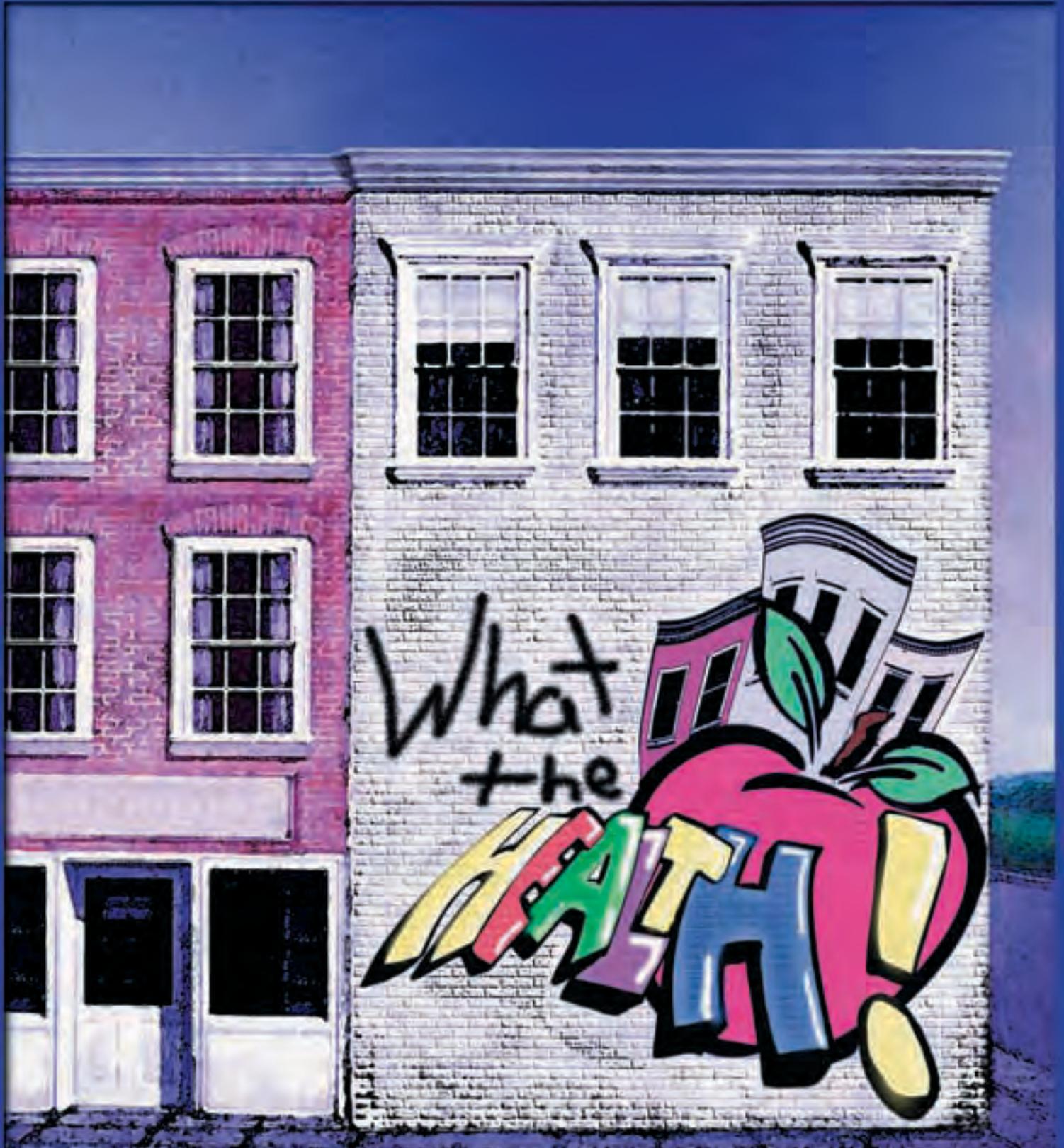


What the HEALTH!

A Literacy and Health Resource for Youth



Canadian Public Health Association



National Literacy and Health Program

What the **HEALTH!**

Stacey, Mo, Carlos, Mikhail and Kim finished cleaning the soup kitchen, thanked the shelter staff, and walked toward the park where friends were waiting. As they walked past an empty storefront, Carlos pointed to a message on the wall. It read **What the HELL**. Beneath it, a young man slept wrapped in a thin blanket, his head resting on everything he owned.

They know what it feels like to give up on life, but thought the graffiti spoiled a part of town that offered so much hope. They talked about what they could do. By midnight they had agreed on a plan. Kim found a pencil in her pocket and made sketches on paper napkins Mo had taken from a coffee shop.



A few days later, the group went to the wall and started to work. In the hour that followed, they transformed a message of despair into one of hope and action. The paint was still drying when they stepped back to admire their work. Now it read: **What the HEALTH!**

Acknowledgements:

The Canadian Public Health Association's (CPHA) National Literacy and Health Program wishes to thank the Population Health Fund of Health Canada for funding the development of *What the HEALTH!*

We also want to thank Frontier College for their help in organizing focus groups of youth across Canada, Ms. Suzanne Doerge for her workshop design and facilitation skills, and the National Literacy and Health Program partners, health providers and literacy practitioners who reviewed this resource and offered helpful suggestions.

CPHA thanks the National Associations Active in Criminal Justice for its permission to adapt and include material from its resource *Living Between the Lines*, included in the section Using What The HEALTH! to improve literacy and health skills.

To the hundreds of youth who gave their opinions, shared their stories, inspired creativity, and gave valuable feedback, thank you. We offer special thanks to Amy Holmes and Matthew Chartrand for their careful review, excellent suggestions and enthusiastic support.

Canadian Public Health Association

The Canadian Public Health Association (CPHA) is a national, independent, not-for-profit voluntary association representing public health in Canada with links to the international public health community. CPHA's mission is to constitute a special national resource in Canada that advocates for the improvement and maintenance of personal and community health according to the public health principles of disease prevention, health promotion and protection, and healthy public policy.

National Literacy and Health Program

The National Literacy and Health Program (NLHP) is a partnership of 27 national health associations working to raise awareness among Canadian health professionals about the links between literacy and health. The NLHP provides health professionals with resources designed to help them serve people with low literacy skills more effectively. The NLHP's Plain Language Service supports improved health communication by offering plain language revisions, assessments and workshops to the public, not-for-profit and private sectors.

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Introduction

There's no doubt that young people living on the street face serious challenges to their health, from poor nutrition to substance misuse to exposure to sexually transmitted infections — but they're not the only youth who do. In fact, a recent national report confirms that adolescents are among the three groups of Canadians with the poorest health.¹

Circumstances and choices often combine with the increasing pressures that this stage of life brings, making it difficult for youth to get adequate health and social services or relevant health information, or develop effective strategies to help them protect themselves from unhealthy lifestyles, sickness and harm.

A recent analysis based on Statistics Canada's 1994–1995 National Population Health Survey reveals that risk behaviours are not uncommon among teens. While most youth experiment with at least one potentially risky behaviour, 43% of males and 33% of females aged 15–24 reported engaging in two or more risk behaviours. For example:

- there are growing numbers of young women 12 to 17 who smoke
- suicide and unintentional injuries resulting in early death are on the rise among young men, especially in Aboriginal communities
- high levels of stress and depression are reported among young women
- 40% of sexually active youth aged 15 to 19 reported inconsistent or non-use of condoms
- 53% of males and 46% of females 15 to 17 reported having drunk 5 or more alcoholic drinks on at least one occasion
- 38% of young women 12 to 14 are trying to lose weight²

What the HEALTH! is one attempt to address this need. If you work with youth and care about their health, then this versatile resource has something to offer you.

What the HEALTH! has been designed by the Canadian Public Health Association (CPHA) to be used by people who teach, guide and support young people in a wide range of roles and environments: in literacy programs, schools, youth-serving agencies, community services and health care settings.

So, whether you're a literacy tutor, a health teacher, a youth worker or a health care provider, **What the HEALTH!** will give you tools to engage teens in learning about their health, understanding what contributes to good health and improving health decision-making skills.

1 Health Canada, *Toward a Healthy Future: Second Report on the Health of Canadians*, 1999, Ottawa.

2 Op. Cit., pp. 128-129.

What the HEALTH! provides you with the ingredients to create a forum where youth can explore their own attitudes and experiences, exchange ideas, and increase their knowledge and skills.

As an educator or facilitator, you'll find **What the HEALTH!** easy to use. It's also easy for young people to read and understand. The stories, discussion questions, literacy exercises and health information in **What the HEALTH!** were all written in clear language to meet the needs of youth who can't read well.

An ideal use of this resource is as a curriculum that can help enhance both the health awareness and the literacy skills of youth who have trouble reading. However, its application can be much broader than that. The stories and exercises can give ALL young people, regardless of literacy skill level, an opportunity to learn about, reflect upon, and build skills for making decisions about important choices affecting their health.

The selection of topics featured in **What the HEALTH!** was guided by young people themselves, and emerged from a series of workshops conducted by CPHA, with the help of Frontier College, in five cities across Canada. These workshops allowed youth to identify their major health concerns as well as to:

- explore how social determinants such as poverty, health in childhood, low self-esteem and discrimination may affect health in the teen years
- discuss how personal circumstances and choices combine to create healthy lifestyles or lives at risk of physical and psychological health problems
- create stories that reflect their attitudes and lifestyles.

How **What the HEALTH!** evolved

What the HEALTH! was developed as a project of CPHA's National Literacy and Health Program. This program is a partnership of 27 national health associations with a commitment to giving people with low literacy skills greater access to health information.

The development of **What the HEALTH!** has been a journey! The original plan was to develop a curriculum designed solely for use in youth literacy programs serving youth engaged in risk activities. As workshops across Canada were set up, it became obvious that the need for a relevant, easy-to-read health curriculum for teens was felt by a much larger audience. It also became obvious that key health issues identified by them all were the same! The exciting challenge then became to develop a resource that could be useful in the **many** settings where youth participate.

Youth have been involved in the entire process of developing **What the HEALTH!** They identified the issues you find in its pages. Stories in the lessons are fictional but were inspired by stories told or created by youth. They also reviewed the stories and

exercises, and provided suggestions for making them more relevant, accurate and interesting. They developed discussion questions and approved the title and design. One ex-street youth reviewed it and said — “This has got to get in the schools. If we had talked about stuff like this it would have made a big difference in my life.”

How What the *HEALTH!* is organized

What the *HEALTH!* contains 10 lessons, each of which focuses on an important health issue identified by youth.

The cover page of each lesson offers a brief introduction to the health topic, placing it in the context of youth attitudes and trends. The flip-side of each cover page provides literacy and health education learning objectives, websites to visit and other resources that can enrich your preparation for each lesson.

The six elements of each lesson are **active verbs**:

Highlight, **E**xplain, **A**nalyze, **L**earn, **T**ry, and **H**elp. They reinforce the idea of youth actively taking steps that bring them closer to understanding changes they can make to enjoy better health.

In each lesson you will find the following sections:

Highlight

Fictional stories about youth that highlight the lesson’s health topic. This section helps improve listening and/or reading skills.

Explain

Questions to measure students’ understanding of the stories.

Analyze

Discussion questions to generate an exchange of ideas, attitudes and strategies on each lesson’s health topic.

Learn

Grammar, spelling and comprehension exercises.

Try

Writing skills development exercises, role-play suggestions and resource-mapping activities.

Help

An easy-to-read health fact sheet that has been edited and approved by health providers serving youth.

How to use What the HEALTH!

What the HEALTH! has been produced in a loose-leaf, easily reproducible format to increase its versatility. You can simply remove the sheets you plan to use and make copies for the youth you serve.

Add your own creative touch to the lessons in this resource. You may, for example, want to incorporate activities where students use video cameras or tape recorders to collect the opinions held and solutions offered by their peers on any given topic. They may enjoy illustrating these opinions by using lyrics from music they enjoy, as well.

You may discover that your students learn better from their peers. Starting from information and resources in **What the HEALTH!**, students can work in groups to lead some of the suggested activities or present the information and/or coping strategies they believe to be the most effective, to the rest of the class.

What the HEALTH! can be used in many different settings: literacy programs, classrooms, health centres or youth drop-in centres. It can be used with individual young people or with groups. For example:

- If you are a literacy practitioner, you may want to work through each element of each lesson, as it is presented, or you may decide to use the popular education methodology provided in the following section. You may choose to use only the lessons that are of specific interest to your student(s).
- If you are a health teacher or health educator, you may choose to select specific stories or health fact sheets as springboards to group discussion, ignoring the grammar and writing exercises.
- Health centres may decide to reproduce and distribute the health fact sheets to youth they serve.

Since the issues addressed in **What the HEALTH!** are of such importance to the health and safety of the youth you serve, please take the time, with your student(s), to create a local resource list for each issue discussed. The list should identify the groups, services and individuals in your community that are qualified, accessible and eager to help youth face and overcome these challenges.

Can you make a difference in helping youth enjoy healthier lives? **What the HEALTH!**
Yes!

Youth Literacy and Health

Literacy is linked to health. The relationship between education, literacy skills and health has been clearly established in many studies over the past several years. In the Executive Summary of Health Canada's 1999 report *Towards a Healthy Future: Second Report on the Health of Canadians* we learn that *Canadians with low literacy skills are more likely to be unemployed and poor, to suffer poorer health and to die earlier than Canadians with high levels of literacy.*

Canadian youth need health information they can understand in order to make healthy choices at an age where risk activity is all around them. Youth with low literacy skills have an even greater need for easy-to-read and understand health information.

In 1989, the Ontario Public Health Association (OPHA) published a report entitled *Literacy and Health Project: Making the World Healthier and Safer for People Who Can't Read*. In this report, OPHA identifies 2 major impacts of literacy on health: direct and indirect.

Direct Impacts

Direct impacts of low literacy on health stem from poor print and verbal communication.

Direct impacts of low literacy on health are:

- incorrect use of medication
- not following health instructions
- safety risks.

Indirect impacts

Indirect impacts of low literacy on health are deeply rooted in the economic and social conditions of people's lives. They include:

- poverty
- unhealthy lifestyle practices
- stress
- low self-esteem
- dangerous living and working environments
- lack or inappropriate use of health services.

Many of the indirect impacts on health have been identified by youth as important health issues. By using **What the HEALTH!** in your classes, you will be addressing not only the many challenges faced by your student(s), but their root causes, as well.

Using **What the HEALTH!** to improve literacy and health skills

Read the stories

Read the stories out loud to your student(s) or have your student(s) read them silently. You may want to review some of the vocabulary first.

Describe what happened

Ask the students to describe what happened in the story and make sure everybody is aware of the “facts”: Who are the people in the story? What happened? When? Where? How? Do they understand all the words?

Name the problem

Encourage the group to name the problem. What really happened? Questions about how each person in the story feels often get to the heart of the issue. Get as many different points of view as possible.

- Why did _____ happen? Why didn't _____ do _____ ?
- How would you describe this story in one sentence?
- What are facts and what are opinions in this story?
- How does the storyteller feel about the other people and about what happened?

Look for patterns

Ask the students to:

- make a chart listing the pros and cons of some issue in the story
- make a list of the facts in the story and another of the opinions
- make a list of causes and how they might be addressed
- list conclusions that can be drawn from the information in the story.

Reflect on their own experience

Ask the group if they know of anyone who has had this problem. As they talk they may open up and share more personal experiences. Then you can ask about those experiences. Ask questions like:

- How does the story make you feel?
- What does it make you think?
- Do you agree with some of the things people said in the story? What?
- Do you disagree with some of the things said? What?
- Why do you disagree? (They could make a list of all the opinions in the story with which they agree and another list of those with which they disagree.)
- If this has happened to you, how were your experiences like the story and how were they different?
- What did you do about the situation?
- Are you happy with the way things turned out?

Link to wider social context

Ask the learners to explore the causes of those common problems. Encourage them to look beyond their own individual circumstances and examine the larger social context. Help them generalize their experiences and see how they fit into the larger social, economic, cultural, and political contexts. You might find the following types of questions useful:

- How does education affect the health of youth today?
- What changes would you make to high schools to keep teens from dropping out?
- How does discrimination affect people's health?
- How would you rank the health topics discussed in these stories from most important to least important?

Identify possible actions

Ask the learners to suggest several things they might do about the problem. Ask them to write a new ending for the story, or an extension about what could happen next. Help the group review what they've learned and how they might use it through questions like:

- Did you learn anything new from the story? What?
- If you did, how might you use it in the future to help yourself or help one another in this group? How could you use it to help your family and friends or your community?
- Would you like to find out more about this subject? How?
- If you were in this situation again, would you do the same thing as you did before, or something else? What would you do, and why?
- How might we in the group help each other when in this situation?
- Would we be willing to do that? If we would, how might we get ready? Who would do what?

You can help clarify what your students want to do, provide resources, and help plan the action. The students themselves should set the goals, identify possible strategies, decide on and carry out actions, and evaluate their success.

Reading and writing follow-up for learners

- Ask learners to write about the experiences brought up by the discussions.
- Have learners undertake research on the issues.
- Suggest that learners write letters even if they may not be sent.
- Have learners write opinions, pros and cons.
- Point out compound words or words with prefixes or suffixes. Ask learners to think of other words with those patterns and have them read and write those words.
- Have learners write a personal dictionary, putting definitions in their own words.
- As time goes on, ask the learners where they have seen the words they learned the session before. Were they able to do anything differently because they could use these words?

How to link your literacy work with other social issues

- Approach literacy work as a way to help learners, other educators, and the public to become critically aware of society. Support each other to act together on the problems you see in your communities. Seeing that we can make a difference helps raise confidence and dispel feelings of helplessness.
- Involve learners as full participants in your organisation. Help people find out how it feels to have a say and be taken seriously.
- Develop and use learning materials that reflect the experiences and viewpoints of learners. Draw out what they have to say about poverty, health, education, employment, housing, race, gender, sexuality and other forces in our lives.
- Educate yourself about the deep connections between poverty, unemployment, poor health, crime and literacy.
- Promote the use of clear language — offer to help other organizations in your community to learn about it.
- Undertake joint projects with other community groups that are working for change — legal clinics, anti-racist educators, disability activists, women's groups, anti-poverty groups, crime prevention groups...

Feelings



Teens are often in emotional pain. Don't ignore it! What may seem unimportant to you is very real to the young person struggling with depression. Sometimes this emotional pain comes from abuse, other times from feeling rejected, or from great disappointment and/or isolation.

When the pain is strongest, teens may have a breakdown in their ability to think rationally. They may begin to focus on death by suicide as the only possible solution to their problems.

Experts say that for every death by suicide, there are 100 to 200 attempts. Girls are more likely to try to kill themselves, often by taking pills, while boys are 4 times more likely to succeed, tending to use violent means such as guns.

You can help teens who are depressed by:

- ◆ letting them know that depression is nothing to be ashamed of, and there are reasons they feel so unhappy
- ◆ providing counselling services that help them deal with their feelings and changes they may need to make in their lives
- ◆ suggesting activities and programs that help people feel good about themselves such as team sports, volunteer work or a youth choir or band
- ◆ listening to them.

Unit Literacy Objectives:

At the end of the unit, students should:

1. be able to understand most of the story content
2. understand the difference between nouns and verbs
3. have increased vocabulary skills.

Unit Health Education Objectives:

At the end of the unit, students should:

1. understand some of the feelings and situations that can lead to depression
2. understand how depression can affect their physical health and safety
3. know how they would respond to a friend who is considering suicide
4. be able to identify several local resources that help youth face and overcome depression and/or thoughts of suicide.

Check out these websites:

www.canadian-health-network.ca/

www.youthnet.on.ca

www.hc-sc.gc.ca/english/youth.htm

www.befrienders.org

www.siec.ca

www.parentingteens.about.com/mbody.htm

www.save.org

<http://kidshelp.sympatico.ca> (under tools for life heading suicide)

<http://209.250.151.141:8080>

Other resources:

Kids Help Phone: 1-800-668-6868

IN EMERGENCY CALL 1-800-SUICIDE (1-800-784-2433) National Hotline

Suicide: teens talk to teens

Marion Crook, Self-Counsel Press (a division of International Self-Counsel Press Ltd.) 1997,

ISBN: 1-55180-108-6

Youth Net

Youth Fax No. 1 (October 1996) *Stress*. Youth Fax No.13 (April 1999) *Suicide*. (Available from Youth Net, 401 Smyth Road, Ottawa, ON K1H 8L1 Tel: (613) 738-3915, Fax: (613) 738-3917.

Centre for Addiction and Mental Health

33 Russell Street, Toronto, ON M5S 2S1 Tel: (416) 595-6878 Fax: (416) 595-6881

Highlight

Alone in a Crowd

My father moved out of the house one year ago. I knew he and Mom didn't get along very well because they were always arguing and slamming doors. I thought he would be like other divorced dads I had heard about. You know, we would see each other twice a month. He would buy me new clothes on my birthday and at Christmas. But Dad just disappeared. I'm not even sure anymore if he took time to say goodbye to me, his 15-year-old daughter, Vicki.

There was loud fighting one day. Silence the next. But the silence didn't last long.



My mother rents 2 bedrooms to student boarders to help pay the mortgage. I got moved down to her sewing room in the basement. She let me pick out new wallpaper and a bedspread. I didn't pick out curtains. The room has no windows.

She started a day care for kids under 4 years old in our house. Our family room became an indoor playground — with a big plastic play structure, a sandbox, a book and puzzle corner, a Lego station and an arts and crafts table. She got them stuff I never had when I was little. Our dining room became the nap room. The dining room furniture joined me in the basement.

The university students are in and out of the house all day long. They have free access to the kitchen and living room, and I often feel like I am in their way. I spend most of my time down in my room.

I tried to tell my mom that I didn't like all the changes she'd made. She got mad and said she counted on me to help her through a difficult time. Help her! Who was helping me? I had lost my Dad, my house, and my life.

It's hard for me to listen at school. I daydream in most of my classes. I usually daydream about death. Some days I dream about my dad dying. Other days I dream that I died and my mother was glad she had another room to rent out. In another daydream I burned the house down with my mother, all the cute little kids and the stuck-up students, inside.

When I can't stand being in the house, I go wandering through the shopping mall. I used to tell myself: "When I see Dad, I'll give him this," then I would steal it. Over a period of 6 months I stole a couple of CDs, 8 ties, 4 decks of cards and a TV remote. I stopped before I got caught. I guess I figured my dad was never coming home. I wasn't important enough to him. I threw all the stuff away.

I have started sleeping 12 to 14 hours a night, hoping things will be different when I wake up. I've put on 25 pounds in 3 months — eating junk food in the basement. I go out with friends less and less because I hate how I look and how I feel. I have started skipping school because I don't see the point in going to class.

Last month the school called my mother in for a parent-teacher conference. She was pretty upset to hear how bad my grades have gotten, and how often I've skipped class. She yelled at me for not being responsible, for being a disappointment, for making her life more complicated.

I didn't get into a fight, it wasn't worth it. I just walked away. I went down to my room and slept.

I listen to music that talks about pain and anger. It makes me feel less alone in my house full of strangers.

Highlight

Running on Empty

Philippe started hanging out with us at the Café Candide last year, just before Thanksgiving. We were a group of college students, ages 18 to 22, who enjoyed being together on Friday nights to crack jokes and discuss world problems. Philippe interested us because he was different. He worked fulltime in a factory and didn't have perfect grammar. We all liked Philippe and as we got to know him, we respected him. His dad had died and Philippe's job helped his family get by. The girls thought he was really hot.

He was tall and good-looking and had a great sense of humour. He hated it that the girls liked him. I thought he was shy. Turns out he hated his life.

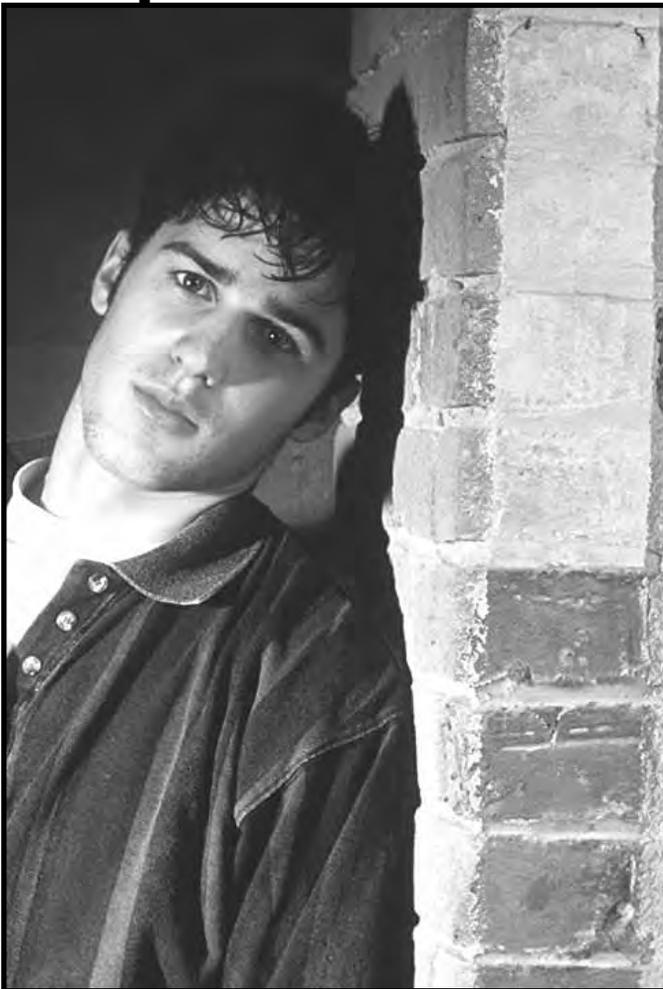
Exams and summer plans broke up our little group. In the fall, like every fall, the group changed. Graduations and love affairs do that, you know. Philippe was a "no show".

In February, I bumped into Philippe in a campus student lounge. He was sitting alone, drinking coffee. I tapped him on the shoulder and said hi.

He seemed embarrassed to see me. I sat down and started asking questions. He still had his job at the factory and was taking courses — but not passing them. As he spoke, I realized he was stoned.

I invited him to re-join our Friday night get-togethers. He laughed and said sure. I gave him my phone number, which he tucked into his wallet.

The next time I saw Philippe, he was in the hospital. His mother had found him passed out inside his car in the middle of the night. He had shut the garage door and car windows, and kept the motor going. She got up to let



the dog out, and noticed the sound of the car running in the garage. That, and skilled paramedics, saved Philippe's life.

He was ready to talk about why he had wanted to die, and was glad to see me.

"I wanted the pain to end," he explained.

"What pain?" I asked.

"Everything was pain, Mark. Ever since my dad died, I've had to hold things together at home, you know? My mom and sisters need so much. They need money for rent and food, clothes and stuff. They need me to drive them around so they can have a life. They need me there at night so they feel safe. They never ask me what I need. I've been running on empty for a long time.

You and the others at the café were the first friends I've had since I quit school to work fulltime. It was great, you're all great — but I felt badly because I didn't finish school. And the girls coming on to me all the time, I hated it! I don't want any more women in my life who need something from me, you know?"

I didn't know, but knew it wasn't the time to make a joke.

"Over the summer, I got accepted in a program at the college. They told me I could finish my high school credits while working towards a diploma. I was sick of factory work. Problem was, I still needed to work fulltime and my family was always complaining that I was never around to help. I fell behind in my studies and I was afraid I would be kicked out of the program. I started smoking dope to relax from all the stress. It didn't help, because nothing changed. I felt like I couldn't move forward or go back. I was stuck in a place that I really hated. I wanted out."

"I'm glad you're still here, Philippe."

"Yeah, me too. I mean, after years of people asking me for help, I thought I should be able to figure this out all by myself. I couldn't, and I didn't ask for the help I need. The doctors here have put me in touch with a counsellor who is going to help me and my family make some changes."

"And you've got friends who care, if you'll let them," I reminded him. "When do you get out of here?"

"Probably not before Thursday, why?"

"Because you've got lots of friends at Café Candide who would like it if you dropped by on Friday night!"

Explain

Alone in a Crowd

1. When did Vicki's Dad leave?
2. Why did Vicki's mother rent out rooms to students? How does that make Vicki feel?
3. Why didn't Vicki choose curtains for her new bedroom?
4. How does Vicki feel about her mother's day care business?
5. What did Vicki daydream about?
6. Why did Vicki start shoplifting? Why did she stop?
7. How long was Vicki sleeping at night?
8. Why did Vicki gain 25 pounds?
9. What kind of music does Vicki listen to?

Running on Empty

1. Where did Mark and Philippe and their friends meet on Friday nights?
2. Who stopped coming in the new school year?
3. Where did Mark bump into Philippe in February?
4. What did Philippe put in his wallet?
5. Who found Philippe in the garage with the car running?
6. Why did Philippe hate it when girls came on to him?
7. Why did Philippe start smoking dope?
8. What were the stress points in Philippe's life?
9. Who is going to help Philippe and his family make some changes?

