<tr>
<td></td>
<td>Cannot memorize all the lessons.</td>
</tr>
<tr>
<td></td>
<td>Need to worry lest the lessons memorized might not be asked in the examination.</td>
</tr>
<tr>
<td></td>
<td>Cannot answer if the lessons memorized are not asked in the examination.</td>
</tr>
<tr>
<td></td>
<td>Uncertain to pass the examination.</td>
</tr>
</tbody>
</table>

Content Questions
1. Which method of study do students normally use? Why?
2. What are the advantages and disadvantages of studying regularly?
3. What are the advantages and disadvantages of delaying studying until the examination is near?
4. Which methods of study has more advantages and less disadvantages?
5. Based on this analysis, which method of study is the better method that will help students get good grades?

Personalization Questions
1. Which method of study do you normally use? How would you evaluate the outcome of using this method?
2. Have you always studied the same way or have you changed your study habits? Why?
3. Why do you think many students delay studying until just before the examination period?
4. What are some ways that you can balance your studying with your family responsibilities? Do you think you would be able to apply these methods? Why or why not?
5. Do you think it is possible for you to change your studying habits? How do you think you will be able to change? What type of motivation would you need to change?

Activity (2)

Objective

The students will be able to make appropriate decisions about their study habits.

Teaching Aid

Flow Chart

Teaching/Learning Activities

1. The teacher should instruct two students to rehearse the following role-play and then to act out their respective roles before the class.

   Student (1): (Seated at the table, reading)
   Student (2): It’s just the beginning of the school term, and you’re studying so hard!
   Student (1): I want to make sure I understand the lessons.
   Student (2): Come on! You can study when the exam’s near. Right now, let’s play the guitar.
   Student (1): Well, it’s good to play the guitar sometimes. But I don’t think it’s a good idea to cram when the exam is near. You might become sick and you can’t go through all the lessons well. If what you’ve learned by heart is not on the test paper, you probably won’t pass.
   Student (2): O.K. then, I gotta go. I’ll be around. I’ll study these when the exam approaches.
   Student (1): Sorry I can’t go with you! I’ve made up my mind to study regularly from the beginning of the year, that’s why.

2. After the role-play, the teacher should ask his pupils for their opinion on the decision of the two friends — who has the better method of study, and why.

3. Then the teacher should explain some of the techniques for making good decisions and make a stage-by-stage evaluation, using the examples of the two students.

<table>
<thead>
<tr>
<th>Identify the problem.</th>
</tr>
</thead>
<tbody>
<tr>
<td>Distinguish between what is feasible and what is not.</td>
</tr>
<tr>
<td>Find out the different methods.</td>
</tr>
<tr>
<td>Stand firm against temptations.</td>
</tr>
<tr>
<td>Make timely decisions.</td>
</tr>
</tbody>
</table>
Content Questions
1. How do students view students who study hard? Why? Do you think this is a fair assessment of the student’s character?
2. Why do you think Student 2 wants to wait until just before the exam to study?
3. If Student 2 needs help in studying for the exam at the last minute, who do you think he will ask to help him? If he does ask, do you think Student 1 should help him? Why or why not?
4. How easy or difficult do you think it was for Student 1 to come to his decision? Please explain.
5. What is the difference between “learning lessons well” (developing knowledge) and “learning by heart”?

Personalization Questions
1. Which character are your study habits most similar to? Why? Please explain.
2. Do you think it would be difficult to refuse a friend if he/she asked you to do something other than study? Why?
3. How would you refuse a friend’s invitations to do activities other than studying? Please give examples. Do you think this will be effective?
4. Does having good study habits mean that you can have no fun? Why or why not? Please explain. What would you need to do in order balance you study time with time for other activities?
5. How do you think students can help support each other develop good study habits?

Activity (3)

Objective
The students will be able to analyze the important messages in the poem, “The Way to Study.”

Teaching aid
Chart showing the poem: ‘The Way to Study’

Teaching/Learning Activity
1. The teacher should lead the students in reciting the poem ‘The way to study’ with gestures, ‘Than-bauk’ style. Let the whole class sing along, in groups and individually.

<table>
<thead>
<tr>
<th>The Way to Study</th>
</tr>
</thead>
<tbody>
<tr>
<td>The decision to be regular</td>
</tr>
<tr>
<td>And studious</td>
</tr>
<tr>
<td>Has to be continuous.</td>
</tr>
<tr>
<td>Avoid studying all night long</td>
</tr>
<tr>
<td>When the exam comes along</td>
</tr>
<tr>
<td>And don’t you forget</td>
</tr>
<tr>
<td>To go early to bed</td>
</tr>
<tr>
<td>When the exam’s just ahead.</td>
</tr>
<tr>
<td>Maung Kyay Zuu</td>
</tr>
</tbody>
</table>
Content Questions
1. If a person makes a decision to be studious, why should they stick to their decision? Please explain.
2. If a student does not have regular study habits, what may be the consequence?
3. Why does the poem recommend to avoid studying all night long? Is this good advice? Why?
4. What are the advantages of going to bed early before an exam? Please explain.

Personalization Questions
1. Do you usually stay up late reviewing your lessons before an exam or do you get up early to review the lessons? Why? Which method do you think is more helpful? Why?
2. Have you ever stayed up very late or all night to study for an exam? How did you feel during the exam? Could you remember all of the information you needed to? Do you think this method of study was effective? Please explain.
3. Are you consistent in your study habits or do you change the time you study often? Why?
4. After completing this lesson, do you think you will try to change your study habits? How?
5. How do you think you can motivate yourself to study regularly? Please explain.

Assessment
The student will write a personal plan or “contract” for studying, stating how they plan to study during the term and what their personal goals for studying are. The plan should be signed by the teacher, student, and one of the student’s parents.

Follow-up Activities
1. Have the students develop a chart to monitor their study habits. Each morning, the students must record whether they were able to study the day before and what they studied. The students should quiz each other from time to time to make sure that they are recording their study habits honestly.
2. To motivate the students and support the students in changing their study habits, encourage the students to form study groups among the students living in the same neighborhood. Each of these groups should make a plan for when and where they will meet and how often. These plans should be given to the teacher to keep on record.
Ask Before Doing

Fifth Standard (507)       Teaching time: (1) class period

Lifeskills Competencies – General

At the end of this lesson, the students should be able to demonstrate skills in the following areas:

✔ **Problem Solving**
  The student will be able to clearly identify problems and their causes.

✔ **Creative Thinking**
  The students will be able to identify at least 3 possible solutions to a problem.

✔ **Critical Thinking**
  The students will be able to anticpate the consequences of the problem for self, family, and community.
  The students will be able to assess the advantages and disadvantages of each possible solution.

✔ **Decision Making**
  The students will be able to identify the best possible solution for him/her based on personal ability and living situation.

✔ **Communication**
  The students will be able to clearly and directly state opinions and give good reason.
  The students will be able to ask for help and advice, and seek information when needed.

✔ **Self Awareness**
  The students will be able to identify realistic goals and expectations based on personal ability and living situation.

✔ **Interpersonal Relationships**
  The students are able to identify the benefits and limitations of living together in society.

✔ **Empathy**
  The students will be able to recognize the needs of others, provide support and/or compromise.

✔ **Coping with Stress and Emotions**
  The students will be able to distinguish between rational thinking and emotional thinking.

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You need to have a clear understanding of a task before doing it. It is more effective to do something with a clear understanding rather than to grope in the dark without knowing how to go about it. You should ask questions, if necessary, before you start to do something.

For example, if you are not clear about the assignment to draw 3 different kinds of geometric diagrams, you need to realize that you should ask the teacher before you do your exercise if you are not sure what to do.

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**Activity (1)**

**Objective**

The students will be able to identify the benefits of asking questions about things with which they are unfamiliar.
Teaching aid

Teaching/Learning Activities

1. Divide the class into four groups and ask each group to select a representative. Then form a new group comprising the group representatives.

2. Out of the two tasks mentioned below, assign one task to each group and ask them to discuss and prepare a questionnaire to have a comprehensive and clear understanding of the information related to the task.
   (a) To plant trees for the greening of the whole school.
   (b) To go on a study tour to enrich general knowledge.

3. While the groups are discussing, the special group formed with the representatives should coordinate and discuss with the class teacher the answers to the following questions.

   **Plant Trees**
   1. When is the best time of year to plant trees?
   2. What date and time will we plant the trees
   3. Who will participate?
   4. What trees will be planted?
   5. Where will we plant the trees?
   6. From where the saplings will be obtained?
   7. How many trees are to be planted?
   8. What is the cost?
   9. What is the purpose, what is the reason for planting the trees?
   10. Who will continue to take responsibility for the trees?

