ACTION RESEARCH AS A TOOL FOR MODIFYING CURRICULUM

ACTION RESEARCH AS A TOOL FOR MODIFYING CURRICULUM OF THE GIRLS' PHYSICAL EDUCATION PROGRAM AT SYL APPS

By

TANYA WOROBEC, Hon.B.Sc, B.Ed.

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AUTHOR:	Tanya Worobec, Hon. B.Sc, B.Ed (University of Western Ontario)
SUPERVISORS:	Dr. Jack Richardson Dr. George Heigenhauser
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ABSTRACT

The intent of the physical education program in highschools is to provide students with information and skills that will assist them in living a healthy, active lifestyle. This intent was not been realized through the teaching of physical education at Syl Apps School, a secure custody facility for Young Offenders. Action Research was used to investigate the areas in which the physical education program was not meeting the needs of the female students at Syl Apps.

The action research process involved the stages of finding a starting point, clarifying the problem, developing action strategies and putting them into practice. These stages were undertaken twice in order to ensure the efficacy of the action strategies developed.

The purpose of this project was to develop suggested modifications to the physical education course so that it would be better suited to the female students at Syl Apps. The suggested modifications that resulted from this project included the establishment of four key assessment tools (Movement skills Assessment, Sister's Package, Self Assessment, Fitness Profile), and the inclusion of a clinical component into the course.

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Chapter 1

INTRODUCTION

This project examines how action research was used as a tool to modify the physical education course offered to the female residents at a secure custody facility for young offenders.

Background

I teach at a maximum security facility for young offenders. In February 1998, I was given the opportunity to teach a physical education program to the female residents. I am a physically active person myself and thus looked forward to the opportunity. Initially however, I did not experience success, as the general curriculum I was supposed to be teaching was not suited to the female residents at Syl Apps Youth Centre.

For about 2 months, I tried a variety of strategies and activities in an attempt to create an environment for a successful class. I had some success, and many failures, but I had no idea what was causing the successes and what was causing the failures.

In April of 1998, I took Dr. Catherine Beattie's Action Research course. From that course I learned how action research was a structured approach to investigating problems found in social practices and devising action plans from which to address those problems. One requirement of this action research course was to complete a small scale action research project. My project involved examining the issue of the girls' physical education program at Syl Apps. The result of this project was the identification of several problems involved in teaching the standard Ministry of Education curriculum to the girls at Syl Apps.

Profile of the Female Young Offender

Fourteen to sixteen percent of the young offenders in Canada are female (Conway, 1992). Females are mostly charged with property offenses (e.g., theft under \$1000), but 10% of the charges are for assaults and violent offenses (Reitsma-Street, 1991). Young women who commit these offenses have been found to come from seriously disturbed homes (Rosenbaum, 1989). "A model of female delinquency, using family dysfunction as a trigger, has been posited by Chesney-Lind. She proposes that adolescent girls run away from damaging families and then adopt delinquent behaviour (theft, prostitution) in order to meet their basic needs (Chesney-Lind, 1988; 1989). This survival strategy is criminalized, leading to charges (Field, 1993, p123)".

Another unfortunate commonality of female young offenders is their extensive history of abuse. Their experience with abuse spans the range of types of abuse, these include physical, sexual, and verbal abuse. Figures cited for physical abuse range from 54% to 79% for female young offenders (Field, 1993). The abuse tends to be severe. In a study performed by Chesney-Lind (1988), being hit by a belt was considered insufficient for the label of abuse. Criteria for abuse in the study by Bergsmann (1989) included broken bones, and wounds or unconsciousness. Familial violence is another all too common part of a female young offender's life. In one study, 71% of subjects came from homes where the mother has been battered (Rosenbaum, 1989).

Many of the young offenders are also substance abusers (Andrews, 1992). Andrews (1992) reports that although few studies have examined the substance abusing young offender, there is still support for substance abuse being a frequent occurrence within the young offender population. Families from which young offenders come are shown to be apathetic toward their youth's drug usage and also report high rates of drug and alcohol usage themselves (Levine & Singer, 1988; Mills, Durham & Alpert; 1988, Farrow & French, 1986).

