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Mental Health Matters

A health education resource for junior secondary school

Second Edition 2009

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Foreword

Mental Health Matters has been developed by the Mental Health Foundation as the result of public concern for the mental well-being of young New Zealanders, taiohi of Aotearoa. The teaching programme is written for secondary schools at the Year 9 and 10 level. It is recommended that this resource is used as part of an ongoing health education programme.

Mental Health Matters provides students with another opportunity to develop personal and interactive skills that promote their mental health. There are other resources available to schools that also do this and Mental Health Matters advises teachers on how these can be incorporated into a comprehensive mental health programme.

No teaching resource is able to address the mental health concerns of all students. To effectively acknowledge and respond to mental health concerns within a learning context, attention must be paid to the wider social and psychological environment. A supportive school and classroom environment is essential to an effective curriculum based health education programme.

Learning about your own mental health and being aware of how changes to it affect your functioning and interactions is a prerequisite to understanding the mental health problems or mental illness of others and their impact.

This teaching resource has been developed for use within the health and physical education learning area of The New Zealand Curriculum. It provides teachers with practical learning activities and ideas that can be developed and modified to meet differing student needs and contexts.

We can not be complacent about the mental health profile of New Zealand’s young people. While schools cannot change this profile alone, promoting awareness of mental health issues, and better addressing these, is now a responsibility schools are required to accept.

Dr Peter McGeorge
Chair Commissioner
Mental Health Commission
October 2009
Introduction

Mental Health Matters is intended to assist secondary schools in promoting the well-being of adolescents and raising their awareness of the diverse nature of mental health. This resource focuses on building skills as well as providing students with some insight into changing states of mental health.

Mental health has been defined as a key area of learning in the health and physical education learning area of The New Zealand Curriculum (Ministry of Education, 2007).

“In health and physical education, the focus is on the well-being of the students themselves, of other people, and of society through learning in health-related and movement contexts.” (p22).

“In health education, students develop their understanding of the factors that influence the health of individuals, groups, and society: lifestyle, economic, social, cultural, political, and environmental factors. Students develop competencies for mental wellness, reproductive health and positive sexuality, and safety management, and they develop understandings of nutritional needs. Students build resilience through strengthening their personal identity and sense of self-worth, through managing change and loss, and through engaging in processes for responsible decision making. They learn to demonstrate empathy, and they develop skills that enhance relationships. Students use these skills and understandings to take critical action to promote personal, interpersonal, and societal well-being.” (p23).

Mental health

What is mental health?

Mental health is integral to well-being as described in The New Zealand Curriculum through the concept of hauora, a Māori philosophy of well-being that includes the dimensions taha wairua, taha hinengaro, taha tinana, and taha whānau, each one influencing and supporting the others (NZC p22). Hauora relates to mental health in the way it represents the need for individuals to be connected socially, emotionally and spiritually and how that enables them to have a sense of belonging and to feel valued and acknowledged as members of family/whānau and the wider society.

A healthy society

While there are many varying definitions of a healthy society, the Mental Health Foundation has defined this as one that acknowledges that mental health is determined by the interactions of individuals with their environment. A healthy society therefore has structures and practices that will treat all members humanely and equitably, and works to ensure economic stability.

What is mental health promotion?

The goal or aim of mental health promotion is positive mental health for as many people in the population as possible. ‘Positive mental health’ encompasses concepts such as well-being, strength, mana, peace of mind, life satisfaction, quality of life, happiness and spirituality.

‘He oranga ngakau
He pikanga waiora’

‘The positive feelings in your heart will raise your sense of self-worth’

Health and physical education learning area whakatauaki (NZC p22)
Inclusiveness statement

Mental health means different things to different people. How you see yourself, how you perceive the ways others respond to you, your beliefs, culture and behaviour shape your mental health understanding. For this curriculum resource to be effective teachers must ensure that all students are included, and that their culture, beliefs and differing values are acknowledged and respected.

A classroom environment of tolerance, acceptance and inclusiveness, with respect to difference, is an essential foundation for promoting a positive learning environment for all. Student learning can be enhanced by opportunities to gain insight into, and understanding of, different views and perspectives. This is summarised in the Values section of The New Zealand Curriculum:

Through their learning experiences, students will develop their ability to:
• express their own values
• explore, with empathy, the values of others
• critically analyse values and actions based on them
• discuss disagreements that arise from differences in values and negotiate solutions
• make ethical decisions and act on them. (NZC, p10)

To achieve a safe classroom, it is important to negotiate safety guidelines with each class of students to help establish a safe learning environment. Again The New Zealand Curriculum provides the direction for this through Effective Pedagogy:

While there is no formula that will guarantee learning for every student in every context, there is extensive, well-documented evidence about the kinds of teaching approaches that consistently have a positive impact on student learning. This evidence tells us that students learn best when teachers:
• create a supportive learning environment
• encourage reflective thought and action
• enhance the relevance of new learning
• facilitate shared learning
• make connections to prior learning and experience
• provide sufficient opportunities to learn
• inquire into the teaching–learning relationship. (NZC p34)

Teachers will have responsibility for ensuring an environment of safety in respect of cultural differences and also for students who have differing abilities or health status, for both genders and for those whose sexual orientation may differ from the majority. Discussing thoughts and feelings can increase the vulnerability of some students, particularly if stereotyped and negative attitudes prevail. If teachers are aware of the importance of inclusion, provide positive role models, and work to establish a classroom environment of acceptance, more effective learning will occur.
School policy and procedures that support the promotion of mental health

Provision for student mental health is a requirement of all Boards of Trustees. The National Administration Guidelines require each Board of Trustees to:

NAG 5
• provide a safe physical and emotional environment for students;
• comply in full with any legislation currently in force or that may be developed to ensure the safety of students and employees.

Schools are required to develop policy and procedures that ensure these needs are met. The development and review of policy requires consultation with the whole school community. School charters will set the foundation for developments in this area. Schools will have many policies and procedures that relate to the mental and emotional well-being of their students and staff. Some examples of these policies and procedures are:

• Guidance and Counselling
• Pastoral care systems and procedures (e.g., peer support, deans network)
• Safe school policy (inclusive of anti-harassment and anti-bullying policies/procedures)
• Equal employment opportunities
• Community consultation
• Traumatic incidents response plan
• Co-curricula opportunities
• The school-based curriculum
Health Promoting Schools

Schools through New Zealand and internationally have adopted a Health Promoting Schools conceptual framework. Central to this framework is the Treaty of Waitangi and its principles of partnership, participation and protection, the Ottawa Charter for health promotion, the Ministry of Education National Education Goals and the National Administration Guidelines. The diagram below shows this conceptual framework:

Within the school emphasis is placed on:
- The importance of an environment which is safe, physically and emotionally, for all of its members
- The formal and informal curriculum, including the implementation of a comprehensive health and physical education learning programme
- A school climate/ethos that cares for and values all those who are involved with the school
Resiliency and protective factors

School can play a major role in helping young people feel:
• Connected
• Secure
• Valued

Connectedness
The classroom and the school environment can foster a sense of connection and belonging for young people. When young people have a positive connection to school, this is a protective factor in terms of their mental and emotional well-being. Caring supportive teachers also provide key support and are role models for young people.

Security
A classroom and school environment that actively accepts and celebrates diversity and addresses harassment, racism and discrimination helps young people to feel secure and safe at school.

Being valued
Young people gain a sense of positive regard through having their achievements affirmed and celebrated by others. The use of interactive teaching and learning approaches and encouragement to participate in group activities contribute to a feeling of empowerment for young people in their learning and social interactions. In addition, receiving positive and constructive feedback from teachers and peers enhances how valued young people feel.

Health and physical education

The four underlying and interdependent concepts at the heart of the health and physical education learning area, - hauora, the socio-ecological perspective, health promotion, attitudes and values, - each shape the curriculum understanding of mental health (NZC, p22).

• As previously noted, mental health is one aspect of well-being explored through the concept of hauora. The holistic approach of this concept means that mental health is always considered in relation to social, spiritual and physical well-being.
• Well-being is something we each have, but is also important to consider the interrelationships that exist between the well-being of individuals, other people, and whole communities. In other words, to take a socio-ecological perspective of well-being.
• The processes that involve students promoting health for themselves and others requires them to take personal and collective action, to develop and maintain supportive mental and emotional environments.

These actions are founded on attitudes and values that reflect a positive, responsible attitude on the part of students to their own well-being, respect and concern for other people and the wider community, and the values of social justice which means actions are fair, inclusive and non-discriminatory.
Aims of Mental Health Matters

- To promote positive mental health and the understanding that mental health is an aspect of personal well-being.
- To assist schools in the development of sustainable mentally healthy environments.
- To explore New Zealand society’s attitudes towards mental illness and the enhancement of mental health and wellbeing.

Themes
These three aims are explored through the following themes and related activities:

- Feeling good about ourselves and others
- Stress and change
- Societal attitudes towards mental health

Establishing a supportive classroom environment
The nature of this resource requires the existence or development of an atmosphere in the classroom that involves:

- A comfortable, informal physical environment
- Trust between students, and teachers and students
- Effective communication
- A teacher skilled in interactive, student centred learning techniques
- The modelling of behaviour that enables students to feel valued
- Openness and willingness to share experiences, with the teacher modelling this sharing appropriately
- The establishment of safety nets for students when sensitive issues are raised
- Using a variety of methods to group students so that they learn to work with a range of people

The activities aim to encourage students to:

- Increase their knowledge about themselves and others
- Be supportive of others
- Learn strategies to help them feel good about themselves
- Express and manage feelings in ways that don’t harm others
- Clarify their own ideas and attitudes relating to mental health
- Perceive the need for and accept support
- Develop key competencies as stated in *The New Zealand Curriculum*, eg managing self, relating to others, participating and contributing, and thinking

Safety guidelines
To ensure a safe emotional environment for students the setting of safety guidelines is essential. Safety guidelines apply to both students and teachers and should be negotiated in partnership. It is important that this work is done carefully and thoroughly. Valuable learning can occur as the result of an in-depth and sustained discussion between the students and the teacher.

While it is important that students are able to share the content of activities in this programme outside the classroom, it is also essential that they understand what confidentiality means in relation to maintaining safety for themselves and others. Students need to understand that they only need to share what they feel comfortable with. Therefore, confidentiality means that the personal details of stories/experiences of students stay within the group.

If there’s something a student doesn’t really want to share they don’t need to. Instead, encourage them to find a safe person they can talk to.
Using this resource

This resource has been designed for use at levels 5-6 of the health and physical education learning area of The New Zealand Curriculum (2007). The activities within each theme are set out in a developmental sequence and it is recommended that teachers follow this sequence. However, each theme may be incorporated into different health education learning contexts, for example:

- **Theme one: Feeling good about ourselves and others** may sit within a learning context of friendships.
- **Theme two: Stress and change** may be included in a learning context related to change, loss and grief.
- **Theme three: Societal attitudes toward mental health** may form part of a learning programme focusing on changing states of health. This theme may be useful for students at NCEA Level 1 if they are working towards the assessment for AS90063 which relates to managing changing states of health.

It is expected that teachers will modify the activities to suit the learning needs of their students.

Learning intentions and success criteria

Each activity begins with a **learning intention** which is linked to at least one achievement objective from the H&PE learning area. The learning intention is then re-expressed as one or more possible **success criteria**. Success criteria are statements of what student learning ‘looks like’ in relation to the learning intention. It is important to note that these success criteria are only intended as examples.

Ideally, success criteria are developed with the students and written in student language. Students should be able to articulate what it is they have learned. A student should be able to state “I can .....” as a consequence of their learning.

Links to the underlying concepts

The “Links to the underlying concepts” in the right hand column contain statements to indicate how the activity reflects the underlying concepts of the H&PE learning area.

Effective pedagogy and key competencies

The constructivist approaches, fundamental to learning in Health Education, provide opportunities for teachers to incorporate many aspects of effective pedagogy (NZC p34-35) into their teaching and learning programmes. Through the use of effective pedagogies, students are able to further develop the key competencies in meaningful and relevant contexts. The teaching and learning practices that create supportive learning environments, make connections with prior learning and experience, and encourage reflective thought and action, support students in various ways to think critically to build new knowledge related to mental health, learn to manage self, relate to others and participate and contribute to learning communities. Examples of effective pedagogy and development of the key competencies feature recurrently throughout all of these activities.