   **Study tour**
   1. Where to go to / What do we want to learn?
   2. What date, what time to set out?
   3. How long will the journey take?
   4. Who will be travelling?
   5. What is the mode of transport?
   6. What are the things to study?
   7. How much it will cost?
   8. What permissions need to be obtained?
   9. What things and utensils to take along?
   10. What is the reason for the trip?

4. Ask the group representatives to return to their respective groups and answer all the questions the groups ask about the assigned task.

5. Then, ask him once again to present the information collected by each group.
6. The teacher should make an overall review and explain that it is necessary to have a clear understanding of a task before undertaking to carry it out and to be able to ask comprehensive questions.

**Content Questions**
1. If a person does not know when the time to plant trees is, but you went ahead to plant the trees anyway, what do you think the consequences might be?
2. If the trees are planted in the wrong location because no one asked permission, what may happen?
3. If all the details of a study tour have been planned but no one has asked for the proper permission to conduct the study tour, what may happen?
4. If all the appropriate questions have been asked and all the permissions granted to conduct a study tour, what do you think the results of the study tour will be? Why?
5. Which is better one, doing a task without asking and with asking? Why?
6. Are there any times when we should not ask questions? When? Why?

**Personalization Questions**
1. When you have a task to do but you do not know how to do it, did you do it without asking? If so, what consequences did you get? Tell your experience to the class.
2. Have your parents ever been angry with you because you have done something without asking permission first? Why do you think they were angry?
3. Do you think that you are able to do something effectively without having a clear understanding of what you are doing? Why? Give examples.
4. What do you see are the immediate benefits of asking questions?
5. If you need to do something, but you are not quite sure how to do it and there is no one to ask, what can you do? Please explain.

**Linkage Questions**
1. If a person is sick and is given some medicine by the doctor but cannot remember the instructions for taking the medication, what should this person do? Why? What could be the consequences if they do not ask?
2. If a person gives a friend or another person advice before knowing what their problem really is what could be the consequences? How could they find out what the problem is before giving any advice?
3. If you see that your mother has made some special food and it is sitting on the table when you come home from school, should you go ahead and eat it? Why or why not?
4. If a friend offers you some pills and says that they will make you feel good, would you take them? Why or why not?

**Assessment**
It is important for the students to develop important information seeking skills. Therefore, the students must participate in an information seeking exercise in their own community. Have the students collect information (alone or in small groups) from local authorities, community leaders, shopkeepers, organizations (Myanmar Red Cross, Myanmar Maternal Child Welfare
Association), and others. [The teacher may have to talk with representatives of the organizations / community first or ask the assistance from the PTA.] The students must decide what would be interesting for them to know and develop appropriate interview questions that will allow them to get the information they need. They must determine how they will get the interview with the person/organization and whom they must ask to help them make an appointment.

After the students have conducted their interviews. They should summarize the questions and information obtained and post it on the wall of the classroom for others to read.

**Follow-up activity**
Have the students keep a list in their journal of all of the times they have asked for additional information during a week’s time. After they have collected the items on they list, they should analyze what would be the advantages of asking for more information. Are their any disadvantages? They should also analyze what the consequences would be if they didn’t ask.

**Teacher’s Note**

**Interview Guidelines**
- Be 5 to 10 minutes early. Do not be late.
- Dress neatly and appropriately.
- When you meet the person you are going to interview, use traditional greeting or shake hands firmly, smile, and look at her or his eyes. Be friendly but not familiar. Ask the interviewer how he or she would like to be addressed.
- Do not do anything distracting like chew gum, drum your fingers, crack your knuckles or scratch your head. Remain alert, listen carefully to what the interviewer says and be positive and confident.
- Be sure to tell the person you are going to interview why you are there and the name of your school.
- Have a pen and paper ready but do not spend all of your time writing during the interview. Write only brief notes or words that will help you remember. After the interview is finished, you can spend some time writing the details.
- Do not interrupt the person you are interviewing when she or he is talking. Do not use profanity, slang or street language; make sure the person you are interviewing knows what you are saying.
- When it is time to leave at the end of the interview, repeat what you did at the beginning: use the traditional greeting or shake the person’s hand, smile and look at her or his eyes and say, "Thank you for your time."
- When you get home, write the person you interviewed a thank you note. Be sure to write legibly, proofread the letter and mail or send it immediately.
### Listening to others

1. Look at their person who is talking
2. Sit or stand quietly: avoid fidgeting, yawning, or giggling.
3. Wait until the person is through speaking before you speak.
4. Show that you understand (“OK,” “Thanks,” or “I see”)

### Appropriate Word Choice

1. Decide what thought you want to put into word and then say them.
2. Look at the situation and the people around you.
3. Know the meanings of the words you are about to say.
4. Refrain from using words that will be offensive to people around you or that they will not understand.
5. Avoid using slang, profanity, or words that could have a sexual meaning.
School Sanitation

Fifth Standard (508)           Teaching time: (2) class periods

*Lifskills Competencies – General*

At the end of this lesson, the students should be able to demonstrate skills in the following areas:

- **Problem Solving**
  - The student will be able to clearly identify problems and their causes.

- **Creative Thinking**
  - The students will be able to identify at least 3 possible solutions to a problem.

- **Critical Thinking**
  - The students will be able to anticipate the consequences of the problem for self, family, and community.
  - The students will be able to assess the advantages and disadvantages of each possible solution.

- **Decision Making**
  - The students will be able to identify the best possible solution for him/her based on personal ability and living situation

- **Communication**
  - The students will be able to clearly and directly state opinions and give good reason.
  - The students will be able to ask for help and advice, and seek information when needed.

- **Self Awareness**
  - The students will be able to identify realistic goals and expectations based on personal ability and living situation.

- **Interpersonal Relationships**
  - The students are able to identify the benefits and limitations of living together in society.

- **Empathy**
  - The students will be able to recognize the needs of others, provide support and/or compromise.

- **Coping with Stress and Emotions**
  - The students will be able to distinguish between rational thinking and emotional thinking.

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It is difficult for an individual to fully carry out a certain task single handedly. While individual participation is necessary, it is also necessary to motivate the group to get involved and work together, only then will we be able to complete the task.

The students have to discuss and coordinate the arrangements for the sanitation of their own school before they implement them.

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**Activity (1)**

**Objective**

- The students will be able to analyze the importance of cooperation in completing certain tasks.
- The students will be able to apply the decision-making/problem-solving process to cooperative efforts.
Teaching aid

Old newspapers, glue, scissors

Teaching/ Learning Activities

1. Explain that the students have already learned to use the decision-making/problem-solving process for personal issues but that the process may also be used for cooperative efforts as well.
2. Ask the students to summarize the steps to decision-making/problem-solving. The teacher will write the steps given on the board and will then summarize once again:
   (a) Determine a task to be carried out or a problem to solve.
   (b) Think together and brainstorm the activities or solutions.
   (c) Choose the best possible method or methods.
   (d) To put the chosen method to work, assign duties and divide the responsibility, specifying by whom, when and where a certain task is to be carried out.
   (e) Carry out the task as arranged.
   (f) Review the performance on completion of the task.
3. Form the students into small groups, give each group some old newspapers and glue and instruct them to build paper towers. Ask them to carry out the assignment only after everyone has thought about it and discussed it thoroughly according to the steps stated above. Also, set a time limit.
4. When the time is up, display at the front of the class the towers constructed by each group. Have a general discussion and evaluation focusing on whether or not the assignment has been duly completed and whether or not the results are good. At the same time, an appraisal should be made, and also check if the groups have followed the steps, through questions and discussion.
5. Explain that group thinking and group work, division of responsibility and cooperation are needed to accomplish certain tasks.

Content Questions
1. How were the working environment and the materials? Did you have everything you needed to build the tower?
2. Did members of the group have different ideas, attitudes and or reactions to building the tower? Please explain.
3. How were responsibilities divided among your group?
4. What was the decision making process for building a tower in your group?
5. What were the problems and obstacles your group encountered in building the tower?
6. If you were to build another tower a second time, would you change anything?

Personalization Questions
1. How did you feel about working in your group?
2. Was your participation satisfactory? Were you able to participate to your fullest potential?
3. Did you did not get to participate to the extent you wanted, what are some ways that you could think of now to participate more fully?
4. Did everyone in the group participate equally (although in different roles)?
5. What are some of the advantages and disadvantages to working in a group?
6. Do you think you would be able to build the tower on your own in the amount of time given? Would it have been as sturdy as the one constructed by your group?
7. If one or members of the group had not participated, how would this affect the other members of the group and the building of the tower?
8. What are some ways that your could encourage others to participate more fully?