The description of the students in the Syl Apps School Policy Manual, includes the following statement:

Almost all students have experienced severe personal trauma in their lives. Diminished self-worth, confused values, inability to express deep feelings and poor interpersonal skills have led most into conflict with society or the law. Many have unrealistic or socially unacceptable goals (Syl Apps School Policy Manual, 1999).

These are the students who I teach; these are the students I need to try and reach.

Where The Original Course Failed.

Previous to my involvement, the girls' physical education program was structured so that three days a week were spent in the weightroom, and two days a week in the gym working on team sports. The weightroom days went more smoothly than the team sport days, though there was still great difficulty in getting the girls to participate. There was a lot of resistance to playing the team sports, as the girls' ability levels were very low and the small class sizes (4-6 people) made playing the team sports awkward. The girls at Syl Apps are generally not girls that participate in team sports. Frequent dislocation from home, parental neglect, truancy, and drug and alcohol use at a young age, resulted in limited opportunities to develop any necessary skills. Consequently, most of the girls resist playing the sports that are included in a 'regular' physical education curriculum.

The health portion of the curriculum included topics such as drugs and sexuality. It was taught sporadically throughout the week in lecture format. The teacher attempted to involve the girls in conversations throughout the classes but this was met with continual resistance.

As outlined in the previous section, exposure to drugs and childhood abuse is something that has personally affected the majority of the girls. This high prevalence of abuse in the girls' lives puts teaching about sex and drugs to the girls into a precarious perspective. "Physical and sexual abuse of children parachutes them instantly, in my experience, into a life of isolation and alienation with a relentless sense of danger hovering over and around them such that they must always be hypervigilant and on guard" (Meen, p.2 1998). The traditional curriculum does not show the sensitivity needed when presenting these intensely personal topics.

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Issue

The issue that emerged from my small scale action research project was the question 'How can I develop a program for the girls physical education course at Syl Apps that fulfills the requirements of a credit, yet teaches the material in a sensitive, personal manner?

Purpose

The purpose of this project was to develop suggestions for how to change the girls' physical education course at Syl Apps so that it better suits the girls' athletic abilities, and treats the health curriculum in a more sensitive manner.

Chapter 2

METHODOLOGY

Definition of Action Research

John Elliott defines action research as "the study of a social situation with a view to improving the quality of action within it" (Elliott, 1991, p.69). The focus on the researcher being an active agent in the practice they are doing the research in, and the requirement that action for change be taken as part of the research, are the areas that differentiate action research from general qualitative research.

Action Research and Teaching

Kemmis and McTaggart (1988) define action research as research involving the teacher reflecting about their own teaching and going through a cycle of change. Grundy (1982), argues that this view of action research is too general. Simple reflection and trying to change something in a classroom does not make one an action researcher. The action research process is a rigorous one. Grundy &Kemmis (1981) describe three requirements that must be fulfilled before research can be said to be action research. The requirements are as follows:

a) the project takes as its subject-matter a social practice, regarding it as a strategic action susceptible to improvement

b) the project proceeds through a spiral of cycles of planning, acting, observing and reflecting with each of these activities being systematically and self-critically implemented and interrelated; and

c) the project involves those responsible for the practice in each of the moments of the activity, widening participation in the project gradually to include others affected by the practice and maintaining collaborative control of the process (Grundy, 1982, p. 23)

Grundy's key points were that the project needs to be a social practice, it proceeds through a spiral of cycles, and that it involves those responsible for the practice. The project described in this paper fulfills all of these requirements: The issue of how to effectively teach the girls' physical education program at Syl Apps, is a social practice that is 'susceptible to improvement'. As will be discussed in the following chapters, I proceeded through a spiral of cycles of planning, acting, observing and reflecting as I made changes to the girls' physical education program. I ensured that my data collection methods included information from all people involved in the girls' physical education program thus involving those responsible for the project with the research. I identified the major stakeholders in the program as being the clinicians who help teach the class, the girls in the class, and myself.