Analyze

1. How does this story make you feel?
2. What kinds of stress exist in your life?
3. How do you cope with stress?
4. Do you think suicide is a selfish act? Why or Why not?
5. Have you ever felt that suicide is the only way out of your problems?
6. Do you have friends or family members you can talk to when things are going wrong in your life? Why is this important?
7. Do you know any religious or cultural ideas that could affect how a person responds to depression?
8. Do you think a person's age affects how they react to life's difficulties? If so, what age group do you feel is most likely to see suicide as a solution? Why?
9. Would you break a promise not to tell anyone if you thought your friend was going to kill themselves? Why? Why not?

To be effective, discussion groups must be a safe place for youth to share their opinions, experiences, fears and beliefs.

As a group, develop guidelines such as:

- all opinions, stories and ideas expressed will remain private
- one person speaks at a time
- everyone participates
- no one will be mocked or criticized.

Learn

Nouns and Verbs

A sentence is a group of words that **conveys a complete thought**. The most important words in a sentence are **nouns** (a person, a place, a thing) and **verbs** (action words).

1) Underline all of the nouns and circle all of the verbs in the sentences below.

For example: I (gave) him my phone number.

1. Mom rented bedrooms to students to help pay the mortgage.
2. I daydreamed in most of my classes.
3. Dad just disappeared.
4. The doctors here have put me in touch with a counsellor.
5. You have friends who care, I reminded him.

2) The following groups of words have nouns and verbs, but are not placed in an order that conveys a complete thought. Put the words in an order that creates real sentences.

For example: No the windows room had = The room had no windows.

1. room my spend of I time in down most my

2. caught stopped I before got I

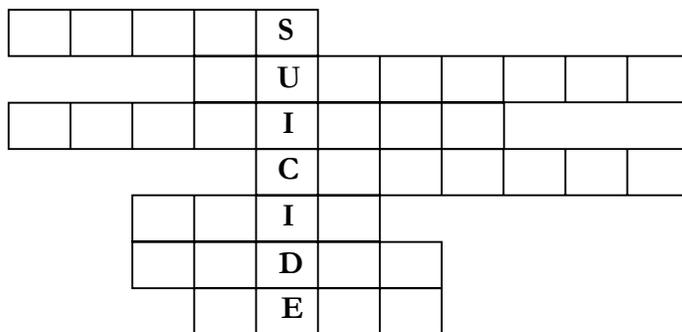
3. me to seemed see embarrassed he

4. never me I they ask what need

5. I ask the I didn't for help need

3) Fill in the blanks, then fit the answers horizontally in the puzzle below.

1. _____ thought Philippe was really hot.
2. Philippe worked _____.
3. Mark visited Philippe at the _____.
4. Philippe and Mark met at the _____ café.
5. Philippe tried to kill himself because he wanted the _____ to end.
6. Philippe felt _____ because he hadn't finished high school.
7. Philippe thought that his mother and sisters _____ too much from him.



4) True or False.

1. Philippe was looking for a girlfriend. _____
2. Mark bumped into Phillippe at a mall. _____
3. Philippe put Mark's phone number in his wallet. _____
4. Philippe was doing well in school. _____
5. Philippe smoked cigars to relax. _____
6. Philippe felt stuck. _____
7. Philippe was angry he was brought to the hospital. _____
8. Philippe and his family are going to meet with a counsellor. _____
9. Philippe was going to have to spend 3 months in the hospital. _____
10. Mark was glad Philippe had not died. _____

Try

Poems can be a good way to write about what you feel. Here is a poem about feeling alone.

Cathy
Friendless, Lonely
Hoping, Trying, Crying,
Left out again
Me

This kind of poem is called a *Cinquain* poem. The name comes from the French number 5 (cinq) because these poems have 5 lines, each line following a set pattern.

- Line 1:** 1 word idea or noun
- Line 2:** 2 words which describe line one
- Line 3:** 3 verbs showing what line one does (usually ending in “ing”)
- Line 4:** 3 or 4 words which give your feelings about line one
- Line 5:** 1 word that means the same thing as line one.

Write a cinquain poem for Cathy that will cheer her up.

Your first line could be a word like **Hope**, **Friendship** or **Love**.

Role Play:

Your best friend calls you to say good-bye. S/he is planning to commit suicide. What would you say and/or do?

Resource Mapping:

Contact your city hall or your local public health unit for a list of services available to people living in your community. Identify which of these services are qualified, accessible and eager to help youth face and overcome depression and/or thoughts of suicide. The goal is to produce a list that you can use and/or share with your peers, with confidence.

Depression

Most people feel really sad now and then. If something bad happens to you or you have a hard day, you might feel sad and tired and stressed out. That's normal. It's just part of life. You know that in a day or two, you will feel better. But sometimes, people get very sad and those feelings don't go away. Sadness that lasts longer than a few weeks is called **depression**.

Depression affects your mind, your feelings and your body. Anyone can become depressed. It is very common in teens. Being a teenager is hard — there are so many changes in your life. It can be too much at times. You can also get depressed if something bad happens in your life. This could be when a friend or family member dies, when you break up with a boyfriend or girlfriend or if your parents get divorced. There are many reasons that you could become depressed. Being depressed is nothing to be ashamed of. You might not even know that you are depressed; just that you don't feel right.

Being depressed can cause changes in your body or in the way you behave. You might:

- not want to do things that you used to enjoy
- sleep all the time or have trouble sleeping
- miss school, start to get bad grades or have trouble at school
- not be able to think clearly or concentrate
- feel sick or sore all the time
- cry a lot
- eat hardly anything, or eat much more than you usually do
- begin to use alcohol or drugs
- start acting in ways you never did before — stealing, swearing, getting in trouble
- spend almost all of your time alone, thinking or listening to music
- think about dying or killing yourself.

What if the pain is too much to take anymore?

Depression can make you feel so hopeless that you think it would be better if you were dead. The sadness and pain is too much, and you think that dying or killing yourself will get rid of those feelings. Maybe you think that your friends or family would be happier if you were dead. Sometimes suicide seems better than living with the sadness. There are some signs that a person might be thinking about killing themselves. People thinking of suicide might:

- start giving away their things to friends and family
- talk about dying or say things like “When I’m gone...”
- seem like they are feeling better or even feeling happy all of a sudden.

If you see any of these signs in yourself, talk to someone right away. If you see these signs in a friend or family member, encourage them to talk to someone right away.

It might not seem like there is any way to get better if you are depressed, but there are services and people that can help you.

What can I do to feel better?

The first thing you can do if you are depressed is talk to someone. Remember that being depressed is nothing to be ashamed of. It does not mean that you are weak or crazy. You can talk to friends, peer counsellors or someone in your family. You can talk to a mental health worker at a health clinic. You can talk to a teacher or guidance counsellor at school. You can even phone a hotline to talk to someone. Look in the yellow pages under **Distress Centres, Suicide** or **Mental Health Services** for places that you can call or visit to get help from people who understand how you feel and are trained to help.

There are ways to treat depression. Some things that might help are:

Doing things that make you happy

Spend time with people who make you feel good about yourself. Be kind to yourself. Play sports, listen to music, sing in a choir, help other people.

Getting counselling

Counselling can help you figure out why you are depressed. It can help you learn new ways to think and behave so that you will feel better about yourself and your life. You might talk to a counsellor by yourself. Or you might meet with the counsellor and a group of other people who are depressed. Your family might go with you and meet with the counsellor so that they can help you at home. You could also join a support group to talk and listen to other people who know what you are going through.

Taking the right medicine

Your doctor might prescribe drugs, called **anti-depressants**, for you to take. These drugs work in your brain to help you with your depression. Some drug names you may have heard are Prozac, Zoloft and Paxil.

Combined treatments

In many cases, you might take medicine and go for counselling. Sometimes medicine can help you feel better pretty quickly. Counselling can help you learn how to deal with your feelings and thoughts. It can help you learn new ways of thinking and acting.

It might take a long time to feel better after being depressed but most people do get better. Life is never hopeless and there are ways that you can feel better.

Safer Sex



Over 60% of Canadian youth under 19 have had sexual intercourse.¹ Movie and TV plots involving sexually active teens, peer group lifestyles and their own raging hormones all encourage teens to be sexually active. But teens don't always make informed choices, believing that nothing bad will happen to them. Sometimes, they believe that they are invincible, infertile, immortal and immune.

In response to the sexual activity of youth, safer sex and healthy attitudes to sexuality and sexual orientation are taught in some schools and at community health centres in an attempt to prevent the heartache of sexually transmitted diseases (STDs) or infections and unintended pregnancies.

People have strong and different attitudes about teen sexuality and pregnancy. For this reason, it is important for youth to understand that they must decide for themselves what is right for them.

You can help youth make healthier, safer choices by:

- ◆ helping them build self-esteem
- ◆ encouraging them to make the choice that is right for them about if and when to be sexually active
- ◆ providing them with information and guidance about birth control and STDs without being judgemental
- ◆ explaining all their options when faced with an unplanned pregnancy
- ◆ talking to them about the increased risk of sexual assault when they are under the influence of alcohol and drugs.

Unit Literacy Objectives:

At the end of the unit, students should:

1. be able to understand most of the story content
2. understand the use of pronouns
3. have increased vocabulary skills.

Unit Health Education Objectives:

At the end of the unit, students should:

1. understand that it is their choice whether or not they are sexually active
2. understand how unsafe sexual practices can affect their health
3. know more about ways to protect themselves from unwanted pregnancy, sexually transmitted diseases (STDs) and date rape drugs
4. be able to identify and know how to reach several local resources that help youth understand, avoid, or deal with the consequences of unprotected sex.

Check out these web-sites:

www.canadian-health-network.ca

www.ppfc.ca

www.teenwire.com

www.goaskalice.columbia.edu

www.sxetc.org/library/articles/art98W_2.asp

www.hc-sc.gc.ca/english/youth.htm

www.cyberisle.org/teennet

www.safersex.org

www.niaid.nih.gov/factsheets/std.htm

<http://hometown.aol.com/MnN1121/index.html>

<http://kidshelp.sympatico.ca>

Other Resources:

Sentence upped for 'date rape drug' Globe and Mail February 19, 2000 p. A21.

The Canadian HIV/AIDS Clearinghouse

The Canadian HIV/AIDS Clearinghouse has a wide selection of materials on safer sex. Some materials are loaned, while others can be ordered in bulk for distribution to others. You can contact the clearinghouse and request a catalogue at this **Toll-Free number: 1-877-999-7740**.

Take Five: A sexual health resource to stay connected with youth

Back issues of this newsletter can be viewed at www.rmoc.on.ca/healthsante. For a free subscription, contact: Janice Benson, Public Health Nurse, *Take Five*, 179 Clarence St. Ottawa, ON K2N 5P7 Tel: (613) 560-6095 ext. 2524, Fax: (613) 560-6096

Sexual Health Fact Sheets (can be photocopied for education purposes)

Available from the Region of Ottawa-Carleton Sexual Health Centre, 179 Clarence St. Ottawa, ON K2N 5P7 Tel: (613) 563-2437, Fax: (613) 560-6096.

Highlight

Nothing to Celebrate

Lindsay checked her hair and make-up in the hallway mirror one last time before grabbing her purse and running out the door. She met her girlfriend, Toni, at the bus stop. They laughed and talked as they waited for the Number 12 bus. They were going to the *Purple Cow*, a popular bar downtown, to celebrate Lindsay's 19th birthday.



Lindsay showed her I.D. to the bartender with a big smile. He gave it back with a grin as he served her a beer. Lindsay and Toni were enjoying the music and their drinks at the bar, when Lindsay felt a hand on her shoulder. A good-looking young man introduced himself and asked her to dance. Ted and Lindsay spent the rest of the evening dancing, drinking and laughing. Lindsay could hardly believe her luck that he found her pretty. At 11 p.m. she called home to tell her roommate that she was spending the night at Toni's house. When the bar closed at 2:00 am, Ted and Lindsay dropped Toni off at her place and then went to Ted's apartment to spend more time together. In the passion that grew between them, Lindsay and Ted had unprotected sex.

Lindsay was hurt when Ted didn't call. She went back to the *Purple Cow*, hoping to see him again. She saw him at the bar, kissing a pretty blonde. She made her way through the crowded room to a pay phone and called a taxi. At home, she

cried for hours. Seeing Ted with another woman made her feel used.

Lindsay worried that she may have gotten pregnant. She knew better than to have unprotected sex. She should have been more careful! She was relieved when she got her period right on time.

A few weeks later, while going to the bathroom, Lindsay found sores near her vagina. She wondered if she had a sexually transmitted disease (STD). At the health clinic, she was tested for STDs and learned that she had herpes. Before her night with Ted, Lindsay did not believe that she could ever get an STD. She thought that only happened to people who slept around with a lot of guys.

Ruth, a public health nurse, told her that herpes is easily spread because many people have it and do not know it. Ruth also told Lindsay that she should have a blood test for other STDs including HIV, the virus that causes AIDS. Because it would take up to three months for the HIV virus to show up in tests, Lindsay would have to wait to see if she is virus-free or not!

Lindsay has a lot to deal with right now. She is sorry she fell for Ted's charm and angry that she did not protect herself. She is sad that Ted has given her a disease that cannot be cured, and she is afraid that her choice to have unprotected sex may have put her at risk for a virus that could develop into AIDS.

With Ruth's help, she is learning how to live with herpes. She will tell any future partners that she has herpes so that they can protect themselves. Even though the herpes may become active and painful at any time, these outbreaks can be treated with medicine.

Lindsay wasn't careful once and now has a disease she will have for the rest of her life. Unprotected sex turned her birthday celebration into a terrible memory.

Highlight

Choices

I was 11 when my Mom explained sex to me. I remember she told me a birth control joke:

“Kelly, What do they call people who use the rhythm method?”

“I don’t know.”

“Parents!”



I thought the whole subject was sick. There was no way I was ever going to do **that** with a boy.

I’m 15 now, and 7 months pregnant.

That started to look pretty interesting when I started going out with Jamal. I was surprised at how strong my feelings for him were. Hugging wasn’t enough. Kissing wasn’t enough. Clothes were in the way. I wanted more. I needed him inside me.

To me, safe sex was about not getting AIDS. I wasn’t worried about catching anything — neither of us had ever had sex with anyone else. Jamal had condoms. I had condoms. Everybody at school had condoms. Teachers passed them out in health class!

But sex education didn’t teach us how hard it is to use your head when you are totally turned on. There was no way either of us could stop to go get a condom out of our backpack.

I got pregnant 6 months after we started dating. We were both pretty scared.

The counsellor at the health clinic was very nice. She promised me our talks would stay private. I wasn’t ready to tell my parents.

She told me I had to make a choice. I could get an abortion at the clinic, and no one would need to know. I could keep the baby. There were programs for teen mothers that would help me stay in school and raise my child. I could have the baby and place it for adoption. There were lawyers who could help me choose parents for my baby.

Jamal liked the abortion idea. He didn't want the whole world to know that he got me pregnant. He doesn't want to be a father at 17. He isn't even sure he wants to be my boyfriend anymore.

After a lot of thought, I chose not to have an abortion. I've always loved babies. I baby-sat a lot in our neighbourhood, and I know that having an abortion would not have been the best choice for me.

I finally decided I needed to talk with my parents. I cried. My mother cried. My father yelled. It took us about 2 weeks before we could talk about it without getting mad.

They told me they are ashamed. They think that my having a baby so young will make people think they haven't done a good job raising me. They also feel like they made a mistake in trusting me alone with Jamal.

They understand why I don't want an abortion. But they are afraid that I am not ready to be a good mother, and they don't want to raise the baby for me.

We decided to talk with a lawyer who helps pregnant girls find good families for their babies. He told me I could meet the couples and visit their homes. He had photos and letters from people from all over the country who want to adopt a baby. I looked through dozens of files and decided on 3 couples I wanted to meet. The lawyer arranged everything. Mr. and Mrs. Pender have lots of money. They would give the baby everything he would ever need or want. Phil and Kayla Matthews are a lot younger and seem to really love each other. They lost a baby at birth last year. Doctors think that Kayla would probably die if she had another baby. The Feldmans run a small ski lodge in Western Canada. They both love sports and nature.

Now I feel like I have more choices and harder choices than before. I'm getting really big now, so I know there's a baby growing inside me. An ultrasound showed that my baby is a boy. So now, my baby is a he, a real person. I see mothers with their babies and I don't want to place mine for adoption. On the other hand, I really liked the people I met, who want to adopt a baby. How can I know which couple to choose to be his parents?

A choice to have unprotected sex got me pregnant. Another choice keeps me pregnant. I'm glad I still have two months to make the best choice for my baby and me.

Highlight

What are the Alternatives?

René stood up in the circle of chairs to get everyone's attention. The chatter died down as he began to speak.

"Most of you have been coming to these monthly meetings long enough to understand that they are a great way to get and give support and friendship to gay, lesbian and bisexual youth in this town. Support and friendship that help us rebuild our self-esteem after bad experiences with our partners, families, schools or communities. Many of us struggled for years to identify

our sexual orientation and comfort zones for expressing our sexuality, and are now enjoying our lives.

This group also gives us a chance to get together and share information about topics that touch us as we live in this world. Taking turns leading the group gives each one of us an opportunity to choose topics we feel are important to us all. For tonight's discussion, I want us to talk about the importance of safer sex..."

Fiona tuned out. She would have much preferred talking about how to come out as a lesbian. No one from her family or her florist training course knew about her sexual orientation. She was also sure that the need for safer sex didn't apply to her. As a lesbian she felt that she had nothing to fear: no unintended pregnancies, no awful diseases carried by semen. "I'm worry-free," she thought as she yawned.

Rita noticed Fiona's attitude and addressed it in her usual direct style. "Girl, I can tell you think you don't need any information from the rest of us about sex. You're wrong. Look at me. I'm a lesbian just like you, and I got genital warts from having sex with a women who didn't know she was infected. I wasn't careful because I didn't think I was at risk. Now I've got an infection



that is controlled but can't be cured. I was lucky that I found out early and can hopefully avoid serious problems."

"I know many people blame gays and bisexuals for the spread of HIV/AIDS in this country," added Tyler. Homosexuality hasn't spread STDs, unsafe sex has done it.

"Yeah Fiona," said Theo from the other side of the group. "Lots of people have STDs and are spreading them around without even knowing it. Safer sex is for everyone: straights like many of our friends, gays like René and Tyler, lesbians like you and Rita or bisexuals like Monique and me."

"OK friends, you've made your point," answered Fiona. "Let's move on. I promise to listen."

An hour later, the meeting was over. Several group members stayed to order pizza and enjoy a very serious game of poker. These youth take risks with cards, not with sex.

Explain

Nothing to Celebrate

1. Where did Lindsay go on her birthday? How did she get there? Who did she go with?
2. Who did she meet?
3. Where did Lindsay go when the bar closed?
4. Why was Lindsay relieved when she got her period right on time?
5. What made Lindsay think she might have an STD?
6. What STD did Lindsay get from having unprotected sex?
7. How long does Lindsay have to wait before she can be tested for HIV?

Choices

1. How old is Kelly?
2. Who is the father of Kelly's baby?
3. Why didn't they use condoms?
4. What did Kelly's father do when she told him she was pregnant?
5. How many couples who want to adopt her baby, did Kelly visit?
6. Is Kelly's baby a boy or a girl? How does she know?
7. How long does Kelly have to wait before her baby is born?

What are the Alternatives?

1. Why did youth like Fiona, Theo, René and Rita meet together?
2. Who led this month's meeting?
3. What was the discussion topic for this month's meeting?
4. Why wasn't Fiona interested in the discussion topic?

5. What STD did Rita get from unprotected sex?
6. What did Fiona promise to do?
7. What did some group members do after the meeting?
8. When do they take risks? When don't they take risks?

Analyze

1. Why is unprotected sex so common among today's youth?
2. Teen pregnancies are on the rise. Do you think this is a problem? If so, what needs to be done?
3. Abortion, adoption and parenting are 3 choices mentioned in the story on teen pregnancy. Are there other options? What are they?
4. Which STDs are most common among sexually active youth, and what are their consequences?
5. What kind of message do you think would convince youth to practice safer sex?
6. How can you protect yourself from STDs?
7. Do you believe that you could get an STD if you aren't careful?
8. Do you know where you can go for an STD test?
9. Are you worried about reports of date rape drugs being used more frequently? Why? Why not?
10. How can you protect yourself from becoming a date rape drug victim? How can you protect others from becoming date rape victims?
11. How do you think support groups can help youth explore their sexual orientation and/or sexual readiness?
12. What topics, other than safer sex, do you think a support group for gay, lesbian and bi-sexual youth would want to discuss?
13. What kinds of gay, lesbian and bisexual sexual activity are high risk for giving or getting STDs? What kinds of protection can reduce the risk?
14. How do you think being afraid to "come out" could affect someone from practicing safer sex?

To be effective, discussion groups must be a safe place for youth to share their opinions, experiences, fears and beliefs.

As a group, develop guidelines such as:

- all opinions, stories and ideas expressed will remain private
- one person speaks at a time
- everyone participates
- no one will be mocked or criticized.

Learn

Pronouns

Pronouns are words like I, mine, my, you, your, yours, he, his, him, she, her, hers, it, its, we, our, ours, us, they, their, and them that replace the name of people, places or things.

1) Circle the pronoun at the end of each sentence that can replace the underlined noun.

For example: Lindsay went back to the *Purple Cow*, hoping to see Ted again. (We, She, It)

1. Ted and Lindsay went to Ted's apartment. (your, its, his)
2. Lindsay was worried she might be pregnant. (They, We, She)
3. Many people have herpes and do not know it. (it, there, her)
4. The test results showed that Lindsay had herpes. (There, They, Them)
5. Lindsay will warn any future partners that she has herpes. (me, them, him)
6. Everybody at school had condoms. (they, there, their)
7. The counsellor at the health clinic was very nice. (She, We, They)
8. Joey didn't want to be a father. (I, He, They)
9. My parents were ashamed. (We, Their, They)
10. Joey and I were both pretty scared. (They, We, Them)

2) Circle the pronouns that show ownership.

I, my, your, he, his, him, she, her, it, we, our, us, they, their, them, there

3) Using each circled pronoun once, fill in the blanks.

- 1) Lindsay handed _____ I.D. to the bartender.
- 2) Lindsay felt _____ hand on her shoulder.
- 3) We had condoms in _____ backpacks.

- 4) _____ programs could help me stay in school.
- 5) I visited _____ homes.
- 6) I want the best for _____ baby.

4) Find the words in the list in the letter box below.

When you have circled every word in the list, there will be letters left uncircled in the letter box. Unscramble these leftover letters to spell a key word from the stories you have read.

D I S E A S E C W I
 S E D U C A T I O N
 C T T H U C X N R S
 E F A S R O E I R R
 L A W Y E R S L Y A
 E E P R O T E C T L
 B C S O A D O P T U
 R I D M E T H O D P
 A V T E B A B Y C O
 T D S M E L B O R P
 E A P A S S I O N S
 C P R E G N A N C Y

Method	Adopt
Safe	Stay
Education	Clinic
Pregnancy	STDs
Advice	Baby
Popular	Cure
Celebrate	Cry
Passions	Sex
Worry	Memory
Tested	Problems
Disease	Protect
Lawyers	

Key word: _____

Role Play:

Lindsay has met a wonderful man by the name of Kevin. They have been dating for six months and she wants to have sex with him. Imagine you are Lindsay, telling Kevin that you have herpes.

In your conversation, tell Kevin the truth, calm his fears and suggest a plan.

Resource Mapping:

Contact your city hall or your local public health unit for a list of services available to people living in your community. Have your students identify which of these services are accessible and eager to help youth understand, avoid, or deal with the consequences of unprotected sex. Students may want to visit and ask questions about the services offered as a way to assess their quality. The goal is to produce a list that they can use and/or share with their peers, with confidence.

Sexual Readiness

Tips for Youth — from Youth:²

- Don't do anything you're not comfortable with. Only you can decide what you're comfortable doing and where you want to stop.
- Because your partner might have different expectations than you do, it's really important to talk about what you want and don't want.
- It's a good idea to have this discussion before the "heat of the moment." But always remember, if you say no and your partner doesn't listen, you have not given consent. This is sexual assault. It is a serious crime.
- Be creative! Sexual intimacy is about more than intercourse. Talk to each other before, during and after you "fool around." Things can get pretty steamy even without having sex, as long as you keep in mind that you will not, no matter how tempted you are, have sex.
- Be careful when it comes to direct genital contact. Even if you have chosen not to have sex, it is possible to be infected with STDs or cause pregnancy if you are not careful.
- No matter what choice you make for yourself, if you hope to have any sort of romantic, emotional or committed relationship, you have to respect each other's boundaries.

Am I ready? Sex Check³:

Answering these questions may help you and your partner know if you are ready for sex.

- Will I feel good about myself if I have sex now?
- Does my partner want to have sex now?
- Am I being pressured to make a decision?
- If the relationship breaks up, will I be glad that I had sex with this person?

2 Sexual Readiness Tips for Youth — from Youth, Take Five, Vol. 3, No. 4, June 1999, p.1.

3 Am I Ready? Sex check, Take Five, Vol. 4, No. 1. February 2000, p.1.

- If we have sex, will I use effective birth control or STD protection every time?
- Am I afraid of anything?
- Am I prepared to deal with the consequences of not practicing safer sex?

Sexually Transmitted Diseases

If you are having sex, protect yourself.

Sex can be fun. It can make you feel good. But it can also be risky. If you do not protect yourself, you could get a **sexually transmitted disease** (STD) or infection.

An STD is a disease that you can get through having sex. There are many types of STDs.

Some STDs are spread from body fluids like semen, vaginal wetness and blood. You can also get diseases like HIV and hepatitis B or from sharing **needles** to inject drugs with a person who has a disease. A woman can pass an STD on to her **unborn child**.

STDs can cause damage to your whole body, if left untreated. For example, genital warts can lead to cancer of the cervix in women. You could even die from some STDs, such as HIV/AIDS.

Some of the STDs you might have heard about are:

- Chlamydia
- Herpes
- Genital warts
- HIV/AIDS
- Hepatitis B
- Syphilis
- Gonorrhea

How do I know I have an STD?

You could have an STD and not know it. The person you are having sex with could have one and not know it. Some STDs have no warning signs. Or the signs go away and you might think the disease has gone away too, but you may be able to pass it to others for a long time.

These are some signs you should watch for:

- a strange smell or strange fluids from your vagina or strange fluid from your penis
- burning or itching around your penis or vagina
- sores, blisters or bumps around your penis or vagina, your mouth or your bum
- burning or itching when you go to the bathroom to pee
- for women, bleeding that is not your period
- bleeding after sex
- pain in your pelvis or vagina.

If you have any of these signs, go to a doctor or clinic right away. They will keep your visit private, give you important information and provide helpful treatment.

How do I keep from getting an STD?

- understanding that not having sex is the most certain way to keep safe
- talking to your partner about STDs
- getting tested, and make sure your partner is tested **before** you have sex
- using a male latex condom even if you are using other birth control methods because it can keep away body fluids that could give you an STD
- getting a series of shots against hepatitis B
- having yearly Pap tests that can find HPV and cervical changes: asking for STD screening
- knowing that having sex with many partners puts you at greater risk of getting an STD, and doing something about it like reducing the number of partners and always using a condom
- not using needles to inject drugs. If you are using drugs, not sharing needles will help prevent HIV and hepatitis B.

STD Risk Awareness Chart

This chart shows the risk for STDs when condoms or barriers are NOT used. The use of condoms for rectal and vaginal intercourse and the use of barriers for oral sex can greatly reduce, but may not eliminate, the risk of STDs. If sexual activities cause condoms to leak, break or slip, they may not be effective protection against STDs.

● High Risk ◐ Some Risk ○ No Risk

STD	Rectal (anal) Inter course	Vaginal Inter course	Oral sex (you giving)	Oral sex (you getting)	Deep Kissing	Mutal Masturbation (without exchanging Body fluids)	Hugging Dry Kissing Massage Self Masturbation
HIV/AIDS	●	●	◐	◐	○	○	○
Chlamydia	◐	●	◐	○	○	○	○
Genital Warts (also occurs in anus, mouth and throat)	●	●	●	◐	◐	○	○
Herpes (on genitals or mouth)	●	●	●	●	◐	○	○
Gonorrhea (also occurs in throat)	●	●	●	●	◐	○	○
Syphilis	●	●	●	●	◐	○	○
Hepatitis B	●	●	●	●	◐	○	○

Birth Control

When you have sex, protect yourself

Sex can be fun. It can make you feel good. But it can also be risky. If you do not protect yourself, you could get **pr egnant** .

How do I keep from getting pregnant?

If you want to have sexual contact, there are many ways to show your feelings. Cuddling and fondling one another, for example, does not put you at risk for pregnancy. Talk with your partner about what you want.