Activity (2)

Objective

The students will be able to develop a plan for school sanitation and assign responsibilities in carrying out the plan.

Teaching aid

Teaching/ Learning Activities

1. Divide the students into small groups and instruct them to draw up a programme to carry out sanitation work for the whole school. Instruct them to follow the first 4 steps out of the 6 mentioned in Activity (1) in relation to school sanitation:
   (a) Determine a task to be carried out or problems related to school sanitation that need to be solved.
   (b) Think together and brainstorm the activities or solutions to sanitation problems in the school.
   (c) Choose the best possible method or methods for solving the sanitation problem.
   (d) To put the chosen method to work, assign duties and divide the responsibility, specifying by whom, when and where a certain task is to be carried out.
   (e) Carry out the tasks and responsibilities as arranged.
   (f) Review the performance on completion of the sanitation plan developed by the class.

2. Record the tasks by filling them in the table below;

<table>
<thead>
<tr>
<th>Task</th>
<th>Persons assigned</th>
<th>Time</th>
<th>Place</th>
<th>Materials or assistance required</th>
</tr>
</thead>
</table>

3. Each group will present its sanitation plan to the entire class.
4. The teacher and the whole class should identify the most feasible plans of action and discuss how to implement them.

Content Questions

1. Is it necessary to implement school sanitation? Why?
2. Explain the set of tasks that would need to be done in order to better the sanitation of the school?
3. How are the tasks divided among the students for implementation? Why is it necessary to divide the work?
4. Is success achievable without everyone’s participation?
5. Give reasons why cooperation and participation is necessary for successful implementation.

**Personalization Questions**
1. How can you become involved in school sanitation? Do you think it is necessary to become involved? Why? What are the benefits to you?
2. What can you do on an individual level to improve the sanitation of the school? How will you do this?
3. Is clean and safe water available in your school? How will you carry out your plan of clean and safe water?
4. Does your school have any corner for dispensing refuse? How do you properly dispose of rubbish?
5. Does the plastic litter damage the school environment? Describe the negative consequences of it?
6. How is the plan for toilet sanitation in your school arranged? Do the students follow the plan well? How can you get them to see the importance of toilet sanitation and to participate in the program without complaint? Please explain.
7. How does your family dispose of refuse? Is there a place for disposal in your residential area? How can you help your family make a plan for the proper disposal of refuse?

**Linkage Questions**
1. What types of diseases can occur if appropriate sanitation is not practiced? How are these diseases transmitted to people? How can they be prevented?
2. How can appropriate sanitation at school help prevent mosquito-borne diseases?
3. What do you think are the benefits of planting trees in the school grounds? How will you maintain the trees? Share your views, what will you do?
4. Is there any relationship between sanitation and HIV/AIDS? Why or why not?

**Assessment**
Have the students develop a sanitation plan for their home environment. They must discuss the plan with family members and determine who will take responsibility for different parts of the plan. The students will submit the finalized plan, signed by all family members, to the teacher for review. The teacher may ask some of the students to present their plans to the entire class.

**Follow-up Activities**
1. Have representatives from the classroom meet with representatives from other classrooms to discuss possible plans (from Activity 2) for a student initiated sanitation plan at the school. The students should organize a committee to monitor the program.
2. Have the students interview community leaders or about sanitation programs in their community? Do they exist? Are they needed? How can students become more involved?
Health Related Emotions and Behaviour

Fifth Standard (509)       Teaching time: (1) class period

Lifeskills Competencies – Mental Health

At the end of this lesson, the students should be able to demonstrate skills in the following areas:

- **Problem Solving**
  The students will be able to identify barriers to good positive mental health.

- **Creative Thinking**
  The students will be able to identify appropriate ways of dealing with their emotions and stress.
  The students will be able to identify appropriate way of building and maintaining positive self-esteem.

- **Critical Thinking**
  The students will be able to assess the advantages and disadvantages of rational thinking versus emotional thinking.
  The students will be able to analyze the behaviors that may either build and support positive self-esteem or contribute to low self-esteem.

- **Decision Making**
  The students will be able to determine realistic goals and expectations for themselves and the appropriate method for reaching those goals and expectations based on personal abilities and living situation.

- **Communication**
  The students will be able to assert personal wants and needs.
  The students will be able to ask for help and counseling from others and will be able to provide help and counseling to others when needed.
  The students will be able to express their emotions and stress in a positive manner.

- **Self Awareness**
  The students will be able to determine realistic goals and expectations for themselves based on personal abilities and living situation.

- **Interpersonal Relationships**
  The students will be able to identify trusted individuals from whom they may seek help, counseling or correct information, and from they will receive appropriate feedback.

- **Empathy**
  The students will be able to recognize the needs and feelings of others and be able to respond to these needs and feelings in an appropriate manner.

- **Coping with Stress and Emotions**
  The students will be able to identify effective ways of dealing with their emotions and stress.

Whenever you and your friends have a stomachache, a headache, a toothache, an earache, an illness, an injury or a disease, you put on a wry face and become sorrowful. You express those feelings through behaviours such as weeping or crying. You need to be able to control your emotions.

**Activity (1)**

**Objective**
The students will be able to analyze the impact of sorrow and unhappiness caused by ill health, injury or disease and how it is reflected in a person’s behaviour.

Teaching aid

Picture diagrams

Teaching / Learning Activities

1. Instruct the students to form into small groups, let them study the pictorial charts and then ask them to discuss and fill in the following information.

<table>
<thead>
<tr>
<th>Prevailing condition</th>
<th>Feeling</th>
<th>Behaviour</th>
</tr>
</thead>
</table>

Ask the students to discuss what condition will give rise to which feeling and bring about what sort of behaviour (Have the students demonstrate gestures and facial expressions).

2. Report the results of the discussion to the whole class. The teacher should record the presentations of the respective group in the form of the above table on the blackboard.

3. Then, the teacher should explain that the feelings of sorrow and unhappiness one gets from being ill, being injured or being stricken with disease can be observed from one’s behaviours such as a wry face, weeping or crying.

Content Questions

1. When you look at the pictures, how do you know what the person is feeling?
2. Can you be sure that your assumptions about their feelings are correct? Why or why not?
3. What are the different emotional responses that allow us to know what a person is feeling? Please list them.
4. If a person is trying to help someone who is not feeling well, how will that person be affected by sick person’s emotional and behavioral response? Why or why not? Should they take the response personally?
5. When young people feel sad, angry or depressed do they want to talk to others or do they want to be alone? Why?
Personalization Questions
1. Is it easy for you to tell when someone is not feeling well or is upset or angry by their appearance? How?
2. How do you know that your friend is not feeling well? What would you do for him/her?
3. How do you know that your friend is in a bad mood (pain/sad/angry) in the classroom? What would you do? What you should not do? Why?
4. Why do some people not want to express their feelings/emotions when they are not feeling well? Do you think this is healthy? Why or why not?
5. Do you think that a person’s emotions and behavior change more quickly, when they are alone or when they are with someone else? Why?

Activity (2)

Objective

The students will be able to identify ways to control emotions and feelings.

Teaching aid

Teaching/ Learning Activities

1. Organize the students into small groups and ask each group to discuss the possible emotional feelings and the behaviours to be observed in connection with each ailment.
2. Record the discussion results of each group on the blackboard in the form of the following table and discuss with the class, adding details.

<table>
<thead>
<tr>
<th>Ailment</th>
<th>Feeling</th>
<th>Observable behaviour</th>
</tr>
</thead>
<tbody>
<tr>
<td>Toothache</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Stomachache</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Illness</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Injury</td>
<td></td>
<td></td>
</tr>
<tr>
<td>e.g. A cut on the finger sore</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
3. Then, after looking at the observable behaviour, explain that rather than responding to one’s emotional feelings by crying, weeping, being boisterous, or suffering without complaint, one should tell adults about one’s ailment or ask one’s friends for help.

Content Questions
1. How do emotions signal how we really feel? Why?
2. How do young people express what and how they feel when they are not well? Give with examples?
3. How do young people usually express themselves when they are sad or angry? Why?
4. When young people feel sad, angry or depressed is it a good idea to talk to others? Why or why not? Please explain.
5. What kind of emotions and behaviors do young people should avoid when they are in pain, sad or angry? Why?

**Personalization Questions**
1. When you are hurt how do you feel? What do you do? Do you think your friends express themselves in the same way? Why or why not?
2. How do you think you express yourself when you are not feeling well, angry or upset? How do you know?
3. When you try to help someone who is not feeling well and they respond to you in a negative way should you be upset? Why or why not?
4. When your parents do not give what you want or you are disappointed in some other way, how can you react positively? How will a positive reaction benefit you and those around you? Why?