Form of Action Research Chosen

There are many forms of action research. All forms are based on the spiral of cycles of planning, acting, observing, and reflecting described by Grundy & Kemmis (1981). The different forms each emphasize a different aspect of the spiral. I have chosen to use the diagnostic form of action research as described by Chein, Stuart, Cool & Harding (1948). They define diagnostic action research as research designed to lead to action. In diagnostic research, the researcher comes into an existing problem; fact finds about the problem and makes recommendations. The recommendations are not pre-tested but are arrived at by an intuitive process on the basis of experience and fact finding.

I have used this diagnostic focus of action research for my project because I think that the greatest strength of action research is that it leads to plans of action that might not have been anticipated at the beginning of the research. I wanted to ensure that I did not make modifications to the girls' physical education course based pre-determined methods, but based on the results of the data analysis. For this reason, I chose to proceed through the spiral of cycles twice before developing this course. In this way, I ensured that I had a strong sense of what the best modifications to the curriculum were that would result in a successful girls' physical education course at Syl Apps.

Phases of Action Research

Altrichter, Posch, & Somekh (1995), break down the spiral of cycles of planning, acting, observing, and reflecting into 4 steps:

- (a) finding a starting point
- (b) clarifying the problem (data collection)
- (c) developing action strategies and putting them into practice
- (d) analysis and theory generation: formulating and sharing teacher knowledge (Altrichter, et al, 1995, p.7).

Step 1: Finding a starting point

Like the diagnostic form of action research described by Chein et al (1948), Altrichter et al (1995) put an emphasis on the initial phases of action research. They argue that the clearer the initial research question, the more exact and useful will be the action strategies developed. As explained in Chapter 1, I used the small-scale action research project completed for Catherine Beattie to 'find my starting point'. The starting point that developed was: How can I develop a girls physical education program at Syl Apps that will 1) fulfill the requirements of a credit, and 2) teach the material in a sensitive and personal manner.

Step 2: Clarifying the problem: data collection

Methods of data collection need to be carefully chosen so that they reflect the perspectives of all parties involved not just the researchers. If the data that is collected gives a skewed perspective of the issues, the action strategies that are developed from this data will not result in a solution to the problem. Altrichter et al (1995) suggest that data be collected from a variety of sources and then triangulated (see discussion on data collection methods in this chapter) in order to ensure that the data collected is an accurate reflection of what occurred.

Step 3: Developing action strategies and putting them into practice

Action strategies are developed as a result of analyzing the data collected. These strategies should result in action that helps to solve the problem that was originally identified. Altrichter et al (1995) comment that putting these action strategies into practice is a good way to test out the theories that have been developed. "Does my practical theory about this situation stand the test of being put into practice or do I have to develop, modify or change it?" (Altrichter et al, 1995, p.153).

Step 4: Making teachers' knowledge public

Generally, the person that chooses to complete an action research project concerning a particular topic, is not the only person that has experienced frustrations in that same area. I am sure that there are other teachers in secure settings that are also struggling with how to teach an effective girls' physical education program. Making the knowledge I have gained public will allow others to use and benefit from this knowledge, and the teaching profession will benefit as a result. The publication of this project is one way I will be making my knowledge public. I will also be presenting at a yearly teachers' conference that Syl Apps hosts called "Breaking the Cycle of Personal Sabotage".

TABLE 1

Trial	Finding a starting point	Clarifying the problem (data collection)	Developing action strategies and putting them into practice	Making teacher's knowledge public
Trial 1	Established after the small scale research project	Delivered the course Sep Oct. 1998 and collected data as the course went on.	NovDec. 1998 I analyzed the data collected and developed action strategies as to how the course could be improved	Did not complete this stage as I was starting another cycle of action research.
Trial 2	Same starting point as trial 1	Delivered the course May - June 1999 and collected data as the course went on.	July -Aug. 1999 I analyzed the data collected and developed action strategies as to how the course could be improved	Publication of this project and presenting the modified course at the Syl Apps Symposium

Cycles Of Action Research in This Project

Data Collection Methods and Techniques

Before starting the research project, I obtained permission from all of the girls in the class to include any comments they made or work they completed as part of my data. I obtained this permission by discussing my research project with them and asking them to sign a letter indicating their agreement (See Introduction to Girls Healthy Active Living, Appendix A)

I used three methods of data collection: research diary, direct observation, and interview. These methods of data collection were chosen because they fit within the

constraints of the institution in which I work, and gave an opportunity for the voices of all parties involved in the girls' physical education program to be heard.