Learning Journals and the importance of developing student literacy in health education

Each activity in the resource is supported by an example of a Learning Journal page. **These pages can be photocopied and used as is, or used for ideas and adapted to meet the unique learning needs, interest and local circumstances of the students.** Health education teaching and learning approaches include a good deal of discussion and group work. However, it is important that students’ reading and writing skills are developed as well as the oral expression of their ideas. Health education learning contains many words and phrases where there are multiple meanings and understandings, some of which may differ from everyday understandings. There can be many ‘right answers’ in health education and this can be confusing so it is important that students have opportunity to develop literacy skills to explain what they mean. Being able to speak with health education meaning, read for health education meaning, and write with health education meaning (that can be understood by others), is just as important in health education as it is for any other learning area.
In addition to attending to some literacy skill development, in context of health education, the purpose of these Learning Journal pages is to give the teacher and the student an indication of the learning outcome – that is, what the student knows (or can do) in relation to the learning intention (and as expressed through the success criteria).

The complexity of learning in a context like health education, where so much learning is related to students' daily life experiences, can mean new learning is hard to separate from existing knowledge and understanding. The Learning Journal pages also aim to encourage reflection on what the student now knows, or what they had not previously realised - that is, what they have *learned*. The final reflection sheet at the end of the resource is intended to provide the teacher with feedback to further inform their planning for other health education learning contexts.

**Assessment**

In health education, teachers are encouraged to view all student work, whether formally and informally gathered, as evidence to indicate what the students are learning. For example, ideas recorded in the Learning Journal, the many student contributions to the activities, whether written on posters or summary sheets, demonstrated through skills practice, or reported as feedback from group discussion, are evidence of what the student has learned and achieved. Pages 39-40 of *The New Zealand Curriculum* discuss this understanding of assessment in more detail and page 35 talks about teaching as inquiry and the need to have evidence to inform teaching practice.

If a more formally collected sample of evidence of learning is required to show how students have consolidated their ideas across several lessons (within each theme for example), one suggestion would be to pose a scenario about a young person (students could write their own) and a sample of the questions similar to those on the learning journal pages could be asked in relation to the scenario.

**Using the DVD**

Three video scenarios have been developed to support some of the activities in this resource.

**Theme One: Feeling good about ourselves and others**

**Activity Five: Scenario One – “I” Statements**

A brother and sister argument. Version two shows how the communication improves by using “I” statements.

**Activity Six: Scenario Two – Self-Talk**

In a tough rugby game, Sam is discouraged and his self-talk is negative. Encouragement from the captain helps him think and act more positively.

**Activity Seven: Scenario Three – I.A.L.A.C.**

This scenario continues the story of Rochelle and shows how her I.A.L.A.C sign is put back together again through friendship and of her own efforts.

The abundance of video material available featuring mental health themes provides many additional resourcing opportunities. It is recommended that teachers source, for example, current mental health promotion campaigns, or movies or TV programmes with themes that reflect the values of the curriculum.
### Planning guide

This planning guide provides an overview and sequence for the themes in this resource.

#### THEME ONE Feeling good about ourselves and others

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<td>A picture of health</td>
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<tr>
<td>Personal health profile – what does being healthy mean to you?</td>
<td>18</td>
</tr>
<tr>
<td>Feelings, emotions and mental health</td>
<td>19</td>
</tr>
<tr>
<td>&quot;I&quot; statements</td>
<td>20</td>
</tr>
<tr>
<td>Self-talk</td>
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<td>Self-attention</td>
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#### THEME TWO Stress and change

<table>
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<th>Activity</th>
<th>Page</th>
</tr>
</thead>
<tbody>
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<td>Stress postbox</td>
<td>37</td>
</tr>
<tr>
<td>Rate your stress</td>
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</tr>
<tr>
<td>Stress profiling</td>
<td>39</td>
</tr>
</tbody>
</table>

#### THEME THREE Societal attitudes toward mental health

<table>
<thead>
<tr>
<th>Activity</th>
<th>Page</th>
</tr>
</thead>
<tbody>
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<td>46</td>
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#### Activity four page 73
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Theme One

Feeling good about ourselves and others

Rationale
By becoming aware of their own strengths and abilities and by understanding their feelings, students learn to value themselves and gain a sense of self-assurance.

Overall objectives
• Students will develop an understanding that mental health is an important part of personal well-being.

• Students will further develop skills for relating to others.
1. Establishing safety guidelines

Rationale
Safe classrooms support learning because individuals and groups of students can share ideas in a safe supportive classroom. Guidelines are for both the students and the teacher.

Learning intention
Students will negotiate a set of guidelines to establish a safe supportive classroom.

H&PE Achievement Objective 5C1

Possible success criterion
[Students] I can say why each of the safety guidelines decided upon by the class helps us to have a safe and trusting environment to work in.

Teaching and learning process
Method One
- Divide class into groups of four and give each group four or five strips of paper or cards.
- Groups brainstorm their guidelines for creating a safe and trusting environment.
- Return groups to a class circle and invite each group to share one guideline at a time, e.g. each group may have a similar guideline such as ‘no put-downs’. Negotiate a set of safety guidelines, including a guideline from each group if possible.
- Glue/staple the strips onto a sheet of card and have each student sign the guidelines.
- Establish with the class a common understanding to the meaning of each guideline (especially ideas related to respect, confidentiality and the right to pass).

Method Two
- Give each group an envelope containing a set of safety guideline cards (see following pages).
- Ask each group to sort their cards into three piles: very important, important, not important.
- After sorting the cards, each group chooses the five or six cards that are most important for their group to be able to work successfully together.
- Return groups to a class circle and repeat the procedure as set out in Method One.

Method Two is a quick method to use and solves the problem of groups struggling to come up with their own statements.

Links to the underlying concepts

Hauora:
A safe mental and emotional environment supports well-being

Socio-ecological perspective:
Individual responsibility for promoting a safe supportive environment contributes to the whole classroom community being safe and supportive

Health promotion:
A safe environment for promoting mental and emotional well-being for everyone in the school community

Attitudes and values:
Respect for the attitudes and values of individuals is important when establishing group safety guidelines

Resources
Coloured card
Glue or staples
Felt marker pens
Teacher note
It is important to negotiate not only the safety guidelines for the group, but also the processes for how these will be maintained. It is recommended that the development of group safety guidelines is not done on the very first lesson with the class and that some time be given to cooperative group building and trust activities prior to starting the programme.

Rights of individual group members are respected
Confidentiality
No put-downs
The right to stay silent
Encouraging participation
<table>
<thead>
<tr>
<th>Safety guideline cards</th>
</tr>
</thead>
<tbody>
<tr>
<td>Giving advice</td>
</tr>
<tr>
<td>Having a sense of humour</td>
</tr>
<tr>
<td>No put-downs</td>
</tr>
<tr>
<td>One person talking at a time</td>
</tr>
<tr>
<td>The right to pass</td>
</tr>
<tr>
<td>No criticising</td>
</tr>
<tr>
<td>Being understanding</td>
</tr>
</tbody>
</table>
# Safety guideline cards

<table>
<thead>
<tr>
<th>A leader</th>
<th>Being confident</th>
</tr>
</thead>
<tbody>
<tr>
<td>Looking at the person speaking</td>
<td>Not interrupting</td>
</tr>
<tr>
<td>Being helpful</td>
<td>Starting on time</td>
</tr>
<tr>
<td>Being confidential</td>
<td>Clean shoes</td>
</tr>
<tr>
<td>Agreeing with everyone else</td>
<td>Being supportive</td>
</tr>
<tr>
<td>Being a friend</td>
<td>No laughing at people</td>
</tr>
<tr>
<td>Being nice</td>
<td>Putting up hands</td>
</tr>
</tbody>
</table>
Learning Journal: Class safety guidelines

Task
(a) Choose three safety guidelines decided upon by the class that are especially important for you. Explain why you consider these guidelines to be important.

Guideline 1:
The reason why this guideline is important for me is ....

Guideline 2:
The reason why this guideline is important for me is ....

Guideline 3:
The reason why this guideline is important for me is ....

(b) Choose a guideline that not everyone agreed on (which means it probably didn’t end up on the final list) or a guideline where people had different understandings of what it meant to them.

(i) Guideline:

(ii) Why do you think people have different views about what some guidelines mean or what is important for establishing a safe environment in the classroom?

Reflection
What I learned from the activity when the class decided on the safety guidelines we would work by (think of ‘learning’ as anything you knew or realised at the end of the lesson that you didn’t know at the beginning).

Success criterion:
As a result of my learning I can .....
2. A picture of health

Rationale
This activity will enable the teacher to determine the current level of students’ knowledge and understanding about what being healthy means to them, in relation to the concept of hauora. Although the focus for this learning is around mental health, it is important that students see mental health as being integral to well-being.

Learning intentions
Students will develop understanding that being healthy involves a balance of physical, mental and emotional, social and spiritual well-being.
Students will develop understanding that, in health education, well-being is explored in relation to the holistic concept of hauora.
H&PE Achievement Objective 5A4

Possible success criteria

[Students] I can identify and describe examples of physical, mental and emotional, social and spiritual well-being.
I can relate my understanding of well-being to the whare tapa wha model of hauora.
I can describe how aspects of well-being are inter-related.

Teaching and learning process
• Brainstorm with the students what they generally understand ‘being healthy’ means to them. Accept all ideas.
• Introduce/recall the concept of hauora, as described through the Te Whare Tapa Wha model (Durie, 1982). Construct with the students a shared understanding of what aspects of well-being each dimension of hauora refers to.
• Make links between the ideas about being healthy and this understanding of hauora.
• Draw out further understandings for any dimensions where students may be struggling to come up with a range of ideas.
• Support the students to develop understanding of terms like: holistic, inter-dependent, inter-related, dimension, aspect.
• In groups, ask students to draw a large body outline.
• Label and/or draw around and on the body, all the things that make up a healthy person. If magazines are used, students can create a collage within and around their body outline.
• Highlight by colour coding or circling all the things that are: physical, mental and emotional, social, spiritual (as best the students understand these ideas).
• Display group posters around the room.
• Acknowledge and identify common threads between the posters and expand the ideas of what being healthy means, (it is important here to examine bi-cultural perspectives and to share experiences with the many cultural groups that make up our New Zealand society).

Links to the underlying concepts

Hauora:
Well-being requires the inter-relationship of all dimensions – taha wairua, taha hinengaro, taha tinana and taha whānau.

Attitudes and values:
Individuals may place different emphasis or understanding on what being healthy means to them.

Resources
Large pieces of newsprint, pens, or crayons, magazines
<table>
<thead>
<tr>
<th><strong>Hauora</strong></th>
</tr>
</thead>
</table>
| **Taha tinana – physical well-being**  
The physical body, its growth, development, ability to move and ways of caring for it. |
| **Taha hinengaro – mental and emotional well-being**  
Coherent thinking processes, acknowledging and expressing thoughts and feelings, and responding constructively. |
| **Taha whanau – social well-being**  
Family relationships, friendships and other interpersonal relationships, feelings of belonging, compassion, caring and social support. |
| **Taha wairua – spiritual well-being**  
Values and beliefs that determine the way people live, the search for meaning and purpose in life, and personal identity and self-awareness. (For some individuals and communities, spiritual well-being is linked to a particular religion: for others it is not). |

Health and physical education in *The New Zealand Curriculum* (1999)
Learning Journal: A picture of health

Task
(a) Draw your own whare tapa wha model (or four inter-connected squares). On your diagram write the names of the four dimensions of hauora in Maori and in English and state the aspects of well-being that these dimensions relate to. If you have knowledge of other cultural models of well-being, or other languages, you may like to add these ideas or names as well. This is your “picture of health”.

(b) Using ideas from your group’s picture of health, select three aspects of well-being related to each of the four dimensions of hauora that you consider are particularly important for you. Write these next to the name for each dimension.

(c) Explain how (for you) these aspects are somehow inter-related – how one aspect of well-being affects another.

Reflection
What I learned from the activity when the class made links between what we thought it meant to ‘be healthy’, and the whare tapa wha model of hauora. (Think of ‘learning’ as anything you knew or realised at the end of the lesson that you didn’t know at the beginning.)