**Linkage Questions**
1. Is there any relationship between age and the ability to control emotions and stress? Why?
2. How might a lack of control over emotions and stress make us more vulnerable to general communicable diseases?
3. How might a lack of control over emotions and stress make us more vulnerable to drug use or HIV and STD infection?
4. Is there a relationship between emotional control and our relationships with others? How?

**Assessment Questions**
1. By looking at the behavior can you tell how that person feel? Why?
2. If your emotions are not control what are the consequences? Why?

**Follow-up activity**
Ask the students to interview family members who have suffered from ailments in the past two weeks to a month about what their emotional feelings were and how they think they expressed those feelings through their behaviours. The answers of the family members can be compared to the observations of the family members while they were sick. The students should discuss and summarize their findings in class, in small groups. The groups will present their findings to the class. After all groups have presented, the class should discuss any variations in the findings.
Teacher Notes:
Formulas for Controlling Emotions

**Controlling Emotions**

1. Learn what situations cause you to lose control or make you angry.
2. Monitor the feeling you have in stressful situations.
3. Instruct yourself to breathe deeply and relax when stressful feelings begin to arise.
4. Reword angry feelings so that they can be expressed in a non-offensive manner to others.
5. Praise yourself for controlling emotional outbursts.

**Coping with Sad Feelings (or Depression)**

1. Identify what situations tend to make you sad.
2. Acknowledge sad feelings when they arise.
3. Report your feelings to a caring adult or peer.
4. Find alternative activities that you enjoy and engage in them. Get outside for fresh air and sunshine.
5. Avoid isolating yourself or withdrawing from friends or relatives.
6. Discuss feelings openly and frankly.

**Dealing with Frustration**

1. Identify frustrated feelings as they arise.
2. Learn the source of frustrated feelings.
3. Breathe deeply and relax when frustrations arise.
4. Discuss frustrations with a caring adult or peer.
5. Find alternative activities that promote feelings of success.

**Expressing Feelings Appropriately**

1. Remain calm and relaxed.
2. Look at the person you are talking to.
3. Describe the feelings you are currently having.
4. Avoid statements of blame and profanity.
5. Take responsibility for feelings you are having.
6. Thank the person for listening.
Counseling
Two types of Counseling

Fifth Standard (510) Teaching time: (2) class periods

Lifeskills Competencies – Mental Health

At the end of this lesson, the students should be able to demonstrate skills in the following areas:

✓ **Problem Solving**
  The students will be able to identify barriers to good positive mental health.

✓ **Creative Thinking**
  The students will be able to identify appropriate ways of dealing with their emotions and stress.
  The students will be able to identify appropriate way of building and maintaining positive self-esteem.

✓ **Critical Thinking**
  The students will be able to assess the advantages and disadvantages of rational thinking versus emotional thinking.
  The students will be able to analyze the behaviors that may either build and support positive self-esteem or contribute to low self-esteem.

✓ **Decision Making**
  The students will be able to determine realistic goals and expectations for themselves and the appropriate method for reaching those goals and expectations based on personal abilities and living situation.

✓ **Communication**
  The students will be able to assert personal wants and needs.
  The students will be able to ask for help and counseling from others and will be able to provide help and counseling to others when needed.
  The students will be able to express their emotions and stress in a positive manner.

✓ **Self Awareness**
  The students will be able to determine realistic goals and expectations for themselves based on personal abilities and living situation.

✓ **Interpersonal Relationships**
  The students will be able to identify trusted individuals from whom they may seek help, counseling or correct information, and from them will receive appropriate feedback.

✓ **Empathy**
  The students will be able to recognize the needs and feelings of others and be able to respond to these needs and feelings in an appropriate manner.

✓ **Coping with Stress and Emotions**
  The students will be able to identify effective ways of dealing with their emotions and stress.

People often meet with various problems. When they come across a problem or difficulty, they are usually angry, very sad, frightened, confused, etc. Whenever this happens the desire to open his/her heart to someone most intimate wells up in the person. In so doing, he/she would be given good advice for solving the problem and be relieved. Thus, he/she would be able to solve the problem easily. This is known as "counseling".

There are two kinds of counseling that are different from each other, especially in the place where counseling occurs and the person who gives counseling.

(1) **Clinic-based counseling**
It is counseling that is provided in a formal session in a hospital, a health centre, or a clinic by a professional, such as a doctor, a social worker, a nurse or a psychologist.

(2) Community-based counseling

It is counseling that is provided in a non-formal atmosphere in a village or urban neighbourhood. It is provided by a community member to another community or family member or a relative.

Activity (1)

Objective

The students will be able to analyze the benefits of counseling.

Teaching aid

Charts depicting events.

Teaching/ Learning Activities

1. Ask the students to study the events illustrated in the charts and to discuss in groups the questions for discussion.

Maung Maung and Maung Cho

Linn Linn and her teacher

Daw Mya May and the monk

(1) Maung Maung was worried about the final examination which he was going to take. He shared his feelings with his most intimate friend, Maung Cho, who encouraged him to boost his morale. Thanks to his friend’s encouragement, he was relieved and felt better and decided to study hard.

(2) Linn Linn always stood first in the Poetry Recitation contest in her school. But now, she was weeping sorrowfully because she did not get any prize in the current Inter-school contest. The class teacher Daw Hla Thi encouraged her by saying that what’s significant is to compete, the outcome is immaterial; that she could get prizes if she continued to try hard. Hence, Linn Linn felt better and made the decision to try harder for the contest in the coming year.

(3) Daw Mya May who was anxious because she received no communication from her son who was working in a far away land. She went to the monastery at the head of the village and told her feelings to the venerable monk, who comforted her with words from the Buddhist teachings to relieve her. Thus, the feeling of anxiety for her son subsided in Daw Mya May and she was again able to go about her everyday chores with ease of mind.
Let’s discuss

(1) In the above events, what kind of persons did the persons concerned meet and speak with?
(2) How did those persons respond?
(3) What benefits did the persons concerned gain from such meetings and conversations?

2. Present the results of group discussions to the class.

3. Continue the discussion, adding the following points:
   When people come across various problems, they usually become angry, very sad, frightened, confused, anxious, etc. At such times, they speak heart-to-heart with someone most intimate and trust-worthy. In so doing, they get relief and good advice which enables them to solve the problem. In the events mentioned above, Maung Maung’s friend Maung Cho, teacher Daw Hla Thi and the venerable monk from the monastery at the head of the village patiently listened to, consoled and encouraged and gave good advice to those who came to consult with them. But they did not directly instruct the persons concerned as to how they should conduct themselves. They just helped them to control their emotional feelings, steady their minds and make their own decisions. This is known as counseling.

Content Questions
1. When do people want to open their heart to someone? Why? What do you call this?
2. What happen to Maung Maung? How did he get relief? Who made decisions for him?
3. Why was Lin Lin weeping sorrowfully? How did she get relief? Who made decisions for her?
4. Why does Daw Mya Mya go to the venerable monk? What did the monk do?
5. Do you think young people at your age can do counseling? Why?
6. What are the factors that the counsellor should avoid? Why?

Personalization Questions
1. Has any of your friends open his/her heart to you? If so why does he/she that? How did you respond?
2. When your friend open his/her heart to you how did you respond? What has happened after your respond?
3. When you have problems or difficulties how do you feel? Who did you approach? Why?
4. Have you ever received counseling (comfort talks) from anyone? How did you feel? What kind of impact does it have on you?

Activity (2)

Objective

The students will be able to assess the process and benefits of two types of counseling.

Teaching aid

Teaching/ Learning Activities

1. In the events of Activity 1, what sort of problems did Maung Maung, Linn Linn and Daw Mya May have that they seek and received counseling. Ask the students to discuss in groups.
2. Based on the discussion results, explain that when people come across a difficult problem they often try to seek counseling in relation to their feelings, that the problems include not only the social problems mentioned above but also health problems. Ask each group to draw up a list of the persons whom one may speak and consult with about his/her feelings when he/she is having a difficult problem related to health.

3. Tell the students to present the list prepared by each group to the class and the teacher should then record them on the blackboard.

4. Classify the persons included in the list thus obtained into two categories, namely, experts and persons from the community. Then, the teacher should explain as follows:

   Regarding counseling related to health, it may be received at the hospital, clinic or health centre from a doctor, health assistant, nurse, social welfare official or psychologist, etc. as well as from one’s most intimate or trustworthy friends, brothers and sisters, parents and relatives, community elder, teacher or monk, etc. in the community. Thus, it can be classified into 2 categories.