If you choose to have sexual intercourse, there are many forms of **birth control** which can prevent pregnancy. Talk to a doctor, nurse, pharmacist or health educator at a clinic about your choices. When you know about the types of birth control, you can choose the birth control method that is right for you.

Remember: Birth control **will not** protect you from STDs. Use a condom with your choice of birth control to help protect yourself from getting an STD.

Birth Control Pills (The Pill)

Birth control pills are the most common method used by youth and can be safely used by most women. They keep a woman from releasing an egg each month. When there is no egg, pregnancy cannot occur. They also make her periods regular, may decrease cramps, control acne and lower her risk for cancer of the ovaries or uterus. You will have to see a doctor to get birth control pills. The doctor may examine you and give you a prescription for the pills. A pill must be taken by mouth every day, usually at the same time, for this birth control method to work. You may be able to get them at a low cost at a sexual health clinic.

There are many different kinds of birth control pills, so if you have side effects you don't like from one, there are many more to try. Some medicine (like antibiotics) can make the pill less effective, so you must use a condom if you are taking this type of medicine. If you throw up soon after you take your birth control pill, you should use a condom if you do not want to get pregnant. If you smoke, you could think about quitting to reduce the risk of harmful side effects.

Condoms

A male condom is a latex (or rubber) cover that goes over the man's penis during sex. It keeps semen and sperm from getting into their partner. It is easy to use and also

protects you from STDs. They work best when you use them with a water-based lubricant. You can buy condoms and lubricant at places like drug stores or grocery stores. Some clinics also give condoms away.

Female condoms are now available but many young women feel that they are hard to use. With the female condom, however, the woman can take control by being sure that a barrier is in place. Female condoms keep sperm and STDs away from her vagina and uterus. If this is your method of birth control, make sure you carry them with you, and remember to use a new condom **every time** .

Depo-Provera

This method stops the woman from releasing an egg each month. You will have to see a doctor to get this method of birth control. Depo-Provera is given by needle every 3 months. It is 99.7% effective immediately if given during the first 5 days of your period. The most common side effect of this method is light bleeding or “spotting.” The cost of Depo-Provera“ may be covered if you are on social assistance.

Spermicides (Sperm killers)

There are many types of spermicides. They come as jelly, foam, cream or film. They have chemicals in them to kill sperm. They have to be put properly in the vagina. They work best when you use them with a condom. You can buy spermicide at drug stores or grocery stores.

Contraceptive Sponges

These are small sponges that have a spermicide in them. A woman can put one inside her vagina up to 6 hours before having sex. The sponge blocks the sperm from going into the uterus and kills them with the spermicide. Leave the sponge in 6-8 hours after the last act of sex. These sponges are used once, then thrown away. You can buy them at drug stores or grocery stores.

Diaphragms

A diaphragm is a shallow rubber dome-shaped cup. The woman puts it in her vagina less than 1 hour before she has sex. It stops/blocks sperm from getting into the uterus. It should be used with a spermicide. You need to see a doctor to be fitted for a diaphragm. This is another birth control method that many young women find hard to use.

Intra-Uterine Device (IUD)

An IUD is a T-shaped plastic object that is placed in a woman’s uterus by a doctor. An IUD won’t let a fertilized egg **implant** , or start to grow, in the uterus. This birth control method is not usually chosen if you are at risk for infections or STDs.

Emergency Contraceptive Pill (Morning After Pill)

This is a form of birth control that must be taken within **72 hours** of having sex without using birth control or if you think your birth control method did not work. You have to see a health care worker for these pills. Because they use a lot of hormones to keep you from getting pregnant, this method is good in an emergency, but should not be your regular form of birth control.

Unplanned Pregnancy

You're Pregnant — what are you going to do?

You never thought it could happen to you. Getting pregnant happens to other girls. But now, **you** are pregnant.

Talk to someone **right away**. You don't have to face this alone. You can talk to your boyfriend, or your parents and ask them for help. You can talk to a guidance counsellor at school, or a public health nurse. You can call **Planned Parenthood**. You can also look in the yellow pages under **Pregnancy Counselling**. These services will not tell anyone you are pregnant if you don't want them to. However, some people you talk to may have strong feelings on teen pregnancy and what you should do. Take time to make the choice that is best for **you**.

You have 3 main choices:

1. raise your baby yourself
2. have your baby and place it for adoption
3. have an abortion.

None of these choices will be easy, so learn more about each one before you decide.

1. Raising your baby yourself

Babies are very cute, but they are a lot of work. Will your partner help you raise the baby? Have you thought about how you would raise this baby alone? You will have to feed, bathe and take care of all the other things that your baby needs now and in the future.

It costs a lot of money to raise a child. Rent, food, diapers, toys, clothes, furniture, and day care are just some of the things you will have to pay for.

But there is more than just money to think about. If you keep the baby, it will change your whole life: at home, at school, at work and with your friends. This may be a chance to focus on your new responsibilities and take charge of your life.

If you decide to keep the baby, there are places you can go for support. Your parents might help you, so you may want to talk with them about your choice. Ask a counsellor about

programs that help young parents and their babies. These programs can help you learn how to be a good parent. They can help you finish school and help you take care of the baby.

2. Placing your baby for adoption

There are many couples who want a baby but can't have one of their own. These people are waiting to adopt a baby that they will love, raise and take care of just like it was their own child.

There are many types of adoption. You might get to meet and even choose the family that will adopt your baby. You might get to see the baby sometimes, or talk to the family about the baby.

If you want to talk to someone about your choices, you can look in the yellow pages under **Adoption Services** or **Pregnancy Counselling** or call **Planned Parenthood** . These groups can tell you how adoption works. They can also help you choose parents for the baby.

If you choose to place the baby for adoption, don't be surprised if you feel really sad about seeing your baby go to other people to raise. Talking to a friend or a counsellor about your feelings is a good way to take care of yourself during a difficult time.

3. Having an abortion

An abortion will end your pregnancy. If you are thinking of having one, talk to someone right away. It is safer to have an abortion as early as you can. You can talk to a public health nurse, Planned Parenthood or pregnancy counselling groups. They will tell you about all the types of abortion and help you if you decide to have one. They can also tell you where you can have an abortion and if you will have to pay any money.

You will need to take care of yourself after you have an abortion. You might feel very sad. You might also feel relieved. You can talk to a friend or a counsellor about your feelings. You might have cramps after you get home. You will also bleed a bit, just like getting your period. The doctor will tell you what you can do to get rid of the pain and feel better as well as what to do for the next few weeks so you heal quickly. For example, you don't have to stay in bed, but you should not exercise for one or two days. You should not take a bath, have sex, go swimming or use tampons for two weeks. The doctor will also talk with you about a choice of birth control.

Take Care of Yourself While You are Pregnant

If you are keeping the baby or placing it for adoption, take good care of yourself while you are pregnant. If you are very young, you might need advice on how to give the baby the best start in life. Start making healthy choices as soon as you know you are going to have a baby. Some suggestions that will help keep yourself and the baby healthy are:

- See a doctor right away. The first visit is very important! A doctor will want to make sure that both you and the baby are healthy, and see you regularly the whole time you are pregnant.
- STOP smoking, drinking and using drugs, if in fact you are doing this. All of these things may affect your health as well as the development and health of the baby.
- Try to eat a healthy diet. Eat fruits, vegetables, grains and other healthy foods regularly. Don't try to lose weight while you are pregnant. It is healthy to gain some weight while you are pregnant. A doctor or public health nurse can tell you how much you should gain and what you should eat, or if you need to take vitamins. Find out if your city has a program that can teach you how to eat well and give you coupons for fresh fruit, vegetables and milk.

Date Rape Drugs: A New Danger

You can make sure that you practice safer sex when you choose to make love with someone. Unfortunately there are people who force sexual contact with others. This is sexual assault and it is a serious crime. Society must address issues of sexual assault in a way that does not hold the victim responsible for the violence committed against them.

Because of the violent world we live in, you should know that you could be in danger of being raped or assaulted by someone giving you a drug without you knowing it. This happens to men and women all over the country. In bars and at parties, people slip drugs into other people's drinks, hoping the person will pass out so that they can have sex with them. This is rape.

There are many drugs out there that are being called **date rape drugs**. These drugs were made to help treat sickness, but when people use them for the wrong reasons, they can be very harmful. Some of the date rape drugs you may have heard of are:

- Rohypnol. This drug is also called Roofies, Roach, Mexica Valium, Rope, and Roachies. It makes your muscles relax. It can put you to sleep in 15 minutes.
- Gamma Hydroxy Butyrate (GHB). This drug is also called Grievous Bodily Harm, Liquid X, Easy Lay and Saltwater. It makes you feel drunk and dizzy and can make you throw up. It also changes the way you think and impairs your judgement.
- Ketamine. This drug is used by vets to sedate animals. It is also called Special K. Large doses will relax your muscles and put you to sleep.

All of these drugs come as pills, powders or liquids. If someone puts one of these drugs in your drink, you won't even be able to tell it is there. These drugs have no taste or smell. They have no colour, so you can't see them in a drink.

But very quickly, you will start to feel relaxed, carefree and sleepy. You will feel dizzy and clumsy. You will not be able to think straight. You might pass out and forget things. This is when you are in danger of being raped. Some of these drugs can also make you forget what happened when you wake up. These drugs act more quickly when taken with alcohol, and may cause death.

Do your best to stay safe from date rape drugs when you are at bars or parties by:

- always getting/buying your own drink
- drinking from bottles. Glasses and cans have a larger opening that someone could slip a drug into
- never asking someone to watch your drink for you. Keeping your drink with you
- not drinking from punches or large kegs of drinks
- watching out for your friends, and asking them to watch out for you.

If you wake up feeling hungover and think you may have been given a drug and raped; here are some things to think about.

- Don't blame yourself. This is not your fault. You are the victim of a violent crime.
- Get support. Talk to a friend or parent.
- Go to the Emergency Room at the hospital. They will help you find out if you were drugged, and will take care of you if you were raped. They can also collect evidence for the police and offer emergency contraception, if you want them to.
- You can call the police before you go to the hospital, or when you are there.
- Do not shower, bathe, douche or change your clothes if you plan to go to the hospital or police.
- Call a crisis line or sexual assault centre.
- If you can, keep some of the drink that you think was drugged and take it to the hospital and the police.

Self-Esteem



Many teens do not feel good about themselves. They compare themselves to the rich, famous and popular people seen on TV, on Much Music, or in movies and magazines — and don't like who they are.

The way other people treat youth has a big influence on how they feel about themselves, as well. If they are abused mentally, physically, verbally or sexually by family members or teased and marginalized by peers, they will often feel unloved or worthless. These feelings of worthlessness can lead teens to make decisions, such as dropping out of school, that may confirm their bad opinion of themselves — choices that put their mental and physical health and safety even more at risk.

You can help youth improve their self-esteem by:

- ◆ challenging media images and expectations
- ◆ making school and youth programs more affirming
- ◆ helping kids heal from abuse and begin to love themselves
- ◆ providing good role models for the youth around us.

Unit Literacy Objectives:

At the end of the unit, students should:

1. be able to understand most of the story content
2. understand the difference between past, present and future verb tenses
3. have increased vocabulary, pronunciation and alphabetization skills.

Unit Health Education Objectives:

At the end of the unit, students should:

1. understand how self-esteem is influenced by things happening around them in society, at home and with their peers, as well as inside them
2. understand how low self-esteem can affect their mental and physical health
3. be able to identify 3 things they like about themselves and 3 things they enjoy doing
4. be able to express their strengths and worth to others
5. be able to identify several local resources that help youth develop good self-esteem.

Check out these websites:

www.canadian-health-network.ca
www.hc-sc.gc.ca/english/youth.htm
www.goaskalice.columbia.edu/1202.html

Other Resources:

Kids Help Phone — 1-800-668-6868

The Quality of Life Profile — Adolescent Version: Background, Description & Initial Validations

Can be ordered from:

Centre for Health Promotion

University of Toronto, Banting Institute

100 College Street, Room 207

Toronto, ON M5G 1L5

Tel: (416) 978-1809 Fax: (416) 971-1365 Email: centre.healthpromotion@utoronto.ca

Highlight

Making the Grade

When David was little, he thought he'd like to be a school janitor. He really liked Joe, the janitor at Fifth Avenue Elementary School. David and Joe got to be good friends. Joe would let David push the big broom in the gym after lunch. Joe would let David hold the stepladder when he changed light bulbs. David got to know what all the keys on Joe's big key chain were for.



David thought Joe had the best job in the world.

When David told his parents, they laughed and said it figured, since he was so dumb.

That's how David found out that people didn't think being a janitor was a great job.

When David left Fifth Avenue Elementary School for high school, he already knew he wouldn't make it to Grade 12. David had trouble with stuff like math and science. It was hard to read all the chapters that teachers gave as homework. Writing essays was a nightmare. If he bothered to even try, he'd just go to the library and copy stuff out of the encyclopedias and hope it made sense to the teacher.

What he hated most about school was the way other students treated him. They would always ask him what his marks were when teachers returned

tests and homework assignments. They knew he had a hard time in class, but wouldn't give him a break. He'd get comments about being a dummy or a retard.

He was sick and tired of sitting in classes, day after day, listening to the blah, blah, blah of boring teachers. He was sick of being told he had poor study habits. He was sick of adults telling him what he needed to learn, instead of them asking him what he'd like to learn.

David hated school, hated his classmates, and hated himself. He saw every failing mark as proof that he was a failure. Everything his classmates said to him, he said to himself.

Last week David looked at his report card and threw it in the garbage. He had failed every subject except gym. He wasn't surprised. It didn't matter. It's the last one he'll ever get. Next week he turns 16.

Highlight

Working the Stroll

The first man who used me for sex was my stepfather, when I was 7. He came into my room on the nights my mother worked late. When I told my mother, she slapped me for telling lies. Those visits didn't stop until he and my mother split up when I was 11.



When I was 13, our neighbour's 18-year-old son knocked on the door when my mother was out. When I answered the door, he said "Hi Patty," then pushed his way in, and raped me. He threatened to kill me if I reported the attack.

When I was 15, I dated a boy from school. My mother found us in bed together one afternoon, and went crazy. She called me every dirty word she knew. She told me that since sex was the only thing I was good at, I should just start getting paid for it. My boyfriend grabbed his clothes and ran.

I don't know if she really meant it or not, but I believed her. I was good for nothing — except sex. I made low grades at school. I wasn't good at sports. I didn't have lots of friends.

I left home two weeks later. I hitchhiked to Calgary, sleeping with truckers in exchange for food and travel.

That was 5 years ago. I worked the stroll here in Calgary for 3 years. I worked for myself — I didn't have a pimp who controlled me. Some sex workers work part-time, or with a limited number of regular clients. I had about 8 regular clients and entertained about 20 others, each week. I earned maybe \$21,000 a year, which is above minimum wage. I was pretty

careful about practicing protected sex, but I have been treated for 2 sexually transmitted diseases (STDs). Luckily, they could be cured. My latest test shows that I'm finally STD-free.

I was hurt a few times, but nothing so bad that it kept me off the streets. Fear is part of the job. A couple of drinks usually helped me go out there and find clients. A few more drinks, when my night was over, helped me forget how much I hated my life.

I don't work the stroll anymore. No, I'm not "Pretty Woman". A cute rich client did not fall in love with me and change my life. I changed it myself. With help.

One night I was so drunk that I passed out in a john's car. When he was done with me, he dumped me on the side of the road 5 miles out of town without paying me. That's when I realized that I was drinking more and more to make it through my days and nights. I got up the courage to visit a health clinic that offers a recovery program for alcoholics.

During the months of group counselling that followed, I realized that my mother was wrong. I am not good for nothing but sex. I've taken the time to think about the things I like, and found out that I really like animals. I passed my GED (General Education Diploma), and have a job as a cashier in a small grocery store. I'm saving my money to get training as a veterinary assistant. I start classes next fall.

I'm paid less than I was making as a sex worker, but I like myself more. I have a cat named Hope who reminds me, every day, that I am no longer a victim, but a woman with a plan and a future.

Explain

Making the Grade

1. When he was little, what did David want to be when he grew up?
2. How did David's parents react when he told them his plans?
3. How did David write essays?
4. What did David hate most about school?
5. How did David's problems at school affect how he felt about himself?
6. What is David's best subject?
7. What did David do with his last report card?
8. Why does David think that turning 16 will solve his problems at school?

Working the Stroll

1. Who was the first man to use Patty for sex?
2. Who raped Patty when she was 13?
3. Where did Patty go when she left home?
4. How did Patty earn money?
5. What did Patty do to forget how much she hated her life?
6. What event gave Patty the courage to join a recovery program for alcoholics?
7. Where does Patty work now?
8. Why did Patty name her cat Hope?

Analyze

To be effective, discussion groups must be a safe place for youth to share their opinions, experiences, fears and beliefs.

As a group, develop guidelines such as:

- all opinions, stories and ideas expressed will remain private
- one person speaks at a time
- everyone participates
- no one will be mocked or criticized.

1. What things in your life help or hurt your self-esteem?
2. What choices might students with low self-esteem make?
3. What can schools do to prevent teens from dropping out?
4. What can parents do to build good self-esteem in their children?
5. How can good role models help youth feel good about who they are and set goals they can successfully meet?
6. What can you do to encourage someone you know who is struggling with low self-esteem?

Learn

Verb Tenses

You know that Patty's story is mostly about what happened to her in the past, because the verbs are in the past tense.

- 1) Change these verbs so that you can use them to tell a story about what is happening now (Present) and what might happen tomorrow (Future).

Past	Present	Future
Was	_____	_____
Came	_____	_____
Worked	_____	_____
Told	_____	_____
Slapped	_____	_____
Didn't	_____	_____
Knocked	_____	_____
Used	_____	_____
Answered	_____	_____
Pushed	_____	_____
Raped	_____	_____
Threatened	_____	_____
Reported	_____	_____
Dated	_____	_____
Found	_____	_____
Called	_____	_____
Knew	_____	_____
Meant	_____	_____
Made	_____	_____
Left	_____	_____
Had	_____	_____
Realized	_____	_____

2) Practise saying these words out loud, then write them in alphabetical order.

- Thought _____
- Laughed _____
- Elementary _____
- Writing _____
- Comments _____
- Boring _____
- Science _____
- Would _____
- Essays _____
- Bothered _____
- Assignments _____
- Gym _____
- Proof _____
- Garbage _____
- Failed _____
- Except _____
- Surprised _____
- Used _____
- Slapped _____
- Victim _____
- Neighbour _____
- Threat _____
- Friends _____
- Regular _____
- Diseases _____
- Usually _____
- Recovery _____
- Cashier _____
- Counselling _____
- Veterinary _____

Role Play

You are being interviewed for a job as a sales clerk in a large department store. Since you have just explored what you like about yourself, explain why you feel you are a good choice for this position.

Resource Mapping

Contact your city hall or your local public health unit for a list of services available to people living in your community. Identify which of these services are qualified, accessible and eager to help youth develop good self-esteem. The goal is to produce a list that you can use and/or share with your peers, with confidence.

Self-Esteem

Self-esteem is the way that you see yourself and how you feel about yourself as a person. How you feel about yourself affects how you live. High self-esteem helps you become a happy, healthy person. The better you feel about yourself when you are young, the better you will feel about yourself throughout your whole life. Feeling bad about yourself and your life, or having low self-esteem, can lead to problems now and as you get older.

What affects self-esteem?

Life at Home

The way that your parents and family treat you has a major impact on how you feel about yourself. If your parents and family show you that they love and respect you, you will most likely feel happy with who you are. If you feel unloved by your family, you may not feel good about yourself.

Life at School

School can be hard when you feel like you don't fit in. Do you have trouble with your work and get bad grades? Maybe you don't get along with teachers, or don't have any friends at school. If people at school tease you, call you names or just ignore you, it is hard not to feel bad about yourself since you spend so much time there.

Friends

Friends can make you feel good about yourself. But if you think they dress better, look better or are more popular than you, you might feel that you're not as good as they are. If you don't have very many friends, you might feel lonely or depressed.

How Other People See You

Most people care about what other people think of them. Whether it is family, friends, teachers, or strangers, a lot of people worry about how other people see them. If you think that other people don't like you, you might not like yourself very much.

Abuse

If people around you abuse you mentally, physically, verbally or sexually, it can make you feel very bad about yourself. All of these types of abuse can make you feel not loved or worthless.

Alcohol and Drug Abuse

Alcohol and drugs can change the way that people around you treat you. They can also change the way you feel about yourself.

What problems are caused by low self-esteem?

Depression

If you think you are worthless or unloved, you will most likely feel sad and lonely a lot of the time. Being sad for a long time is known as depression. Depression can affect all aspects of your life. It can even lead to suicide.

Dropping Out of School

People who have a hard time in school often drop out before they finish high school. This makes it very hard to find a job later on. If you drop out, you will most likely end up working in low-paying jobs since you may not have the skills, education or experience for better jobs.

Abusing Other People

Some people who were abused, or who suffer from low self-esteem, go on to abuse others. They might get into fights with people. They might hurt those close to them — yelling at them, hitting them or treating them badly. They might try to make other people feel bad about themselves to make themselves feel better.

Alcohol and Drug Abuse

If you have low self-esteem, you might start drinking or abusing drugs to make yourself feel better. This might seem to work for a little while, but in the end, drug or alcohol abuse will make you feel worse about yourself and your life. It can also lead to severe health problems.

Prostitution

Sometimes people who had a bad childhood, were abused, or have low levels of education end up on the streets. They can't get a good job or make enough money to live. Desperate for money, shelter, food or other things, some people turn to trading sex.

How can I feel better about myself?

Talk to a friend or a community youth worker . You might need to go for counselling and talk to someone who can show you how and why you can feel good about yourself. Talking to other people in a support group might also help you. When you feel good about yourself, you will feel good about your life.

Stay in school. When you have an education, there are more jobs open to you.

Take care of your body. Eat healthy foods. Don't smoke or drink too much. Don't abuse drugs. If you keep your body healthy, your mind will have more of a chance to be happy.

Do things that make you happy. Spend time with people who make you feel good about yourself. Be kind to yourself. Play sports, listen to music, help other people.

Drug Abuse



Curiosity, boredom, unhappiness, painful relationships and desperation to escape the reality of their lives are reasons some teens give for trying the many drugs available to them today. Others suggest that the lack of positive role models in their lives combined with peer pressure, and low self-esteem led them to engage in risky activities such as drug abuse.

Although teens' recreational drugs of choice are marijuana and cocaine, taking prescription pills with alcohol is becoming a favourite weekend activity for thrill-seeking youths.

Teens find it hard to resist the excitement and escape from problems that drugs promise and provide. They also find it hard to believe that it's easier to start using drugs than to stop.

You can help youth understand and/or avoid drug addiction by:

- ◆ explaining the effects drugs can have on their lives
- ◆ exploring with them why youth use drugs and what alternatives there are
- ◆ referring youth who are seeking help to programs designed to help them overcome drug addiction
- ◆ supporting those who are trying to break addictions.

Unit Literacy Objectives:

At the end of the unit, students should:

1. be able to understand most of the story content
2. understand compound words and compound sentences
3. have increased vocabulary skills.

Unit Health Education Objectives:

At the end of the unit, students should:

1. be able to identify several reasons why youth begin to use drugs
2. understand how drug abuse can affect their mental and physical health
3. have a strategy for refusing drugs without losing face
4. be able to identify several local resources that help youth understand, avoid, or overcome drug abuse.

Check out these web-sites:

www.canadian-health-network.ca

www.deal.org

www.health.org

www.hc-sc.gc.ca/english/youth.htm

www.prescriptiondrugabuse.org

www.angelfire.com/co/Cocaine

www.http://crackbusters.com

www.recoverynetwork.com/links/800.html

www.inhalants.org

www.healthtouch.com/level1/leaflets/118054/118058.htm

<http://hna.ffh.vic.gov.au/phb/hdev/drug/cover.html>

<http://kidshelp.sympatico.ca> (under *tools for life* heading drug abuse)

<http://209.250.151.141:8080>

Alcohol and Drug Abuse Hotlines

Cocaine Hotline 1-800-COCAINE

Al-Anon/Alateen Family Group Headquarters, Inc. (Serving teens with alcohol and drug addictions)

Canada 1-800-443-4525

USA 1-800-344-2666

Other Resources

Sentence upped for 'date rape drug' Globe and Mail February 19, 2000 p. A21.

Youth Net

Youth Fax No. 10 (January, 1998) *Drugs*. (Available from Youth Net, 401 Smyth Road, Ottawa, ON K1H 8L1 Tel: (613) 738-3915, Fax: (613) 738-3917.

Highlight

Busted

I won't blame my dad for my drug problems, but when I try to figure out why I started sniffing coke, I know it had a lot to do with him losing his job.

My dad is a pretty take-charge kind of guy. He says "Greg!" and I jump. It was OK when he was working. I mean, we only had to put up with his bad



moods or follow orders for a couple hours a day. When I was little, I'd see him only at supper. He would get home from work and we would eat. After supper, I went to bed. As I got older, I'd try not to say anything dumb at the table that would make him mad. I'd help my mom with supper clean up, then go to my bedroom to listen to music or do my homework.

When the factory closed, he was home all the time. He was always in a bad mood. He had a problem with everything I did, what I wore, how I looked. He wouldn't let me bleach my hair like the other guys in my class. He threatened to kick me out of the house if I ever got my ear pierced. I hated being home, because he was there.

I started hanging out at the mall after school, just to have a couple of hours to myself before facing him. I got friendly with other kids who spent time there too. At first I thought that they were just hanging out, like me. But as I got to

know them better, I saw that they were doing business. They sold little packets of coke at \$15 each. Business was good, because they supplied users from 4 schools. It was interesting to watch the different kinds of people buying the stuff. There was no "druggie" type. The fact that so many kinds of kids were using the stuff made me want to try it.

The first packet was free. Now I know why. Everything seems so intense and possible when I'm high. Life without it sucks.

I used money I had in my savings account to support my habit. At first, I could get 2 snorts from a packet, and I was using 3 packets a week. As my cocaine use grew, my money started running out. I took money out of my mom's wallet. But let's face it, with Dad out of work, \$45 missing didn't go unnoticed! I told my parents I needed it to pay for school supplies. I had to pay them back by doing extra chores around the house.

I became desperate for ways to get the money I needed to buy coke, and started to snatch purses. I'd take out any money I could find, then dump the purse into the nearest garbage can. After almost getting caught, I started to sell coke to support my habit. For every 10 packets I sold, my supplier gave me one packet free.

My parents knew something was going on, but didn't think I was into drugs. I never snorted coke at home, and didn't stay out late at night. But I was losing a lot of weight and hardly ever slept.

My business at school was growing nicely, but I was failing my courses. I got called into the counsellor's office to talk about what was going on. I talked a lot about trouble at home and promised to try harder. She didn't have a clue.

Two weeks ago, a jerk in my biology class set me up. When I met him after school to sell him some coke, I was arrested by a couple of plainclothes cops.

My parents are really upset. They're mad at me, each other, my supplier, and the world.

I'm in a detox centre now. When the doctor thinks I'm over my addiction, I'll get transferred to a juvenile detention centre. I hate it here. I can't imagine what life will be like for me when I get out. I guess I should care, but I don't — yet.

Highlight

The Profit and the Loss

My name is Heidi. I'm in sales. The income is high. So are the risks, I've discovered. For my clients and me.

When I was 15 I broke my leg in a downhill skiing accident during a Christmas visit with my mother who works in a ski resort in Whistler, British Columbia. I needed two operations to set the bones properly. I



was in a lot of pain. Hospital staff gave me Percodan to help me sleep. When I got home to Ottawa I still had to take painkillers to get through the night. They worked really well. When they kicked in, nothing hurt. I felt like I was floating in a rainbow cloud, gently drifting through space and time. The accident spoiled my senior girls' basketball season, but introduced me to the magic of prescription drugs.

I insisted that the pain was still bad, even when it wasn't, so that I could continue to enjoy my trips into dreamland. My father, who is a family doctor, prescribed codeine to dull the pain. Those pills didn't give me the same great feeling as the Percodan (percs) did, but it was better than nothing. When the codeine capsules were gone, he ordered a refill. I took several out of the pill bottle and hid them. When my dad decided I shouldn't take any more, he took the bottle away.

By the time I was off crutches, I was still taking codeine. When my secret supply ran low, I took a sheet from my dad's prescription pad, and wrote out another drug order for Percodan, and signed his name. I brought it to a pharmacy across town, and paid cash. There was no problem getting the fake order filled. I increased my dose, taking as many as 3 pills a day.

On the weekends my girlfriends and I would take a few with a couple of beers with really amazing results.