Success criterion:
As a result of my learning I can …..
3. Personal health profile
- What does being healthy mean to you?

Rationale
People have different understandings about what being healthy means. The purpose of this activity is to enable students to make further connections between the concept of hauora and their personal well-being.

Learning intention
Students will explore what being healthy means for them personally.
*H&PE Achievement Objective 5A4*

Possible success criterion
[Students] I can describe what being healthy means to me.

Teaching and learning process
- Hand out a copy of the Learning Journal page, ‘For me being healthy involves …’
- In column 1, students tick any of the statements which seem to them to be important aspects of their health.
- In column 2, students tick the six statements which are the most important aspects of being healthy to them personally.
- In column 3, students rank these six in order of importance – put ‘1’ by the most important and so on.
- Ask students to compare their list with a partner or small group. Note similarities and differences.
- Ask students to classify the ‘being healthy’ statements ticked in column 1 according to each dimension of hauora. They may decide some items belong to more than one dimension.

Links to the underlying concepts

**Hauora:**
Well-being requires the inter-relationship of all dimensions – taha wairua, taha hinengaro, taha tinana and taha whānau.

**Attitudes and values:**
Individuals may place different emphasis or understanding on what being healthy means to them.
Learning Journal Page 1: For me being healthy involves....

1. Having a strong sense of belonging
2. Exercising regularly
   (playing sport or doing PE three times a week, work out)
3. Eating regular and healthy meals
4. Doing something for fun every day
5. Getting regular and sufficient sleep
6. Not smoking
7. Having time to myself
8. Usually coping well when something extra is asked of me
9. Feeling happy most of the time
10. Being able to talk to someone when I feel unhappy
11. Knowing what I'm good at
12. Knowing the things I need help with
13. Being able to show affection to people
14. Being able to receive affection and love from people
15. Having someone whom I can depend on for support
16. Being able to adapt easily to changes in my life
   e.g. moving school, moving house
17. Being able to make decisions
18. Having special friends
19. Being able to talk over the good and the bad things
    soon after they have happened
20. Enjoying some form of relaxation/recreation
21. (Your own idea)
22. (Your own idea)
Learning Journal Page 2: For me being healthy involves....

Task
Instructions for the ‘For me being healthy involves ......’ page 1:
(a) In column 1, tick any of the statements that you think are important aspects for your health.
(b) In column 2, tick the six statements which are the most important aspects of being healthy for you personally.
(c) In column 3, rank these six statements in order of importance for you by putting “1” by the most important, “2” by the next most important, and so on.
(d) Using your knowledge of hauora from the “picture of health” activity, identify which ‘being healthy’ statements belong to which dimension. Use a simple code (eg letters, symbols or a colour code – with a key) to identify which dimension each statement could relate to. You may decide some statements belong to more than one dimension, which is fine.

Reflection
(i) Based on your findings to this activity, which of the dimensions appears to be the most important for you?

(ii) Which dimensions appear to be less important for you, based on this activity?

(iii) Is this a fair reflection of what you understand about your well-being? Why or why not?

(iv) What are the advantages and disadvantages of working out a personal health profile based on a list like this?

Advantages:

Disadvantages:

(v) Suggest other ways you could work out a profile of your well-being.

Success criterion:
As a result of my learning I can .....
4. Feelings, emotions and mental health

Rationale
Feelings and emotions are experienced daily, and change regularly, in response to life events. Recognising and expressing feelings appropriately is an essential part of managing mental and emotional well-being. The remaining activities in Theme One require students to be able to identify and express feelings.

Learning intention
Students will identify and express feelings related to a range of situations.

H&PE Achievement Objective 5A4

Possible success criterion
[Students] I can identify a range of feelings related to certain life situations and acknowledge these in my own life.

Safety net
- Emphasise that feelings experienced today may not be the same as those experienced tomorrow. Feelings change and just because we may ‘feel stink’ one day, doesn’t mean this will be the case every day.
- The feelings cards include the word ‘powerful’. Please help students to understand that in this context, ‘powerful’ means to have control over yourself and your decisions, not control over another person.
- Feelings that have more negative connotations, like being angry, scared, or sad are legitimate feelings and are a part of our humanity. People are allowed to have these feelings and express these feelings. It is whether or not that these feelings are expressed in a healthy way that is the issue. Healthy ways of expressing feelings relate to the attitudes and values of the learning area – does the expression of the feelings show respect for the well-being of the person’s own self and that of others they are in contact with?

Teaching and learning process

Activity One: What are feelings and emotions and how do they relate to mental health?

In pairs:
- As an introduction to the lesson, ask students to pair up with someone they trust to share one thing they were pleased about and one thing that was difficult in the last week. Try to identify (name) a range of feelings each person experienced in each situation.
As a class:
- Place ‘positive’ and ‘negative’ cards at opposite ends of a continuum on the floor.
- Ask students to place themselves on the part of the continuum that best represents how they feel about their mental health today (acknowledge that this is only about their feelings today).
- Have students discuss with the person next to them why they have placed themselves at that point.
- Ask students to share with the class the reasons why they are at different points on the continuum today, (it would be timely to remind students about the class safety guidelines before doing this).

Teacher note:
It is a good idea to repeat this activity later on in the programme to allow students to move to a different position on the continuum in response to changing life situations.

As a class:
- Pose and discuss the questions: ‘What are feelings?’ and ‘What are emotions?’
- Acknowledge that the terms tend to get used interchangeably and it is not always clear what the difference is. As a general observation, most sources talk about feelings as being the actual experience, perception or sensation – what a person feels in response to an event. ‘Emotions’ tends to be a more umbrella term to describe the state of having feelings. Most definitions tend to suggest that a person’s emotional state comes from some combination of their individual thoughts, feelings and behaviours.
- Pose the question: ‘How do thoughts differ from feelings? Student understandings of these concepts will be determined by their access to language. Thoughts are the cognitive processes of the mind – thinking, decision making, problem solving and so on. Our thoughts tend to be deliberate and serve the purpose of helping people to understand a situation or work things out. Feelings, on the other hand, are a response people have to events in their lives - they are more a sensation or a perception.

Teacher note:
The objective here is not to confuse, or rigidly define the terms, but consider how they might be similar or different and to highlight how complex these concepts are.

In groups:
- Ask students to brainstorm ideas about the reasons why people might move toward the negative and positive ends of the continuum, e.g. negative reasons like peer pressure, smoking, relationships, being disorganised, tiredness, fighting and arguing with parents/siblings/friends; or positive reasons like being successful at something, having the company of good friends, being complimented, enjoying the environment, or an interest like sport or a hobby.
- Students then brainstorm ideas about what changes occur in people’s lives that result in them feeling differently tomorrow or in the future.
• Ask students:
  - What are some of the important things in people’s lives that contribute to their mental and emotional well-being?
  - What are some characteristics that mentally healthy people have (related especially to thoughts and feelings)?
  - Describe the body language that people might show if they have generally positive feelings or generally negative feelings.

Activity Two: Identifying named feelings

• Ask students to sit in a circle.
• Hand out a feelings card (from copy page 6) to each student.
• Each student reads their card and completes their statement.

Activity Three: Colour my feelings

Teacher note:
If students are struggling to express feelings in words, this is a visual activity which may offer a way into the previous activity where the expression of feelings is required to be done verbally.

• Each student needs a blank sheet of A4 paper and a selection of different coloured pens, pencils or crayons.
• Ask students to divide the page into eight sections and number each box one to eight. Cut the page into the eight sections.
• Explain that in each box they are to use colour to illustrate a feeling. They do not draw an actual picture, but just use lines and shading to show the feeling.
• Ideas for feelings to illustrate: happy, sad, angry, loving, excited, nervous, depressed, jealous, powerful, feminine, masculine, healthy, lonely, successful, strong.
• Gather the class around an open area of floor. Invite students to place one feeling at a time on the floor (so that all the number one, number two etc feelings are shown at the same time) and ask for comments about the similarities and differences. Ask students to speculate where or how we learn to associate colour and form with feelings.
# Feeling statements

<table>
<thead>
<tr>
<th>I feel powerless when…</th>
<th>I feel happy when…</th>
<th>I feel hurt when…</th>
<th>I feel full of enthusiasm when…</th>
</tr>
</thead>
<tbody>
<tr>
<td>I feel stupid when…</td>
<td>I feel ill when…</td>
<td>I feel loving when…</td>
<td>I feel helpless when…</td>
</tr>
<tr>
<td>I feel lonely when…</td>
<td>The colour I most feel like is…</td>
<td>I feel proud when…</td>
<td>I feel important when…</td>
</tr>
<tr>
<td>I feel good when…</td>
<td>I feel glad when…</td>
<td>I feel put down when…</td>
<td>People like me when…</td>
</tr>
<tr>
<td>I feel powerful when…</td>
<td>I feel healthy when…</td>
<td>I feel most strongly when…</td>
<td>I feel under pressure when…</td>
</tr>
<tr>
<td>I feel saddest when…</td>
<td>I feel afraid when…</td>
<td>I feel impatient when…</td>
<td>I feel foolish when…</td>
</tr>
<tr>
<td>I feel successful when…</td>
<td>I feel OK when…</td>
<td>I feel great when…</td>
<td>I feel popular when…</td>
</tr>
</tbody>
</table>
Learning Journal: Feelings, emotions and mental health

Task
(a) Select six feelings statements from the copy page (or make up your own list of feelings). Try to choose three feelings that have more positive associations and three feelings that have more negative associations. Complete the feeling statements using your own selected feelings.

1) I feel ________________ when ....

2) I feel ________________ when ....

3) I feel ________________ when ....

4) I feel ________________ when ....

5) I feel ________________ when ....

6) I feel ________________ when ....

(b) Write a brief paragraph describing things that make you feel positive about your life.

(c) If these are the sorts of things that make you feel positive, what are some things you could do to improve your mental and emotional state when you are not feeling so positive about things in your life?

Reflection
What I learned from the activity about feelings, emotions and mental health (think of ‘learning’ as anything you knew or realised at the end of the lesson that you didn’t know at the beginning).

Success criterion:
As a result of my learning I can .....
5. ‘I’ statements

Rationale
‘I’ statements enable students to express and manage feelings in conversations with others as they help to communicate how they feel. This activity supports the maintenance of the classroom safety guidelines.

Learning intention
Students will demonstrate the use of ‘I’ statements.

H&PE Achievement Objective 5A3/5C3

Possible success criterion
[Students] I can use ‘I’ statements to express my feelings in response to situations I am unhappy about.

Teaching and learning process
To teach ‘I’ statements:
• View the first scenario from the DVD on ‘I’ statements, making use of the question breaks as they appear in the DVD.
• Construct with the class an understanding of what an ‘I’ statement is (use the following copy page as a guide).
• Discuss reasons why ‘I’ statements support mental and emotional well-being.
• Make links between the video, the students own construction of an ‘I’ statement definition, and the copy page.
• Hand out a scenario from the following copy page to pairs of students (or students could make up new scenarios). Students practice responding to the situation using an ‘I’ statement.
• Invite the students to demonstrate the use of their ‘I’ statement to a bigger group, or the class.

Teacher note
It may be appropriate to signal the issue of power relationships. It is much easier to use ‘I’ statements with some people than others, i.e. a friends vs. an authority figure.

Then again, it may be easier to use ‘I’ statements with someone you don’t know (even in authority) as we risk losing the approval of people we do know.

The Mental Health Foundation’s ‘Good Communication’ leaflet has a section on ‘I’ statements that students could be given to read.

Links to the underlying concepts

Hauora/Attitudes and values:
‘I’ statement use is about being able to state how you feel about something in a way that is respectful.