<table>
<thead>
<tr>
<th>Clinic-based Counseling</th>
<th>Community-based Counseling</th>
</tr>
</thead>
<tbody>
<tr>
<td>Doctor</td>
<td>Friend</td>
</tr>
<tr>
<td>Health assistant</td>
<td>Brothers and sisters</td>
</tr>
<tr>
<td>Nurse</td>
<td>Parents and relatives</td>
</tr>
<tr>
<td>Psychologist</td>
<td>Community elder</td>
</tr>
<tr>
<td>Social welfare official</td>
<td>Venerable monk</td>
</tr>
<tr>
<td></td>
<td>Teacher</td>
</tr>
</tbody>
</table>

**Content Questions**
1. What is the role of the counselor? Where can you do the counseling?
2. When do people seek for help and advice? Who can give this help and advice? In what situations? Should a person talk to the same person about every problem? Why or why not?
3. When people have social problems from where and from whom do they seek for help and advice? Why would this be an appropriate place to talk? Why would this person be appropriate to talk to?
4. When people have health problems where do they go for help and advice? Why?
5. What benefit can be gained by receiving counseling?

**Personalization Questions**
1. When you have health problem whom do you approach? Your friend (or) your family? Why do you talk to this person?
2. When you feel sorrowful/angry who did you approach most? Why do you talk to this person? What benefit did you received?
3. When your family member is sick who do you talk to for relief? Why? Why do you approach that person?
4. When your friend is sad/angry, how can you help him/her? Why? What would you say to him/her? Please give an example.
Teacher’s Notes

There are two major types of counseling:

2. **Formal or Clinic Based Counseling.** This type of counseling will be found in a clinical setting, i.e. in hospitals, clinics, and public health service centers and the counselors will be either doctors, nurses, social welfare workers, or psychologists.

3. **Non-Formal Counseling.** This type of counseling can take place anywhere, e.g. in the dormitory, under a tree in the garden, under a tree in the factory compound, at a swimming pool, etc. and the counselors are friends, work supervisors, and relatives.

Non-Formal Counseling is the type of counseling we will focus on here in this lesson.

**Non-Formal Counseling**

Non-Formal Counseling * takes place when 2 persons or a group of persons have affinity with each other and talk and listen actively to each other in turn. The person who seeks non-formal counseling will get the following benefits:

1. Reduces symptoms of psychological stress and mood swings, such as anger, fear, excitability, depression, sadness, disappointment, etc. When stress has been reduced the person will be able to manage their problem more easily

2. Helps in the evaluation of the real situation or problem.

3. Help the person see choices related to the problem and be able to make decisions on their own. This makes counseling different from teaching or giving advice to the person.

4. Gives the person willpower so that they are able to make a good decision and encourages them to make decisions on their own in the future.

* For the most part, non-formal counseling will take place between two people (one-on-one).

One person is usually the counselor, while the other is the person seeking counseling. Sometime, however, non-formal counseling can occur in a group setting. Usually, one-on-one interaction gets better results because we are more likely to speak out mind to someone we trust and in a private place.
14 Steps to Non-Formal Counseling.

Have the students brainstorm what they think would be the steps to non-formal counseling. They may not think of all of the steps but that is okay. The teacher may add any missed steps in the discussion.

1. Start conversations by talking about things in general until they center on the problem.
2. Encourage the person seeking non-formal counseling and make themselves comfortable while the person giving non-formal counseling lets them know that they are willing to accept and listen to anything that they have to say.
3. Show that you are interested and committed to what they have to say.
4. Through speech and body language show that you understand, have compassion for and sympathize with what is being said.
5. Explain that non-formal counseling will help reduce their levels of stress.
6. Help state the problem directly. It will help to talk about each problem separately.
7. If the person who is seeking non-formal counseling has any questions we should provide information to them to help them evaluate their own situation or evaluate the problem more thoroughly. If is something we do not know or are not sure of, you should refer them to the person or place where the information can be obtained.
8. Explain to the person seeking non-formal counseling that behaviors can be changed if we must change.
9. Encourage the person seeking non-formal counseling to think of the many choices available to them.
10. Help the person seeking non-formal counseling see the possibilities, the good points and the bad points of each way/choice.
11. Have the person seeking counseling make a choice on their own.
12. Give emotional support and praise when the person seeking non-formal counseling makes their own decision.
13. Encourage the person seeking non-formal counseling to use this method the next time they need to make a decision.
14. Show the person seeking non-formal counseling that we are happy and willing to talk with them again.

The teacher may wish to have the students write the 14 Steps to Non-Formal counseling on chart paper and then place it where all of the students can see it clearly).

5 Characteristics of a Good Non-Formal Counselor

A good non-formal counselor:

1. Creates a Friendly Atmosphere. What does it mean

   Creates a friendly atmosphere means being able to be yourself when you are receiving non-formal counseling. The non-formal counselor should show interest by smiling, chatting and body language when listening to what others have to say. When the other person is speaking, the non-formal counselor should look the other person in eye in order to show that you are interested in what the other person is saying. That person will feel at ease and will want to tell you what is on their mind.

   For example: When someone comes to you for non-formal counseling, if you keep your nose to your work and are not interested in letting him speak freely, they will not want to continue speaking. But, if you look into their eyes sometimes, ask a few questions, laugh a little, or nod you head from time to time, they will want to continue because
they know that you are interested in listening in what they have to say. Sometimes there may be some touching. For example, holding hands to show emotional support for the person seeking non-formal counseling.

2. **Has a Clean Slate and Open Mind.** What does it mean? Why is it important to be a clean slate and be open minded when someone comes to talk with you?

   Having a clean slate and open mind means not having prejudices or preconditions on what that person or their behavior is like. For example, if a person is addicted to drugs, uses amphetamines, sniffs glue, or drinks alcohol we should not presume that they will not be able to quit their addiction. Instead, we should think that it will be possible for them to quit. They have come to talk to you and that may be the first step for them in putting their plan to quit their addiction into action.

   For example: A friend is always arriving to school late and never has his homework done. He always looks tired and sometimes may even fall asleep in class and does not participate in your regular activities. In your mind you may think that he is using drugs or staying up late hanging out with the wrong crowd. Your thoughts are beginning to be prejudiced and do not allow us to listen to what your friend needs to tell. In all probability, your friend may have a problem at home and may have to work very hard to help his family or stay up late to care for a sick family member.

3. **Has a Small Mouth and Big Ears.** What is your interpretation of this?

   “Small mouth, big ears” means that when someone seeks non-formal counseling from you, you should listen more than you speak. You have to allow your friend to get things off their chest as much as possible. You don’t need to interrupt or paraphrase the person seeking counseling. You may occasionally say words like “yes”, “I see”, “Oh”, etc. so that know you are interested and following what they are saying.

   For example: Suppose the same friend who you suspect is using drugs comes to talk to you and you immediately ask, “Why are you using drugs?” instead of letting him complete his story before asking. He may think that you are looking down on him and do not respect him as a friend because, in reality, he is not doing anything wrong.

4. **Is Tight Lipped.** Why is this characteristic very important?

   Being tight-lipped means keeping the confidence or secrets of the person seeking non-formal counseling by not telling others about your conversations. The person who is seeking non-formal counseling trusts you enough to come and talk with you. If you tell their story to others and they will most likely find out later and become angry or dissatisfied and will not dare to come and talk to you again.

   For example: Suppose your friend who has problems at home comes to talk to you and you tell someone else about your conversations. Every time you talk with your friend, he is lighter hearted and participates in your regular activities. But, when he finds out that you have told someone else, he does not trust you and becomes withdrawn. Your friend may become more depressed because he feels that there is no one that he can talk to. Instead of helping your friend, you have made it worse for him.

5. **Doesn’t Make Decisions for Others.** Why shouldn’t you make decisions for others?

   Not making decisions for others means no matter who is seeking non-formal counseling you will be the one to tell them to do something in one way or another. You function is
to be a mirror, a guide, or someone who will help reveal the choices at hand only. Have them use the 5 steps for reaching our goals to think of the good points and the bad points. Then, leave the decision-making up to them.

For example: Suppose a friend comes to ask you for advice about a problem. Instead of you helping him/her find ways to solve their own problem, you tell directly tell him/her what to do. Then if your friend follows your advice and the problem becomes worse, whom do you think your friend will blame? What do you think may happen to your friendship? By allowing your friend to make their own decisions, they will be more committed and determined to put plans for solving their problems into action.