When I realized how easy it was for me to get drugs, I decided to go into business for myself. I stole a whole pad of my father's prescription forms from his office, so I could write more fake drug orders. When I was sure that he hadn't noticed that it was missing, I started using the forms to stock up on Valium, percs and codeine to take and to sell. For example, I bought 50 pills for \$30.00, then sold them for \$ 3.00 each. That pad of forms kept me supplied with enough drugs for my own habit, and for selling drugs to others, for a whole year. I sold a lot because taking percs with alcohol is the way teens around here like to party.

With my father's help, I got a job cleaning offices in a medical building downtown. Over a period of 6 months, I was able to steal prescription form sheets from several doctors. I am always careful to buy the drugs from several different drug stores, using names I take from the phone book.

Last week, a girl I sold pills to took an overdose and died.

I know I should stop. My whole life is centred on taking and selling drugs. I'm messing up my life and the lives of others. I made lots of money and lost a clear conscience. I want to stop lying and cheating. I want to know the difference between right and wrong again. I want to stop feeling guilty.

That will be the hardest thing of all.

Explain

Busted

1. Why did Greg start hanging out at the mall?
2. Why did Greg's father lose his job?
3. What were Greg's new friends doing at the mall?
4. Why did Greg want to try coke?
5. How much did his first packet cost? Why?
6. How did Greg get money to buy coke when his money ran out?
7. Why did he start selling coke?
8. Why did Greg's parents think something was wrong?
9. Who set Greg up to get busted?
10. Where is Greg now?

The Profit and the Loss

1. Where does Heidi's mother work?
2. Why did Heidi start taking Percodan?
3. What does Heidi's father do for a living?
4. How does Heidi supply herself with prescription drugs?
5. How much does Heidi charge for a Valium pill?
6. How does Heidi find names to put on prescription forms?
7. What do Heidi and her friends mix with pills? Why?
8. What job did Heidi's father help her get?
9. What makes Heidi think she should stop taking and dealing drugs?
10. What are some of the things that Heidi wants now, that her drug money can't buy?

Analyze

1. Do you think that drugs add to your life or take away from it? Explain.
2. Can you believe people who say they can use drugs without becoming addicted? Why? Why not?
3. Do you think that drugs would become less attractive to people if they were legalized?
4. Do you think that youth are under a lot of pressure from peers and the media to try drugs? Explain.
5. If drugs change how you think and act, what are some possible consequences of taking drugs, other than addiction? (i.e., driving under the influence, unprotected sex, violence)
6. How can you protect yourself from becoming a date rape drug victim? How can you protect others from becoming date rape drug victims?

To be effective, discussion groups must be a safe place for youth to share their opinions, experiences, fears and beliefs.

As a group, develop guidelines such as:

- all opinions, stories and ideas expressed will remain private
- one person speaks at a time
- everyone participates
- no one will be mocked or criticized.

Learn

Compound Words

Compound words are words that are made by putting together two smaller words.
Examples of compound words are:

Afternoon	Bedroom	Chairman	Daylight	Everything
Football	Grandmother	Horseshoe	Indoors	Jellyfish

1) Find 5 compound words in the story Profit and Loss and write them in the boxes below.

--	--	--	--	--

The following list of words are not compound words, but they do have smaller words inside them.

2) Read each word and write all the smaller words you find.

Example: Season: Sea, As, Seas, So, Son, On

Income: _____

Discovered _____

Operations _____

Drugs _____

Than _____

Sheet _____

Form _____

Filled _____

Many _____

Realized _____

Year _____

Building _____

Always _____

Mad _____

Compound sentences are made by putting together two smaller sentences with words like or, but or and.

3) Make compound sentences from the pairs of short sentences below.

For example:

- 1. I won't blame my father for my drug problems. I know they had a lot to do with his losing his job.

I won't blame my father for my drug problems but I know they had a lot to do with his losing his job.

- 2. I would help my mom with supper clean-up. Then I would go to my bedroom to listen to music.

- 3. After school I would hang out at the mall. Sometimes I would sit in the park, just to have a couple of hours to myself before facing my father.

- 4. I started to snatch purses. I would take out any money I could find.

- 5. I talked a lot about trouble at home. I promised to try harder.

- 6. The accident spoiled my senior girls' basketball season. It introduced me to the magic of prescription drugs.

- 7. I made lots of money. I lost a clear conscience.

Role Play

You are at a party and a friend offers you a packet of coke. S/he insists that it will guarantee you a great time. Many other youth are snorting, and you don't want them to think you're afraid. How would you refuse the drugs without losing face?

Resource Mapping

Contact your city hall or your local public health unit for a list of services available to people living in your community. Identify which of these services are qualified, accessible and eager to help youth understand, avoid, or overcome drug abuse. The goal is to produce a list that you can use and/or share with your peers, with confidence.

HELP

The Dangers of Drugs

What is a drug?

A drug is any substance that affects your body, your mind or your actions.

There are many kinds of drugs. There are drugs that you smoke, that you swallow, that you inhale, that you drink, and even drugs that you inject into your body with a needle. Some drugs are legal and some drugs are not legal. Some of the drugs you might have heard of are:

- marijuana (pot)
- cocaine/crack
- alcohol
- tobacco
- LSD
- heroin
- steroids
- nicotine
- ecstasy
- mushrooms

There are many other kinds of drugs out there too. Lots of people use them. They may seem fun or harmless, but drugs can make you very sick and even kill you.

Why do people use drugs?

- **Pain control.** Drugs may be prescribed by doctors to help people deal with emotional and physical pain. This kind of drug use can become a problem when people are not able or willing to stop taking these drugs when the treatment period is over. Prescription drugs are legal, but they are supposed to be used to treat sickness. Taking drugs that were not prescribed for you, or taking too much of a prescription drug is dangerous. If you abuse these drugs alone, mix them with other pills or with alcohol to try out different ways of getting high, you never know what they will do to you.
- **Peer pressure.** Many people use drugs to fit in with their friends. Maybe your friends use drugs and they try to get you to use them too.
- **Curiosity.** People often try drugs for the first time just to see what it feels like. They see other people using drugs at parties and in bars and think it looks like fun.
- **For pleasure.** Many people like the way that drugs make them feel. Some drugs make people feel relaxed and calm. Other drugs give people more energy and make them enjoy things more.
- **To rebel and to take risks.** For some people, feeling grown up and in control is part of what they like about using drugs. Other people like the dangers or the risk of getting caught.

- **To relieve stress.** Many people use certain drugs to calm them down. Some people use them if they are upset or nervous or to get away from problems in life.
- **Because people at home use drugs.** Maybe your parents or your older siblings use drugs. If you see drugs in your home, you might want to try them too.

What can drugs do to my mind?

Drugs affect people in different ways. Some drugs make people feel relaxed and calm. This feeling of being mellow and happy is known as being high, but this feeling does not last. Some drugs make people feel scared, nervous or out of control. Drugs change the way you think, react and behave. You may not be able to think clearly. You might forget things. You might get very confused. You might hallucinate, or see things that are not real.

People on drugs often make choices that put themselves and others at risk. You might try to drive a car or get in a car with someone else who is high. Drug use can also lead to fights, falls, burns, drowning, and even suicide. You might also end up taking risks about sex or other things that can put you in real danger.

If you use drugs over a long period of time, they can affect your mind permanently. You might always forget things or have trouble learning. You might keep seeing things that are not real. Drugs can make your brain work slowly. They can make you depressed. They can affect your thoughts and feelings.

What can drugs do to my body?

Drugs have different effects on the body. Some drugs will speed up your heartbeat, raise your blood pressure and make you breathe very fast. Other drugs will slow down your heart rate and the way your body works and can make you sleepy, clumsy or dizzy. Some drugs will make you sweat, others will make you shiver. Some drugs will make you pass out. Some drugs can cause seizures or heart failure. Some drugs can kill you if you take them at all or take too much.

If you keep abusing drugs, they will hurt your body. You could damage your liver and other vital organs. Your heart could get weak from having to work so hard when you are on drugs. If you use needles, you are at greater risk of getting hepatitis B and HIV.

What can drugs do to my life?

Drugs can affect your life in other ways. You might stop taking good care of yourself by not eating healthy foods, by dropping sports or good friends. You might start to depend on drugs so much that nothing else matters. You could get angry a lot or become depressed. You might stop caring about school, so your grades will drop. If you have a job, you might miss work, get in trouble or even get fired.

You might start lying to hide your drug habit or stealing to pay for drugs. You can get arrested if you are caught buying, selling or using drugs. You might have to pay a fine or even spend time in jail. This could give you a police record that you will have for life.

How can I stop using drugs?

When you're trying to stop abusing drugs, try to stay away from people who use them. You will be less tempted if you stay away from bars and parties where you know you will be exposed to drugs.

Talk to people who understand drug addiction. There are support groups that may be able to help you learn how to handle the times when you want drugs or are being offered them.

You can also look under **Addiction Information & Treatment Centres** in the Yellow Pages. There is a list of places that can help you stop using drugs for good.

Drinking

Youth are given the message that drinking alcohol will make them popular, sexy, athletic and funny. Television commercials don't show what damage heavy drinking can do.

As teens approach adulthood, they are impatient to engage in adult activities. For many, drinking alcohol represents their entry into the world of adults.

Family attitudes about alcohol can also impact a teen's desire to drink. If drinking is important to parents, youth might start drinking as a way of identifying with them. If drinking is forbidden by parents, youth might start drinking as a way to rebel.

Another reason why youth drink is to escape emotional pain. Sometimes they need alcohol to relax. If they are unable to control their drinking, drinking will start to control them, as confirmed by the growing number of alcohol-dependent teens.

You can help teens who are making decisions about alcohol by:

- ◆ challenging the media messages about the benefits of drinking alcohol
- ◆ exploring the reasons why teens drink
- ◆ explaining the positive and negative effects drinking can have on other parts of their lives such as their health, their friendships and their reputation
- ◆ identifying signs of problem drinking such as drinking alone, drinking a lot in a short time or needing to drink every day
- ◆ referring youth who are seeking help to programs designed to help them control their drinking
- ◆ supporting those who are trying to break their dependence on alcohol.

Unit Literacy Objectives:

At the end of the unit, students should:

1. be able to understand most of the story content
2. understand the use and formation of contractions
3. have increased vocabulary skills.

Unit Health Education Objectives:

At the end of the unit, students should:

1. be able to identify several things that influence teens to drink alcohol
2. be able to recognize signs of a drinking problem
3. understand how drinking can affect their mental and physical health
4. have some strategies for handling situations that involve people under the influence of alcohol
5. be able to identify several local resources that help youth understand, avoid or overcome alcohol abuse.

Check out these web-sites:

www.canadian-health-network.ca

www.hc-sc.gc.ca/english/youth.htm

www.aa.org

www.add.ca/teen_add.htm

www.healthtouch.com/level1/leaflets/118054/118058.htm

<http://209.250.151.141:8080>

Other Resources

Alcohol and Drug Abuse Hotlines

Alcohol Treatment Referral Hotline 1-800-ALCOHOL

Provides 24-hour help and referrals for people with concerns about alcohol or drug use.

Canadian Centre on Substance Abuse

75 Albert Street, Suite 300

Ottawa, Ontario K1P 5E7

Phone: (613) 235-4048 Fax: (613) 235-810

Articles

“Drinking Age, Teen Suicide Rates Linked” *American Journal of Public Health*, 1999;89: 1365-1368.

Highlight

In Over Her Head

“No way! You have *never* tasted beer?”

Shannon nodded, wishing she could die on the spot. She wanted to be part of the cool group in her new high school, but now they probably all thought she was a real loser. It was so important that she fit in! She and her mother had sold their house in Halifax and had moved in with her grandmother here in the small town of Bancroft, Ontario, when her dad died after a 2-year battle with cancer. Thinking quickly, she grabbed her wallet out of her backpack and pulled out \$20. “Is this enough to buy beer for all of us?” she asked.



“Absolutely,” said Erika, as she grabbed the money and stuffed it in her pocket. “We’ll meet tonight at 8 o’clock behind the church on 5th and Main. You know the spot?” The girls all nodded, then ran as the bell rang for their next class.

Shannon asked her mother to drop her off at the public library to do homework that night. She wanted to go meet her new friends without having to answer any questions. She knew her mom would never let her be out after dark with girls she didn’t know, let alone allow her to drink beer! She worked until 7:45 pm, then walked the 3 blocks to the church.

Erika and 4 other girls joined Shannon in the shadows behind the church building just after

8 o’clock. They brought 2 6-packs of beer with them. “Two each!” exclaimed Erika as she passed them out and popped the lid off of her first.

“The cops never check back here because we don’t leave a mess,” Callie whispered to Shannon, who froze every time a car drove by.

Shannon opened a can of beer and took a sip. She made a face, then sipped again. By the time she had nearly finished the can, she was taking a few

swallows at a time, enjoying the strange new taste. She felt very grown-up, and was so glad that the girls included her in their complaints about parents and teachers, and their stories about the boys they'd dated over the summer.

Erika helped Shannon finish her second beer. She then took a small roll of breath mints out of her pocket and gave 2 to each girl. "These should get you past your parents and up to the bathroom to brush your teeth before they ask any questions," she explained. "It works for the rest of us!"

Shannon ran back to the library. She felt a bit sleepy, but didn't think it was because of the beer. She was glad for the chance to go into the bathroom and wash her face with cold water. She rinsed out her mouth before using the breath mint. She was waiting outside the library when her mother arrived a few minutes later.

Drinking with friends behind the church became a regular part of Shannon's life. Any night of the week, as many as a dozen friends would meet for a beer or 2. Shannon's grades slipped a bit, but she told her mom and grandmother that her new school was harder than the one she had gone to before. Didn't they see that she was spending at least 3 nights a week at the library?

Her friends told her she was funny after she'd had a couple of beers. She would drink until she got silly and made everyone laugh. Shannon felt popular for the first time in her life.

By the end of Grade 11, Shannon was spending most of her pocket money on beer and cheap wine. When friends' parents went away for a weekend, her group would throw all-night parties. Shannon would get permission to spend Friday night "at a friend's." She would get drunk and not come home until she got over her hangover — usually late Saturday afternoon.

Last weekend, while she was drunk, Shannon jumped into a swimming pool at an all-night party. She made everyone laugh. Then she almost drowned.

One of the guys at the party was a lifeguard and dove in and rescued her when someone finally figured out that Shannon was in real trouble. Erika called 911 and told everybody to leave before the paramedics arrived.

Shannon woke up in the hospital, 3 days later. She, her mom and her grandmother were all happy to learn that she had not suffered any brain damage. She knew that it would be dangerous to drink so much in the future. She didn't know if she could stop. She was also afraid of losing all her friends if she stopped drinking.

Shannon didn't know if she should laugh or cry when an addiction counsellor at the hospital told her that as a result of her accident, parents and teachers had asked that an alcohol recovery program for teens be offered in Bancroft. The program was approved by the town council and it was going to be held in the same church she used to drink behind!

Shannon was nervous when her mom brought her to the first meeting, but her fears disappeared when she entered the room. There, saving a seat for her, were Erika and Callie.

Highlight

A Date to Remember

Throwing up into your date's lap isn't the best way to get a girlfriend. Believe me.

I didn't have the flu. I didn't have food poisoning. I was drunk.

Not everybody gets sick when they drink. My problem is that I drink until

I get sick. Last weekend, I thought that I could stop after 1 or 2 drinks. I was wrong. Sarah was totally grossed out. She called home and had her father pick her up from the party.

I can tear apart a car engine and rebuild it, no problem. I speak two languages. I get passing grades at school. But I can't say no to alcohol.

My name is Stephen Trapper. I am Cree. I am 18 years old. I'm an alcoholic.

My father grew up in a residential school in northern Manitoba. He was taken away from his village, his family and his culture. He learned how to read and write English and do basic math. He also learned how to live in an institution. When he finished school and went back to his village, he didn't know how to live like a native. He didn't fit in. People made fun of him because he couldn't fish and hunt. He did learn how to drink, though. Getting drunk was a favourite weekend activity for many men on the reserve.

He eventually went off reserve to look for work. He got hired as a public school janitor in Winnipeg. He did OK because he did what teachers and principals told him to do. He hated it because those same teachers and



principals treated him like a “stupid Indian.” They made him feel like he was back in the residential school system. He spent his weekends drinking with native men he met downtown.

He met my mother at a Pow Wow. He was 28, she was 17. Eight months later she was pregnant, so they got married.

My dad didn't know anything about living in a family, or being a husband and father. He just knew about doing his job and drinking with his friends on weekends. My mother had no self-esteem. She had been sexually abused by a cousin as a young girl, and having a baby triggered memories she wanted to forget. She started to drink at home. Ever since I was a baby, I'd finish off the beer left in her glass. She thought it was cute. She also liked the fact that a few swallows of beer calmed me right down.

By the time I was 14, I was drinking a 6-pack of beer a day. I'd brag about it at school as a way to make friends. Getting passing marks was not much of a problem, but making friends was. I couldn't invite kids over to our apartment — it was always a mess, and my mother was usually drunk. My clothes didn't have the right labels and were often worn and dirty. I was one of only a handful of native students in my school. White kids were more interested in teasing us than getting to know us.

At 16 I added my father's favourite drink to my diet: whiskey. It wasn't long before I was spending most weekends with my father and his friends, drinking until I got sick. It wasn't until last weekend, when I could not stop drinking at a party, that I realized that I couldn't control my drinking. My drinking controlled me.

In my drunken state, I felt like my life was a waste of time. I'd end up a drunk like my parents, or worse. I thought it would be easier on everyone if I just killed myself. I tried to leave the party by jumping off the apartment balcony, but was held back by my friend Daniel.

The next day Daniel brought me to the home of a native Elder who shared stories of the Cree culture with us. He said I must stop drinking if I want to build a life for myself that I and others can respect. He made a lot of sense. I decided I want to change my life.

It's hard for me to live at home now that I'm trying to stop drinking. My friends at the Aboriginal healing centre support me and help me find ways to show my parents that they too can live without alcohol.

Throwing up in my date's lap might turn out to be the best thing that ever happened to me, because that was the day I decided to begin a new life without booze. It's a date I'll remember forever!

Explain

In Over Her Head

1. Why did Shannon think the cool kids at her new school thought she was a real loser?
2. How much money did Shannon give Erika? Why?
3. Where did Shannon's mother think she was doing homework?
4. How did Shannon feel when she drank her first beer?
5. What did Erika give to all the girls after they finished their drinks? Why?
6. Where did Shannon meet her friends to drink?
7. How did Shannon explain her dropping grades to her parents?
8. What made Shannon feel popular?
9. What happened when Shannon jumped in a swimming pool while drunk?
10. Why does Shannon know she won't lose all her friends if she stops drinking now?

A Date to Remember

1. Where did Stephen's father grow up?
2. Why did he leave the reserve to look for work in Winnipeg?
3. Where did he meet Stephen's mother?
4. What triggered memories of sexual abuse in her past?
5. How did she cope?
6. When did Stephen begin to drink?
7. Why did Stephen brag about drinking to his classmates?
8. Who did Stephen throw up on during a party?
9. Where did Daniel bring Stephen the day after the party?
10. Why will that party be a date for Stephen to remember?

Analyze

1. Are many teens anxious to reach legal drinking age? Why? Why not?
2. Should the legal drinking age be changed? Higher? Lower? Explain.
3. Do you think that advertising really influences teens to start drinking?
4. What are long-term effects of drinking?
5. If you thought you had a drinking problem, would you try to get help?
6. Is being able to drink alcohol important to you? Why? Why not?
7. If drinking changes how you think and act, what are some possible consequences of drinking, other than addiction? (i.e., driving under the influence, unprotected sex, violence)

To be effective, discussion groups must be a safe place for youth to share their opinions, experiences, fears and beliefs.

As a group, develop guidelines such as:

- all opinions, stories and ideas expressed will remain private
- one person speaks at a time
- everyone participates
- no one will be mocked or criticized.

Learn

Contractions

Contractions are a way of writing a pair of words as one word.

Example: Should not = Shouldn't

1) Match these word pairs with their contractions.

Should not	I'm
Can not	They're
Are not	Don't
Do not	Shouldn't
Does not	He's
She is	Aren't
They are	Can't
He is	Wouldn't
I am	She's
Would not	Doesn't
I will	I've
Could not	Won't
Have not	We'll
Had not	They'll
Will not	I'll
I have	Haven't
We will	We've
We have	Couldn't
They will	She'll
She will	Hadn't

These words are all mixed up!

2) Unscramble each word and place it in the sentence where it fits best.

bghtoru, daregs, gagunilh, kudrn, left, lysli, rolse, shifin, statde, vredo, zbuuz

For example: uzbz = buzz A beer buzz gone bad.

1. You have never t_____ beer?
2. They probably all thought she was a real l_____

3. They b_____ two 6-packs of beer with them.
4. Shannon froze every time a car d_____ by.
5. She f_____ very grown-up.
6. Erika helped Shannon f_____ her second beer.
7. Shannon's g_____ slipped a bit.
8. She would drink until she got s_____.
9. They were all l_____ at her.
10. Last weekend, while she was d_____, Shannon almost drowned.

Let's do that again!

agehcn, bremreme, dngiikrn, kics, kpase, lfimay, luf, nwok, oolccihla, rometh, wokr

For example: luf = flu _____ I didn't have the flu.

1. Not everybody gets s _____ when they drink.
2. I s _____ two languages.
3. I'm an a_____.
4. He was taken away from his village, his f _____ and his culture.
5. He went off reserve to look for w _____.
6. My m _____ had no self-esteem.
7. My d_____ controlled me.
8. I decided I want to c_____ my life.
9. I don't k_____ what's ahead.
10. It is a date I'll r_____ forever!

Role Play

You are at a party with several friends. Your driver has served himself at the open bar several times, and you are worried about the ride home. What would you do in this situation? What would be the safest way for you and your friends to get home?

OR

A friend has humiliated him/herself while drunk. The next day, explain the effect too much alcohol has on him/her. Suggest ways s/he can recognize when s/he has had enough to drink.

OR

You have learned from past experience that when your best friend has had too much to drink, s/he insults people. Decide what you will do the next time his/her insults are directed at you, and tell him/her.

Resource Mapping

Contact your city hall or your local public health unit for a list of services available to people living in your community. Identify which of these services are qualified, accessible and eager to help youth understand, avoid or overcome alcohol abuse. The goal is to produce a list that you can use and/or share with your peers, with confidence.

Help

Do you drink? Then drink safely.

Booze. Beer. Wine. Coolers. Liquor. Shots. It doesn't matter what you call it, it's all alcohol. Alcohol is a drug. And more people abuse alcohol than any other drug.

Lots of people drink. You have probably at least tried some kind of alcohol. Maybe you had your first drink at a party with friends. Or you have tried booze at home or at a friend's house. It is against the law for minors (people who are younger than the legal drinking age) to drink booze. Even so, children and teens are starting to drink alcohol at younger ages.

Why do teens drink?

There are lots of reasons why teens drink. Some of the reasons that teens drink are to:

- fit in with friends who drink or to make new friends (peer pressure)
- kill the pain problems bring
- look and feel cool
- feel less shy around others
- attract boyfriends or girlfriends
- break the rules
- get rid of nerves or stress
- taste different kinds of booze
- see how it feels to be drunk
- get a "buzz" or "high"

What's so bad about drinking?

Drinking can be dangerous. It is very easy to drink too much, even if you don't mean to. Even 1 or 2 drinks can affect how you feel, think, behave and react. Maybe you think that you won't get drunk as quickly if you drink just beer rather than hard liquor or wine. But 1 1/2 ounces of liquor (1 shot), 1 glass of wine and 1 beer all have the same amount of alcohol in them.

When you have been drinking too much, you might take too many risks. You might fool around or sleep with someone without using birth control or a condom to protect you from sexually transmitted diseases (STDs). You could end up pregnant or sick with an infection. You could put yourself at risk of being attacked or sexually assaulted. You might get into a fight. You could get into a car with someone who has been drinking. Or you might try to drive after you have been drinking. You can increase the risk of accidents like falling or drowning by drinking. **When you drink too much, you can put yourself and other people in danger** .

Drinking too much can affect all parts of your life. You may start to have health problems such as headaches, nausea or stomach problems. Missing work or school or getting bad grades would be another effect. You might have trouble sleeping or forget things and have trouble focusing on work or school. You might get depressed or nervous. You might start lying to people or stealing money so you can buy booze. You might start to depend on alcohol to make you feel better.

Drinking can also have health effects that can last for your whole life. Drinking alcohol for many years or in large amounts can damage your liver, your stomach and your bladder. It can cause heart problems and high blood pressure. Drinking can even cause brain damage.

How do I know if I have a drinking problem?

Some people start off slowly, but drink more and more over time until they have a real drinking problem. If one or both of your parents have a drinking problem, you are more likely to have one too.

There are different types of drinking problems. Binge drinking means that you might not drink every day, but when you do, you have 5 or more drinks in a row in order to get drunk. Some people have a chronic drinking problem which means that the problem lasts over a long time. These people might never seem drunk, but they drink almost every day.

It is hard to admit that you have a drinking problem, but there are signs to watch for. You might have a drinking problem if you:

- drink every day
- drink to feel better about life
- drink alone
- try to cut down or stop drinking but find you can't
- drink to get to sleep
- drink just so you can get drunk
- try to hide your drinking from other people or lie about your drinking
- drink in the morning before school or work, or drink at school or work
- have blackouts and forget things about where you were or what you did
- miss school, work or other activities because you are drunk or have a hangover.

If you think you have a drinking problem, you may decide to stay away from people who encourage you to drink and places where you might want to drink, until you know you can be in control. Try to discover other ways to have a good time or cope with your problems.

Where can I get help?

Look in the Yellow Pages of the phone book under **Addiction - Information and Treatment Centres**. You will find listings for places like **Alcoholics Anonymous and Al-A-Teen**. You will also find the names of other private treatment and counselling centres. These places can give you the help and support you need to drink responsibly.

Smoking



Smoking cigarettes, like drinking alcohol, is viewed by teens as an adult activity — proof of their new status in life. Despite the smoking prevention campaigns waged by the health and education sectors, youth, especially young girls, are smoking tobacco in greater numbers.

Cigarette companies' sponsorship of popular sports and cultural activities, advertising in major magazines, the examples set by media personalities or family members as well as the availability of cigarettes to underage smokers, all contribute to teens' attraction to smoking.

Marijuana is not seen by youth as very different from tobacco. Their reasons for smoking pot are very similar to those for smoking cigarettes: peer pressure, the desire to relax from stress and wanting to identify with popular media symbols. Because of its status as an illegal drug, it continues to provide teens with a way to rebel against the authority of parents and police. Thirty years of debate have not resolved the arguments that continue to erupt in our homes and seats of government over the dangers and merits of smoking pot.

You can help youth make responsible decisions about smoking by:

- ◆ challenging the media messages about the positive benefits of smoking tobacco and marijuana
- ◆ explaining the risks involved in smoking tobacco and marijuana
- ◆ exploring the reasons why youth smoke and what alternatives exist
- ◆ supporting those who are trying to quit smoking tobacco or marijuana.

Unit Literacy Objectives:

At the end of the unit, students should:

1. be able to understand most of the story content
2. be able to use several prefixes and suffixes as clues to the meaning of words
3. have increased vocabulary skills.

Unit Health Education Objectives:

At the end of the unit, students should:

1. understand what things around them influence teens to smoke tobacco and/or marijuana
2. understand how smoking tobacco and/or marijuana can affect their mental and physical health
3. be aware of some of the things they could do to reduce or stop smoking tobacco or marijuana
4. be able to identify several local resources that help youth understand, avoid or combat addiction to tobacco and/or marijuana.

Check out these web-sites:

www.canadian-health-network.ca

www.hc-sc.gc.ca/english/youth.htm

www.cdc.gov/tobacco/facts.htm

www.healthtouch.com/level1/leaflets/118054/118058.htm

<http://hna.ffh.vic.gov.au/phb/hdev/drug/cover.html>

http://www.camh.net/resources/about_alc_coc_mari_smok.html

<http://209.250.151.141:8080>

Other Resources:

The Quit 4 Life Program

Health Canada is taking steps to help youth stop using tobacco before it becomes a lifetime habit. Quit 4 Life (Q4L) is a self-help kit in a compact disk case for teenage smokers aged 15-19. This resource can be ordered on-line at: www.hc-sc.gc.ca/hppb/tobaccoreduction/youth.html

How Not to Smoke: A help book for women who want to quit smoking

Council for a Tobacco-Free Metro Toronto. 1997 This resource can be ordered from: The Canadian Public Health Association, 1565 Carling Ave. #400, Ottawa ON K1Z 8R1 Tel: (613) 725-3769, Fax: (613) 725-9826.

Highlight

Life Savings or Saving Lives?

I've been smoking since I was 10. If second-hand smoke counts, like they say it does, I guess I've been smoking since before I was born. Both my parents and my grandparents smoke. Come to think about it, I probably don't know 10 people who don't smoke at all. We're not each 3 pack-a-day smokers. Between the 4 of us, Mom, Dad, my 18-year old sister, Pam, and me, Carl, we probably smoke 2 packs a day.