Resources
‘I’ statement copy page
‘I’ statement scenarios
‘Good Communication’ leaflet
### ‘I’ statements

<table>
<thead>
<tr>
<th>If</th>
<th>Then</th>
</tr>
</thead>
<tbody>
<tr>
<td>Someone does something you don’t want them to do…</td>
<td>Use an ‘I’ statement</td>
</tr>
<tr>
<td>Someone interrupts you or talks over you…</td>
<td>Describe the behaviour you are objecting to and link it with how you feel. <em>‘I feel rubbished when you talk over me.’</em></td>
</tr>
<tr>
<td>Or if you feel uncomfortable…</td>
<td>Own the feeling. <em>‘I’m feeling uncomfortable with this discussion.’</em></td>
</tr>
<tr>
<td>Or you don’t feel listened to…</td>
<td>Say what effect this has on you. <em>‘I don’t feel listened to at the moment. I have to keep repeating myself and this wastes time.’</em></td>
</tr>
<tr>
<td>Or if someone criticises you personally…</td>
<td>Say something like <em>‘John, when you say things to me like that I feel unseen and unappreciated.’</em></td>
</tr>
</tbody>
</table>
### ‘I’ statements scenarios

<table>
<thead>
<tr>
<th>Scenario</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>Simon lent Jeremy some money and despite Jeremy’s promise to pay it back, he hasn’t yet done so.</td>
<td>John doesn’t like David spreading rumours about him to his friends.</td>
</tr>
<tr>
<td>Jane told her friend Angela that she secretly really like Stephen. Angela went and told Sarah, then Sarah went and told Stephen.</td>
<td>Sharon borrowed Rachel’s new jeans and returned them ripped and stained.</td>
</tr>
<tr>
<td>Gwen heard Frieda saying to her cool friends how fat and smelly Gwen was and that she never used soap or deodorant.</td>
<td>Fred was due to meet Harry at the movies at 5pm. Fred was half an hour late and they missed out on seats.</td>
</tr>
<tr>
<td>Hine missed catching the ball and Susan gave her a racial put-down.</td>
<td></td>
</tr>
</tbody>
</table>
Learning Journal: ‘I’ statements

Task
(a) Using ideas from the lesson(s) on ‘I’ statements, write two scenarios of your own about a person who needs to express how they feel about the situation.
(b) Give an example of an ‘I’ statement that could be used in this situation.
(c) Describe how the use of an ‘I’ statement could support the mental and emotional well-being of the person in the scenario.

(a) Scenario 1:

(b) ‘I’ statement that could be used in this situation:

(c) How the use of the ‘I’ statement supports well-being in this situation:

(a) Scenario 2:

(b) ‘I’ statement that could be used in this situation:

(c) How the use of the ‘I’ statement supports well-being in this situation:

Reflection
(i) In the week following the lesson(s) on ‘I’ statements, I used an ‘I’ statement when ....

(ii) What I said ...

(iii) How this helped my mental and emotional well-being ....

Success criterion:
As a result of my learning I can .....
6. Self-talk (silent sentences)

Rationale
The way people think about situations impacts on their mental health. Self-talk affects how people feel about their experiences and how they respond to situations. People are often unaware of their self-talk, even though it has a powerful influence on their lives. This activity is to support students to learn to think positively and rationally about how things really are. Where activity 5 focused on feelings, this activity focuses on the thoughts a person has in response to certain life situations.

Learning intention
Students will demonstrate understanding and use of the strategies for positive self-talk.
_H&PE Achievement Objective 5A4_

Possible success criterion
[Students] I can turn negative self-talk into positive self-talk.

Teaching and learning process
- View the second scenario on the DVD, making use of the questions to pause the video and check with students the meaning they are taking from the scenario.
- The teacher introduces the concept of self-talk, relating the video to the model on the copy page.
- In pairs, students are given a self-talk situation card from the following copy pages (or they could use their own conflict situations).
- Give each pair a sheet of paper and ask the students to draw a figure on it which has a thought bubble and a speech bubble.
- Each pair writes the negative (unrealistic) idea in the thought bubble.
- Students then discuss how to re-word the negative (unrealistic) idea into a positive one.
- Ask the students to write the new statement into the speech bubble.
- Ask each pair to present their scenarios as skills practice using appropriate tone of voice and body language.
- Place the completed scenarios around the walls for future reference.

Teacher note
Support students to build understanding of terms like rational and irrational, realistic and unrealistic. Acknowledge that thinking rationally is something we often have to make a deliberate and conscious effort to do, it does not always happen naturally.
# Model for turning negative self-talk into positive self-talk

1. **What happened ‘out’ there?**
   
   I was left off the rugby/netball team

2. **What was the upset feeling inside?**
   
   I felt sad, lonely and unwanted.

3. **What was the negative self-talk likely to be?**
   
   ‘I’m not good enough for them. Dumb useless coach. None of the team like me. I should have practiced harder, then I would have showed them. I’d have made the team then.’

4. **Look closely at the self-talk**
   
   a) Change the absolute words ‘should’ or ‘have to’ to – ‘it would be nice if’ or ‘would like to’
   
      
      Leave out all the blame
   
   c) Is too much being expected? Change the ‘need to’, ‘must’, ‘always’, ‘never’ to ‘sometimes’ or ‘want’

5. **Reword the self-talk into a positive statement.**
   
   ‘It would have been nice to have been on the team. I’m going to do lots of training, watch the team in action and then maybe next year I will be selected.’
## Self-talk statements

<table>
<thead>
<tr>
<th>My friends will never invite me to their party because I acted like a complete idiot in front of the boys.</th>
<th>If I don’t enter the competitions I can’t lose and feel like a failure.</th>
</tr>
</thead>
<tbody>
<tr>
<td>I must have approval of all my friends to feel wanted and successful.</td>
<td>I must be able to do all things well, otherwise I will consider myself a failure.</td>
</tr>
<tr>
<td>My friends always disagree with me, making me feel useless and unwanted.</td>
<td>I must always have the same opinions as my friends, otherwise I’ll be an outsider and won’t be asked to join in anymore.</td>
</tr>
<tr>
<td>I must ask the teacher to answer every problem I have because (s)he has all the right answers and her/his ideas are more important than mine.</td>
<td>I can’t do any of this. I’m hopeless.</td>
</tr>
<tr>
<td>It’s all my fault I lost Mum’s necklace, I’m so irresponsible and careless.</td>
<td>I’m never going to try out for athletics because I can’t run fast and people will laugh at me.</td>
</tr>
<tr>
<td>---</td>
<td>---</td>
</tr>
<tr>
<td>I’ll never take Art, I’m so helpless at painting.</td>
<td>I always get bullied at school because I’m small and look like a geek, so I ask for it.</td>
</tr>
<tr>
<td>I always put my foot in it and say the most embarrassing things.</td>
<td>I’m so embarrassed about the way I look, no boy/girl will ever want to go out with me.</td>
</tr>
<tr>
<td>Good things never happen to me because I’m a good for nothing no-hoper.</td>
<td>I’m so clumsy, I’m always dropping things.</td>
</tr>
</tbody>
</table>
**Learning Journal: Self-talk**

**Task:**
(a) Make up two scenarios of your own where a person might use negative self-talk and complete the table:

<table>
<thead>
<tr>
<th>Scenario 1.</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>(i) What happened (what was the outside event)?</td>
<td></td>
</tr>
<tr>
<td>(ii) What was the feeling inside?</td>
<td></td>
</tr>
<tr>
<td>(iii) What might the negative self-talk be? Underline the negative parts of the self talk.</td>
<td></td>
</tr>
<tr>
<td>(iv) Rewrite the self-talk more positively</td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Scenario 2.</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>(i) What happened (what was the outside event)?</td>
<td></td>
</tr>
<tr>
<td>(ii) What was the feeling inside?</td>
<td></td>
</tr>
<tr>
<td>(iii) What might the negative self-talk be? Underline the negative parts of the self talk.</td>
<td></td>
</tr>
<tr>
<td>(iv) Rewrite the self-talk more positively</td>
<td></td>
</tr>
</tbody>
</table>

(b) The words rational/irrational or realistic/unrealistic may be used instead of positive/negative to describe self-talk. My understanding of these other self-talk terms is:

(i) If my thinking is irrational it means I am ....

(ii) If my thinking is rational it means I am ....

(iii) If my thinking is unrealistic it means I am ....

(iv) If my thinking is realistic it means I am ....

**Reflection**

[A week after the lesson(s) on self-talk]

A situation in the past week where I have been aware that I changed my negative self-talk to positive self-talk is ....

**Success criterion:**

As a result of my learning I can .....
7. Self-affirmation

(Adapted from Sidney Simon’s and Merill Harmin’s I.A.L.A.C story in Canfield and Wells, 100 Ways to Enhance Self – Concept in the Classroom, Prentice Hall, 1976)

Rationale
Life has ups and downs and there are many ways people can support themselves in the down times. Valuing oneself is an important support strategy. This activity provides students with a self-nurturing strategy to help affirm who they are, and the personal qualities that are important to them.

Learning intentions
Students will recognise situations that cause people to experience low feelings.
Students will identify and describe personal qualities that are important to them.
H&PE Achievement Objective 5A4

Possible success criteria
[Students] I can recognise situations that may cause people to feel down, I can say what my personal qualities are and feel good about myself.

Teaching and learning process
- Write the letters I.A.L.A.C on the board. Ask the students to brainstorm, in the context of the previous activities, what they think the letters represent. Accept all relevant interpretations e.g. I am loving and cuddly, I am loveable and capable, I am likeable and cool etc.
- The students can then choose the message that they like the best.
- Read and explain the following information to the class. We all carry an invisible sign inside us. If someone is nasty to us, teases us, puts us down or hits us then part of our sign is torn. I am going to tell you a story about (Rochelle).
- Give each student a piece of paper with I.A.L.A.C. written on it.
- Ask the students to tear a piece off their sign every time something negative or hurtful happens in the story.

Here is Rochelle’s story:
Rochelle slept in and her mother yelled at her (rip). She was in such a hurry that she forgot her lunch, missed the school bus (rip) and was late for school (rip). When she reached school she found that she had left her homework behind as well, and her teacher said that she was always forgetting things… she would forget her head if it wasn’t screwed on (rip). During Maths she received her test results back, 10 out of 25 (rip). Then in English, she was asked to read a poem and everyone laughed at her (rip)…
• Ask the class, ‘How many of you feel upset when these things happen to you?’
• ‘How can you put the sign back together again?’ (collect ideas from the class e.g. talk to a friend, play music, go for a walk or ride, play a game, read a book, play with your pet, remember good times…).
• How would you help Rochelle repair her sign? (tell her what you like about her, do things with her, lend her lunch money, meet and go to school together, ring and remind her about homework…).
• Complete Rochelle’s story using ideas from the class, this time making things positive and, while doing so, repair Rochelle’s sign.
• View the third scenario on the DVD. Make connections between the class discussion and Rochelle’s story on the video.
• Explain that everyone’s sign gets torn from time to time and we need to keep putting it together again. We sometimes need to repeat the magic formula, ‘No matter what you do or say, I am still a worthwhile person.’
• Supply each member of the class with a piece of paper or card to fashion into an envelope. Ask the students to individualise the envelopes using colours and symbols that are important to them.
• Talk to the students about the inside and outside factors which enable them to keep their signs intact.
• Outside factors are things like being praised, complimented, thanked, having prized possessions…
• Inside factors are things like: self-acceptance, self-knowledge, acceptance of feelings, wants and goals, ability to express ourselves…
• Students can look back on these as the year proceeds and add more factors if they wish.
• Read Mental Health Foundation booklet – ‘Feeling Good’.

Safety net

Students may feel that their lives are like lots of torn-up pieces of paper roughly sellotaped back together. It is important to discuss with them the idea that each day they have the chance to renew their signs, i.e. have a fresh start. Students may like to think of the repaired lines and tears in the paper as being a record of what was learned from the experience. Also, select a name for the story that does not belong to a class member.
Learning Journal: Self-affirmation

Task:
Design yourself eight ‘business cards’ – one for each day of the week. Each of these ‘business cards’ needs to contain one self-affirming message about you – things you are good at, things you like about yourself, things that you value about yourself, and so on. The eighth business card needs to be filled in by a trusted friend or family member. Keep these cards in your IALAC envelope and read them whenever you’re feeling a bit down.

<p>| | |</p>
<table>
<thead>
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</tr>
</tbody>
</table>

Reflection
(i) Positive things that I find are easy to say about myself are ....

(ii) Positive things that I find are more difficult to say about myself are .... [you may not have any but most people do!]

(iii) Why do you think you find some things easier, and some things more difficult to say about yourself?