Research Diary

At the end of every class that I taught, I immediately wrote down my thoughts on how the class went; what was successful, and what was not. I commented on what the girls' reactions had been to the activity of the day, quoted comments they had made and noted any interesting body language that the girls portrayed. I commented on the logistics of the classes as well, i.e., how long we had to wait for security guards to come an escort us into the changerooms. Altrichter et al (1995) recommends the research diary as one of the strongest tools of an action researcher because through analysis of the thoughts that are written over time, patterns can be seen that the researcher may not have anticipated.

Interview

I interviewed the girls taking the class as well as the clinicians that were involved with the class. I chose the interview format instead of a questionnaire format because of the literacy barrier that many of my students face. For most of the girls coming into Syl Apps, school has not been a positive experience. They have generally not done very well on tests and have found school to be a frustrating, self defeating part of their lives (Andrews, 1992). When faced with a written questionnaire, my fear was that their negative experiences with school would turn them off completing this questionnaire in a thoughtful manner. The interview also gave me the advantage of being able to watch the body language the girls communicated throughout the interview which gave me additional information as to the girls' comfort levels with various topics.

I developed the interview questions using the suggestions of Drever (1995). Drever describes two extremes that interviews can take. One extreme is one in which the interviewer reads out a list of questions and alternative responses and the interviewee has to pick from one of the responses offered. The opposite extreme is one in which the interviewer has a conversational style that allows the interviewee to largely determine the course of the discussion. I chose to give a semi-structured interview which is in the middle of these two extremes (Drever, 1995). A semi-structured interview is one in which the interviewers set up a general structure by deciding what questions they want to ask in advance, but the detailed structure of the interview is left to be worked out during the interview. Drever (1995) suggests that the interviewer prepares prompts and probes that can be used to get the interviewee to expand on answers given. I used the same interview questions with the clinicians that I had used for the girls. I was interested to see where the opinions of the girls and the opinions of the clinicians differed about the success or the failure of particular topics.

Direct Observation

"Observation is a research method in which the investigator systematically watches, listens to and records the phenomenon of interest. Observation does not depend on people willing to be interviewed" (Burrows, 1997, p.316). I included observation as one of my data collection methods in order to gain information about how the girls related to one another and what their body language said about their comfort level with various topics. "Observation of behaviors, actions, activities, and interactions is a tool for understanding more than what people say about (complex) situations, and can help to understand these complex situations more fully" (Burrows, 1997, p.316).

Bryson-Brockmann & Fischbein (1995) suggest the use of videotaped feedback to lessen the effects of observer bias. Unfortunately, using videotape to observe the girls in the physical education class is hampered because of the Young Offenders Act (Hudson, Hornick, & Burrows, 1988). Under this act, the identity of the young offender is kept confidential, and as a result, taking photographs or videotapes is discouraged.

In an effort to reduce bias, Simpson & Tuson (1995), recommend using an impartial observer. Again, because of the nature of the class that I teach, I did not use this suggestion. When a stranger comes into a class, the students act differently then they would normally. They either talk more to try and impress the visitor, or become very quite and shy. Because of the change of behaviour that results when an outside person comes into the class, I chose not to have an impartial observer come into the class. I chose to do direct observation of the girls myself.

I used a descriptive form of recording the data (Simpson & Tuson, 1995) as I did not restrict what I wrote down but recorded whatever the students said and did. I followed the suggestions of Merriam, in Burrows (1997) as to what should be included in observation

notes:

Structured observations should include:

- The setting. What is the physical environment like? What is the context? What kinds of behaviour are promoted or prevented?
- The participants. Describe who is in the setting, how many people and their roles. What brings them together and who is allowed there?
- Activities and interactions. What is going on? Is there a definable sequence of activities? How do people relate to the activity and relate to, and interact with each other?
- Subtle factors. Informal and unplanned activities; symbolic and connotative meanings of words; non-verbal communication (e.g. dress, space) (Burrows, 1997, p.323).