My parents didn't encourage me to start smoking. In fact, the rule at our house was that kids couldn't smoke at home before we were 15. I think my sister did wait. She's a great one for obeying rules. Not me! I started sneaking cigarettes out of the house and smoking over at the park after supper when I was 10. I have a neighbour who gives me a pack of cigarettes every time I shovel her walk, mow her lawn, or rake her leaves. She's been doing that since I was 12. My parent's didn't know until I told them last year, when I turned 16.

My grandpa started letting me light up for him, and take a drag, when I was 13. That made me feel pretty grown-up. He started smoking when he was over in Europe during World War II. He said it calmed his nerves. Guess it still does, because he smokes a lot.

My parents started smoking when they were in high school. That was before all the fuss about how bad smoking is for you. They grew up with smoking

ads in newspapers and magazines and on TV. All the movie and TV stars smoked, and kids would copy how they did it, to look really cool.

Sometimes we talk about stopping. Two months ago, a lady from the Heart and Stroke Foundation came to school and challenged us to go home and figure out how much money we were burning up every year by smoking. When I figured out on my calculator how much my family spends on cigarettes a year, we couldn't believe it. It came up to almost \$ 2,500.00. Now that's a good reason to stop. We know that we'd all have to stop together, and decided we weren't ready. Then we got out my calculator again, and figured out that if we each smoked 13 less cigarettes per week, we'd make a carton last a week. That way, we'd save \$19.50 every week.

We turned an empty coffee can into a bank, and put the money we've saved in it, each Friday. We're saving for a big screen TV. There's a picture of it on the wall, behind the cigarette carton.

I'll give quitting some serious thought when I'm on my own and have to buy my own smokes. I guess there will be other things I'll want to spend my money on. I bet I could get down to a pack a week.

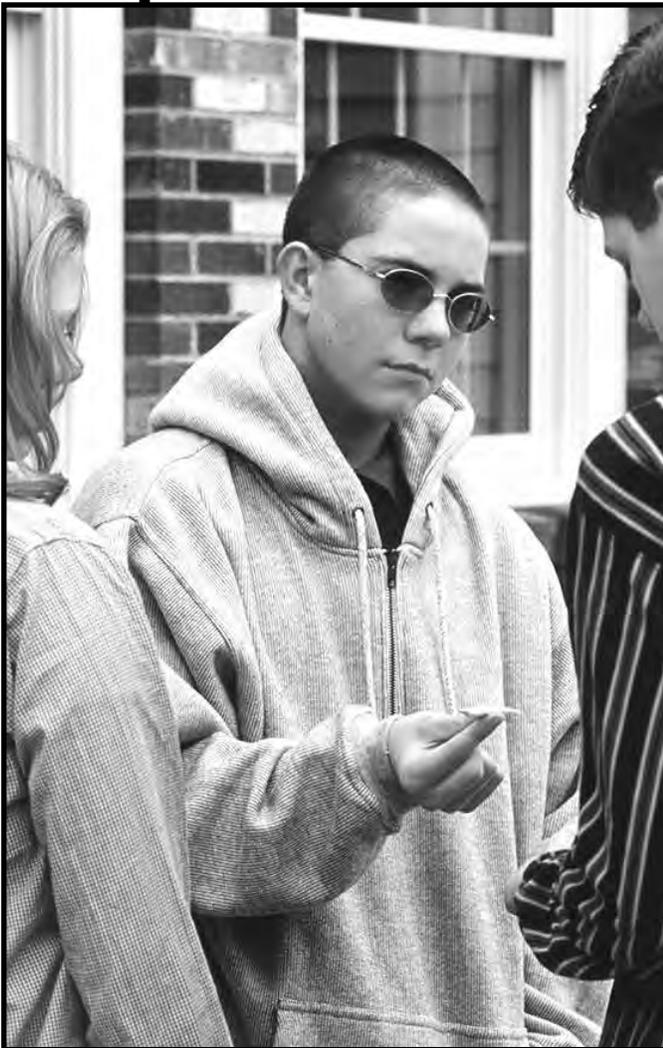
We're probably saving more than money. It may turn out that we're saving our lives.

At school I hear about how bad smoking is for your health, but I know that there is a smoking lounge for the teachers. Whatever.

Highlight

Downhill Thrill

My name is Kyle Mitchell. Everybody calls me Mitch. I'm 16 and have always loved adventure. As a baby, my mom says I'd climb as high as I could before she rescued me from taking a bad fall. Once she found me standing on top of the refrigerator! I rode a 2-wheel bike without training wheels before I was 4. Merry-go-rounds were a bore. Roller coasters and bumper cars were my favourite fair rides.



I broke a lot of rules to satisfy my need for excitement. For example, I would leave our yard to ride my bike down the steep hill in a park about 2 kilometres away from our house. I climbed tall trees in the schoolyard and got suspended for 3 days, and I skated alone on the river even when a thin-ice warning flag was flying.

I tried snowboarding on a Grade 7 ski day and loved it. It is the ultimate thrill. I got a board at a used sports equipment sale for \$50 the next week. I spend my weekends working on my style on a steep hill just out of town. Skateboarding in the summer helps me stay in shape for snowboarding in the winter. I've made new friends, snowboarders like me, who love to live on the edge.

I'm still breaking rules. I've discovered something that makes the physical thrills of speed and danger even more awesome: Dope. Smoking a blunt or two before hitting the slopes makes the

rush of putting my life on the line more intense.

I get my supply from a guy in my gym class. He deals from his car in the parking lot of a grocery store near my house. I don't bring dope to

school because you never know when the police will show up with dogs to sniff it out. I keep my stuff hidden in the pocket of a jacket I leave hanging in my clothes closet. My parents are big on respecting privacy, so I know it's safe.

There has been a big debate about marijuana for longer than I've been alive. My dad, like Clinton, swears he never inhaled the stuff. Right. Well I inhale, and enjoy the feeling I get. Anything and everything is possible after a good blunt. That's why I smoke before boarding. I don't mind breaking laws that are stupid – smoking pot or going 80 kilometres per hour (kph) in a 60-kph zone, for example. I'm not hurting anybody else, and I'm getting more out of life. How can that be wrong?

Now doctors are talking about using marijuana to help really sick people relax and deal with their pain. That proves the stuff's not really dangerous, right?

I've got an appointment with my dealer later today. He told me he's got free samples of coke for his regular clients. He says it gives a rush unlike anything pot can give. Maybe I'll give it a try.

Explain

Life Savings, Saving Lives

1. When did Carl start smoking?
2. Who else in his family smokes?
3. Who gives Carl cigarettes in exchange for doing chores?
4. Who let Carl light up his cigarettes for him when he was young? How did that make Carl feel?
5. What does Carl's family plan to do with the money they save by smoking less?
6. Why does Carl think he'll probably stop smoking when he's on his own?

Downhill Thrill

1. Give 2 examples that show how much Mitch has always loved adventure.
2. When did Mitch start snowboarding?
3. What does Mitch do in the summer to stay in shape?
4. Why does Mitch smoke dope?
5. Where does Mitch keep his dope?
6. What proves to Mitch that dope is not really dangerous?
7. What might Mitch try next?

Analyze

1. Do you believe that the health warnings printed on cigarette packs? Why? Why not?
2. Why are cigarettes so easy to get for underage smokers?
3. Do you think people get their money's worth from cigarettes?
4. Do you believe that smoking is an effective way to control weight?
5. Do you think that people who smoke in spite of medical evidence should have to pay health care costs related to smoking? Why? Why not?
6. Who or what pressures youth into trying pot?
7. Do you think that smoking pot is linked to trying stronger drugs? Explain.
8. Do you think that marijuana should be legalized for everyone, or just the terminally ill? Explain.

To be effective, discussion groups must be a safe place for youth to share their opinions, experiences, fears and beliefs.

As a group, develop guidelines such as:

- all opinions, stories and ideas expressed will remain private
- one person speaks at a time
- everyone participates
- no one will be mocked or criticized.

Learn

Prefixes and Suffixes

A **prefix** is a group of letters at the beginning of a word that gives you a good idea of what the word means, because of what the prefix means. Here are some prefixes and what they mean.

co-, con- = with, together

non-, un- = not

pr e- = before

demo- = people

poly- = many

uni- = one

ex- = out of, from, beyond

bi- = two

dis- = do the opposite

1) Choose the correct prefix to complete these words.

1. _____ dense (make denser or more compact)
2. _____ lock (open)
3. _____ patriate (leave one's own country)
4. _____ decease (die first)
5. _____ annual (twice a year)
6. _____ agree (have a different opinion)
7. _____ son (having the same sound)
8. _____ sense (without meaning)
9. _____ glot (speaking many languages)
10. _____ cracy (government by the people)
11. _____ operate (work together)

2) Here are other prefixes that are commonly used. Look them up in the dictionary, explain what each means, then give an example of a word having that prefix.

Prefix	Meaning	Example
Anti-		
Dyna-		
Aqua-		
Chrono-		
Extra-		
Hyper-		
Para-		
Micro-		
Ultra-		
Photo-		

A **suffix** is a group of letters at the end of a word that gives you a good idea of what the word means, because of what the suffix means. Here are some suffixes and what they mean.

-ous = full of	-plex = having parts or units	-less = without
-ics = a body of facts	-air e = characterized by	-let = a smaller version
-able = able to do, make	-ness = a quality or state	-war d = direction in space/time

3) Choose the correct suffix to complete these words.

- Dark _____ (no light)
- Back _____ (going in reverse)
- Million _____ (a rich person)
- Child _____ (having no children)
- Cine _____ (many movie theatres under one roof)
- Glori _____ (awesome)
- Phys _____ (a branch of science)
- Profit _____ (making money)
- Book _____ (a small book)

4) Find other words that end in these suffixes and write them in the chart below.

Suffixes	Examples
-ous	Nervous,
-ics	Politics,
-able	Dependable,
-plex	Duplex,
-aire	Legionnaire,
-ness	Goodness,
-less	Fearless,
-let	Piglet,
-ward	Afterward,

5) These sentences contain prefixes and/or suffixes. Circle them.

For example: Smoking is becoming (un)popular because it is expensive and danger(ous).

1. Tobacco producers enjoy millionaire status through dishonest advertising.
2. Smokers risk developing cancerous lungs.
3. Anti-smoking activists are tireless in their efforts to limit public smoking.
4. This is a complex social and health issue which needs everyone's cooperation.
5. Money saved by not smoking can be put toward the purchase of other goods.



You have been hired to write the words to a song about the dangers of smoking for an anti-tobacco TV commercial. After much thought, you've made lists of words that rhyme with **Smoke kills, stop now!** They are:

Smoke	Kills	Stop	Now
Choke	Bills	Top	Bow
Broke	Chills	Drop	Cow
Soak	Frills	Plop	How
Woke	Hills	Mop	Pow
Spoke	Wills	Chop	Vow
Stoke	Thrills	Flop	Brow
Stroke	Mills	Prop	Ow
Toke	Pills	Crop	Row

You wrote verse #1 last week. The tune is "Happy Birthday to You." Today you need to write verses 2, 3 and 4. Use words from the lists to create more rhymes and reasons to not smoke.

Verse 1

"Oh please do not smoke"
She coughed as she spoke
"It will kill you, my darling
By cancer or stroke!"

Verse 2

Verse 3

Verse 4

Role Play

1. You are sitting close to the smoking section in a small restaurant. A person at the table next to you takes out a package of cigarettes. You think the smoke will spoil your dinner. Try to convince the smoker not to light up.
2. You are sitting close to the no-smoking section in a small restaurant. You take out a package of cigarettes. A diner at the table next to you, in the non-smoking section, asks you nicely to wait until he leaves before smoking, because he is bothered by smoke. How do you respond? Why?
3. You're at an outdoor rock concert and marijuana cigarettes are circulating freely. The person next to you lights up a joint, takes a drag and passes it on to you. How do you feel? What do you say? What do you do?

Resource Mapping

Contact your city hall or your local public health unit for a list of services available to people living in your community. Identify which of these services are qualified, accessible and eager to help youth understand, avoid or combat addiction to tobacco and/or marijuana. The goal is to produce a list that you can use and/or share with your peers, with confidence.

You Can Quit Smoking!

Look around you in magazines, bus shelters and stores. What do you see? Cigarette ads. Now look at the people around you. Standing in front of office buildings, dancing in bars, eating in restaurants. People smoking. There's no doubt about it - smoking is everywhere. You probably know people who smoke. Maybe you smoke yourself. The truth is — smoking is very bad for your health.

Why do people smoke?

If smoking is so bad for your health, why do so many people still smoke? There are many reasons, but some of the most common ones are:

- **Peer pressure.** Maybe you started smoking to fit in with your friends who smoke. You might not even like it, but you keep smoking to be a part of the group.
- **Habit.** We all know that smoking is addictive. Once people start, they often find it very hard to stop. Maybe smoking is an important part of your daily routine.
- **Rebellion.** Most parents don't want their kids to smoke, even if they do. Maybe you want to rebel against your parents. So you smoke or even sneak cigarettes from them.
- **For pleasure.** You like the taste, the smell and the feel of smoking. It is easy to become addicted to smoking, especially if you like it. You might not care about what it is doing to your body over time — just about how smoking makes you feel right now.
- **To relieve stress.** Many people say that they smoke because it calms them down. Maybe you smoke when you are upset or nervous, after a fight with someone, or a hard day at work or school.
- **To keep weight down.** Many people, especially young women, believe that smoking will help them control their weight. Smoking a cigarette keeps them from eating, and is calorie free.
- **People at home smoke.** Your parents, or other members of your family smoke, so why shouldn't you?

Why is smoking so bad for me?

Cigarettes contain nicotine. Nicotine is a drug that is very addictive. You can become hooked on smoking very quickly. Cigarettes also contain about 4,000 other poisons and chemicals. You might have heard of some of them:

- **Ammonia** — a poison used in cleaning fluids.
- **Acetone** — a poison used in nail polish remover and cleaning fluids.
- **Carbon monoxide** — the same type of poison found in car exhaust fumes.
- **Lead** — a poison that can damage your nerves.

These are just a few of the harmful things found in cigarettes. Why would you want to put these things in your body?

Your smoking affects more than **your** body and **your** health. When you smoke in public places, or even outside, other people have to breathe in your second-hand smoke. They have to breathe in the same poisons that you are breathing.

Smoking can harm a baby if the mother smokes while she is pregnant. The poisons and chemicals can hurt a baby's mind and body long before it is even born.

What can happen if I keep smoking?

Smoking can lead to many health problems. Maybe you think that nothing will happen to you, but the effects of smoking start to show almost right away.

Smoking makes your clothes and hair smell bad. It gives you bad breath and can lead to gum disease and tooth decay. Smoking makes your fingers turn yellow and can cause you to get wrinkles.

You will notice that you can't taste or smell as well as you could before. You might get sick more often, and cough a lot. You might suffer from asthma, shortness of breath, emphysema or other lung and breathing problems.

Your heart rate will go up. Your blood pressure might go up too. Smoking can cause heart disease, heart attacks and strokes.

When you smoke, your risk of cancer goes up also. Smoking can lead to cancer of the mouth, larynx and pharynx and esophagus (throat), lungs, pancreas, cervix, uterus, and bladder among others.

How can I quit smoking?

It is hard to quit smoking, but if you really want to quit — for yourself and for your health, you can do it. Some people are able to quit on their own. It takes time. Many people try 5 or 6 times before finally quitting for good. That's OK. If you're trying to quit, don't give up.

You can quit smoking cold turkey, where you just pick a day and stop smoking. This can be hard because your body has become addicted to cigarettes. You might get headaches or feel nervous or grumpy. You will start to feel better soon though.

You can also cut down on smoking a little bit at a time. Instead of 10 cigarettes a day, smoke 8, then 6, then 4 until you are ready to stop for good. Set goals for yourself. Give yourself rewards when you meet your goals — a new CD, dinner out or something else that you enjoy.

When you're trying to stop smoking, it helps to spend time with people who don't smoke. You will be less tempted to smoke if you stay away from bars and other places where you will be exposed to smoke.

If you are having trouble quitting smoking, talk to a doctor or a public health nurse. You might be able to use special chewing gums or a nicotine patch. These things will help your body adjust to not smoking. You may think that these things are too expensive to use. Remember that in the long run, if they help you stop smoking, you will save money!

You can also look under **Smokers' Information & Treatment Centers** in the Yellow Pages. There is a list of places that can help you stop smoking for good. It's a choice that will save your life!

Blunt Facts about Marijuana

We all know that smoking cigarettes is bad for us. But what about smoking marijuana?

Marijuana is an illegal drug. It is made up of the stems, leaves, seeds and flowers of a plant called **hemp** . It contains over 400 chemicals that change the way your mind works. There are lots of names for marijuana, but some of the more common names are hash, pot, weed, grass and Mary Jane.

Most people smoke marijuana, either in a cigarette (**joint**) or in a pipe. Some people also use it in cigars, called **blunts** . Other people use bongos, or water pipes.

Why do people use marijuana?

There are many reasons why people use marijuana. Many are the same as the reasons that people smoke cigarettes:

- **Peer pr essur e.** Maybe you started using marijuana to fit in with your friends. Maybe you tried it at a friend's house or a party. You most likely see people in movies and on TV using drugs and think it looks cool.
- **Rebellion.** Maybe using marijuana makes you feel grown up. You know your parents would most likely be angry if they knew you smoked marijuana, but you don't really care. It's a way to prove that you are making your own choices.
- **For pleasur e.** Many people just like the way that marijuana makes them feel. Maybe it makes you relax and feel less shy around other people.
- **To relieve stress.** Many people use marijuana because it calms them down. Maybe you smoke if you are upset or nervous. Maybe to get away from problems in your life.
- **Because people at home use it.** Maybe your parents or your older siblings use marijuana. Maybe they let you try it for the first time and you kept using it.

What can marijuana do to me?

Marijuana makes different people feel different things. It affects both the body and the mind. Some people feel relaxed and calm. This feeling of being mellow and happy is known as being **high**. It can make some people feel less shy and more confident. Other people feel scared, nervous or out of control. In the body, marijuana can cause bloodshot eyes, dry mouth and throat and rapid heartbeat. Many people also get very hungry and thirsty when they are high. People who use marijuana sometimes:

- feel lazy
- act clumsy or dizzy
- get very sleepy
- become nervous or anxious
- react to things more slowly than normal
- forget things they know and have trouble learning new things
- have trouble thinking clearly or solving problems
- see and hear things strangely or see things that are not real.

When you use alcohol or other drugs with marijuana, the effects of the marijuana will be stronger than normal. Using drugs can affect your judgement. You might try to drive a car or get in a car with someone else who is high. Drug use can also lead to fights, falls, burns, drowning, and even suicide. You might also end up making bad choices about unsafe sex or other things that can put you in real danger.

Marijuana can affect your life in other ways. You might stop taking good care of yourself. You could neglect your health or the way you look. You might start to depend on drugs so much that nothing else matters. You could get angry a lot or become depressed. You might stop caring about school, so your grades will drop. If you have a job, you might miss work, get in trouble or even get fired.

You might start lying to cover your drug habit or stealing to pay for drugs. You can get into trouble with the law if you are caught buying, selling or using marijuana. You might have to pay a fine or even have to spend time in jail. This could give you a police record that you will have for your whole life.

What can happen if I keep smoking marijuana?

Over time, marijuana will start to affect your body. In men, it may lower levels of testosterone. This can affect hair and beard growth, muscle growth and voice changes. In women, marijuana may raise testosterone levels. This can cause hair to grow on the face and body. It can cause acne. In both men and women, marijuana can make it hard to have children later in life.

Some health professionals think that marijuana use can cause cancer. It contains some of the same chemicals and poisons as cigarettes. Like smokers, marijuana users also get a lot of colds. They can develop breathing problems, asthma and coughing.

Using marijuana can lead you to try other, more dangerous drugs. The more drugs and alcohol you use, the worse it is for your body and your mind. It can affect how your brain functions, how you learn and remember things.

How can I stop using marijuana?

When you're trying to stop using marijuana, it helps to spend time with people who don't use it either. You will be less tempted if you stay away from bars and parties where you will be exposed to it. You might need to cut down a little at a time. That's OK.

You can talk to a doctor or a public health nurse. There are support groups of other people who are trying to stop using drugs. They may be able to help you.

You can also look under **Addiction Information & Treatment Centres** in the Yellow Pages. There is a list of places that can help you stop using drugs for good. Your body and your brain will thank you.

Living Environments

Youth who do not have the support of their families to make a move to independence, may have a hard time finding safe, affordable housing. Landlords, wanting to protect their property from vandalism and/or neglect, refuse to rent to people without jobs, references from previous landlords or good credit ratings. Not many teens enter the housing market with those qualifications.

Public housing is scarce, with hundreds of low-income people and families on waiting lists. Poverty forces many teens to settle in unhealthy housing in crowded, unsafe buildings and neighbourhoods.

You can help youth face the challenges of living in a safe environment by:

- discussing why youth want to leave home and whether there are options for staying
- identifying the barriers to finding safe and affordable housing and exploring possible solutions
- developing a tool with youth to help them assess the quality of potential housing environments
- sharing coping strategies for living healthier and safer in less-than-ideal situations.

Unit Literacy Objectives:

At the end of the unit, students should:

1. be able to understand most of the story content
2. understand the use of adjectives in a sentence
3. have increased vocabulary skills.

Unit Health Education Objectives:

At the end of the unit, students should:

1. be able to identify reasons why youth have difficulty finding safe affordable housing.
2. understand how the quality of living environments can affect mental and physical health
3. know how to assess the quality of potential living environments
4. be able to identify several local resources that help youth find safe and affordable housing.

Check out these web-sites:

www.canadian-health-network.ca

www.bccewh.bc.ca/effects.htm

www.bmc.org/program/doc4kids/contents.htm

www.teensurfer.com/teenhelp.htm

www.utoronto.ca/qol/index.html

Other Resources:

Canadian Mortgage and Housing Corporation (CMHC)

1-800-668-2642

Website: www.cmhc-schl.gc.ca

The Quality of Life Research Unit

Centre for Health Promotion

University of Toronto, Banting Institute

100 College Street, Room 207

Toronto, Ontario M5G 1L5

Tel: (416) 978-1809 Fax: (416) 971-1365 Email: centre.healthpromotion@utoronto.ca

Website: <http://www.utoronto.ca/qol/index.html> (click on community quality of life)

Highlight

Boarding House Blues

I moved out of my mom's apartment when her boyfriend moved in. My name is Randy, and I'm 18 years old. I live in a boarding house downtown with 6 other men.

My landlord must have found grey paint on sale. Every room in the 7-bedroom house has grey walls, floors and ceilings.



When I first visited it, I was impressed. The place looked clean, a real deal at \$200 a month. I had visited other places that cost more and looked worse. What sold me on this place was that the landlord did not ask for a deposit of first and last month's rent. Paying first and last month's rent for an apartment when you sign a lease can cost nearly \$1,000. It would take me years to save that kind of money. Besides, I don't have the \$450 a month most studio apartments cost.

I moved into this place the same day I found it. It didn't take long because I don't own much. The \$75 a week I earn putting advertisements in mailboxes goes towards rent and food, not furniture and clothes.

I've been here for six months and have discovered that the grey paint covers more than dirt. It covers small sheets of metal nailed over rat holes. I haven't seen a rat in the house yet, but I can hear them scratching away behind the

walls. Cockroaches, on the other hand, rule the kitchen.

The house isn't heated well, so the windows frost over in winter, and I'm sick a lot. Missing windows in the basement make locking the doors a

joke. Burned-out light bulbs outnumber those that work, and backed-up plumbing is routine.

Because none of us can afford to leave, the landlord doesn't worry about keeping the place safe. If I file a complaint and he's forced to fix the place up, the rent will go up and I couldn't pay.

Bad plumbing and rats aren't the only problems here. It seems that there are always a couple of tenants who get pretty loud and violent when they've had too much to drink. I spend most of my time locked in my room. I feel safer that way. The police have had to come twice this week to take someone away for disturbing the peace. When one noisy boarder leaves, seems there's another one, just as bad, waiting to take his spot.

Last week I applied for a job at a gas station pumping gas. If I get the job, maybe I could afford to rent a room in someone's home. I think that would be cleaner and safer. I see them advertised in the paper for around \$350 a month. But I'd probably have to buy a bus pass to get to work, which would be another \$60 a month.

If I don't get the job, I guess I'll get a cat.

Highlight

Neighbourhood Nightmare

“Hello? Police? I’d like speak with Sergeant Tonkin, please.” Julia rocked 17-month-old Melina on her hip as she waited for her call to go through.



“Sergeant? Hi. This is Julia Lopez calling. I found more used needles and broken beer bottles in the Bolton Park sandbox again. It’s the fourth time this month! No I didn’t. I came right home and called you. Look, I’m really worried about my baby. She’s walking now, and could get really hurt by this stuff! OK, thanks.”

Julia hung up the phone and sighed. Even though Sergeant Tonkin had promised to send a police officer to collect dirty needles as evidence, and city workers to clean out the sandbox, she was angry and afraid. She was angry that she was trapped in a neighbourhood where drugs were bought and sold. She was afraid that the day would come when she couldn’t protect her daughter from the dangers around her.

As a teen-aged mother, Julia has very little money. She shares a 2-bedroom apartment with Carla, another single parent and her 3-year-old son, Trevor. They met at the adult high school where they are enrolled in a special program for teen parents. Day care is provided during class periods, and parenting classes are part of the program. Julia is grateful for the chance to get her diploma, and hopes to go on to college so that she can get training in early child education. She dreams of getting a place of her own where she and Melina will feel safe. She has put her name on a waiting list for public housing, but has little hope of getting out of the Bolton Park area any time soon. Her low income forces her to share housing in this section of town. Because it was so hard to find a landlord that would accept 2 young mothers with children as tenants, Julia knows that finding a better place would not be easy.

Julia knows better than to walk around the neighbourhood after dark. Gang activity has increased in the neighbourhood as many drug suppliers fight to control the streets. Julia's apartment is her protection from addicts strung out on drugs who could very easily turn violent. She often hears ambulances in the streets after midnight.

Drugs are not the only risk in the Bolton Park area. Julia knows that the drug dealing is linked to an active sex trade. More than once, men looking for sex have stopped their cars, inviting Julia to get in. Although the money offered is tempting, Julia refuses to get involved. She knows that as a teen mother, she is considered an at-risk parent. She doesn't want to do anything that might result in Family Services taking her baby away.

Julia looks out her bedroom window 20 minutes later. Sergeant Tonkin has kept his promise. She smiles at her daughter who is running to her with a bright yellow ball in her arms. "Yes sweetie, let's go outside and play."

Explain

Boarding House Blues

1. Why did Randy move out of his mother's apartment?
2. How much rent does Randy pay per month?
3. How does Randy earn money for rent and food?
4. What was the grey paint hiding?
5. Why does Randy spend most of his time locked in his room?
6. What job has Randy applied for?
7. If he gets the job, where would he like to live?

Neighbourhood Nightmare

1. What did Julia find in the park sandbox?
2. Who does she tell?
3. What does he promise?
4. Who does Julia live with? Why?
5. What kind of job does Julia hope to get some day?
6. What makes it dangerous for Julia to go out at night?

Analyze

1. Do you know people who have moved out of their family home and are on their own? How do they afford to live? What is the quality of their housing arrangement?
2. Do you think that it's fair to ask low-income people for first and last month's rent? Why? Why not?
3. How much money do you think you would need to be able to live somewhere safe and clean?
4. Why is your environment important to maintaining a healthy lifestyle?
5. Do you think it is important to live at home with your parents until you can support yourself?
6. What would you do if you found yourself needing to find housing with little or no income?

To be effective, discussion groups must be a safe place for youth to share their opinions, experiences, fears and beliefs.

As a group, develop guidelines such as:

- all opinions, stories and ideas expressed will remain private
- one person speaks at a time
- everyone participates
- no one will be mocked or criticized.

Learn

Adjectives

Adjectives are words that describe nouns (people, places, things).

These words describe the nouns underlined in the sentences below.

used, bad, public, yellow, single, real, missing, small, teen-aged, low

1) Find the best adjective to complete each sentence.

For example: My landlord must have found **grey** paint on sale.

1. The place looked clean, a _____ deal at \$200 a month.
2. It covers _____ sheets of metal nailed over rat holes.
3. _____ plumbing and rats aren't the only problems here.
4. _____ windows in the basement make locking doors a joke.
5. A police officer will collect _____ needles as evidence.
6. As a _____ mother, Julia has very little money.
7. Her _____ income forces her to share housing.
8. She has put her name on a waiting list for _____ housing.
9. Melina came running to her with a _____ ball in her arms.
10. Carla is another _____ parent.

Adjectives can also compare nouns.

For example: This is the **dirtiest** boarding house in the city.

2) Following the example above, match 5 of the adjectives below to nouns and use them in a sentence to show comparison.