(iv) What could you do to help yourself overcome the difficulties you have saying some of the positive things?

Success criterion:
As a result of my learning I can…
8. Promoting positive personal mental health

Rationale
Taking individual action to support one’s own well-being is as important as contributing to the collective action of a group promoting well-being for all members of a community. Knowing how to set goals, how to implement the steps of the goal, how to reflect on or evaluate their success, and how to set further goals is an ongoing cycle of action for promoting positive personal mental health.

Learning intentions
Students will plan, implement, and reflect on the success of a goal that aims to promote positive, personal mental and emotional well-being.

H&PE Achievement Objective 5A1

Possible success criterion
[Students] I can plan and implement a goal to improve a part of my mental well-being.

Teaching and learning process
Teacher Note:
It may be useful to leave this goal setting task until the activities on stress in Theme 2 have been completed as this will increase the range of possibilities for the selection of a personal mental health promotion goal.

Determine students’ existing knowledge and previous experience of goal setting in health-specific, and more general learning contexts, by brainstorming answers to questions like:
• What does it mean to set goals?
• Why do we set goals (in general)?
• In what situations have you set goals? (eg some students may be familiar with setting goals in relation to numeracy, literacy or other learning specific targets.)
• Why is it important to set goals in relation to well-being?
• What steps are required to plan and carry out (or implement) goals?
• Have you heard of the acronym “SMART” goals? What does this mean? [Specific, measureable, achievable, realistic and time bound – help students unpack the meaning of these terms.]
• What do we do if our goals are successful (or unsuccessful)? Why?

At this level of learning, students in health education are required to be developing the following understanding of personal goal-setting:
• A goal setting plan has a clearly stated goal that clearly identifies the aspect of mental and emotional well-being that will be improved or enhanced by achieving the goal.
• The plan describes how all aspects of well-being (physical, social spiritual and mental and emotional) could be enhanced by achievement of the goal.
A plan is presented as an action plan containing:

- the identification of specific, measureable, achievable and realistic steps needed to carry out the overall goal.
- a description of what these steps will contribute towards the achievement of the goal.
- a description of how the student will know they have achieved each step (how the achievement of each step will be measured).
- a description of possible barriers that are unique and specific to each step that may hinder the achievement of the goal, and how these barriers will be overcome.
- a description of the enablers that are unique and specific to the achievement of these tasks and how these people and resources will help.
- a timeline for the completion of the goal.

Help students to develop understanding of terms like: enhance, enabler, barrier, hinder, implement, measureable, realistic, achievement, unique.

Support students to identify an aspect of their mental and emotional well-being that they could take action on over the course of 1-2 weeks. This could be related to previous (or following) activities such as:

- Expressing feelings through the use of ‘I’ statements.
- Using positive self-talk in [specific situations].
- To affirm myself at least once a day.
- Managing stress related to [a specific situation].

Through a succession of paired and small group discussions, individual decision making, and with teacher guidance, have each student complete the Goal Setting template (Learning Journal page 1). It is advisable that some checks are made as to suitability of the planned goals and that they are SMART goals.

Acknowledge for the students that setting goals related to mental and emotional well-being can be difficult because our thoughts and feelings are ‘inside’ us. What shows on the outside are our behaviours related to these thoughts and feelings. When students are deciding on their goal, the steps, and how they will know they have achieved each step, have them identify what actions might be “seen” by another person.

Once the goal is planned, students are required to implement their plan, keeping a logbook as they proceed. A template is provided for this on Learning Journal page 2.

After the plan has been implemented, reflect on the success of the implementation of the goal using the questions on the Learning Journal page.
### Learning Journal: Personal goal setting plan (page 1)

**Task 1: Use the following template to set out your goal setting plan**

<table>
<thead>
<tr>
<th>(a) Clearly state a goal that identifies the aspect of <strong>mental and emotional well-being</strong> that will be enhanced by achieving the goal</th>
</tr>
</thead>
<tbody>
<tr>
<td>(b) Describe how all aspects of well-being (physical, social, spiritual and mental and emotional) could be enhanced by achievement of the goal</td>
</tr>
<tr>
<td>(c) The specific, measurable, achievable and realistic steps needed to carry out the overall goal (you may not need 5 steps)</td>
</tr>
<tr>
<td>(d) What these steps will contribute towards the achievement of the goal</td>
</tr>
<tr>
<td>(e) How you will know you have achieved each step</td>
</tr>
<tr>
<td>(f) A timeline for the completion of the steps</td>
</tr>
</tbody>
</table>

**Step (1)**

**Step (2)**

**Step (3)**

**Step (4)**

**Step (5)**

| (g) Possible barriers that are unique and specific to each step that may hinder the achievement of the goal |
| (h) How these barriers will be overcome |
| (i) Enablers (people and resources) that are unique and specific to the achievement of these tasks and how these people and resources will help |

**Step (1)**

**Step (2)**

**Step (3)**

**Step (4)**

**Step (5)**
Learning Journal: Personal goal setting implementation and reflection (page 2)

Task 2:
Implement your plan, keeping a log of your actions and thoughts as you carry out the steps.

<table>
<thead>
<tr>
<th>Logbook date</th>
<th>Actions taken</th>
<th>Comments about the success of the action (what happened, my thoughts and feelings)</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
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<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Task 3: Reflection
(i) Explain why you think you were successful (or not so successful) at achieving your goal.

(ii) What steps could you take next to make further improvements to your mental and emotional well-being? (this will likely depend on whether or not you successfully implemented your goal).

(iii) Why have you chosen these next steps?

(iv) Three things I learned about myself in planning and implementing my goal, or about the importance of setting goals for well-being, are:
(1)
(2)
(3)

Success criterion:
As a result of my learning I can...
Theme Two

Stress and change

Rationale
The activities in this theme have been developed to help students learn strategies and skills that could help them manage stressful situations.

Overall objectives
- Students will develop an understanding that change is constant and that some changes can be stressful.
- Students will develop knowledge and skills for recognising and managing stress.

Teachers may find it useful to combine activities from this theme with those from the resource ‘Change, loss and grief’, Mental Health Foundation 2009.
1. Stress postbox

(Adapted from The Drug and Alcohol Programme for Secondary Schools)

Rationale
Stress is a part of life. The focus on stress in health education is about managing stressful situations, not so much getting rid of stress, as this is unrealistic. Young people have knowledge, experience and understanding of stress. This postbox activity provides opportunity to determine students' current knowledge and understanding of ideas related to stress.

Learning Intention
Students will demonstrate understanding of stress.
H&PE Achievement Objective SA1

Possible success criterion
[Students] I can identify what stress is, what causes stress, how it affects people and how people can manage stress.

Teaching and learning process
• Select 6-8 postbox questions from the following page. Enlarge these and pin to walls around the classroom. Place a container under each question in which students post their answers.
• Give each student the same number of pieces of blank paper.
• (Optional) Ask them to write ‘M’ if they are male and ‘F’ if they are female on each piece of paper (this is the only identification they make on their answers).
• Ask students to move around the room, answering each question, then folding up their answers and placing them in the container.
• Once all the students have answered all the questions, divide the class into groups to summarise all of the responses that have been written.
• Discuss with the class the ways in which they can present information, e.g. graph, table, flow chart, continuum. They then record their data and report back to the class.
• Discussion will focus on the issues raised.
• Pin completed work around the room for future reference.

Teacher Note
It is important to establish with the students that their responsibility when collating the feedback from the postbox is to represent everyone's responses. That is, they summarise everything. They are not to censor and leave some things out. A useful rule of thumb is to say to the students that they expect all other groups to consider their answers. This means that although they won't necessarily see their ideas word for word, they should be able to see that their ideas have been included.

Links to the underlying concepts
Hauora:
Stress has implications for all aspects of well-being.

Socio-ecological perspective:
Stress of individuals can impact on other groups in the community and stress in the community can impact on individuals.

Health promotion
A shared understanding about what stress is assists in the planning and development of stress management skills for members of the community.

Attitudes and values
Different experiences of stress means individuals view stress in different ways.

Resources
Set of question cards placed around the room.
Plastic containers or envelopes to place beside each question
Small sheets of paper for responses.
Large sheets of newsprint with the questions headed up on them or question cards.
# Suggested postbox questions

1. a) What other words might you use to explain what ‘stress’ means?  
   b) How do people feel when they are stressed?

2. List 5 things that commonly cause adolescents to stress out.

3. List 5 things that commonly cause adults to stress out.

4. a) Identify 3 negative effects of stress.  
   b) Identify 3 positive effects of stress.

5. List 5 ways that you might be able to tell that a person is feeling stressed (because of the way they behave).

6. List 5 ways stress might show up physically in or on the body.

7. List 5 ways some people might try to hide their stress, or do unhelpful things to try and cope with stress.

8. Identify 5 ways people might cope with stress.
Learning Journal: Stress

Task
Use the ideas you contributed to the postbox, plus the ideas in the summaries, to write your own answers to the questions about stress. Imagine you were talking with someone who wasn’t sure what it meant to be stressed.

1. How I would explain what ‘stress’ is to another person who wasn’t sure what it meant:

2. Three stressful situations (for teenagers)
   I would tell this person about to help them to understand what I mean:

3. How I would explain to the person that stress could have negative and positive effects:

4. Three things I could tell the person to look out for so they can tell if they were personally feeling stressed:

5. Three things I could tell the person to look out for so they can tell if another person was feeling stressed:

6. Three unhelpful ways of managing stress I could tell the person about are:

7. Five healthier and more helpful ways of managing stress I could tell the person about are:

8. Now explain to the person why are these ways more healthy by making links to all aspects of well-being (the whare tapa wha model of hauora):

Reflection
(i) From the lesson on stress, the things I came to realise (that I didn’t know before) about stress were ...

(ii) How I think I might use this new knowledge when I realise I’m feeling stressed ....

Success criterion:
As a result of my learning I can .....
2. Rate your stress

Rationale
Everyone experiences stress. What is stressful for one person may not be stressful for another. This activity provides opportunity for students to identify some of the stressors in their lives and what action could be taken to manage this stress.

Learning intention
Students will identify some of the stressors in their own lives and ways that could help the management of this stress.

H&PE Achievement Objective 5A1

Possible success criterion
[Students] I can identify what causes me stress and how I could manage my stress.

Safety net
It is important to emphasise the confidentiality of this individual task. Some students may be happy to share with their friends and others may prefer to keep their scores private.

Teaching and learning process
Activity One: Creative visualisation
• Explain to students that, as an introduction to the activity looking at situations they personally find stressful, they are going to take part in a creative visualisation. This activity will ask them to reflect on a time that was stressful for them, but they will not be required to share what this actual situation was. Instead, they will be asked to share some of the ideas about what helped (or didn't help) to manage the situation.
• Script: Close your eyes, breathe deeply and find a rhythm to your breathing […….pause].
• Think about a time when you experienced change in your life ……..
• Try to remember the event in detail…..
• How vivid is this memory? - blurred, vivid? …..
• Can you see any of the people present at that time? ….
• Did they say anything to you at that time that made you feel better or worse? ….
• How could people have helped you? …
• Slowly open your eyes and take a few moments to think about what you could share with the person sitting next to you related to what helped or didn't help you manage the stressful situation.

Teacher note
It is suggested that ‘Clear the Deck’ p 156 and ‘Creative Visualisation’ p 163 from ‘Taking Action’ are useful follow-up activities.
## Learning Journal: Rate your stress

Give the following statements a rating of 1-5 for the stress it causes you (a score of 1 would indicate little stress and a score of 5 would indicate that it causes major stress).