Linkage Questions
1. When someone is sick is just getting treatment with drugs enough? What does a sick person need to maintain their mental health? Why?
2. What do a person with HIV/AIDS would need other than drug treatment? What will help them maintain their mental health? Why?
3. When someone become drug addict what does he/she need to help him/her stop using drugs? Why is counseling important for this?
4. Anyone who has any untreatable diseases, what benefit will they receive if they are able to receive non-formal counseling regularly? Why?

Evaluation/Assessment

Divide the students into small groups. Assign each group one of the following scenarios. From the scenarios, the groups must develop a role-play that demonstrates non-formal counseling. Have the students perform the role-play for the class. The classroom as a whole will evaluate the techniques used for non-formal counseling and the language used for its effectiveness.

Scenarios
(a). A friend makes an appointment to see you and some other friends because it has been a long time since you have seen each other last. This friend arrives one half an hour late and seems a little upset. Your other friends do not notice but you do. What would you say to this friend to find out what is wrong and to help him/her?
(b). A classmate starts to talk to you about and argument with some of his/her friends about doing assigned tasks in the classroom. They say that you are not doing your chores but you insist that you are doing them. How could talk to this classmate to help him/her solve the dilemma?
(c). A friend confides to you that the teacher you aside and said that you are neglecting your studies and not working to your ability. Your friend feels he is trying but just can’t concentrate on what is going on in the classroom. How could you help your friend find and solve the core of the problem?
(d). A friend tells you that another friend has asked her to spend the night at her house. She has heard rumors that her friend’s brother is now living there and he has AIDS. Your friend is afraid of going to her friend’s house. What would you say to her?
(e). A friend tells you that she is worried about getting AIDS because her boyfriend has an older brother who shoots drugs. His brother’s friends hang out at their house on the
weekends when no adults are around. She is not sure whether her boyfriend uses drugs or not but she still likes this guy a lot. How would you discuss this situation with her?

**Follow-up Activities**

Have the students document their experiences in non-formal counseling.

1. When the student goes to talk to friend, family member or other trusted person to talk about a problem they should document steps in non-formal counseling that person used in discussing the problem with them. Why did they go to that person? Did they feel better after talking about their problem with this person? Do they think that this person was able to help them? Why?

2. When a friend comes to them to talk about a problem they should document the steps in non-formal counseling that they used in discussing the problem with their friend. Why do they think their friend came to them to discuss the problem? How do they think the friend felt after talking with them? Do they think they were able to help the friend?

They do not have to give the details or personal information related to their experiences but should document the steps to non-formal counseling that were used in providing non-formal counseling in each case.
Practice for Mental Health

Fifth Standard (511)       Teaching time: (1) class period

Lifeskills Competencies – Mental Health

At the end of this lesson, the students should be able to demonstrate skills in the following areas:

✓ **Problem Solving**
The students will be able to identify barriers to good positive mental health.

✓ **Creative Thinking**
The students will be able to identify appropriate ways of dealing with their emotions and stress.
The students will be able to identify appropriate way of building and maintaining positive self-esteem.

✓ **Critical Thinking**
The students will be able to assess the advantages and disadvantages of rational thinking versus emotional thinking.
The students will be able to analyze the behaviors that may either build and support positive self-esteem or contribute to low self-esteem.

✓ **Decision Making**
The students will be able to determine realistic goals and expectations for themselves and the appropriate method for reaching those goals and expectations based on personal abilities and living situation.

✓ **Communication**
The students will be able to assert personal wants and needs.
The students will be able to ask for help and counseling from others and will be able to provide help and counseling to others when needed.
The students will be able to express their emotions and stress in a positive manner.

✓ **Self Awareness**
The students will be able to determine realistic goals and expectations for themselves based on personal abilities and living situation.

✓ **Interpersonal Relationships**
The students will be able to identify trusted individuals from whom they may seek help, counseling or correct information, and from they will receive appropriate feedback.

✓ **Empathy**
The students will be able to recognize the needs and feelings of others and be able to respond to these needs and feelings in an appropriate manner.

✓ **Coping with Stress and Emotions**
The students will be able to identify effective ways of dealing with their emotions and stress.

For a person to be healthy, not only physical health but mental health is also important. A mentally healthy person neither under-estimates nor over-estimates himself/herself. One is able to control the conflicting desires within oneself. They are mentally secure, have self-confidence, can make the right decisions and are able to resolve everyday problems satisfactorily. Thus, to be mentally healthy, one should:

- be able to keep to the middle path (Mejimapadipada) in any undertaking, avoiding both extremes
- bestow love and kindness upon others
- keep cool and calm when faced with a problem or difficulty and decide and resolve it responsibly.
Activity (1)

Objective

The students will be able to identify the attitudes and skills of a mentally healthy person.

Teaching aid

Character type charts

Teaching/ Learning Activities

1. Ask the students in the class to brainstorm what they think are characteristics of a mentally healthy person. The teacher will write single words of the characteristics the students suggest on the blackboard.

2. The teacher will then write two columns, attitudes and skills, on the blackboard and ask the students to determine which of the given characteristics relate to a person’s attitude and what characteristics relate to a person’s skills. After some discussion, the teacher will place the words in the appropriate column.

3. Next, divide the students into small groups and distribute the character type charts to each group and ask them to study the three different types of character.

(a) Maung Lu Aye is a steady, stable and honest person. He can keep cool and calm and resolve any problem after careful consideration. He can think of the causal relationship of the problems that arise, including community affairs. He always takes responsibility in carrying out community work with goodwill and benevolence.

Maung Lu Aye

(b) Ma Hla Win over-estimates herself and is not satisfied unless she can act as the boss in all matters. She is not used to listening to what her friends and associates have to say. However, if any problem crops up, she would rather evade it and put the blame on others than take the responsibility to resolve it.

Ma Hla Win

(c) Maung Nu has very little confidence in himself. He wavers all the time. Although he always ask for other's opinions, he never takes them seriously and fail to make decisions. Thus, in any matter, he does not use his own judgement. He is a very impressionable person.

Maung Nu
Let’s discuss

<table>
<thead>
<tr>
<th>Maung Lu Aye</th>
<th>Ma Hla Win</th>
<th>Maung Nu</th>
</tr>
</thead>
<tbody>
<tr>
<td>attitudes</td>
<td>skills</td>
<td>attitudes</td>
</tr>
</tbody>
</table>

4. Ask the students in each group to discuss the attitudes and skills of the three persons and fill in the table.

5. Have each group present the small group discussion results to the class. The teacher will write the characteristics in the appropriate columns on the blackboard. [To save time, each group following the first group only needs to add characteristics that the first group did not provide. Or, different groups can present the different characteristics of one of the three people and then the other groups suggest any additions at the end.] Any disagreement over characteristics should be resolved through discussion.

6. Then, based on the discussion results, explain that just as a mentally healthy person does not over or underestimate himself/herself. He/she can restrain one’s inner conflicting desires, he/she feels secure and has self-confidence. A mentally healthy person can make rational decisions and solve everyday problems satisfactorily. In order to be mentally healthy, the person must also be physically healthy.

**Content and Personalization Questions will come at the end of Activity 2**

**Activity (2)**

**Objective**

The students will be able to identify ways of maintaining or developing good mental health.

**Teaching aid**

**Teaching/Learning Activities**

1. Ask the students to look through the attitudes and skills of the (3) persons discussed in Activity (1) and discuss the following questions:
   (a) Among the three persons mentioned, who, in your opinion, is mentally healthy?
   (b) Why do you think so?
   (c) Among the three, whose example will you follow in your behaviour?
   (d) Why?
2. After listening to the discussions, the teacher should briefly explain the attitude and behaviour of a mentally healthy person.
3. Ask the students to discuss in groups how a person can maintain or improve their mental health through modifying attitudes and developing skills.
4. Instruct them to present the group discussion results to the whole class.
5. Then, the teacher should add the following:
   A mentally healthy person does not over or underestimate himself/herself. He/She knows and rectifies his/her own weaknesses and shortcomings through self analysis and self improvement; carries out his/her duties zealously and responsibly; capable of making good decisions, is able to take long-term collective responsibility with others; willing to work to improve his/her living environment

Content Questions
1. Who is the most mentally healthy person, Maung Lu Aye or Ma Hla Win or Maung Nu who mentioned in your lesson? Why?
2. Among the three, who do you think is a good role model for your behavior? Why?
3. Which character, Maung Lu Aye, Ma Hla Win, or Maung Nu, do you resemble the most? Why?
4. Do you think it is possible for Ma Hla Win and Maung Nu to change their behavior? How?
5. If you were to choose one of these people as a friend, which one would you choose? What is attractive about that person that you think would make a good friend? Please explain.
6. What basic skills are necessary for good mental health? Why? [The teacher may refer to the Teacher’s Notes]

Personalization Questions
1. Do you think you are a mentally healthy person? Why or why not?
2. What do you think you can do to help improve or maintain your mental health? Please explain.
3. Can our friends help us improve or maintain our mental health? How?
4. What skills do you think you need to develop or strengthen in order to improve your mental health? Please explain.
5. If a friend gives you constructive criticism about your behavior do you think you would listen to that friend? Why? How can the constructive criticism help you to improve or maintain your mental health?
6. What type of constructive criticism could you give to a friend? How would you give it to a friend? What would you say? Please give an example?