Rent	Better-paying
Plumbing system	Cleaner
Tenant	Best
Job	Lowest
Room	Most violent
Friend	Dirtiest
Neighbourhood	Loudest
Gang	Longest
Boarding house	Worst
Waiting list	More dangerous

1. _____
2. _____
3. _____
4. _____
5. _____

3) Using the name of the street you live on, fill in adjectives that describe your housing situation or the neighbourhood you live in. The result is called an ACROSTIC.

Here are two examples:

Middle-class	Filthy
Active	Old
Inviting	Ugly
Neat	Racist
	Tense
	Hopeless

Your turn! Write the name of your street down the left side of a page. Look in a dictionary to find adjectives that start with each letter, and choose those that best describe where you live.

Role Play

Your apartment building is infested with cockroaches. You want to complain to your landlord, but are afraid he'll raise the rent if he has to pay an exterminator. Call the local tenants association and ask what are your rights and your landlord's responsibilities. Then knock on your landlord's door, explain the problem, tell him what you expect him to do, and what steps you will take if he doesn't take immediate action.

Resource Mapping

Contact your city hall or your local public health unit for a list of services available to people living in your community. Identify which of these services are qualified, accessible and eager to help youth find safe and affordable housing. The goal is to produce a list that you can use and/or share with your peers, with confidence.

Help

Safe Environments

Your environment is made up of all that is around you in your life. It is where you live and where you go to school. It is where you walk, drive, take the bus or spend time. Your environment is buildings such as your home, your work and your school. It is your neighbourhood and places like parks, streets or stores. It is the people you come in contact with. It is the air you breathe and the water you drink. Your environment affects how you live. All people have the right to live in an environment where they can feel safe, happy and healthy.

There's no place like home...

Home is likely where you spend most of your time. You want to feel safe and happy there. Because there are many things that make a house or home a safe environment, before you move into a house or an apartment, check:

- **Security.** Do the doors and windows have good locks? You should never have to worry that someone will hurt you or steal your belongings in your home.
- **Air quality.** It is very important for you to breathe clean air. Are there good vents and windows so that you can always get fresh air? Is the furnace clean and safe?
- **Room temperature.** Your home should be warm enough for you in the winter and cool enough for you in the summer. Does the furnace work well? Can you open the windows in the summer?
- **Water quality.** You need water — to drink, to wash in, to cook with. Your home should have both hot and cold water. Is the water safe to drink? Can you get water any time you need it?
- **Pest control.** Are there any signs of pests, such as mouse droppings or cockroaches? Rats and mice can carry disease. Cockroaches and other insects can get into food, leaving droppings or eggs that can make you sick.
- **Safety.** Your home should never put you in danger. Homes need to have good wiring for electricity so there is no fire danger. Appliances like the fridge and stove should work well and be new enough so they meet Canadian standards. There should be clear escape routes from your home in case of fire.

School Days

School is another part of your environment that should be safe. When people are teased or harassed, they are not happy. When people at school are beat up or hurt in other ways, they are not healthy.

There goes the neighbourhood...

The neighbourhood you live in should be a safe environment for you. Many things help make a neighbourhood a place where you can be happy and healthy. Before you move into a new neighbourhood, check:

- **Lighting.** Do the streets around you have good lighting at night? This includes outdoor lights on houses and buildings. This helps both cars and people walking on those streets.
- **Security.** The police should patrol your neighbourhood on a regular basis. Also, it's a good idea to have a Neighbourhood Watch program. This way, your neighbours or the police will spot trouble. They can watch out for gangs, drug dealers, thieves, vandals or other dangers in the area.
- **Location.** Does the neighbourhood give you easy access to stores and services? This includes public transit, grocery stores, drug stores and health clinics. It's also handy to have things like a fire department or police station close to you.

What can I do to make my environment safe?

A large part of making your environment safe depends on *you*. You have the right to a safe environment, and you have the right to change things to make your environment safe. There are things you can do to keep yourself safe and happy:

Keep a clean home. This is the first step in keeping pests and bugs away from your house. Don't leave food around that pests can get into.

Make sure your home is healthy. Ask your landlord to check the wires, water pipes and taps. Install a fire detector and buy a fire extinguisher to keep in your home. If there are any problems with heat or cold or water, talk to your landlord right away. If the landlord won't help you, talk to the housing authority in your area.

Help make your neighbourhood safe. Call the police if you see vandalism, drugs, theft or any other crimes going on around you. Ask for the police to patrol your area if they don't do so already. Ask the city for more street lights if you think your street is too dark.

Stand up for yourself. If you feel unsafe any place — home, school or work — speak up! Tell someone who can help like a landlord, a teacher, an employer or the police. Tell people what needs to change, and take steps to change things so that you can live in places where you are happy, healthy, and above all, safe!

Prejudice



Youth often feel that they are victims of prejudice and discrimination. Employers may discriminate against them because of their age, gender, race or lack of work experience. Teachers may discriminate against them because of their attitude, dress or behaviour. Politicians may discriminate against them because of their lack of power.

Teens can also be the *source* of harmful discrimination against their peers. They may learn to despise others because of physical, religious, sexual, ethnic or economic differences from their families, friends or groups they are involved in. Discriminating against others may provide some teens with a sense of power and control, but it creates social, emotional and physical turmoil for their victims.

You can help youth from practising discrimination and/or help youth defend themselves from discrimination by:

- ◆ providing a learning environment where tolerance is highly valued and practiced
- ◆ exposing discriminating practices in your community
- ◆ discussing the effects of discrimination on individuals, communities and society in general
- ◆ teaching skills that help teens challenge prejudice
- ◆ being an example of support towards minority members of your community through your attitude and actions.

Unit Literacy Objectives:

At the end of the unit, students should:

1. be able to understand most of the story content
2. understand the use of adverbs in a sentence
3. be able to recognize the difference between an adjective and an adverb
4. have increased vocabulary skills.

Unit Health Education Objectives:

At the end of the unit, students should:

1. be able to express their views on discrimination
2. be able to describe how different types of discrimination affect individuals, communities and society in general
3. understand how discrimination can affect the mental and physical health of its victims
4. have a strategy for responding to discrimination directed towards themselves and others
5. be able to identify several local resources that help youth assert their rights when faced with prejudice.

Check out these web-sites:

www.canadian-health-network.ca

www.teensurfer.com/teenhelp.htm

www.dezines.com/rainbow

www.pflag.ca

www.pch.gc.ca/multi/Standing/intro.htm

www.pch.gc.ca/multi/ann96-97/english/hate-e.htm

<http://kidshelp.sympatico.ca> (under *tools for life* heading diversity)

Other Resources:

Youth Net

Youth Fax No. 8 (October 1997) *Outstanding Youth*. (Available from Youth Net, 401 Smyth Road, Ottawa, ON K1H 8L1 Tel: (613) 738-3915, Fax: (613) 738-3917.

Support groups for gay, lesbian bi-sexual and transgender youth

Look for one in your community.

Hate: Communities Can Respond – A Community Handbook

Advisory Committee on Anti-Hate and Anti-Racism, Toronto: Municipality of Metropolitan Toronto, Access and Equity Centre, 1996 (photocopying is encouraged by the Manual's publisher).

Highlight

Squeezing out the Squeegees

My friends know me as Blade. I'm a street kid. It's where I work, not where I live. I'm a windshield washer by trade. On a good day I can earn between \$50 and \$100. People don't like that. They don't mind that lawyers get paid \$100 an hour, but if a teen decides to make a job for him/herself, it becomes a big problem.



Local government has decided that I'm a criminal. A law has been passed that makes it against the law for youth to stand on street corners offering to wash the windshields of drivers waiting at red lights. It's happening all over the country. City councils and provincial governments across Canada are declaring war on squeegee kids.

Why? Because store owners complain that we scare their customers away. Because police say that we hassle drivers and create traffic jams downtown. Because city council members decided that tourists would get a bad impression of their cities because they don't like the way we look.

If some street youth break the law, we are all labelled as criminals. That's not fair. People think that we all spend our money on drugs, so we shouldn't be able to work the streets to support our habits. Who asks store-owners or office workers how they spend their money?

Do people lose their jobs because they buy lottery tickets, or spend money at casinos or on alcohol?

I was not at the meeting that changed my life. I wasn't given the chance to tell the city council that I always stop washing when the lights change

or that I never force drivers to pay me for a wash. No one cares that I have no other way to pay my rent or buy my food without taking the risk of getting arrested and landing in jail. I don't want to go to jail — I might get killed. I don't want to live in the streets — I might get sick.

I am being treated like a criminal because I don't want to live and look like everybody else. I hated school. I couldn't handle it. There was nothing offered that I could take and pass, or that would get me a job I'd like, so I dropped out. I don't want to sell hamburgers; I want to wash windshields.

The people in charge don't care about peoples' rights; they just care about votes. It seems that my vote and my life aren't as important as the yuppies who wear Armani clothes and own nice cars.

If the city council made it against the law to drive BMWs inside the city, I bet that the rich would take them to court and demand their rights. They'd go all the way to the Supreme Court if they had to.

Because I have no money, I have no voice.

Oh Canada.

Highlight

Joy in Pain

Joy picked up another schoolbook out of a snow bank, then chased after some papers that had fallen out of her notebook and were blowing down the street. A group of white teens had grabbed her backpack from her and tossed everything in it in all directions. She tried not to cry when she called her uncle from a phone booth a few minutes later to ask him for a ride home. She had missed the last bus going to the reserve.



While she waited for her uncle's old Chevy pickup truck, Joy asked herself if trying to realize her dream of becoming a nurse was worth it. When Joy's father left them two years ago, Joy and her mother had moved in with her mother's brother, George Hunter, his wife Edna and their three small children. Joy knew that her aunt hoped that she would drop out of school when she turned 16 to stay at home and help her with the children and housework. It had taken Joy months to convince her family that she should finish high school.

It hadn't been easy at school, either. Students from the reserve were not encouraged to take courses that would prepare them for college or university. Native youth who don't take academic courses sometimes end up taking courses like basket weaving. Boredom in class usually led them to drop out with no job skills. Joy had friends on the reserve who, out of boredom and hopelessness, had tried to commit suicide.

Being one of only a few native people at Pearson High, Joy was an easy target for blaming, teasing and pranks. She remembered the girl who spoke about Native land claims in a current events class. How she looked

right at Joy when she said “Natives think that everything their great-grandfathers’ horses pissed on, belongs to them.” To be fair, the teacher had told the girl to sit down, but the damage was done. Everyone had laughed. Ever since, kids would tell Joy that she should make land claims on disgusting places like the town dump and a regional sewage treatment plant.

“Whatever the government has given native people doesn’t come close to what it has taken away,” thought Joy as she and her uncle drove back home. Several men were sitting outside of the tavern just outside the reserve. Unemployment and poverty have created a feeling of hopelessness.

If it weren’t for Emily Roundsky, a Community Health Representative who serves her people by teaching them about healthy living, Joy would have given up her dream long ago. She would have joined the dozen other girls her age at the reserve who are teen mothers struggling, in their poverty, to raise their children, understand themselves and find meaning in their lives.

But deep inside her, Joy knows that she wants to enter into the meaning of her name—joy for herself and a source of joy for others. She wants to be trained to help her people improve their lives and respect their traditions. She also wants to be an example, like Emily, to younger women growing up in a society that treats their people so poorly. But looking down at her soggy school books and papers she wonders how much longer she can be strong — her problems seem so big. Since spending time with Emily was her best chance of holding on to her dream, Joy decided to visit her more often.

Joy got out of the truck, went into her uncle’s tiny home and hugged her 3 small cousins, knowing that their future was worth her present pain.

Explain

Squeezing out the Squeezees

1. How much money can Blade earn on a good day?
2. Who has decided that squeegee kids are criminals?
3. Who complained about squeegee kids? Why?
4. What do people think squeegee kids spend all their money on?
5. Was Blade given the chance to defend his job?
6. Why did Blade quit school?
7. What does Blade think people in charge care about more than peoples' rights?
8. What does Blade think rich people would do if it became against the law to drive BMWs inside the city?
9. Why does Blade think squeegee kids have no voice?

Joy in Pain

1. Why did Joy miss the last bus going to the reserve?
2. Who does Joy live with? Why?
3. Why does her family want her to leave school?
4. Why do many Native students drop out of school?
5. Why do white people resent Natives for not having to pay taxes?
6. Who is Emily Roundsky?
7. What is Joy's dream for her future?

Analyze

1. What is discrimination?
2. Do you think teachers take appropriate action when discrimination occurs in schools?
3. What would you do if you saw someone being discriminated against?
4. Do you think people who discriminate against others should have to pay a fine? Go to jail? Do community service?
5. This unit uses stories about race and lifestyle as examples of discrimination. What other kinds of discrimination do you see today? In your school? In your home? In your church? In yourself?

To be effective, discussion groups must be a safe place for youth to share their opinions, experiences, fears and beliefs.

As a group, develop guidelines such as:

- all opinions, stories and ideas expressed will remain private
- one person speaks at a time
- everyone participates
- no one will be mocked or criticized.

Learn

Adverbs

Adverbs are words that describe how, when or where an action takes place.

You can describe how things are done by making adverbs from adjectives. All you have to do is add ly or ily to the end of the word.

1) Follow this rule to change the adjectives below into adverbs and write them in the boxes.

For example: Helpful + ly = helpfully

“Are you lost,” she asked?

How did she ask? Helpfully.

“Are you lost,” she asked helpfully?

Unfair , bad, important, different, happy, vicious, terrible, ignorant, amazing

Unfairly		

Since adverbs can tell us when something happens, they apply to the past, present or future.

2) Write the adverbs from the box below, under the correct time.

Yesterday	later	now	after
Before	next	today	recently
Currently	tomorrow	presently	earlier

Present	Past	Future
Today		

3) Underline the adverbs in each sentence below, then explain how they describe the action by writing how, when or where on the line at the end of the sentence.

For example: It is happening across the country. **Where**

1. Politicians have recently made windshield washing illegal.
2. The police say we create traffic jams downtown.
3. If some street kids break the law, we are all unfairly labelled as criminals.
4. Students usually tease Joy.
5. Joy believes that society treats her people poorly.

When identical words can be used as both adjectives (Adj), which describe nouns, and adverbs (Adv), which describe verbs, it is easy to get mixed up.

4) Write Adj or Adv above the word that is the same in each pair of sentences.

For example:

adv

I came late to gym class to avoid rude stares in the locker room.

adj

I went to the school office to ask for a late pass.

1. Down jackets are too expensive for squeegee kids to buy.
When the rain is coming down hard, squeegee kids can't work.
2. I think the laws against squeegee kids got passed rather fast.
Those jeeps are fast on city streets and country roads.
3. I pushed the up button and waited for the elevator.
He went up the stairs to save time.
4. Talking things over with Emily Roundsky made Joy feel better.
Joy will be a better nurse for having had such a good role model.
5. Dirty windshields mean money in my pocket.
Passing laws against people like me is playing dirty.

Try

Have you ever been the victim of prejudice like Blade or Joy? Was it because of your age? Your race? Your gender? Your sexual orientation? Your religion? Your friends? How you look? How well you do at school or work?

Write about how you felt when others treated you badly for no good reason.

Have you ever seen anyone else being harassed because of their age? Their race? Their gender? Their religion? Their friends? Their sexual orientation? How they look? How well they do at school or work?

Write about how that made you feel, and what you think was behind the harassment (Fear? Jealousy? Politics?).

Write about ways you think people can prevent and/or stop discrimination.

Role Play

You are being followed through a music store by a store employee. You think it is because of your age and the nose ring you are wearing. Report your feelings to the store manager. If s/he doesn't apologize, what other steps can you take to prevent this happening to others?

Resource Mapping

Contact your city hall or your local public health unit for a list of services available to people living in your community. Identify which of these services are qualified, accessible and eager to help youth assert their rights when faced with discrimination. The goal is to produce a list that you can use and/or share with your peers, with confidence.

Discrimination hurts everyone...

Look around you. What do you see? People from different races, cultures and backgrounds. People of all shapes and sizes. People of all ages. Canada is made up of people from around the world, and all of them bring something special to our country.

Not all people can see this though. Some people don't accept things that are different in other people. Some people judge others based on their skin colour, the language they speak, the beliefs they hold. This is called prejudice — when you form an opinion about someone just by looking at them or without getting to know them. It is when you judge whole groups of people based on just one person. Prejudice is not fair to anyone. And it often leads to discrimination.

Discrimination is when the way you have judged a person affects the way that you treat that person. It is when you say or do mean things to someone. It is when you laugh at someone or make them feel ashamed. It is when you don't treat one person the way you treat other people. It is when you don't hire someone for a job because you see them as different. There are many forms of discrimination. People judge other people based on many things. Some of the most common are:

- **Race.** The colour or someone's skin is often the reason why others mistreat them. History is full of terrible examples of people feeling better than others because of race. Even though Canada's laws recognize that all races deserve equal respect and treatment, many Canadians still have trouble treating people of different races fairly.
- **Culture.** Canada is made up of people from many cultures. Some from far away, some from Aboriginal traditions dating from before European settlers came to Canada. The way people dress, eat or speak reflect their cultural background. Despite the differences in culture, all Canadians are the same in wanting a good life. But what is good about a life that faces teasing, harassment or unfair hiring practices?
- **Religion.** People hold many beliefs. There are many religions that you might choose to follow. Religion is very important to some people and not to others. It can affect the way a person dresses, eats, acts and lives. You have the right to believe what you want, and so do all of the people around you. We all need to respect the beliefs of other people.
- **Gender.** It shouldn't happen in today's world, but it does. People are discriminated against for being male or female. Men and women are different from each other in many ways. Part of this is just biology. There are physical differences that cannot be denied. Put-downs and insults are one way you might discriminate against someone of the opposite sex. Did you know that it is illegal to not hire a person based on whether they are male or female? Or to pay one person less than another for doing the same work just because of gender? Men and women should be treated as equals in all parts of life.

- **Age.** Age discrimination works in many ways. Against the old, against the young, against teens. Canada sets legal age limits for things like driving, drinking and voting. There are reasons for these laws. The problem comes when a person is not treated fairly because of their age. A sales clerk following a teen around a store because she thinks the teen will steal something, or a driver getting upset with an old person because they are driving too slow are examples of age discrimination. Remember that people of all ages have something to give, whether it is the wisdom and experience of an old man or the wonder and delight of a child.
- **Sexual orientation.** Most people in our society are heterosexual — they are attracted to people of the opposite sex. However, many Canadians are gay, lesbian, bi-sexual or trans-gendered. These people may have lifestyles that are hard for you to understand, but that is not a reason to discriminate against them. Keep in mind that they are the same as you — they have hopes and fears, and wish to love and be loved.
- **Ability.** When you see a person in a wheelchair, or a blind person on the street, you might feel sorry for them. You might think that they are helpless. Just because a person has a physical disability does not mean that they are less intelligent or less able than a person without a physical problem. People with mental or developmental disabilities may have problems with many tasks in life. But they should still be given respect, not laughed at when they try to work, shop or do other things.

What can I do to stop discrimination?

The first step YOU can take is to treat people as fairly as you can. Try to treat all people the same. Treat them the way you want them to treat you.

Stand up for others. If you see anyone who is teasing or harming someone else because they are different, step in and try to stop it. If you see discrimination going on — at work, at school, or any place else — speak up and try to stop it.

What can I do if someone is discriminating against me?

Stand up for yourself. Let the person who is discriminating against you know that you will not let them treat you badly. Talk to them or write a letter.

Keep a record of the discrimination. Write down dates, details, who saw it happen.

Talk to someone in authority. If you are at school, talk to a teacher or principal. At work, talk to your boss. In a store, talk to the manager.

If these things do not help you, you may need to talk to the police or a lawyer to make the discrimination stop.

As Canada grows, we will see all sorts of people become citizens of our country. When we all accept each other and our differences, we will have a safer and more fair country to live in.

Homelessness

The “street kids” look and attitude have been adopted by many more teens than those who actually find themselves with no housing. Some young people choose to live in the streets and are proud of their ability to cope in difficult circumstances. Many others, unfortunately, are forced to live in the streets because they are unable to find housing. They are at great risk from exposure and violence.

Teens who leave home before they are financially able to afford healthy housing may find themselves among the growing number of young people with no fixed address. Some leave to escape abuse, others to assert their independence. Some teens are forced to leave home by parents who are unable or unwilling to cope with the challenges the teen years can bring.

You can help youth facing homelessness by:

- ◆ advocating for alternative housing options for youth in your community
- ◆ providing a realistic look at street life to youth still at home or in care, and exploring options
- ◆ supporting the efforts of street youth trying to live healthier lives
- ◆ referring homeless youth to programs that can help them.

Unit Literacy Objectives:

At the end of the unit, students should:

1. be able to understand most of the story content
2. understand the use of synonyms, antonyms and homonyms in a sentence
3. have increased vocabulary skills.

Unit Health Education Objectives:

At the end of the unit, students should:

1. understand the many social and personal reasons why youth can find themselves without a home
2. be aware of several options for both staying at home and independent living
3. identify changes that could improve the condition of local homeless youth
4. be able to identify several local resources that help youth get off the streets and/or return home.

Check out these web-sites:

www.canadian-health-network.ca

www.cps.ca/english/proadv/StreetYouth/Findings.htm

www.childcybersearch.org/opgohome

www.teensurfer.com/teenhelp.htm

Other resources:

Operation Go Home

Our Mission:

To reunite runaway youth (18 and under) with their families; OR to connect them with an existing agency that can best help them meet their needs and become productive citizens.

P.O. Box 53157

Ottawa, Ontario K1N 1C5

Tel. (613) 230-4663 Fax (613) 230-8223

Haley, Nancy & Roy, Élise. (September 1999) Canadian street youth: Who are they? What are their needs? *Paediatric Child Health*. 4(6) 381-383.

Tonkin, Roger S. (September 1999) Street youth are our kids, too. *Paediatric Child Health*. 4(6) 379.

Highlight

No Place is Home

15-year-old Shelly pulled her blanket up closer to her chin and, for the first time since she'd run away from her stepfather's house, wondered how she would survive the winter. Life on the streets during the summer hadn't been too bad. Sleeping under the stars down by the river with friends she'd made was more fun than she'd had in years.



If she could survive in the streets until her 16th birthday in February, she thought she'd finally be free of the violence she had suffered from people who were supposed to protect her. She figured nothing could be worse than getting hit around for no good reason. But stories she'd heard from other street kids of dumpster diving for food and exchanging sex for a shower and a bed to sleep in made her wonder what the future held.

Shelly avoided shelters and soup kitchens because she didn't want to be identified as an underage runaway and get sent back. She was a runaway, but not from home. Home meant family, love, laughter and safety. Being homeless wasn't simply having no place to live — it was having no place to call home, and she'd lived that way for a long time.

Shelly's street family did their best to help her get ready for the cold weather. They showed her how to protect herself

from the wind by wrapping newspaper around her body under her sweatshirt. They brought her with them when they set up camp over a hot air vent near a good spot to panhandle. They shared food they collected at the food bank with her.

Life got scary when, in late November, a group of 5 homeless men came to the hot air vent to stay warm. These men were heavy drinkers, and when drunk, got really loud and pushy about who would sleep where. In just a few days, they had taken over the vent. They threatened to beat up anyone who tried to sleep there without “paying” them with a bottle of booze. Shelly knew what getting beat up by a drunk was like, and did her best to panhandle enough money for a 6-pack of beer every day. When she had enough money, she’d ask an adult to buy the beer for her. In the neighbourhood she shopped in, it was an easy thing to do.

With money going to booze instead of food, Shelly never felt full. She didn’t have any way of cooking, so she ate cold ravioli or soup when she could afford it. One day, as she sat in a shopping mall to stay warm, Shelly fainted. When she came to, there was a crowd of worried shoppers standing around her, and a police officer kneeling next to her. When she saw the badge, Shelly started to cry. She’d be sent back and probably get killed.

At the police station, Shelly told her story to Heather, a youth worker, while she ate a tuna sandwich that someone gave her. Heather told her that the law said that her stepfather must be told that Shelly was safe, but he would not know where she was staying. Family Services would make sure that Shelly was protected, and would help her make plans for her future.

Shelly lived in a group home for 3 years while she finished high school. Now 20 years old, she is living with a friend in a 2-bedroom apartment. She works fulltime as a waitress and hopes to attend college to become a medical secretary. Shelly volunteers at a homeless shelter, and tells her story to young girls who are afraid to trust anyone, so that they will get help before it’s too late.

Highlight

A Round Trip with Sharp Corners

Scott Fujita put clothes from his closet into a duffel bag as his father watched from the hallway.

When Scott told his parents that he was gay, his father gave him one hour to pack his things and get out. “We never want to see you again!” were the last words he heard as the front door slammed behind him. He walked to the drugstore and called his boyfriend, Jim.



He couldn't believe it when Jim told him that he wasn't ready to come out — he wanted to finish school and get a job first. Jim thought it would be better for both of them if Scott left their small town so people wouldn't talk. He gave Scott \$175 and offered to drive him out to the highway so he could hitch a ride to Toronto. “Lots of gays live there — you'll be fine.” Jim asked Scott to send him his address when he got settled so they could keep in touch.

Getting settled was a problem, though. With only \$90 from his bank account and the money from Jim, Scott couldn't afford to spend money on hotels or a boarding house until he found a job. He didn't feel safe in the “gay” part of town. The first night he had gone there looking for help, two men asked him home with them for sex in exchange for money and shelter.

During the day, Scott walked the streets of Toronto looking for a job. No one wanted to hire a 17-year-old with no address. He spent most nights in Toronto's subway stations. He would get on a train any time a security guard noticed him. Sometimes he slept in the trains, riding them to the end of the line.

He spent more and more time talking with other homeless people to learn about emergency shelters and soup kitchens. He became a regular visitor to these places. He gave up on finding a real job. He earned some money by selling beaded bracelets he made. He missed his family and Jim, but wouldn't call them. He was still too hurt by their lack of love and support.

Seven months after he was kicked out of his home, Scott knew he needed help if he didn't want to have to trade sex for money. He went to a community centre and asked Gregg, a social worker, for help to find safe housing and job training. It scared Scott to find out how long the waiting list was.

Gregg asked Scott to call his family. "You may find out that they feel badly for sending you away, and want you back home. They've had 7 months to calm down and see things differently. Give them a second chance."

Scott called home from Gregg's office. He started to cry when he heard his father ask him to come home. "It's going to be hard," his father said, "but it can't be harder than living without you. We love you, son. Please forgive us and come back."

Gregg put Scott on a bus later that day. Scott wanted to go home to the safety of his parents' house after 7 months in the streets. He wanted to go back to school to prepare for his future. But Scott was nervous as he rode along. He wasn't the same person he had been 7 months ago. Living at home with parents who didn't understand or approve of his lifestyle would really put their love to the test. Scott knew his Dad was right: they had a hard road ahead of them. He would do his best to walk it with love and respect so that they could face the future together.

Explain

No Place is Home

1. How old is Shelly?
2. Where did she run away from? Why?
3. Why did Shelly stay away from shelters and soup kitchens?
4. Where did Shelly and her street family set up camp when the weather turned cold?
5. Who took over the vent?
6. What did Shelly have to do to keep her spot near the vent?
7. Why did Shelly cry when a policewoman spoke to her in the mall?
8. Where did Shelly live while she finished high school?
9. What are Shelly's plans for the future?

A Round Trip with Sharp Corners

1. Why did Scott leave home?
2. Where did he go?
3. Who is Jim?
4. Why didn't Scott feel safe in the gay part of town?
5. Where did he spend most nights?
6. How did Scott earn some money?
7. Why did Scott go to a community centre?
8. Who told Scott to give his parents a second chance?
9. Why did Scott want to go back home?
10. Why was Scott nervous about going back home?

Analyze

1. Do youth leave home for different reasons? What are some?
2. Have you ever run away? Did you need help? Did you find help?
3. Should homeless people be granted special rights that help them improve their quality of living? If so, what kinds of rights would you suggest?
4. The teens in the stories were homeless because of big problems in their parents' home. Do you think social agencies such as the police or child services should investigate the quality of life in peoples' homes in order to prevent these problems?
5. Describe situations where youth have to leave home as a result of their own actions, not because of problems in their parents' home.

To be effective, discussion groups must be a safe place for youth to share their opinions, experiences, fears and beliefs.

As a group, develop guidelines such as:

- all opinions, stories and ideas expressed will remain private
- one person speaks at a time
- everyone participates
- no one will be mocked or criticized.

Learn

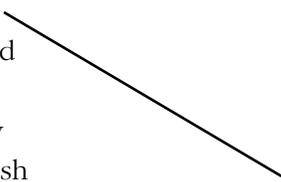
Synonyms, Antonyms and Homonyms

Synonyms are words that mean the same thing but are spelled differently.

For example, get is a synonym for acquire.