To try and lessen my observer bias, I audiotaped the classes in which I observed and transcribed the tapes. After the transcription was complete, I destroyed the audiotapes. (See Sample Direct Observation, Appendix C for an example of one class in which I observed).

Methods of Data Analysis

I used the Constructive Method of data analysis as suggested by Altrichter et al

(1995). The constructive method of data analysis includes four stages; reading data,

selecting data, presenting data, and interpreting data and drawing conclusions.

Reading Data

I completed data summaries of all data collected. Altrichter et al (1995) recommends what should be contained in a data summary:

The data summary should contain answers to the following questions:

- 1. What is the context in which the data was collected: Why was the data collected using this method of collection? Why was the data collected in this particular situation?
- 2. What are the most important facts in the data? Is anything surprising?
- 3. About which research issue is the data most informative?
- 4. Do the data give rise to any new questions, points of view, suggestions, and ideas?
- 5. Do the data suggest what should be done next, in terms of further data collection, analysis, or action? (Altrichter et al, 1995, p.123)

In my description of the data summaries found in Chapter 3 and 5, I have included the answers to questions 2, 3 and 4. Question 1 was answered in the justification of why I used the data collection methods I did. Question 5 is discussed in the Chapter 4 and 6.

Selecting Data

Selecting data consists of grouping data into similar concepts (Altrichter et al, 1995). This was done by grouping the data into categories. "Categories need to be chosen which are relevant to the research question and at the same time partially express the contents of the data" (Altrichter et al, 1995, p.124). There are two methods of creating the categories for the data, the inductive and the deductive method.

Developing categories using a deductive method is independent of the data. The categories are chosen from the researcher's theoretical knowledge and the data is then

searched for relevant passages. In the inductive method, the categories are developed from the data (Altrichter et al, 1995).

I used a combination of the inductive and deductive methods. As a result of my smallscale action research project, I had some thoughts as to how the data would emerge. Based on these thoughts, I was able to choose some of the categories for the data to fit into before I actually analyzed the data. However, I did not want to restrict myself only to the data categories I was expecting, so I used the inductive method as well to allow some categories to flow from the data.

The method I used to develop the categories was based on suggestions from Altrichter et al (1995). The method involved the following steps:

- Made basic list of categories that I developed based on my personal theoretical knowledge (deductive method)
- 2. Read over data and highlighted passages that seemed relevant to the research question
- 3. Went through text a second time looking only at highlight passages and decided on a category (either one I had already decided upon or a new category based on the highlighted text) for each highlighted text.
- 4. Listed the categories on a sheet of paper
- 5. Organized the categories into common concepts

Presenting Data

Presenting data consists of ensuring that the selected data is presented in a form that is "easy to take in at a glance" (Altrichter et al, 1995, p.122). This was done by taking the categories of data developed in the previous step and defining their meanings. This resulted in clearly defined categories that could be used as a focal point from which to develop the suggestions for modifications to the course.

Interpreting the Data and Drawing Conclusions

The data was interpreted by triangulating the data collected from all three methods of data collection. Triangulation involves analyzing the similarities and the differences between data collected using different methods (Altrichter et al 1995). Altrichter et al (1995) describe the advantages of triangulation as being that it "1) gives a detailed and balanced picture of the situation, 2) contradictions which are often hidden in situations become visible, enabling a more profound interpretation, 3) it breaks the hierarchy of credibility, which limits our understanding by giving equal status to people from different ranks" (Altrichter et al, 1994, p.115). Triangulation of data allowed me to see when there were differences of opinion between the girls and myself as to the success of a particular aspect of the course.