Teacher Notes:
In developing and maintaining good mental health, the students should be focusing on skills development. The teacher may wish to introduce the ten core life skills to the students because these skills are the same skills needed for good mental health. Through the development of these skills the students will also develop good attitudes through rational decision making and problem solving.
**Problem Solving**
A person is able to clearly identify problems and their causes.

**Creative Thinking**
A person is able to identify at least 3 possible solutions to a problem.

**Critical Thinking**
A person is able to anticipate the consequences of the problem for self, family, and community.
A person is able to assess the advantages and disadvantages of each possible solution.

**Decision Making**
A person is able to identify the best possible solution for him/her based on personal ability and living situation.

**Communication**
A person is able to clearly and directly state their opinions and give good reason.
A person is able to ask for help and advice, and seek information when needed.

**Self Awareness**
A person is able to identify realistic goals and expectations based on personal ability and living situation.

**Interpersonal Relationships**
A person is able to identify the benefits and limitations of living together in society.

**Empathy**
A person is able to recognize the needs of others, provide support and/or compromise.

**Coping with Stress and Emotions**
A person is able to distinguish between rational thinking and emotional thinking.

**Linkage Questions**
1. How do you think mental health and physical health are linked together? Please explain.
2. Why does a person need good mental health in order to have good physical health? Please explain.
3. When you are sick, do you want to be bothered making decisions? Is it easy for you to make decisions when ill? Why? How would your physical health interfere with your making rational decisions?
4. Is a person who uses narcotic drugs able to make rational decisions? Why? How would this affect their mental health?
5. How can good mental health help young people prevent infection with HIV and STD and prevent addiction to narcotic drugs? Please explain.
Assessment
Have the students work in small groups and discuss the following:

1. If you were Maung Lu Aye, what could you do that would help you maintain your good mental health? Think of examples and develop a plan to maintain good mental health.
2. If you were Ma Hla Win, what do you think you could do to improve your mental health? Think of examples and develop a plan to improve your mental health?
3. If you were Maung Nu, what do you think you could do to improve your mental health? Think of examples and develop a plan to improve your mental health?

Have representatives from each group present their plans to the rest of the class. To save time, the teacher may assign each group a different person.

Follow-up Activity
Have the student develop a personal plan for maintaining or improving their mental health, including how they will develop good attitudes and develop or strengthen skills. Encourage the students to keep a personal diary that monitors their mental health development or maintenance plan. Every few days they can record what skills they think they have developed or strengthened during the previous few days and if they feel they have undergone a change in attitude on certain matters. The students should also record how they feel the change has come about.
Acquired Immune Deficiency Syndrome (HIV/AIDS)

Fifth Standard (512)  Teaching time: (1) class period

Lifeskills Competencies – HIV/AIDS and STD

At the end of this lesson, the students should be able to demonstrate skills in the following areas:

✓ **Problem Solving**
  The students will be able to identify factors of risk and vulnerability that may place a person at risk of infection with HIV and STD, including Hepatitis B.

✓ **Creative Thinking**
  The students will be able to identify behaviors and methods of preventing infection with HIV and STD (including Hepatitis B), including protective factors.

✓ **Critical Thinking**
  The students will be able to assess the advantages and disadvantages of the various methods of prevention in relation to personal behavior.
  The students will be able to identify the socio-economic and cultural impact of HIV.
  The students will be able to assess the relationship between substance abuse and infection with HIV and Hepatitis.
  The students will be able to assess traditional care practices and institutional care.

✓ **Decision Making**
  The students will be able to identify realistic behaviors and methods to reduce the factors of risk and vulnerability that may place a person at risk of infection with HIV and STD, including Hepatitis B.

✓ **Communication**
  The students will be able to provide information and discuss issues related to HIV/AIDS and Sexually Transmitted Diseases, including Hepatitis B in a clear and direct manner.
  The students will be able to ask for help and advice or seek additional information on HIV/AIDS and STD, including Hepatitis B, when needed.
  The students will be able to demonstrate skills in refusing sexual advances and skills in negotiation for condom use.

✓ **Self Awareness**
  The students will be able to assess personal risk for infection with HIV and STD, including Hepatitis B.
  The students will be able to assess the impact of infection with HIV and STD, including Hepatitis B, on their personal goals and expectations.

✓ **Interpersonal Relationships**
  The students will be able to identify the sexual networks that may place them at risk for infection with HIV or STD, including Hepatitis B.
  The students will be able to identify the impact of infection with HIV and STD, including Hepatitis B, on the self, family, community and society.
  The students will be able to identify social and cultural factors that may aid in the prevention of HIV and STD infection.

✓ **Empathy**
  The students will be able to recognize the needs and feelings of persons living with HIV/AIDS.
  The students will demonstrate compassion and support for persons living with HIV/AIDS.

✓ **Coping with Stress and Emotions**
  The students will be able to distinguish between appropriate behavior and physical and emotional needs and desires.
  The students will be able to distinguish between peer pressure and personal needs.
Activity (1)

Objective

The students will be able to distinguish between infection with HIV and having AIDS.

Teaching aid

Chalk and blackboard

Teaching/Learning Activity

1. Ask questions to draw out the knowledge among the children.
   "What are some that diseases that can be treated but have no cure?"
   "Which of these diseases do you think are common to Myanmar?"
   "What is the difference between HIV and AIDS?"

2. The teacher will note the answers from the children on the blackboard. Then the teacher will explain that HIV is a germ (very tiny virus) that infects and destroys the immune system and AIDS is the immune deficiency that is caused by the HIV virus and allows opportunistic infections to attack the body.

Content questions

1. How many different diseases were you able to name? What were they?
2. Which diseases were mentioned often? Why do you think these diseases were mentioned more often than others?
3. How can these diseases be treated? Why can’t they be cured?
4. What is the cause of AIDS? Please explain.
5. How will a person know if he has been infected with HIV?
6. How can someone be infected with HIV?
7. How is HIV different from AIDS? Please explain. Why is it important to know the difference?

Personalization questions

1. How well do you know different diseases? Are you able to tell the difference between communicable and non-communicable diseases?
2. With which communicable diseases are you the most familiar? Why are you familiar with these diseases?
3. Do you think you have enough information about different diseases? If you feel that you do not have enough information, where can you find additional information?
4. How well do you know about HIV and AIDS? Are you able to tell the difference between them?
5. What do you think young people should know about HIV/AIDS?
6. How can you protect yourself and others from being infected with HIV?
7. What can you tell others about HIV and AIDS that will help them make important decisions in their lives? Please give an example.
Activity (2)

Objective

The students will be able to identify ways in which HIV is transmitted and ways in which it is not transmitted.

The students will be able to communicate to others how HIV is transmitted and how it is not transmitted.

Teaching aid

Chalk and blackboard rolled up lots

Teaching/Learning Activity

(Based on what has been learnt in the fourth standard)
1. The teacher will write up the lots on which are written the means through which AIDS could be transmitted and the means through which AIDS cannot be transmitted. On each lot will be written only one case. The lots will be placed in a cup held by the teacher.
2. The students will be divided into two or three groups and a representative from each group will draw one lot each.
3. They will open the lot and show it to their group members. They will then discuss and decide whether the case is the way that the disease can be transmitted or otherwise. Then they will present their case to the class.
4. Discuss with the whole class and score marks for each group (Let all the groups do their presentation in turn)
5. Congratulate the team with the highest score.