1) Connect the synonyms:

Get	Homosexual
Hard	Complete
Job	Assist
Gay	Employment
Finish	Acquire
Help	Difficult



Antonyms are words that have opposite meanings.

For example, sell is an antonym for buy.

2) Connect the antonyms:

Sell	Finish
First	Buy
Give	Dangerous
Start	Last
Ask	Answer
Safe	Take

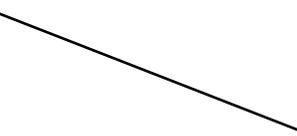


Homonyms are words that sound the same, but have different spellings and meanings.

For example, peace is a homonym of piece.

3) Connect the homonyms:

Peace	Sum
Hour	Too, Two
No	New
To	Piece
Some	Know
Knew	Our



Palindromes

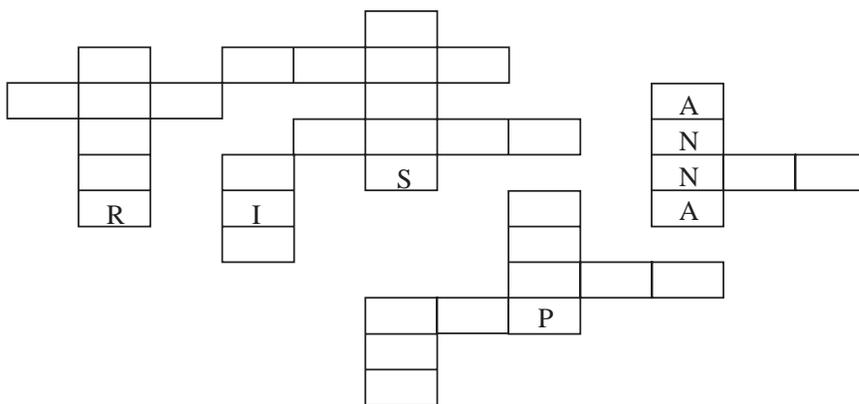
Palindromes are words that read the same from either direction. An example is the girl's name, Anna.

4) Complete the sentences below with these palindromes.

eye, pop, gag, radar, noon, solos, nun, pup, toot, bib, peep

1. A young dog is a _____.
2. A soft drink is sometimes called _____.
3. You thread a needle through its _____.
4. To make children laugh, the clown will _____ his horn.
5. Little birds make a sound called a _____.
6. The Coast Guard discovered the sunken ship by using _____.
7. She will sing two _____ at the concert.
8. I put a _____ on my baby to keep her dress clean.
9. I'll meet you for lunch at _____.
10. The _____ made us all laugh.
11. A religious sister is also called a _____.

5) Now fit the answers into the crossword puzzle below:



Can you think of any other palindromes? Try!

Try

A member of the city council wants you to suggest 5 ways the city can help homeless people improve their lives. How would you answer?

The first thing to do is

The next thing that would help is

It is also important to give homeless people

Don't forget to start

I would also like the city to

Role Play

Read your answer to the last exercise out loud, as if you were conducting a news conference, or addressing city council.

Resource Mapping:

Contact your city hall or local public health unit for a list of services available to people living in your community. Have your students identify which of these services are qualified, accessible and eager to help youth get off the streets and/or return home. The goal is to produce a list that you can use and/or share with your peers, with confidence.

No Fixed Address

What does it mean to be homeless?

It means you have no place to live. No place to keep warm. No place to eat. No place to sleep. No place to feel safe.

Runaways and Throwaways

Maybe you left home because there were big problems there. Maybe someone at home hit you or tried to abuse you sexually. Or someone at home used drugs or booze too much and you couldn't take it anymore. Maybe you felt like there was nobody who cared about you.

Maybe you thought that life on the street was better than what you had at home. So you ran away. OR

Maybe you were kicked out. Maybe there wasn't enough money to feed everyone at home. Or you were doing drugs and your parents couldn't take it. Maybe you told your family that you were gay or that you were pregnant and they threw you out. Maybe they asked you to leave or just changed the locks on you.

Even if you didn't want to, you had to leave.

You might have to live on the streets. No money. Nobody to help you. No way to get food. No place to stay. No choice.

Living on the streets isn't easy. There are lots of risks when you live on the street.

- You will be outside in all sorts of weather — rain, snow, wind and sun. You could get very sick.
- You might get robbed, beaten up or even killed by other people on the street.
- You could get sick because you can't get the foods you need to stay healthy. You might stay sick because you think you can't go see a doctor.
- You might start using drugs and alcohol.
- You may end up in trouble with the police for dealing drugs, stealing, or even trading sex for money.

If you ever want help, there are places you can go and people who want to help you.

No matter where you are, you can always find help. Look in the Yellow Pages of the phone book under **Social Service Organizations** to find places you can go to.

If you need food, you can go to:

- food banks
- churches and missions
- soup kitchens.

If you need a place to sleep, you can try places like:

- drop-in centres
- emergency shelters
- distress centres
- the YMCA or YWCA
- the Salvation Army
- family service centres.

Many of these places can also tell you how to get help if you want to go home, find a place to live, go to school, or get a job.

Getting off the streets is hard, but living on the streets is harder.

Healthy Eating

What teens eat is often based on what's available, what they can afford, what they enjoy eating, what's made popular through advertising, and their attitudes about body shape and size.

Youth struggling with poverty may eat only what they can find in food banks or dumpsters. They may choose to buy foods that are big on bulk, to fill them up, but are low on nutritional value.

Some youth will throw out food they don't like, and eat only what they enjoy, missing out on necessary vitamins and minerals. Others battle eating disorders, starving themselves in an attempt to bring their body shape and size to a false standard of beauty.

What teens don't always realize is that their bodies NEED a variety of nutrients (carbohydrates, proteins, fats, vitamins and minerals) found in food, to work well.

Variety is not only the spice of life; it is the source of life.

You can help youth develop healthy eating habits by:

- ◆ challenging food advertisements and body images reflected in the media
- ◆ discussing ways youth can eat what they need, while eating what they like
- ◆ identifying strategies that allow homeless youth to eat better at low cost, such as community kitchens
- ◆ donating healthy food to food banks and other relief programs serving youth.

Unit Literacy Objectives:

At the end of the unit, students should:

1. be able to understand most of the story content
2. understand the conditional verb tense
3. have increased vocabulary skills.

Unit Health Education Objectives:

At the end of the unit, students should:

1. recognize the different circumstances that can prevent youth from eating well
2. understand how body images portrayed in the media can cause youth to develop eating disorders such as anorexia and bulimia
3. understand how poor eating can affect their mental and physical health
4. have several ideas for eating well on a low budget
5. be able to identify several local resources that help youth understand, avoid or combat eating disorders and enjoy well-balanced diets.

Check out these web-sites:

www.canadian-health-network.ca

www.nedic.on.ca

www.hc-sc.gc.ca/english/youth.htm

www.vegsource.org (recipes & information for vegetarian lifestyles)

<http://209.250.151.141:8080>

<http://kidshelp.sympatico.ca> (under tools for life heading nutrition)

Other Resources:

Kids Help Phone: 1-800-668-6868

The National Eating Disorder Information Centre (NEDIC)

a Toronto-based, non-profit organization, established in 1985 to provide information and resources on eating disorders. Tel: 1 (416) 340-4156

Teenagers and Eating Disorders: Looking Good

Marion Crook, New Canada Publications (a division of NC Press Ltd.) 1992,

ISBN: 1-55021-077-7

Collective Kitchens Handbook

Edmonton Board of Health. October 1992

Can be ordered from: Resource Office, Capital Health Authority, Public Health Services, #500, 10216 – 124 Street, Edmonton, Alberta T5N 4A3. Tel: (403) 413-7929, Fax: (403) 482-4194.

Basic Shelf Cookbook

Can be ordered from: The Canadian Public Health Association, 1565 Carling Ave. #400, Ottawa, ON K1Z 8R1 Tel: (613) 725-3769, Fax (613) 725-9826.

Youth Net

Youth Fax No. 7 (May 1997) *The Whole U Counts!* (available from Youth Net, 401 Smyth Road, Ottawa, ON K1H 8L1 Tel: (613) 738-3915, Fax: (613) 738-3917.

Highlight

Feeling Full vs. Feeling Fine

As an eighteen-year-old boy, I think that one of the worst things about being poor is being hungry. Growing up, my mom fed us lots of rice and beans because they were cheap, filled us up and were good for us. Lots of times we didn't eat breakfast before going to school because the fridge was empty. Milk and eggs were special treats. Desserts were something we knew about from TV.



I came to the city with my friends Jeremy and Rusty last year, hoping to find work. We get odd jobs now and then through a temporary work agency, but nothing regular. We're on social assistance, which pays for rent and bus tickets. There isn't much left over for food. Until recently I would get fed pancakes and sausage or scrambled eggs and toast 3 times a week at a shelter downtown. Last winter, I went to the soup kitchen at lunch time if there was nothing to eat at home. Back at our apartment, my roommates and I ate a lot of pasta and cola — the combination made us feel full, even if it probably wasn't very good for us.

I went to a youth health clinic a couple of months ago because I had a sore throat. The nurse asked me questions about my health and diet. When I told her about the pasta and cola trick, she said, "Craig, you and your roommates should join the clinic's collective kitchen program." She spent 30 minutes telling me all about it, and I was sold

on the idea! It is part of the clinic's services, but runs out of a church kitchen and fellowship hall.

A supper menu is put together every week by teens in the program with the help of a dietitian. We each pay \$7 in advance, for the week. We are all assigned different jobs like shopping, cooking and cleaning up every day. A healthy hot meal, which would cost at least \$10 in a restaurant, costs us each only \$1 because local grocery stores donate basics like flour, pasta, rice, canned goods and fruit and vegetables. Our money pays for eggs, milk, butter, cheese and meat.

I eat better now than I have in my whole life, and not just at supper. I've learned a lot about how important it is to eat well. Food helps keep me healthy, full of energy, and thinking clearly. I still need help from the food bank for the meals I eat at home, but I am careful to pick foods that will be good for me. I don't eat just to feel full anymore. I eat to feel fine.

I have also discovered that I like to cook! My favourite job is peeling carrots and potatoes. I hold the record for the number of potatoes peeled in 15 minutes. I'm thinking that my cooking experience might help me get a job in a restaurant. Maybe next month I'll ask Sharon, the program's coordinator, for a letter of recommendation.

Highlight

A Diet to Die For

I don't know when I stopped being a chubby young teen on a diet, and became a young woman so afraid of gaining weight that I almost starved myself to death.



My name is Alyssa. I am 18 years old, 5'7" tall and weigh 93 pounds. That's good — for me. Before I joined a support group 16 months ago, I weighed 85 pounds. I hope to bring my weight up to 115 pounds, but I know that will be hard. At some point in my life I decided that becoming skinny was the most important thing I could do. I lost a lot more than weight. I lost friends, I lost time I could have spent doing my best at school, and I lost opportunities to work and travel.

Both of my parents are in the army, so we move around a lot. By the time I was 14, we had moved 6 times. We were living in Germany when I started to diet. I was living at a boarding school because my parents were often away from home with their jobs.

I didn't worry about fitting in. I paid attention to current fashions in clothes, hair and make-up, and studied hard for top grades. Until my roommates started to tease me about my weight, I had never thought much about my size. I weighed 145 pounds and wore size 12. Compared to their size 7 bodies, I was huge. They pasted pictures of their own faces on the bodies of skinny models on posters hung on the walls. One day when I came back to our room, a new poster hung

by my bed. Someone had pasted my face on the body of a whale. I ripped the poster off of the wall and stuffed it in the garbage. I looked at myself in the mirror and decided I should lose a few pounds.

I stopped eating desserts and snacks and lost a couple of pounds. I took out books from the library on how to lose weight, and cut out all fried foods. 3 weeks later, when I had lost only 5 more pounds, I decided to stop eating meat, milk and cheese.

I was losing weight pretty quickly now. Even my roommates said that I was

looking good when I wore my size 9 jeans a few months later. But I didn't want to look good. I wanted to look great! I felt I needed to lose more weight. By the end of the school year, I had lost 30 pounds.

My parents weren't too worried about the big change in my body shape, since girls often change a lot in their early teens. During the summer vacation, they didn't insist I eat just like them, as long as I ate vegetables and took vitamins to keep up my strength. I became pretty good at putting food on my plate in a way that made it look like I was eating more than I really was. I cut everything up in tiny pieces and chewed each piece 20 times before swallowing. In the time it took my parents to eat a full meal, I ate only a tiny bit.

We moved again that summer. I lived with my parents and started Grade 10 at the local high school. Living at home made it easier for me to skip meals. I never ate breakfast or lunch anymore. I'd go to the library to do homework during my lunch period. I didn't make any friends, because I wasn't willing to eat with other students. It was hard to pay attention in class, but I didn't know it was because my brain needed food to work well. Even when I was hungry, I wouldn't eat. I knew I had to eat something at dinner with my parents, and was afraid that if I ate during the day, I would gain weight.

When I weighed 95 pounds, my parents got scared. They insisted I eat more so I wouldn't get sick. My mother made me drink a glass of orange juice and eat a slice of toast every morning before I went to school. I started to use the exercise room during my lunch period, to work off the extra calories. I couldn't stand the thought of putting on weight.

To my surprise, the exercise brought my weight down even lower. I was proud that I could wear size 3 dresses. I thought I looked glamorous and was ready to diet even more to keep that look. I thought that people who worried about how I looked were just jealous.

I couldn't go visit my grandparents in Vancouver that summer, because my parents were afraid I wouldn't eat. I applied for a summer job at the army base, but I didn't pass the physical. The doctor tried to scare me into gaining weight by telling me the reason I didn't have my periods any more was because I was starving myself.

My parents brought me to a psychiatrist to talk about why I wanted to be skinny. I told her that being skinny is being the best you can be, and I want to be the best in everything I do. It was hard to explain it so it made sense to anyone else, but I knew it was right for me.

My mother heard about a support group for women like myself, who are dieting themselves to death. She said she wanted me to go, but it was my choice.

I thought about it for a long time. Finally, 16 months ago, I went to a meeting, mostly to please my mother. There were 7 of us there. We were all different ages and different colours, but we were all skinny. Too skinny. It was strange to see other women as "too skinny" when I couldn't see myself as anything but fat! A couple of girls talked about how hard it was to eat 3 times a day, but they were adding just one extra bite each meal, and in a few months, it would make a difference in their health. That helped me realize how hard it would be for me to change the way I ate.

I've gained 8 pounds. I need to gain more. I like myself more, and want more from life than hunger, exercise and possible death. I have a poster on my wall of a woman holding hands with a man and a young child. My face is pasted on that body. With the support of family and friends, I'll get there. One ounce at a time.

Explain

Feeling Full vs. Feeling Fine

1. Why did Craig and his friends move to the city?
2. Where would Craig often eat breakfast?
3. Why did Craig and his roommates eat pasta and cola?
4. Why did Craig go to the community health centre?
5. What program did Craig join for \$7 a week?
6. Where does the collective kitchen take place?
7. What do local grocery stores donate to the collective kitchen program?
8. What is Craig's favorite job in the collective kitchen?
9. What kind of job does Craig hope to find? How?

A Diet to Die For

1. Why did Alyssa and her parents move around a lot?
2. Where was Alyssa living when she started to diet?
3. Why did she start to diet?
4. How did Alyssa make it seem like she was eating more than she did?
5. When did Alyssa's parents begin to worry about her weight?
6. Why did Alyssa start using the exercise room at school during lunch period?
7. Why couldn't Alyssa go to Vancouver to visit her grandparents?
8. What group did Alyssa's mother suggest she visit?
9. How much weight has Alyssa gained in the past 16 months?

Analyze

1. What is more attractive, a skinny girl or a healthy girl?
2. Should peoples' view of your weight influence you to diet if you have healthy eating habits?
3. What's the best way to diet safely?
4. How can culture and media affect people's health?
5. Do you eat to feel full or to feel fine? Explain.
6. Do you think food banks serve a real purpose, or just encourage low-income people to waste their money? Explain.

To be effective, discussion groups must be a safe place for youth to share their opinions, experiences, fears and beliefs.

As a group, develop guidelines such as:

- all opinions, stories and ideas expressed will remain private
- one person speaks at a time
- everyone participates
- no one will be mocked or criticized.

Learn

Conditional Verbs

If I had a million dollars, I'd buy you a house

If I had a million dollars, I'd buy you furniture for your house

(Maybe a nice chesterfield or an ottoman)

If I had a million dollars, I'd buy you a K-Car

(A nice Reliant automobile)

If I had a million dollars, I'd buy your love.

With these and other lyrics, the popular Canadian group *Barenaked Ladies* uses what is called the *conditional mood*. The songwriters suggest actions that depend on certain conditions, something that is only imagined — in this case, having a million dollars.

Some clues that the conditional mood is being used are:

- an “if” clause: If I had a million dollars
- words like: will, would, could, might (I would buy you a new house)

The conditional mood can be written in the present, the past, and the future. For example, in its song, the band imagines what it could do with a million dollars today:

If I had a million dollars, I'd buy you a house (present conditional mood).

The band might also imagine what it could have done with a million dollars in the past, what it could do in the future and in the habitual present.

For example, the song could say:

If I had had a million dollars, I would have bought you a house (past conditional mood).

or

If I have a million dollars next week, I will buy you a house (future conditional mood).

or

When I have a million dollars, I buy you houses (habitual present mood). This explains what the band does all the time, when the condition (having a million dollars) is met.

1) Match the sentences below with the conditional mood expressed.

- 1. If Craig had a better job, he would earn more money. **Past**
- 2. If youth will pay \$7 a week, they may join the collective kitchen. **Present**
- 3. If Alyssa had ignored her roommates' teasing, she may not have become anorexic. **Future**
- 4. When Alyssa gains weight, she fights the urge to diet. **Habitual Present**

2) Unscramble these groups of words to form sentences in a conditional mood.

For example: Mom breakfast if us fridge without was would school the empty to send
If the fridge was empty, Mom would send us to school without breakfast.

- 1. there could found stayed we home have we have back work would if

- 2. full we winter eat drinks wanted last if pasta feel we soft would to and

- 3. might kitchen known if have sooner we had it collective the joined we about

- 4. afford well grocery eat food of can donate to continue we to stores

- 5. restaurant will Sharon recommend find try to if job me will I a

- 6. skinny on models might young if girls so not go were diets not

- 7. insisted her eaten Alyssa had more parents if have

- 8. noon her would made exercise at breakfast if Alyssa her eat mother

- 9. grandparents agreed properly Alyssa visited could eat to have her she had if

- 10. extra food of meal improve Alyssa at will bite each health if her an eats

Try

Think of 3 of your favorite places to eat. For example, a shopping mall food court, a full-menu restaurant, your own kitchen.

Make up a menu of what you would order or prepare for each location, that includes foods from all four food groups.

Food Groups	Menu # 1	Menu # 2	Menu # 3
Grain Products →			
Vegetables and Fruit →			
Milk Products →			
Meat and Alternatives →			

Role Play:

You are part of a committee that is organizing a collective kitchen in your neighbourhood. Your job is to convince local grocery store owners to make contributions of basic supplies such as: bread, flour, sugar, pasta, rice, canned goods and fruit and vegetables.

Resource Mapping:

Contact your city hall for a list of services available to people living in your community, then:

1. create a local resource list of the groups, services and individuals in your community that are qualified, accessible and eager to help youth understand, avoid or combat eating disorders
2. create a local resource list of the groups, services and individuals in your community that are qualified, accessible and eager to help youth enjoy well-balanced diets (i.e., collective kitchens, food banks, soup kitchens, menu planners).

Anorexia Nervosa

Many people have gone on a diet at one time in their life. But sometimes people trying to lose weight can go too far.

What is anorexia?

Anorexia is a serious illness called an eating disorder. People with anorexia are very afraid of eating. They are even more afraid of being overweight or fat. They won't eat enough food to keep their weight at a healthy level. They make themselves stop eating or eat very little. Some people starve themselves until they get sick or even die.

People with anorexia can't see what their bodies really look like. They think they are fat or ugly — no matter how skinny they really are. They will not believe people who tell them they are too skinny. They have an idea of what they want to look like, and they won't stop dieting until they reach that goal.

People with anorexia often think they have to be perfect so that other people will like or love them. They worry a lot about what other people think of them. They feel helpless in many parts of their lives. By starving themselves, they are in charge of at least one part of their lives. By losing weight, they feel strong. They feel that they have power over themselves and their bodies. They feel in control.

How does anorexia affect the body?

The human body needs food to stay healthy. When someone stops eating enough food, they can get very sick. Anorexia can:

- slow down the heart beat, shrink the heart muscles and cause heart disease
- make the hair on the head get thin or fall out
- cause very fine hair to grow on the face, back, chest
- dry out the skin and make it itchy
- make fingernails weak and brittle
- make women stop getting periods and make it hard to have a baby later in life
- cause dehydration (when the body doesn't have enough fluids or water)

- make bones weak
- make a person get confused or forget things
- cause seizures
- cause bloating in the stomach.

What are the signs of anorexia?

The first thing you might notice is that a person has lost a lot of weight, often very quickly. There are other signs that are harder to spot. People with anorexia often:

- find reasons not to eat with friends or family
- move food around on their plate to look like they ate more
- cut food into really small pieces and chew them for a long time
- feel very cold all the time
- wear many layers of clothes to keep warm and to hide how skinny they are
- exercise or work out very often and for a long time
- stop getting periods
- like to cook food, but never eat what they cook
- get very tired
- feel dizzy or faint
- forget things or get confused.

How is anorexia treated?

It is hard to convince someone with anorexia that they are sick. They might think they are still too fat. They might think you are jealous of their success in losing weight or that you just want to make them fat. You can try to encourage the person to see a doctor as soon as they can.

Doctors will also do tests to check if the person has not harmed their body by starving it. If there is damage to the body, the doctors will also try to treat any problems they find.

One part of treatment is to help the person gain weight. People who have lost so much weight that they are in danger of getting very sick may have to go to the hospital. They may be fed through an I.V. (a tube in the arm). A health care team will help the person choose healthy foods and set goals to gain weight.

Another part of treatment is to help the person with anorexia change how they think about themselves. The person will need counselling. This might be alone or in support groups, or both. The person's family may go for counselling too. Counselling tries to:

- change the way the person sees their body and their life
- help the person see that no-one is perfect
- show that bodies come in many shapes and sizes
- help the person to feel better about themselves and boost their self-esteem
- help the person learn to accept and maybe even like their body the way it is
- teach the person how to eat again in a way that is healthy
- change the feelings the person has about food and eating.

Getting better after fighting anorexia takes a long time. It is not easy for someone to change how they feel about themselves. It is not easy to learn new ways to behave. Sometimes people have to go through treatment many times before they are better. They may go to counselling for a long time. But with love, support and help, there are ways to get better and to stay healthy and happy

Insert Food Guide here

Appendix 1



Tips for working with youth who have low literacy skills

Tips for working with youth who have low literacy skills

Don't assume that the youth you serve will tell you if they can't read. Since there is a strong social stigma attached to low literacy, nearly all nonreaders or poor readers will try to hide this fact. This is why it is important to use *clear verbal communication* when you talk and *plain language* health information when you give print materials.

Clear verbal communication is a way of speaking that is easy to understand. It helps you to organize what you say so that it is easy to remember, check with clients to make sure they have understood and suggest treatment plans clients *can* follow. It also includes listening to your patient and giving them an opportunity to express their feelings.

1. Organize your information.

Decide on the three to five most important points. Tell your clients what you're going to cover and then give the details.

2. Use common words, not technical jargon.

3. Check that your clients have understood what you have said.

You can say: I talk to so many people that I sometimes leave things out. Would you repeat what I just told you so I can be sure I have explained everything?

4. Give your clients a chance to express how they feel and to tell the story of their illness.

5. Use written information as a back-up.

Personal contact with clients is the best way to make sure they have understood your message. Written information should be a simple reminder of what they have learned from you. When you give your clients pamphlets or brochures, always highlight what is most important for them to remember.

6. Plan with your clients what they can do.

When clients resist your instructions, consider that they may not be able to do what you ask. Try to plan together with your clients what is realistic for them to do.

7. Explain procedures and ask permission during examinations.

What is common knowledge to you, as a health professional, is a mystery to most of your clients. Explain what the examination will include and what you hope to learn. Ask permission to proceed at each new stage.

8. Let your client know what you are thinking.

Sharing your thoughts may encourage your client to participate more actively in the visit.

9. Make direct eye contact.

Studies have shown that doctors who sit face-to-face with patients, maintain eye contact and have more open arm postures are regarded as more empathetic, interested and warm. Eye contact tells your patient that you are listening and interested.

Plain language is a way of organizing and presenting information so that it makes sense and is easy to read for the intended audience. In other words, plain language is a relative rather than an absolute term. Your document is in plain language when your intended audience understands it.

To help you to develop good plain language writing habits, learn and apply the following tips.

Plain Language Tips

1. Use the active voice.
2. Write directly to your reader.
3. Use a positive tone wherever possible.
4. Use common words rather than technical jargon.
5. Use short words and short sentences.
6. Don't change verbs into nouns.
7. List important points separate from the text.
8. Write instructions in the order that you want them carried out.
9. List items in a parallel form.
10. Test what you write.

Clear Design Tips

1. Choose left flush justification.
2. Choose type that is clear and easy to read.
3. Pay attention to how the text looks on the page.
4. Use illustrations and graphics effectively.

If your client or patient *does* admit to being unable to read and write, respect their privacy. Do not assume that s/he is in search of a literacy program.

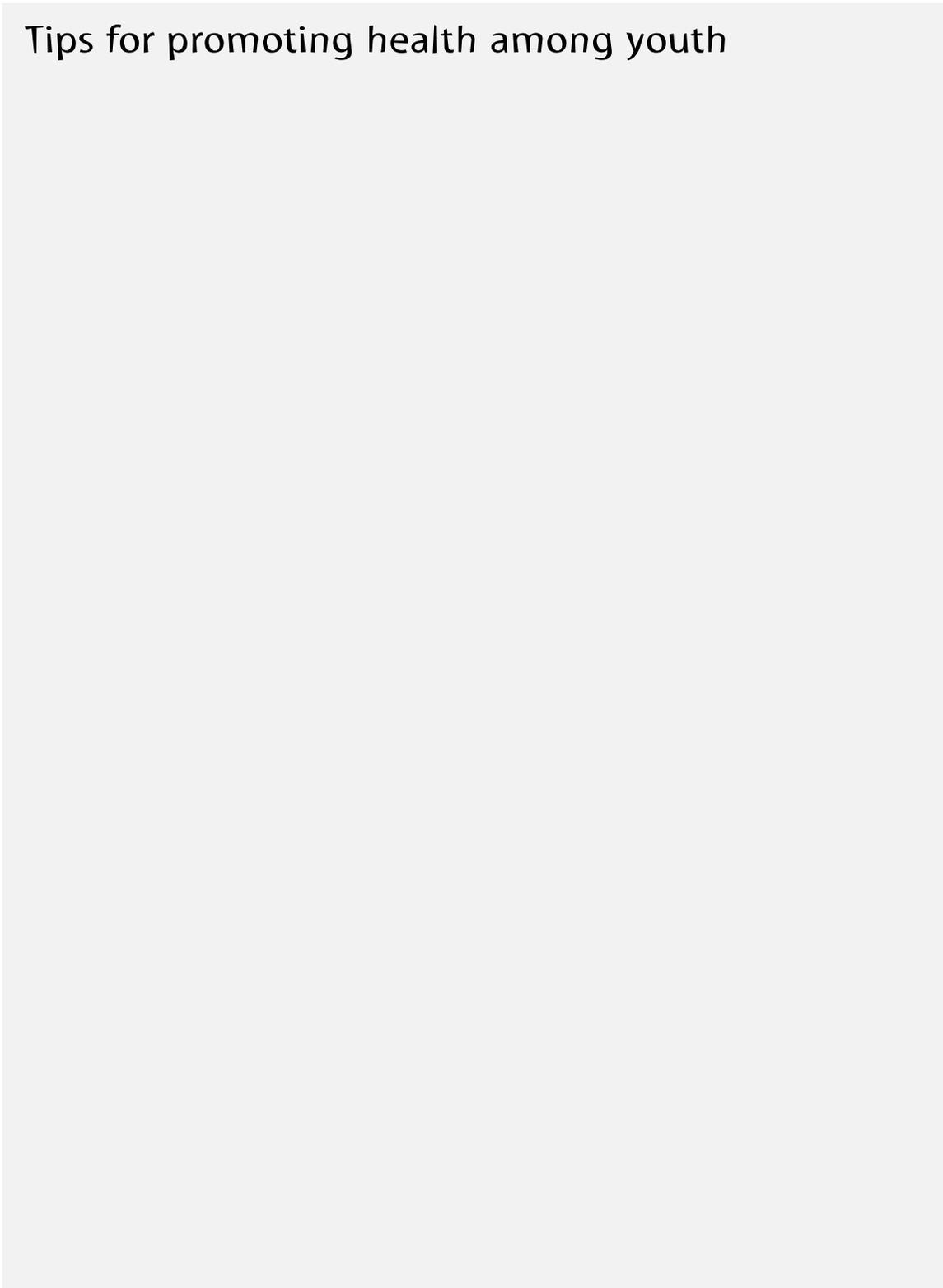
What you can do, is offer the phone number of the local literacy program along with friendly encouragement and support.