Triangulation also helps to counter a caution that is often given with regards to analyzing qualitative data:

One of the purposes of analysis is to find explanations, which 'fit' our understanding and therefore seem emotionally plausible. The teacher searches for an interpretation of the situation, which seems right to him [her] and serves as a secure basis for action. However, plausible explanations cannot necessarily be trusted. Sometimes they are the product of prejudices and wishful 1 thinking and fail to stand up to examination.(Altrichter et al, 1994, p.120).

By triangulating the perspectives of the girls, the clinicians and myself, I have attempted to lessen the 'prejudices and wishful thinking' that are inevitably brought to the data analysis.

Summary

This chapter provided an overview of the methodology utilized in this project. The definition of action research was explored as well as the phases of action research undertaken in this project. The data collection and data analysis methods and techniques were described in detail. The next chapter will give a description of the physical education course offered during the first trial and a descriptive analysis of the data from the first trial of action research.

Chapter 3

DATA ANALYSIS OF THE FIRST TRIAL OF ACTION RESEARCH

Description of the physical education course offered during the first trial

The course that was offered was based on the guidelines provided by the Halton District School Board. These guidelines cover all the information that the provincial government requires in order to grant a legal credit. Changes were made to the suggested guidelines based on the results of the small scale action research project taken in April 1998. The changes were focused on three areas. 1) How to work with other people in the building in order to provide a smoothly running physical education program. 2) The need to structure the delivery of the course so the girls took some ownership of the course and thus increased their participation in both fitness and health related activities. 3) The need to make sure that the modifications made to the course were not so great that they compromised the credit requirements of the course.

Trial 1 was planned for a two-month period. (See the Calendar of Events: Appendix D). There were 7 girls that participated in the course during this time. Each day was designated as either a Fitness or a Focus day. Fitness days were active days in which the girls participated in some sort of physical activity; the girls were required to wear uniforms on these days. Fitness day activities included lessons on how to use the weightroom, introductions to rhythmic gymnastics, aerobics, soccer, basketball and badminton (see calendars Appendix D for more detail). Focus days were non-active days in which the girls

participated in discussions about health related issues. Focus days activities included discussions about decision making, drugs, personal safety and sexuality (Appendix D).

Two clinicians, a psychologist, and a social worker attended some of the classes. They came for 16 sessions starting September, 24th 1998, and ending in December, 1998. The intent of the clinicians being present in the class was to make the information learned more personal to the girls.

Three outside speakers visited the class. Related to personal safety, a woman from The Halton Rape Crisis Centre visited. Related to healthy sexuality, a 17 year old mother, who had been a young offender herself attended, and on a fitness day, a guest aerobics instructor came and taught a skip-box class.

At the beginning of the trial, the girls developed a set of class expectations and decided on the consequences that would occur if these expectations were not met (See Class Expectations, Appendix E). The girls also developed a rubric (an assessment tool) that they used to assess themselves on their participation, attitude, how they worked with others, and what level of interest they showed in the class. (See Self-Assessment Rubric, Appendix F). They also completed a weekly journal that asked them to reflect on their participation throughout the week (See Appendix G). The expectation was only that they complete the self-assessment; the girls would be not evaluated on how they assessed themselves.

A pre and a post-test related to the health issues were given. (See Focus Day pretest Appendix J). The main assessment tool for the health portion of the course was the Sister's Package. (See Appendix K_1). The girls were required to complete four packages, each package dealing with a different health issue. The topics the students chose had to be topics that they thought their sister, or someone that they cared about, could benefit from knowing. They could present the information in whatever form they chose (song, written paper, drawing, poem, audio tape, video tape etc.). The girls were instructed that the package should be designed to make their sister, or significant friend, stop and think about the topic; it could not be a straight regurgitation of facts.

Due to time constraints, some of the health related topics were discussed informally during the Fitness days. Topics like nutrition and body image were discussed this way, and consequently thus not formally assessed.

A monthly fitness test was completed. This enabled the students to track their progress in all four components of fitness (See Fitness Assessment, Appendix H_1). After the assessments were completed, the girls developed an action plan that outlined what their goals were for each component of fitness and what they could do to achieve these goals.