<table>
<thead>
<tr>
<th>Activities Leading to Risk of Infection</th>
<th>Activities Not Leading to Risk of Infection</th>
</tr>
</thead>
<tbody>
<tr>
<td>• Having sexual intercourse (with those who have the virus.)</td>
<td>• Living together in the same house</td>
</tr>
<tr>
<td>• Accepting blood donation from those who have the virus.</td>
<td>• Sneezing, coughing</td>
</tr>
<tr>
<td>• From mother who has the virus to her fetus</td>
<td>• Through tears, sweat</td>
</tr>
<tr>
<td>• Ear lobe boring instrument</td>
<td>• Kissing on forehead, cheek and hand</td>
</tr>
<tr>
<td>• Tattooing</td>
<td>• Working together</td>
</tr>
<tr>
<td>• Contaminated barber blades</td>
<td>• Playing together</td>
</tr>
<tr>
<td>• Contaminated operation equipment</td>
<td>• Bathing together</td>
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<tr>
<td>• Puncturing</td>
<td>• Sharing toilets</td>
</tr>
<tr>
<td>• Acupuncture treatment</td>
<td>• Hugging</td>
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<tr>
<td>• Sharing of cutting blades</td>
<td>• Through utensils</td>
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<td></td>
<td>• Shaking hands</td>
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<td></td>
<td>• Travelling in the same car</td>
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<td></td>
<td>• Sleeping together</td>
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<td></td>
<td>• Mosquito bites</td>
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<td></td>
<td>• Bed bug bites</td>
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<td></td>
<td>• Dog bites</td>
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<tr>
<td></td>
<td>• Looking after those who have the disease</td>
</tr>
<tr>
<td></td>
<td>• Handling and carrying currency notes</td>
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</tbody>
</table>
Content questions
1. What questions or statements are difficult to answer? Why?
2. What are the behaviors that have no risk to HIV? Why? How do you know these behaviors do not place you at risk?
3. Do you have enough information about HIV to justify your answer that the behavior is a risk or non-risk behavior? Why or why not?
4. How much information is useful for young people to make decisions?
5. Do your friends have the same/more/less information than you do?
6. Even though young people know a behavior is risky, what are some factors that may still cause young people to place themselves at risk for infection?

Personalization questions
1. Do you feel that you know enough about the transmission of HIV and the prevention of HIV infection? Why or why not?
2. What do you think a person should do if they are unsure a behavior is safe?
3. How can you protect yourself from being infected with HIV/AIDS? Why do you need to do so?
4. What would you ask when you go to a clinic or a hospital to get an infection? Why?
5. When someone in your family need blood transfusion should you ask the doctor to do before giving the blood? Why?
6. If you have unanswered questions about HIV, where can you go to obtain the information? Is this a good source of information?
7. Do you think it is best to get information from one or many sources? Why?

Linkage questions
1. How can the practice of good personal hygiene protect a person infected with HIV from general communicable diseases and opportunistic infections?
2. Does a person with HIV/AIDS would need the same nutritious food like you? Why?
3. When you get sick, how do you feel? What type of care and support do you need? Do you think a person with HIV/AIDS needs the same things? How can you help them?
4. How does drug use place a person at greater risk of HIV infection? Please explain.

Evaluation/Assessment

Stop, Think, Go

Make three circles on blackboard. In each circle, write one word, “Stop,” “Think,” or “Go.” The teacher will read behaviors listed below out loud one at a time. If the students think that behavior does not present a risk for HIV infection they should point “Go” circle. If they think there is a risk of HIV infection they should point to the “Stop” circle. If the students are unsure whether a behavior will place them at risk or not at risk, they should point to the “Think” circle. After the students give their answers the teacher will randomly select students to give the reasons for their answer.

Behaviors
1. Play together in the field
2. Sharing needles and syringes
3. Eating from the same plates
4. Receiving a blood transfusion with untested blood
5. Donating blood
6. Having sex without protection
7. Bitten by a mosquito
8. Giving massage to a person with HIV/AIDS
9. Had a tattoo in the festival
10. Mother to an unborn child

Follow-up Activity
Have the students develop a plan on how they can present important information to other students in the school and to the community on the transmission and prevention of HIV infection. The presentation should also present the difference between HIV and AIDS. An activity that may help students to do this is given below. The teacher should coordinate with the school headmaster, the PTA, or community leaders to allow the students to give their presentations.

Immune System Dance

Objective:
1. The youth will be able to describe the process of HIV infection and the progression of HIV in the body.
2. The youth will discuss methods to prevent HIV infection.

Materials: Communicable diseases masks [Tuberculosis, Pneumonia, STD, Cancer, Influenza], HIV mask, condom hat or shower cap, T-cell pins, sunglasses, music cassette (lively music), tape player

Instructions:
1. Assign roles to the participants of the dance (approximately 15) and explain the following process:
2. One male participant stands in the middle of the room and the music is turned on. He begins to dance to the music.
3. The dancer is then surrounded in a circle by dancing T-cells, which will protect him from the communicable diseases. The t-cells are facing outward.
4. The communicable diseases, except for HIV, come to attack but are fought off by the T-cells. They eventually go away.
5. A beautiful woman comes dancing along; the man sees her and invites her into his inner circle for a dance. Before they dance, however, she helps him put on a condom cap. When they are finished the cap is thrown away and she leaves.
6. Communicable diseases come to attack again but are fought off by the T-cells because prevention was used.
7. A second beautiful woman comes dancing along. The man sees her and invites her into his inner circle for a dance. This time, he does not have a condom but he is so taken by her charms that they dance together anyway. (Or, perhaps they know each other so they don’t feel it is necessary to use a condom.)
8. The man is unaware that HIV has come along with the woman and begins to slowly debilitate the T-cells.
9. Once the T-cells are weakened or destroyed, the communicable diseases come to attack once more. This time they succeed.
10. After running through the dance, the participants must then perform it for the other workshop participants.
11. Have the participants and the observers of the dance discuss what they have seen and how it relates to HIV infection.

Content Questions
1. What did you see happening in the role-play and what is it trying to tell us about?
2. Why couldn’t the communicable diseases succeed the first time around?
3. Why couldn’t the communicable diseases succeed the second time around?
4. Did HIV attack the body of the person directly? What does this signify?
5. After he is infected with HIV, what happened to his body?

Personalization Questions
1. What are some reasons why a person may use protection with some people but not with others?
2. If there are no symptoms directly related to HIV infection, is it possible to know if a person is infected, just by looking at him? Why or why not?
3. If a person is showing external symptoms, skin rashes, etc. can we automatically assume that they are infected with HIV? Why or why not?
4. What do you think kills a person with AIDS?
5. Do you think you may be at risk of HIV infection? Why or why not?

Teacher Notes:

What is AIDS?
AIDS stands for the acquired immune deficiency syndrome. Very simply, AIDS is caused by a virus (HIV) that infects and damages cells of the immune system. AIDS by itself does not kill, but allows other infections (such as pneumonia, cancer and other illnesses) to invade the body, and these diseases can kill.

At the present time, there is no know cure for AIDS, and no vaccine that prevents the disease.

Though AIDS is a communicable disease, it is not spread through casual contact.

Fortunately, the virus that causes AIDS is hard to contract and can be prevented. AIDS is a very serious disease, but you should know these facts:
1. AIDS is not spread by casual contact in schools, at parties, stores, or the workplace.
2. HIV (the Human Immuno-deficiency Virus) is very weak and does not survive well outside the body.
3. You cannot get infected with HIV by hugging, shaking hands or simple being near a person who is infected with the virus. NO person has ever been infected by an insect bite.
4. You cannot catch HIV from a toilet.
5. HIV is not spread through the air from sneezing or coughing.
6. You cannot get infected with HIV from animals or animal bites.

**How do people get AIDS?**

Not everyone is at risk for AIDS. People who are at risk can protect themselves if they take reasonable precautions. Being safe from AIDS is up to you. It is your responsibility to protect yourself – and those you love. This responsibility starts with knowing how people get AIDS.

The main ways HIV is spread are:

- Having sex (oral, vaginal, anal intercourse with a person infected)
- Sharing needles and syringes with others
- Contaminated blood
- Babies born to mothers infected with HIV

**Can you get HIV from someone who has HIV/AIDS by touching them?**

No. There is no evidence that HIV is spread through casual contact (including shaking hands, social kissing, coughing, sneezing, swimming, sharing bed linen, eating utensils, cups, office equipment, chairs, etc.). There is no reason to avoid a person living with HIV/AIDS in ordinary social contact.

**What about doctors, nurses, dentists, and other health care workers?**

Routine safety measures, such as wearing gloves, protect both patients and health care workers. Special precautions are taken when handling the blood of patients in case it is infected with HIV and while giving injections.

**What about blood transfusions?**

It is true that some people become infected through blood transfusions, but it is rarer than other forms of transmission. Donated blood should be tested for HIV before transfusion.

**What about giving blood?**

There is no risk from donating blood. New needles are used for each donor, each time blood is given. If you have placed yourself at risk for HIV infection, you should consider not donating blood.