You may also want to contact local literacy workers to offer your help and support in organizing literacy programs/sessions on health issues.

Appendix 2



Tips for promoting health among youth



Tips for promoting health among youth

Here are some simple ideas and methods you can use when addressing health issues with youth. They are based on a health promotion approach that has been developed by health care providers and health educators

Health in this case means more than not being sick.

Health is...

- being well in your body, mind, feelings and soul (physical, mental, emotional and spiritual health)
- being able to reach your goals and realize your dreams because you are well enough to do it
- being able to cope with problems and make changes to help yourself.

Since people are affected by the world they live in, it is helpful to think and talk about health in the context of *families*, *communities* and *society* as a whole, in addition to the *individual*. In other words, the kind of family that youth live with or get support from, how much a part of a community youth feel, and social attitudes and behaviours such as acceptance, tolerance and caring all contribute to health. Some other things that research tells us which add to or take away from health are:

- how much money we have (income)
- how much respect we get from other people and how important they make us feel (social status)
- how much education we have
- the love and care we have received as young children (child development)
- the health and safety quality of the places we live, work and study (environments)
- the quality of the water we drink and the air we breathe (environments)
- our own activities — the food we eat, whether we smoke or get exercise (personal health practices).

When you talk about health issues with youth, it is useful to keep these broad ideas in mind.

Health promotion helps people take control of and improve their own health. You can't give someone health, but you can teach them and support them in ways to live healthier lives. For you and the youth you work with, health can be improved by:

- trying to change school, workplace and government policies or rules that affect youth. An example of health promotion would be working to create more jobs and training programs that meet youth needs.

- making better places to learn, work, live and play. Making sure your school or agency is a “healthy” place to be, and trying to change housing regulations that discriminate against youth are actions to promote health.
- helping youth connect with “communities” of people like them, or who live near them, to address common needs, such as creating a community kitchen, or just getting help from neighbours.
- helping youth develop personal skills to improve their health, such as quitting smoking, practicing safer sex, and resisting prejudice.

Here are some more suggestions for addressing youth health issues in a teaching/learning setting:

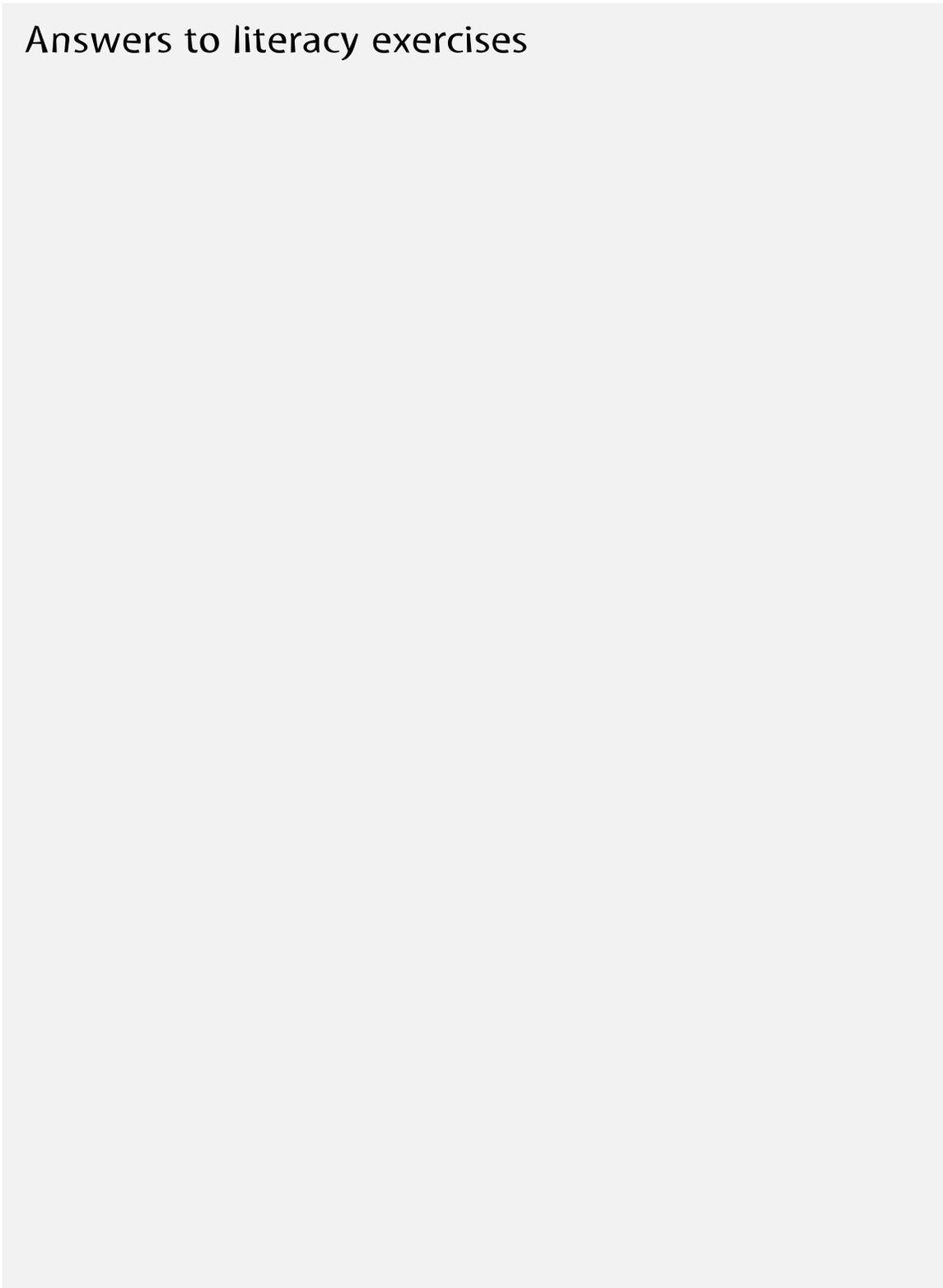
1. **Listen.** Youth continue to say that adults don’t take the time to really listen to them and try to see the world from their point of view.
2. **Start where youth are at.** Find out what issues most concern them and adapt the teaching material you are using to what they are concerned about.
3. **Recognize that what seems to be a really unhealthy choice is the best choice youth can make from the options available.** For some youth, living on the street is safer, at least in the short term, than living at home. And smoking is a safer way to cope with anxiety than using drugs.
4. **Be respectful and as non-judgmental as possible,** especially when youth are describing situations and activities you are not very familiar with. Look for your own biases and prejudices, but recognize you have your own values and beliefs as well.
5. **Avoid messages that include “should” and scare tactics.** Research tells us that youth are especially turned off by both moralizing and negative messages.
6. **Provide more than information.** Taking action on a health issues comes about when youth have:
 - a) the knowledge they need
 - b) opportunities to look at their attitudes and beliefs
 - c) the skills to carry out the action

In other words, in a teaching/learning setting, youth won’t quit smoking because we tell them it is bad for them. They are more likely to try to quit if they can think and talk about why they smoke, and have some concrete ways of resisting cigarettes.
7. **Realize that youth have to be ready to change.** Sometimes the present isn’t the right time to stop smoking, completely change diets, move to a better apartment or fight city hall. Take heart: raising health issues now might provide the information and support to make changes in the future.
8. **Involve youth in developing and carrying out health education that works.**

Appendix 3



Answers to literacy exercises



LESSON 1

Nouns and Verbs

1) Underline all of the nouns and circle all of the verbs in the sentences below.

1. Mom (rented) bedrooms to students (to help pay) the mortgage.
2. I (daydreamed) in most of my classes.
3. Dad just (disappeared).
4. The doctors here (have put) me in touch with a counsellor.
5. You (have) friends who (care), I (reminded) him.

2) Put the words in an order that creates real sentences

1. room my spend of I time in down most my
I spend most of my time down in my room.
2. caught stopped I before got I
I stopped before I got caught.
3. me to seemed see embarrassed he
He seemed embarrassed to see me.
4. never me I they ask what need
They never ask me what I need.
5. I ask the I didn't for help need
I didn't ask for the help I need.

3) Fill in the blanks, then fit the answers in the puzzle below.

1. Girls thought Philippe was really hot.
2. Philippe worked full time.
3. Mark visited Philippe at the hospital.
4. Philippe and Mark met at the Candide café.
5. Philippe tried to kill himself because he wanted the pain to end.
6. Philippe felt badly because he hadn't finished high school.
7. Philippe thought that his mother and sisters need too much from him.

G	I	R	L	S															
			F	U	L	L	T	I	M	E									
H	O	S	P	I	T	A	L												
				C	A	N	D	I	D	E									
		P	A	I	N														
		B	A	D	L	Y													
			N	E	E	D													

4) True or False.

- | | |
|--|--------------|
| 1. Philippe was looking for a girlfriend. | FALSE |
| 2. Mark bumped into Phillippe at a mall. | FALSE |
| 3. Philippe put Mark's phone number in his wallet. | TRUE |
| 4. Philippe was doing well in school. | FALSE |
| 5. Philippe smoked cigars to relax. | FALSE |
| 6. Philippe felt stuck. | TRUE |
| 7. Philippe was angry he was brought to the hospital. | FALSE |
| 8. Philippe and his family are going to meet with a counsellor. | TRUE |
| 9. Philippe was going to have to spend 3 months in the hospital. | FALSE |
| 10. Mark was glad Philippe had not died. | TRUE |

LESSON 2

Pronouns

1) Circle the pronoun at the end of each sentence that can replace the underlined noun.

1. Ted and Lindsay went to Ted's apartment. **his**
2. Lindsay was worried she might be pregnant. **She**
3. Many people have Herpes and do not know it. **it**
4. The test results showed that Lindsay had Herpes. **They**
5. Lindsay will warn any future partners that she has Herpes. **them**
6. Everybody at school had condoms. **They**
7. The counsellor at the health clinic was very nice. **She**
8. Joey didn't want to be a father. **He**
9. My parents were ashamed. **They**
10. Joey and I were both pretty scared. **We**

2) Circle the pronouns that show ownership.

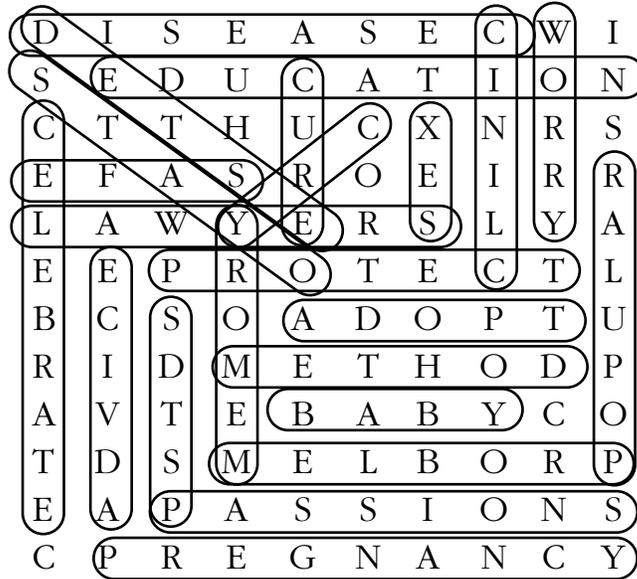
my your his her our their

3) Using each circled pronoun once, fill in the blanks.

1. Lindsay handed **her** I.D. to the bartender.
2. Lindsay felt **his** hand on her shoulder.
3. We had condoms in **our** backpacks.
4. **Your** programs could help me stay in school.
5. I visited **their** homes.
6. I want the best for **my** baby.

4) Find the words in the list in the letter box below.

When you have circled every word in the list, there will be letters left uncircled in the letter box. Unscramble these leftover letters to spell a key word from the stories you have read.



- | | |
|-----------|----------|
| Method | Adopt |
| Safe | Stay |
| Education | Clinic |
| Pregnancy | STDs |
| Advice | Baby |
| Popular | Cure |
| Celebrate | Cry |
| Passions | Sex |
| Worry | Memory |
| Tested | Problems |
| Disease | Protect |
| Lawyers | |

Key word: Choices

LESSON 3

Verb Tenses

1) Change these verbs so that you can use them to tell a story about what is happening now (present) and what might happen tomorrow (future).

Past	Present	Future
Was	Is	Will be
Came	Comes	Will come
Worked	Works	Will work
Told	Tells	Will tell
Slapped	Slaps	Will slap
Didn't	Doesn't	Won't
Knocked	Knocks	Will knock
Used	Uses	Will use
Answered	Answers	Will answer
Pushed	Pushes	Will push
Raped	Rapes	Will rape
Threatened	Threatens	Will threaten
Reported	Reports	Will report
Dated	Dates	Will date
Found	Finds	Will find
Called	Calls	Will call
Knew	Knows	Will know
Meant	Means	Will mean
Made	Makes	Will make
Left	Leaves	Will leave
Had	Has	Will have
Realized	Realizes	Will realize

2) Practise saying these words out loud, then write them in alphabetical order.

Assignments	Failed	Surprised
Boring	Friends	Thought
Bothered	Garbage	Threat
Cashier	Gym	Used
Comments	Laughed	Usually
Counselling	Proof	Veterinary
Diseases	Recovery	Victim
Elementary	Regularly	Would
Essays	Science	Writing
Except	Slapped	

LESSON 4

Compound Words

1) Find 5 compound words in the story Profit and Loss and write them in the boxes below.

Downhill	Painkillers	Rainbow	Dreamland	Girlfriends
Downtown	Overdose			

2) The following list of words are not compound words, but they do have smaller words inside them. Read each word and write all the smaller words you find.

Season	Sea, As, Seas, So, Son, On
Income	In, Come, Me
Discovered	Cover, Covered, Red, Over, Disco, Cove
Operations	Opera, Rat, Era, Ration, Rations, On
Drugs	Drug, Rug, Rugs
Than	A, An
Sheet	She, He
Form	For, Or
Filled	Fill, Ill, Led
Many	Ma, Man, An, Any
Realized	Real, Realize, I,
Year	Ye, Ear
Building	Build, Ding, I, In
Always	A, Way, Ways
Mad	Ma, A, Ad

3) Make compound sentences from the pairs of short sentences below.

1. I won't blame my father for my drug problems but I know they had a lot to do with his losing his job.
2. I would help my mom with supper clean up and then go to my room to listen to music.
3. After school I would hang out at the mall or sit in the park, just to have a couple of hours to myself before facing my father.
4. I started to snatch purses and take out any money I could find.
3. I talked a lot about trouble at home and promised to try harder.
4. The accident spoiled my senior girls' basketball season but it introduced me to the magic of prescription drugs.
5. I made lots of money but lost a clear conscience.

LESSON 5

Contractions

1) Match these word pairs with their contractions.

Should not	I'm
Can not	They're
Are not	Don't
Do not	Shouldn't
Does not	He's
She is	Aren't
They are	Can't
He is	Wouldn't
I am	She's
Would not	Doesn't
I will	I've
Could not	Won't
Have not	We'll
Had not	They'll
Will not	I'll
I have	Haven't
We will	We've
We have	Couldn't
They will	She'll
She will	Hadn't

2) Unscramble each word and place it in the sentence where it fits best.

1. You have never **tasted** beer?
2. They probably all thought she was a real **loser**.
3. They **brought** two 6-packs of beer with them.
4. Shannon froze every time a car **drove** by.
5. She **felt** very grown-up.
6. Erika helped Shannon **finish** her second beer.
7. Shannon's **grades** slipped a bit.
8. She would drink until she got **silly**.
9. They were all **laughing** at her.
10. Last weekend, while she was **drunk**, Shannon almost drowned.

3) Let's do that again!

1. Not everybody gets sick when they drink.
2. I speak two languages.
3. I'm an alcoholic.
4. He was taken away from his village, his family and his culture.
5. He went off reserve to look for work.
6. My mother had no self-esteem.
7. My drinking controlled me.
8. I decided I want to change my life.
9. I don't know what's ahead.
1. It is a date I'll remember forever!

LESSON 6

Prefixes and Suffixes

1) Choose the correct prefix to complete these words.

1. Condense (make denser or more compact)
2. Unlock (open)
3. Expatriate (leave one's own country)
4. Predecease (die first)
5. Biannual (twice a year)
6. Disagree (having a different opinion)
7. Unison (having the same sound)
8. Nonsense (without meaning)
9. Polyglot (speaking many languages)
10. Democracy (government by the people)
11. Cooperate (work together)

2) Here are other prefixes that are commonly used. Look them up in the dictionary, explain what each means, then give an example of a word having that prefix.

Prefix	Meaning	Example
Anti-	Against	Anti-smoking
Dyna-	Energy	Dynamite
Aqua-	Water	Aquaplane
Chrono-	Time	Chronometer
Extra-	Outside, Beyond	Extraordinary
Hyper-	Above, Beyond, Super	Hyperactive
Para-	Closely related, Resembling	Paramilitary
Micro-	Small	Microchip
Ultra-	Beyond what is ordinary	Ultrathin
Photo-	Light	Photograph

3) Choose the correct suffix to complete these words.

1. Darkness (no light)
2. Backward (going in reverse)
3. Millionaire (a rich person)
4. Childless (having no children)
5. Cineplex (many movie theatres under one roof)
6. Glorious (awesome)
7. Physics (a branch of science)
8. Profitable (making money)
9. Booklet (a small book)

4) Find other words that end in these suffixes and write them in the chart below.

Suffixes	Examples
-ous	Nervous,
-ics	Politics,
-able	Dependable,
-plex	Duplex,
-aire	Legionnaire,
-ness	Goodness,
-less	Fearless,
-let	Piglet,
-ward	Afterward,

5) These sentences contain prefixes and/or suffixes. Circle them.

1. Tobacco producers enjoy millionaire status through disonest advertising.
2. Smokers risk developing cancerous lungs.
3. Antismoking activists are tireless in their efforts to limit public smoking.
4. This is a complex social and health issue which needs everyone's cooperation.
5. Money saved by not smoking can be put toward the purchase of other goods.

LESSON 7

Adjectives

1) Find the best adjective to complete each sentence.

1. The place looked clean, a **real** deal at \$200 a month.
2. It covers **small** sheets of metal nailed over rat holes.
3. **Bad** plumbing and rats aren't the only problems here.
4. **Missing** windows in the basement make locking doors a joke

5. A police officer will collect used needles as evidence.
6. As a teen-aged mother, Julia has very little money.
7. Her low income forces her to share housing.
8. She has put her name on a waiting list for public housing.
9. Melina came running to her with a yellow ball in her arms.
10. Carla is another single parent.

2) Following the example above, match 5 of the adjectives below to nouns and use them in a sentence to show comparison.

Better-paying job, Cleaner boarding house, Best friend, Lowest rent, Most violent gang, Dirtiest room, Loudest tenant, Longest waiting list, Worst plumbing, More dangerous neighbourhood

3) Using the name of the street you live on, fill in adjectives that describe your housing situation or the neighbourhood you live in. The result is called an ACROSTIC.

LESSON 8

Adverbs

1) Change the adjectives below into adverbs.

Unfairly	Badly	Importantly
Differently	Happily	Viciously
Terribly	Ignorantly	Amazingly

2) Since adverbs can tell us when something happens, they apply to the past, present or future.

Write the adverbs from the box below, under the correct time.

Present	Past	Future
Currently	Yesterday	Next
Now	Recently	Later
Presently	After	Tomorrow
Today	Earlier	Before

3) Underline the adverbs in each sentence below, then explain how it describes the action by:

writing how, when or where on the line at the end of the sentence.

1. Politicians have recently made windshield washing illegal. when
2. The police say we create traffic jams downtown. where
3. If some street kids break the law, we are all unfairly labelled as criminals. how
4. Students usually tease Joy. when
5. Joy believes that society treats her people poorly. how

4) Write Adj or Adv above the word that is the same in each pair of sentences.

Adj

1. Down jackets are too expensive for squeegee kids to buy.

Adv

When the rain is coming down hard, squeegee kids can't work.

Adv

2. I think the laws against squeegee kids got passed rather fast.

Adj

Those jeeps are fast on city streets and country roads.

Adj

3. I pushed the up button and waited for the elevator.

Adv

He went up the stairs to save time.

Adv

4. Talking things over with Emily Roundsky made Joy feel better.

Adj

Joy will be a better nurse for having had such a good role model.

Adj

5. Dirty windshields mean money in my pocket.

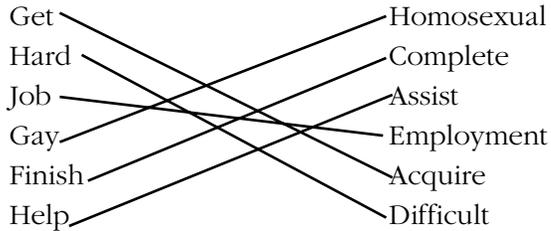
Adv

Passing laws against people like me is playing dirty.

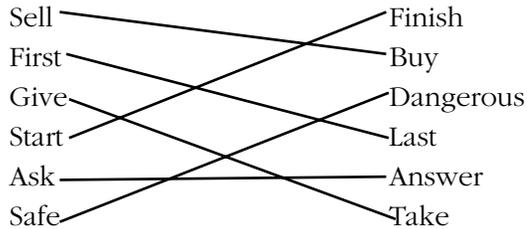
LESSON 9

Synonyms, Antonyms and Homonyms

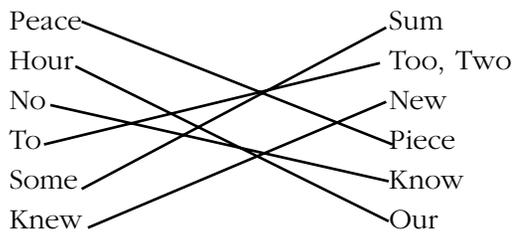
1) Connect the synonyms:



2) Connect the antonyms:



3) Connect the homonyms:

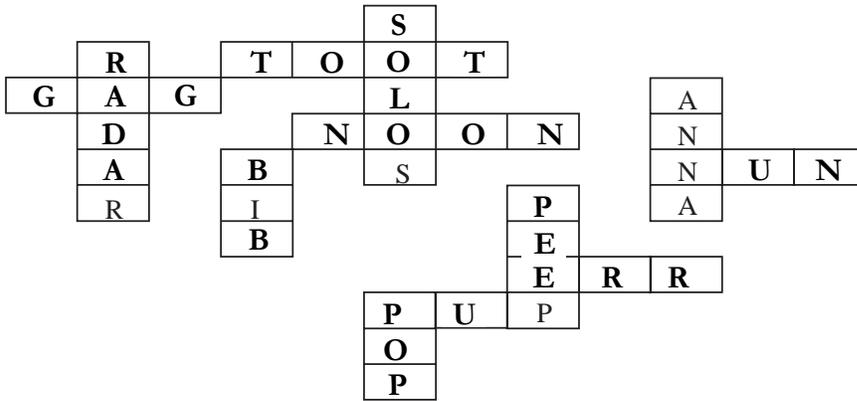


4) Complete the sentences below with these palindromes.

eye, pop, gag, radar, noon, solos, nun, pup, toot, bib, peep

1. A young dog is a pup.
2. A soft drink is sometimes called pop.
3. You thread a needle through its eye.
4. To make children laugh, the clown will toot his horn.
5. Little birds make a sound called a peep.
6. The Coast Guard discovered the sunken ship by using radar.
7. She will sing two solos at the concert.

8. I put a **bib** on my baby to keep her dress clean.
9. I'll meet you for lunch at **noon**.
10. The **gag** made us all laugh.
11. A religious sister is also called a **nun**.



5) Now fit the answers into the crossword puzzle below:

LESSON 10

Conditional Verbs

1) Match the sentences below with the conditional mood expressed.

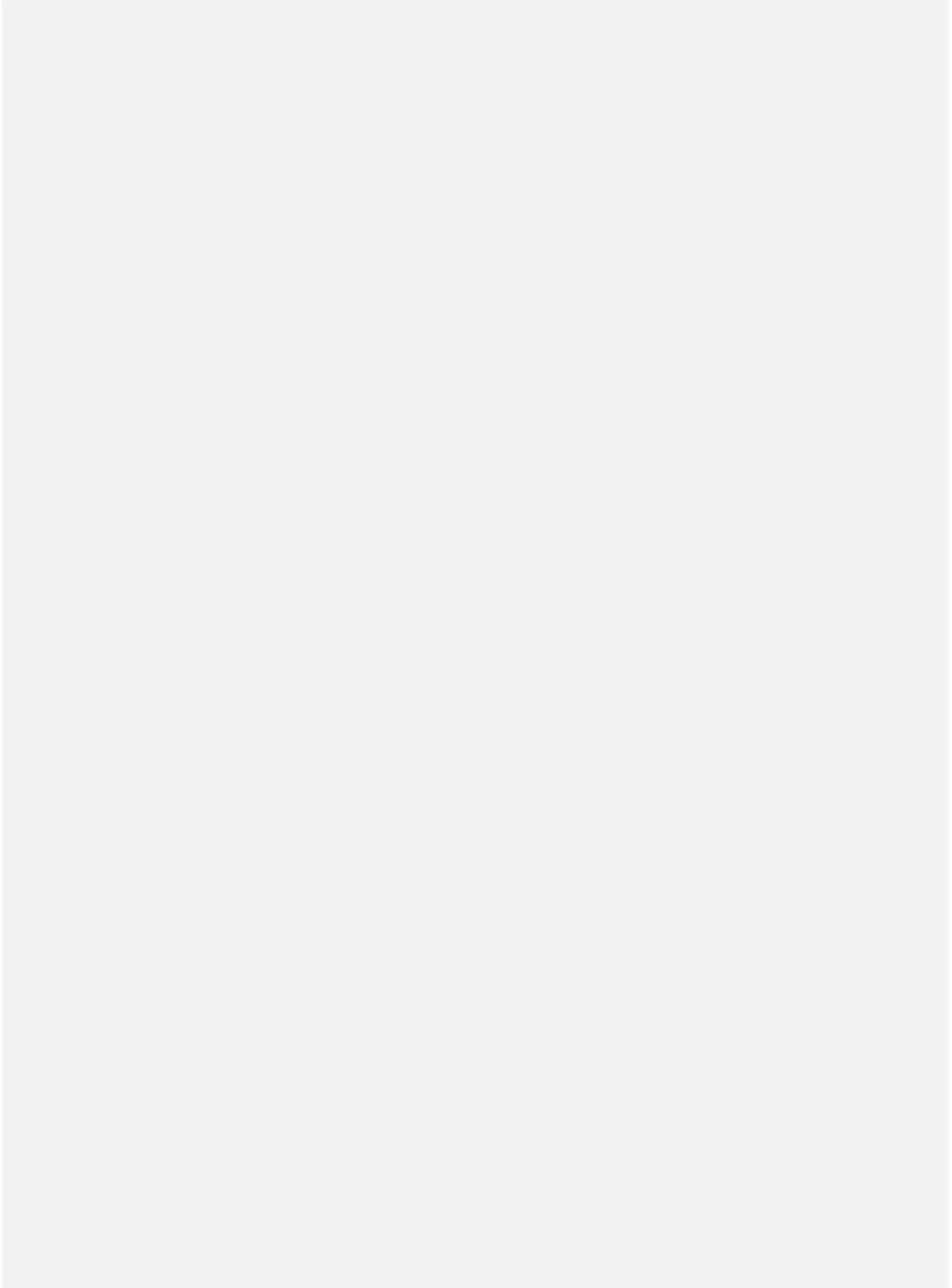
- | | |
|---|------------------|
| 1. If Craig had a better job, he would earn more money. | Past |
| 2. If youth will pay \$7 a week, they may join the collective kitchen. | Present |
| 3. If Alyssa had ignored her roommates teasing, she may not have become anorexic. | Future |
| 4. When Alyssa gains weight, she fights the urge to diet. | Habitual Present |

2) Unscramble these groups of words to form sentences in a conditional mood.

If the fridge was empty, Mom would send us to school without breakfast.

1. We would have stayed back home if we could have found work there.
2. Last winter we would eat pasta and soft drinks if we wanted to feel full.
3. We might have joined the collective kitchen sooner if we had known about it.
4. We can afford to eat well if grocery stores continue to donate food.
5. I will try to find a restaurant job if Sharon will recommend me.
6. Young girls might not go on diets if models were not so skinny.
7. Alyssa might have eaten more if her parents had insisted.
8. If her mother made her eat breakfast, Alyssa would exercise at noon.
9. Alyssa could have visited her grandparents if she had agreed to eat properly.
10. If Alyssa eats an extra bite of food at each meal, her health will improve.

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