<table>
<thead>
<tr>
<th>Stressor</th>
<th>Rating</th>
</tr>
</thead>
<tbody>
<tr>
<td>Relationship problems with friends</td>
<td>1 2 3 4 5</td>
</tr>
<tr>
<td>Relationship problems with parents</td>
<td>1 2 3 4 5</td>
</tr>
<tr>
<td>Arguments with other family members</td>
<td>1 2 3 4 5</td>
</tr>
<tr>
<td>Concerns about your body shape and image</td>
<td>1 2 3 4 5</td>
</tr>
<tr>
<td>Concerns about your physical growth and development/sexuality</td>
<td>1 2 3 4 5</td>
</tr>
<tr>
<td>Smoking and whether to or not</td>
<td>1 2 3 4 5</td>
</tr>
<tr>
<td>Pressure to have a boyfriend/girlfriend</td>
<td>1 2 3 4 5</td>
</tr>
<tr>
<td>To use drugs and alcohol or not</td>
<td>1 2 3 4 5</td>
</tr>
<tr>
<td>School work and examinations</td>
<td>1 2 3 4 5</td>
</tr>
<tr>
<td>Sickness or health matters</td>
<td>1 2 3 4 5</td>
</tr>
<tr>
<td>Money problems</td>
<td>1 2 3 4 5</td>
</tr>
<tr>
<td>The sickness or death of someone close</td>
<td>1 2 3 4 5</td>
</tr>
<tr>
<td>Ethnic and cultural differences in relationships</td>
<td>1 2 3 4 5</td>
</tr>
<tr>
<td>Being harassed, bullied or abused</td>
<td>1 2 3 4 5</td>
</tr>
<tr>
<td>Having no control over what happens to you</td>
<td>1 2 3 4 5</td>
</tr>
</tbody>
</table>

(b) Select one of the stressors that you have noted as causing you the most stress.

(i) Selected stressor is:

(ii) People or organisations that might be able to support me are:

(iii) Some steps that I could take to reduce the stress associated with this particular part of my life are:

### Success criterion:
As a result of my learning I can…
3. Stress in life

Rationale
Some situations are more stressful than others, although which situations are more stressful is a matter of individual perception. This activity provides students with opportunity to explore the range of opinions of others in the class and what situations they consider to be stressful or less stressful.

Learning intention
Students will recognise that people have different perceptions about what is and is not stressful.
H&PE Achievement Objective 5A4/5C1

Possible success criterion
[Students] I can understand that people’s experiences of stress are varied - what is stressful for one person may not be for another.

Safety net
It is important to emphasise that stress in everyday life is unavoidable. A level of stress is often beneficial and needed to help realise potential. Individuals vary in their tolerance of stress.
Prolonged exposure to high levels of stress, however, may affect a person’s health and well-being.

Teaching and learning process
Activity One: Trigger photos
- In small groups, students select a trigger photograph (copy pages 18a–c) and build a scenario around what they believe is happening in the situation pictured.
- Students identify and record the stressors in their scenarios.
- Re-visit the coping strategies suggested in the postbox activities.
- Identify strategies people might use to cope in these stressful situations.

Activity Two: Life situation cards
- Students form groups of four.
- Distribute a set of life situation cards (copy page 19) to each group and ask each student in the group to select a card.
- Each student reads a card in turn.
- Discuss the stressors associated with each life situation and record responses on newsprint. For example, stressors for an Olympic swimmer may include: anxiety before the final race, winning/losing, media coverage, accommodation, travel (etc).
- Ask students to identify which life situation card, among those chosen by the group, is likely to cause the person (or the people) the most stress.
- Students negotiate and rank the life situations from least to most stressful.

Links to the underlying concepts
Hauora
Stress has implications for all aspects of well-being.

Socio-ecological perspective
Stress of individuals can impact on other groups in the community and stress in the community can impact on individuals.

Health promotion
A shared understanding about what stress is helps promote strategies for managing stress.

Attitudes and values
Different experiences of stress means individuals view stress in different ways.

Resources
Trigger photographs
Life situation cards
Newsprint, felt marking pens

References
‘Stressed Out’ (MHF/MoFH)
‘Coping With Stress’
‘Stress…and how to handle it’ (MHF)
‘Taking Action’ pp146-148
Activity ‘Coping with Changes’
• Groups report to whole class
  - most and least stressful situation for each group
  - supporting reasons most/least stressful
  - positive and negative effects of stress.
• Ask class to sit in a circle. Place cards “less stressful” and “most stressful” at each end of a continuum.
• Students take turns to place their life situation cards on the continuum.
• Allow some discussion and moving of cards, noting that it is not the agreed ranking of the cards that is the objective, but the discussion about the different perceptions of what students consider to be more or less stressful.

Teacher note
This activity could be followed up with ‘Recognising Stress; ‘Taking Action’ p146 and the OHT p148.
# Life situation cards

<table>
<thead>
<tr>
<th>Emergency doctor</th>
<th>Professional golfer</th>
<th>Postie</th>
<th>Olympic swimmer</th>
</tr>
</thead>
<tbody>
<tr>
<td>Teacher</td>
<td>Airline pilot</td>
<td>Parent</td>
<td>Shop assistant</td>
</tr>
<tr>
<td>Year 10 student</td>
<td>Police officer</td>
<td>Taxi driver</td>
<td>Mountaineer</td>
</tr>
<tr>
<td>Panelbeater</td>
<td>Journalist</td>
<td>Chef</td>
<td>Factory worker</td>
</tr>
<tr>
<td>Unemployed worker</td>
<td>Single parent with young baby</td>
<td>The tangi</td>
<td>Shopping</td>
</tr>
<tr>
<td>Netball</td>
<td>Tramping</td>
<td>Cultural group member</td>
<td>Unemployed youth</td>
</tr>
<tr>
<td>Travelling</td>
<td>Camping</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
Learning Journal: Stress in life

Task

(a) Select four of the Life Situation Cards of interest to you.
(i) For each situation identify as many stressors as possible for the person in the situation.

<table>
<thead>
<tr>
<th>Life situation card 1</th>
<th>Life situation card 2</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Life situation card 3</th>
<th>Life situation card 4</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
</tr>
</tbody>
</table>

(ii) Which life situation would YOU say was the most stressful and the least stressful among those you selected? What is your reason for this?

(iii) Explain why other people might have a different opinion to you about what they think are the most and least stressful situations.

Reflection
Thinking about all the activities you have done around stress, why do you think some people are able to manage stress more successfully than others? Try to think of what is going on for people personally, in their relationships with others, and in the community where they live, work or go to school.

(i) Personal - factors which make stress manageable:

(ii) Relationships with others - interpersonal factors which make stress manageable:

(iii) The community - societal factors which make stress manageable:

Success criterion:
As a result of my learning I can…
4. Managing and supporting change and transition

Rationale
The impact of changing schools can be a significant stress in the life of a young person. A supportive school environment can influence the well-being of students experiencing stressful changes and transitions. This activity uses a story as a starting point to look at the way the school supports new students. As a result of this exploration, students are encouraged to make recommendations for changes to improve the way their school supports students in transition.

Learning intention
Students will identify ways schools can support students experiencing stressful changes and transitions. 

H&PE Achievement Objective 5D1/5D2

Possible success criterion
(Students) I can identify the things that make students new to the school feel less stressed.

Teaching and learning process

Activity One: The change scenario
- Organise students into groups of three to four.
- Hand out a set of sentences (copy page 21) to each group and ask the students to spread them out on the table.
- Each group decides who goes first and which way around the group will go.
- Silently and in turn place the sentences in sequence. i.e. no talking and students must wait their turn to be able to place or shift a sentence.
- With each turn, a student can only place or shift one sentence.
- The idea is for the first person at least to decide which is the first sentence – this can and probably will be changed in later turns.
- Continue silently shifting the sentences until the group has decided on an order.
- When silent consensus has been reached, students write one to three sentences of their own (on strips of paper) that they would like to add to any part of the agreed story that would be supportive and helpful for the characters represented in the sentences. This can be done silently or through group discussion.
- Ask the students to renegotiate where they will place their sentences in the story. This also can be done silently or through group discussion.
- Invite each group to read their completed stories to the class or invite the groups to move around the room to read each story.

Teacher note
The first part of this activity uses ‘silent negotiations’ as a way to introduce the change scenario. The activity is conducted in silence with each group
member being able to take a turn in positioning a sentence card to help build up an agreed order for the story.

Explain to the class that the use of silence enables each student to think about where they want to place their sentence and to do this without comment from other group members.

**Activity Two: Promoting well-being for students in transition**

Acknowledge for the class the stressful nature of changing schools and that you are changing your focus from the story to their school.

In the same groups, ask the students to brainstorm answers to the following questions:

- What feelings might the new student be experiencing as she was being introduced to class?
- In what ways did the new sentences created by the group provide support for the new student and for others represented in the story?
- What conflict was present in the story?
- What peer pressure could be identified in the story?
- In what ways could teachers introduce new students to a class?
- How does our school provide support for new students?

Ask each group to report their ideas back to class. Use the ideas generated from the discussion for the following tasks:

- Divide the class into pairs and ask each pair to develop a set of interview questions to find out more about how their school supports students in transition. These questions could be adapted from those already answered and could also include questions relating to policy and procedures, attitudes and behaviour towards new teachers and students, and how the school welcomes individuals and groups into the school.
- Students could then interview people such as their peers, newly enrolled students, teachers, deans, the Principal and the school counsellor.
- Students then collate their findings and prepare a report to present to the rest of the class.
- The class can then evaluate the findings from each group and develop a set of recommendations for the Principal and Board of Trustees, the Student Council or the school’s health team.
### Sentences for silent negotiations

<table>
<thead>
<tr>
<th>I felt embarrassed and unsure of what I should do</th>
<th>I wanted to be nice to her</th>
</tr>
</thead>
<tbody>
<tr>
<td>The rest of the class didn’t want to know her</td>
<td>Toni, could you sit next to her and show her around at lunchtime?</td>
</tr>
<tr>
<td>What’s ya name?</td>
<td>Are you dumb or something?</td>
</tr>
<tr>
<td>The rest of us laughed and nudged each other</td>
<td>Would talking to her make me lose my friends?</td>
</tr>
<tr>
<td>The teacher glared…</td>
<td>A new student was brought into class</td>
</tr>
<tr>
<td>A couple of boys laughed as Johnny said something under his breath</td>
<td>She blushed again and turned away</td>
</tr>
<tr>
<td>Why don’t you go back where you came from?</td>
<td>I hope the teacher doesn’t ask me</td>
</tr>
</tbody>
</table>
Learning Journal: Stress in life

Task
(a) Imagine you have been appointed to be the buddy of a student new to the school.
   (i) Provide some brief details about the student.
   (ii) In the left hand column, write a paragraph describing how s/he must be feeling about being in a new school.
   (iii) In the right hand column, write a paragraph about the ways you can support the student and help them manage the stressful situation they are in. Try to include things that get the student to do things for him/herself and things you can do for them, including finding out about the wider school things they need to know about.

Profile of the new student:
Name:
Where they have come from (school, town/country):
Do they speak the same language as you?

<table>
<thead>
<tr>
<th>How the student must be feeling about being in a new school</th>
<th>Ways you can support the student and help them manage the stressful situation they are in:</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Reflection
Thinking about students who arrive new to a school (especially part way through the year), what new learning (or realisations) have occurred for you about how stressful it is for these students?

Success criterion:
As a result of my learning I can .....
Theme Three

Societal attitudes towards mental health

Rationale
To give students the opportunity to examine attitudes, values and beliefs related to changing states of mental health.

Overall objectives
• Students will explore how the language used to describe aspects of mental health may reflect people's attitudes.
• Students will clarify their own attitudes towards mental illness

Note
These activities could sit at either Level 5 or 6 of the curriculum. This will be determined by the depth of understanding developed by the students, as shown by what they can achieve.

This theme could form part of a unit of work about changing states of health suitable for assessment at Level 1 NCEA (Achievement Standard 90063).
1. Media portrayal of mental health

Rationale
Media messages about mental health can be helpful and/or unhelpful. The first of the activities in this theme provides students with the opportunity to explore mental health issues from different viewpoints, as illustrated through media. It is intended that this will keep students personally distanced from the issues before embarking on the following activities that require them to consider attitudes and values at an individual level.

Learning intention
Students will analyse ways in which media portray issues around, and influence societal attitudes about, mental health.

H&PE Achievement Objective 5D1/6D1

Possible success criterion
[Students] I can look critically at, and analyse messages in, the way the media portray mental health.

Teaching and learning process

Preparation:
Students, with support from the teacher, will need to collect a range of media articles with a focus on mental health. Sources of the articles could include:

- TV news, documentary, or current events stories.
- Print, internet, magazine and newspaper articles.
- Extracts from biographies that examine the experience of well known people who have lived with mental illness.
- Mental health awareness campaigns.
- TV or radio programming with mental health themes.
- [Optional] Include some mental health related articles from previous decades and contrast these with current sources.

Analysis:
- In groups/pairs students read the articles.
- Ask students to list the language that makes some reference to mental health, that is, words and phrases describing the person and the feelings portrayed.
- Ask each group to write their impressions of how the person/people in the articles are portrayed.
- Engage the students in discussion to identify possible impacts of these messages on personal and societal attitudes about mental health. Teachers will need to be prepared to critically comment on the messages portrayed, especially if students appear to be missing the nuances of the messages.

Links to the underlying concepts

Hauora:
*Media can influence the way individuals and society think about mental and emotional well-being.*

Socio-ecological perspective:
*Media stories can illustrate the impact societal attitudes about mental health can have on individuals and communities.*

Health promotion:
*Media can influence the way society thinks and behaves around issues to do with mental illness – both positively and negatively.*

Attitudes and values:
The media reflect a diverse range of attitudes and values about mental health.

Resources
A range of articles featuring incidents involving people with mental health problems.

Articles with negative headlines
Conclusions:
Pose the following questions for group discussion and feedback to the whole class:

- Overall, how positive or negative (helpful or unhelpful) were the messages about mental health in the articles you analysed?
- Therefore, how might the media influence people’s attitudes about mental health?
Learning Journal: Media portrayal of mental health

Task
Find an item similar to one of the media sources you analysed in class.
(a) Briefly describe the article (or if it is a short print article, stick it into your Learning Journal).

(b) (i) List the language that makes some reference to mental health - that is, words and phrases describing the person or people.

(ii) Overall, how is the person (or people) in the article portrayed?

(iii) How positive or negative (helpful or unhelpful) are the messages about mental health in the articles you viewed?

(iv) Therefore, how might the media influence people’s attitudes about mental health based on articles like this? Why do you say this?

Reflection
The values supported by health education encourage us to show respect for the well-being of ourselves, other people, and the community. We are also encouraged to demonstrate a sense of social justice (which means to be fair, inclusive and non-discriminatory).

Thinking about the article you analysed, does this article show respect and a sense of social justice for people with mental health issues? Why or why not?

Success criterion:
As a result of my learning I can .....
2. Language use

Rationale
Some of the language people use to describe mental illness is discriminatory. It is important to challenge negative attitudes that perpetuate discrimination. The purpose of this activity is to identify mental health-related vocabulary that is negative, hurtful and unhelpful, and to promote the use of language that is inclusive and supportive.

Learning intention
Students will explore language used to describe aspects of people's mental health and how this language reflects societal attitudes. 

H&PE Achievement Objective (aspects of) 5A4/6A4, 5C2/6C2, 5D1

Possible success criterion
[Students] I can identify language related to mental health that is hurtful and discriminates against people, and use language that shows respect and understanding.

Safety net
In the process of this activity some students may learn new words that could be used to discriminate. It is essential to process this activity in a way that stresses the inappropriateness of this language.

Teaching and learning process
- Reflect back on the picture of health. Briefly revisit the factors that contribute to mental well-being.
- Discuss the fact that there are times when people are not mentally well and that it is at this point that attitudes in our society towards mental illness become apparent.
- Ask the class to brainstorm all the words that are used to describe things to do with mental health. Accept and record all contributions. (Words will include those to do with people who have mental health problems, the institutions that care for them, the people who look after them…). Ask students to identify appropriate and inappropriate words, slang, and put downs.
- Ask for a volunteer to come up and erase from the board all the words that are not positive. It is likely that there will be very few words left on the board. When complete, reflect on what the words tell us about society’s attitudes towards mental health.
- Identify more supportive words such as actual names for illnesses, positive references, points of fact, and identify the terms the class will use.
- Students discuss reasons why it is important to use language that shows respect and understanding.

Alternative activity
To prevent students having to ‘own’ the language they come up with in this activity, a suggestion is to place them in role as experts who are being sent out into the community as part of a mental health research project. Their task is to find out what language people in society are using to describe people experiencing mental health problems and any associated issues and ideas. The teacher takes the role of the chief researcher who calls a meeting to collect in all the information the experts have ‘found out’.

Links to the underlying concepts

Hauora:
Language use can influence mental and emotional well-being.

Socio-ecological perspective:
The attitudes of the wider society tend to be reflected at all levels of the community.

Health promotion:
Promoting the use of non-discriminatory, non-stereotypical language is an important part of promoting mental and emotional well-being for everyone in the community.

Attitudes and values:
The language commonly used in wider society tends to reflect the attitudes and values of that society.

Resources
Pen, paper, scissors
Learning Journal: Language use and mental health

Task
(a) (i) Use ideas from the mental health activities on media messages and language use to write a brief scenario about a person using language and behaving in a way that is hurtful and discriminatory towards a person living with mental illness.

(ii) Write an ‘I’ statement you could use to respond to the person in the scenario using the hurtful language and stating the behaviour you would like them to change.

(iii) Suggest an alternative way they could speak and behave:

(b) (i) This time, use the scenario provided by someone else in the class (or use one of the situations from a previous activity) and repeat (ii) – (iii) above. Scenario:

(ii) Write an ‘I’ statement you could use to respond to the person in the scenario using the hurtful language and stating the behaviour you would like them to change.

(iii) Suggest an alternative way they could speak and behave:

Reflection
(i) How difficult do you think it is to assert yourself and use an ‘I’ statement in a situation like this? Why do you say this?

(ii) What I learned from the activities about mental health language (think of ‘learning’ as anything you knew or realised by the end of the lesson that you didn’t know at the beginning).

Success criterion:
As a result of my learning I can....
3. Mental health continuum

Rationale
There are many misconceptions about mental health issues. People's attitudes and values, which are sometimes based on misconceptions, impact on individuals experiencing mental health problems. This activity provides students with the opportunity to examine myths and facts about mental health, some of which may have already been raised in the previous activities.

Learning intention
Students will explore misconceptions about mental health to clarify their own understanding about a range of mental health issues.

H&PE Achievement Objective (aspects of) 5A4/6A4, 5C2/6C2, 5D1

Possible success criterion
Students can tell the difference between a myth and a fact on a range of mental health issues.

Safety net
It is important to have safety guidelines for this activity – only the person with the card speaks, ‘I’ statements must be used – not commenting on the opinions of others, but stating one’s own opinion. Emphasise that often a card will end up in a place that not everyone agrees with, but that’s alright. Value and acknowledge each contribution.

Teaching and learning process
- Ask the students to sit in a circle.
- Place the ‘strongly agree’ and ‘strongly disagree’ cards at either end of a continuum line.
- Give each student a statement card.
- One at a time, students read their statements, then place them on the continuum, according to how strongly they agree or disagree. They must explain why they have placed the card in its position.
- Other students may shift cards, providing they give a reason for doing so.
- A continuum encourages participants to respond with their opinion ranging anywhere from ‘agree’ to ‘disagree’. Although this is still required by this activity, a few of these situations have a known medical basis to them, or have a legal position behind them (such as the Human Rights Act, 1993), and therefore some situations in effect have an answer that is more ‘right’ or ‘wrong’. Support students, accessing additional information where necessary, to sort out the myths and facts contained in these statements.

For example
Myth
‘If a person has had a mental illness there isn’t much hope.’

Fact
Some people may be ill for many years before they finally receive effective treatment, or their condition improves for other reasons. Once the improvement to their well-being occurs, these individuals may remain well for the rest of their lives.

Links to the underlying concepts
Hauora:
Mental and emotional well-being is often a misunderstood dimension of health.

Socio-ecological perspective:
Young people’s understanding of mental health issues often reflects dominant societal messages.

Health promotion:
Promoting good mental health for everyone requires people to have access to correct information.

Attitudes and values:
Misunderstanding about mental health has resulted in discriminatory attitudes and values in society.

Resources
Continuum statements photocopied onto cards. STRONGLY AGREE STRONGLY DISAGREE

For current resource material to support this activity, check the resources page at www.likeminds.org.nz and www.mentalhealth.org.nz
## Suggested continuum statements

<table>
<thead>
<tr>
<th>People with mental health problems are just as intelligent as everyone else.</th>
<th>People with mental health problems should be kept away from other people.</th>
</tr>
</thead>
<tbody>
<tr>
<td>A person who has a mental health problem can never be normal.</td>
<td>People with serious mental health problems should be sacked from their jobs.</td>
</tr>
<tr>
<td>Teenagers are too young to have mental health problems.</td>
<td>Stress is always harmful and should be treated as a mental illness.</td>
</tr>
<tr>
<td>People who let others know they’ve had a mental illness shouldn’t be surprised if they are treated as strange and different.</td>
<td>People with mental health problems only have themselves to blame.</td>
</tr>
<tr>
<td>To know that a person has been mentally ill is the most important thing to know about them.</td>
<td>You can be friends with someone who has a mental illness.</td>
</tr>
<tr>
<td>Suggested continuum statements</td>
<td></td>
</tr>
<tr>
<td>------------------------------------------------------------------------------------------------</td>
<td></td>
</tr>
<tr>
<td><strong>People with mental health problems should exercise more willpower.</strong></td>
<td><strong>Public money used for caring for people with mental health problems would be better spent on cancer research.</strong></td>
</tr>
<tr>
<td><strong>Really, if someone is mentally ill, it would be better if they were put in an institution.</strong></td>
<td><strong>People with mental illnesses are potentially dangerous.</strong></td>
</tr>
<tr>
<td><strong>A mental breakdown is not a proper mental illness.</strong></td>
<td><strong>They could go berserk at any time.</strong></td>
</tr>
<tr>
<td><strong>People who are depressed just need to snap out of it and be more self-disciplined.</strong></td>
<td><strong>Institutions are much better equipped to cope with people with mental health problems than families.</strong></td>
</tr>
<tr>
<td><strong>Special needs students should never be in mainstream classes.</strong></td>
<td><strong>People recover from mental illness all the time. Anyone can experience a mental illness.</strong></td>
</tr>
</tbody>
</table>
Learning Journal: Myths and facts about mental health

Reflection task
Think about each of the lessons you have participated in where issues around changed states of mental health were discussed.

(a) Three things I realised I already knew about issues to do with changed states of mental health.

1. 

2. 

3. 

(b) Three things I learned about issues to do with changed states of mental health that I had not realised before:

1. 

2. 

3. 

(c) Something I will do differently in future in relation to the issue of changed states of mental health (eg ask or find out if I don't know, stop using certain language, challenge other people's use of language).

What I do now (or have done in the past):

What I will do in future:

What I will encourage others to do in future:

Success criterion: 
As a result of my learning I can…
4. Addressing stigma and discrimination

Rationale
Young people can be influenced by the dominant attitudes of the society they live in. Misconceptions and a lack of understanding about people who are perceived as being ‘different’ because of mental, emotional, behavioural or intellectual conditions, can result in stereotyping, discrimination and stigmatisation.

This activity aims to help young people develop understanding about some of the more familiar mental health issues and to differentiate these from conditions where a person’s mental, behavioural or intellectual functioning is different because of injury, neurological disorder, behavioural disorder, or congenital/birth defects or damage.

The activity also explores the impact of stereotyping, discrimination and stigmatisation that occurs for people living with a real or perceived difference. Appropriate ways to support people experiencing a changing or different state of mental health are also considered.

The depth of learning will determine the level of the curriculum the students are achieving at.

Learning intention
Students will develop basic understandings about changed states of mental health and other conditions that may influence mental, emotional, behavioural or intellectual functioning.

Students will identify ways in which people living with these conditions may be stereotyped or discriminated against and the impact of this.

Students will identify and action ways to support people experiencing or living with mental, emotional, behavioural or intellectual differences.

H&PE Achievement Objective 5A4/6A4, 5C2/6C2, 5D2/6D2

Possible success criterion
[Students] I can demonstrate understanding that there are many reasons why people’s mental health may change. I know that the way others treat people with mental health related issues may lead to discrimination. I can also identify some appropriate ways to support a person with a changed state of mental health.

Teacher note
Young people may not have had the opportunity to learn about or differentiate between mental illness and other health concerns such as congenital or injury related intellectual disability, degenerative diseases, neurological disorders, and behavioural disorders. These health concerns may be viewed as ‘not normal’ and can result in attitudes and behaviours from members of the wider society that are discriminatory. In order to break the cycle of misunderstanding it is important that these attitudes and behaviours towards perceived ‘difference’ are challenged. The focus of the health and physical education learning area in The New Zealand Curriculum is to promote well-being, and therefore to explore some of the impacts that a changed state of health has on well-being.
People living with a health-related condition, be it physical or mental, are often described or referred to by their condition, and not as a person who happens to live with the illness. Encourage others not to use phrases like ‘she’s an asthmatic’ or ‘he’s a schizophrenic’ but to use words that say she lives with asthma or experiences schizophrenia. Using expressions like ‘changed state of health’ can also assist in reducing the stigma associated with particular illnesses.

Safety Net

Some of the scenarios may relate to students’ experiences. It is important to acknowledge this.

Teaching and learning process

- It is recommended that students view the video of ‘John’s Story’ (describing the experiences of a young man living with bipolar affective disorder), at some point during the teaching of Theme Three. The booklet of discussion ideas accompanying the video could be used to introduce this activity. The questions the students are asked to discuss below about the scenarios could also be asked about ‘John’s Story.’

- Divide students into small groups and assign each group one of the scenarios. Each group needs to identify and discuss the following in reference to the person experiencing a change state of health:
  1. What they know about the person in the scenario.
  2. What they assume about the person in the scenario.
  3. What opinions they have about the person in the scenario.

- Based on this initial discussion students then find out:
  1. Some brief information about the condition that the person in the story is experiencing. It is recommended that the teacher directs students to appropriate sources of information by supplying some fact sheets/pamphlets, or provide access to a computer encyclopedia and websites.
  2. What sort of formal help is available for a person with this condition? (e.g. support agencies for the person and their family, specialist therapy and medication etc.)
  3. Why and how might some people in society discriminate against this person?
  4. How might the person’s well-being be affected because of both their condition and any potential discrimination?

- Students report findings back to the class.

- Class discussion
  1. How could discrimination in these situations be reduced?
  2. What other less formal types of support might people with mental health problems and other conditions need to manage their lives? (think of all aspects of well-being)
  3. What actions are being taken locally or nationally to reduce discrimination against people living with mental illness or other differences?

- Develop and carry out a school action plan to raise awareness about one aspect of discrimination or to promote mental well-being in the school. This might be a poster display, a presentation at assembly, a day of celebrating differences and diversity of any type, a wear-something-different-day and so on.
Scenario 1

Sam had to change schools a couple of months ago. His mum and dad separated and he went to live with his mum in another town. He had to leave behind all his friends, his nice house where he had his own bedroom, and he didn’t get to finish the season with his sports team. They were probably going to win the finals. Since shifting, Sam hasn’t been able to concentrate on school work and he’s not doing as well as he used to. He doesn’t feel like making new friends and won’t talk to anyone at school. He often cries himself to sleep, especially after he’s been talking to Dad or one of his friends from ‘back home’ on the phone. In the weekend he sits for hours on end down at the local beach just watching and thinking. Weekends are hard because there’s nothing else to do - not that he wants to go and do anything new anyway. One of Sam’s new teachers was worried about him not settling in, and she suggested he went and saw the counsellor. He’s been a couple of times now and he’s finding talking about it is helping him make sense of what is going on for him, even if it doesn’t take away the hurt and the low feelings.

Scenario 2

Carol lives with a condition called epilepsy. She can usually prevent having seizures or ‘fits’ by taking medication. However, her classmates know that if she starts behaving ‘funny’ or falls on the ground and starts to have a seizure, they have to clear a space around her and try to place something soft under her head if she is on hard ground so she doesn’t hurt herself. They then have to run to get the teacher and keep other people away. If the seizure stops before the teacher arrives, they know to roll her over into the recovery position and check that she hasn’t swallowed her tongue.

Scenario 3

Angela’s Mum had another baby recently. Soon after the birth, Angela noticed her Mum was often quite weepy and didn’t want to do anything. She wouldn’t talk much either. Angela did the best she could helping out around the house, but it was really hard when Dad came home and started yelling at Mum telling her to ‘get up and get her life together.’ A couple of weeks ago, a good friend of her Mum’s came around and took Mum to the doctor. Since then, things have started to get better at home. Dad even came home with a big bunch of flowers last night and couldn’t stop apologising and hugging Mum. He said he had been talking with one of his colleagues at work whose wife had had post-natal depression after their last baby and that he was starting to understand what Mum was going through.
### Scenario 4

Greg’s grandma has recently been placed in a special hospital unit at the local retirement village. Grandma had been getting really forgetful and lately she hasn’t been able to look after herself. Sometimes when Greg goes to visit, Grandma doesn’t even know who he is. She starts talking about all this stuff that means nothing to him. It’s getting worse and worse. Greg finds it quite distressing to visit Grandma now and Mum always ends up crying after they leave. During their last visit, the doctor explained to Greg that his Grandma, like a lot of the other old people in the hospital unit, had Alzheimer’s disease and at the moment there is no medicine that can cure it. The doctor gave Greg some information to read and told him that if he had any more questions, they could talk next time he came to visit.

### Scenario 5

Daniel’s older brother John was in a car crash six months ago. He had been a passenger in a car that his drunk mate was driving. John used to be one of the top sportspeople at school and was pretty good at his schoolwork, and he was really popular. Daniel sometimes has to help his brother to eat and help him to the toilet because the head injury he suffered damaged the parts of the brain that control his arms and legs. As well as this, his entire speech centre was damaged and he has very slurred speech. At times he doesn’t seem to understand much about what is going on. John’s friends came to see him on a few occasions after the accident, but lately no one has been visiting.

### Scenario 6

Sarah’s younger brother Chris is in a class for children with special needs. The special needs unit is part of the local primary school. He doesn’t learn as fast as Sarah did at the same age, but other than that he does all the usual things kids his age do – has lots of friends, plays sport and his favourite after school activity is Playstation games. For some lessons, Chris is in a group with other children like him where they have help from specially trained people. For other lessons, he joins in with the rest of the kids his age in a mainstream class. Chris looks a little bit different to other kids and sometimes does things other people find funny or strange. When he was born, the hospital did a genetic test called a karyotype that showed Chris had an extra chromosome. The medical books call his condition ‘Down's Syndrome’
Learning Journal: Destigmatising mental health

Task
(a) Select a scenario about a person living with a changed state of mental health, different to the situation you used for the class activity (you could use one of the articles analysed in an earlier lesson). Write or describe your scenario here (or stick in the article you are using):

(b) Provide some brief information about the condition that the person in the story is experiencing. Use an appropriate source of information (stating what this was).

(c) (i) What sort of formal help and support is available for a person with this condition?

(ii) What other less formal types of support does this person need to manage their life? (think of all aspects of well-being)

(d) (i) Why and how might some people in society discriminate against this person?

(ii) How might the person's well-being be affected because of both their condition and any potential discrimination?

(iii) How could discrimination in this situation be reduced? Include examples of personal, interpersonal and societal strategies.

Reflection
Recall the health promoting actions being taken locally or nationally to reduce discrimination against people living with mental illness or other differences. Explain how successful, in your view, these campaigns have been. Back up your claim using ideas from any of your lessons around changed states of mental health.

Success criterion:
As a result of my learning I can .....
Student reflection

(1) The learning activities related to mental health I enjoyed the most were ....

This was because ....

(2) The learning activities related to mental health I enjoyed the least were ....

This was because ....

(3) For me, the most important things I learned were ....

(a)

(b)

(c)

(d)

(e)

(4) Things related to mental health I would like to learn more about are......

(5) I have used my new learning about mental health in the following ways ..... 

(6) Any other comments you would like to make about your learning related to mental health.

Thank you for your feedback. It will be used to help plan further health education lessons.
## Teacher reflection

1) On completion of this unit of learning, this is how I rate my confidence with the following features:

<table>
<thead>
<tr>
<th>In context of mental health ....</th>
<th>Not at all confident</th>
<th>Growing confidence</th>
<th>Quite confident</th>
<th>Very confident</th>
</tr>
</thead>
<tbody>
<tr>
<td>Supporting students to develop their literacy skills in health education contexts</td>
<td></td>
<td></td>
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</tr>
<tr>
<td>My understanding and use of effective pedagogy in the NZC</td>
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<td></td>
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<tr>
<td>My understanding and development of key competencies for students</td>
<td></td>
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<tr>
<td>My understanding of the underlying concepts of the H&amp;PE learning area</td>
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<tr>
<td>My understanding of the mental health key area of learning</td>
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<tr>
<td>My understanding of formative assessment</td>
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<tr>
<td>My understanding of how to write learning intentions</td>
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<tr>
<td>My understanding of how to support students to develop success criteria</td>
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<tr>
<td>My understanding of collecting student voice about their engagement in learning</td>
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<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>[Other features]</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>[Other features]</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

2) This is how I applied my knowledge, skills and understanding of effective pedagogy:

<table>
<thead>
<tr>
<th>Effective pedagogies in <em>The New Zealand Curriculum</em> (p34)</th>
<th>Effective pedagogical practices I was aware I was using during the delivery of these learning activities <em>(give examples of where these pedagogies were used)</em></th>
<th>The impact the use of these pedagogies appeared to have on student engagement and achievement <em>(give examples of this impact)</em></th>
</tr>
</thead>
<tbody>
<tr>
<td>• create a supportive learning environment</td>
<td></td>
<td></td>
</tr>
<tr>
<td>• encourage reflective thought and action</td>
<td></td>
<td></td>
</tr>
<tr>
<td>• enhance the relevance of new learning</td>
<td></td>
<td></td>
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<tr>
<td>• facilitate shared learning</td>
<td></td>
<td></td>
</tr>
<tr>
<td>• make connections to prior learning and experience</td>
<td></td>
<td></td>
</tr>
<tr>
<td>• provide sufficient opportunities to learn</td>
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<td></td>
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<tr>
<td>• inquire into the teaching–learning relationship.</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

3) This is how I applied my knowledge, skills and understanding of ways the key competencies are developed for students:

<table>
<thead>
<tr>
<th>Key competencies in <em>The New Zealand Curriculum</em> (p12-13)</th>
<th>Key competencies that were being developed by students through the use of these effective pedagogies included <em>(give examples of where these key competencies were developed)</em>:</th>
</tr>
</thead>
<tbody>
<tr>
<td>• Thinking</td>
<td></td>
</tr>
<tr>
<td>• Using language, symbols and texts</td>
<td></td>
</tr>
<tr>
<td>• Managing self</td>
<td></td>
</tr>
<tr>
<td>• Relating to others</td>
<td></td>
</tr>
<tr>
<td>• Participating and contributing</td>
<td></td>
</tr>
</tbody>
</table>
(4) This is how I applied my knowledge, skills and understanding of the ways the Values in the NZC are modelled, encouraged and explored:

<table>
<thead>
<tr>
<th>Values in The New Zealand Curriculum (p10) Students will develop their ability to ...</th>
<th>I helped students to develop these abilities by .... (give examples of where the students were able to develop their abilities):</th>
</tr>
</thead>
<tbody>
<tr>
<td>• express their own values</td>
<td></td>
</tr>
<tr>
<td>• explore, with empathy, the values of others</td>
<td></td>
</tr>
<tr>
<td>• critically analyse values and actions based on them</td>
<td></td>
</tr>
<tr>
<td>• discuss disagreements that arise from differences in values and negotiate solutions</td>
<td></td>
</tr>
<tr>
<td>• make ethical decisions and act on them.</td>
<td></td>
</tr>
</tbody>
</table>

(5) Student achievement of the learning intentions:

(a) (i) Evidence gathered from the students’ Learning Journals would suggest that these learning intentions were met:

(ii) My evidence for this success is ....

(iii) Aspects of these successes I will use in subsequent units of work are ......

(b) (i) Evidence gathered from the students’ Learning Journals would suggest that these Learning Intentions were not met as planned:

(ii) My evidence for this lack of success is ....

(iii) What this evidence suggests I will need to do differently in future ......

(c) Student voice collected through the use of the student reflection sheet (and any other means) provided the following insights about this unit of learning on mental health

Based on all of the data reported in this reflection of my practice, actions I need to take to improve the achievement of my students are:
References