Summary of the Method of Data Analysis

As described in detail in Chapter 2, the analysis of the data collected in trial 1 followed the Constructive Method as suggested by Altrichter et al (1995). This method involved:

- 1. Triangulating the data
- 2. Grouping the data into categories of similar concepts
- 3. Defining the meanings of these categories

The remainder of this chapter is broken down into these four sections. Due to the extensive nature of some of the data summaries, only highlights of these summaries and relevant quotes from the research diary have been described.

DATA SUMMARIES

Data Summary from the Research Diary

Fitness activities successful

The fitness activities planned were generally successful. The girls enjoyed tracking their progress in the weightroom but became bored if there were too many weightroom days in a row. The introduction of rhythmic gymnastics also met with success. The girls seemed to enjoy moving to music. There was only a small portion of time devoted to playing traditional sports such as basketball and volleyball, and these sports were not resisted as much as I had anticipated.

Increased participation

The classes that fostered the girls' sense of ownership of the program resulted in high levels of participation. This occurred in both the Fitness and Focus day classes.

We completed the fitness assessment started on Friday. The girls established personal goals they wanted to achieve to improve their level of fitness. Girl 1 & Girl 5 and I worked together to develop some exercises they could do in their rooms at night. [Girl 2] initially said she 'had no goals' and refused to work, however, watching [Girl 1] work at developing the exercises, she walked over and started to develop an exercise plan of her own (Fieldnotes #S21).

The girls were responsible for self-assessing their own level of participation. I was surprised at how much the girls assessment of themselves reflected how I would have assessed their participation level (Fieldnotes #S23). There were doubts about how much strength the self assessment tool should be given, "I might have been more insistent last year if they weren't participating, but this year I am just letting them self assess themselves and reflect why they didn't work hard that day - I don't know if this is successful or not" (Fieldnotes #S23).

Frustration with the Sister's Package

The packages the girls developed were not as thoughtful as I had hoped. (See Appendix K₁ for the actual assignment). The girls chose the topics they wanted to investigate, which led to increased interest at the beginning of the project, but did not lead to the depth of research by the girls that I had been hoping for. Most of the girls simply wrote information from their heads, things they knew (or thought they knew) about a topic.

Unplanned activities

I impulsively added a self portrait and tee-shirt activity for the girls to complete one Focus day that was very successful. It started the girls talking and helped me to learn about them in a personal, yet non-threatening manner. (See Appendix O for a sample of what the girls produced).

Girls' state of mind

There were frequent referrals regarding what the girls told me about how they were feeling as they came into class. For example,

[Girl 2] was upset Monday night due to the pressures in the cottage (other girls being angry at her, cottage staff being in a bad mood), she wanted to kill herself (I don't think very seriously), she asked for tampons and tried to shove them down her throat. She said she thought they would act like a plug on a drain and stop air getting to her lungs and she would die. She ended up puking up the tampons and everything in her stomach (Fieldnotes # S08)

Often these comments were made flippantly, as if what they were saying was not unusual

or disturbing.

What it means to be in control

Conversations in class about the girls' use of drugs and alcohol gave an insight into

their interpretations of what it means to be in control of one's life;

[Girl 5] was very open with answers, she gave extreme examples of being so drunk she could not walk, being put into a tent where a dog was licking her but she couldn't move, and getting into a car accident, yet in the same breath, she is describing how in control of her life she is. (Fieldnotes #S22a). The girls' loci of control are generally external. It is always someone else's fault that things happen to them. "I was just hanging out with my friends when they did the break and enter, just because I was in the house with them when the cops found us, I don't know why I was charged too" (Fieldnotes#O5).

Time as an issue

Topics took longer to cover than I had anticipated. This was due to tasks taking longer to complete than I anticipated. Additionally, there was a significant amount of flux in which girls attended the class, so I was always backtracking to fill the new girls in with what they missed.

Working with other staff in the building

A difficulty that I encountered that surprised me was how to effectively work with other staff in the building. Being a maximum security facility, the students need to be escorted by a security staff whenever they move to an area that is outside the school area. The weightroom and the changerooms are located outside the school area. As a result, I was dependent on a security staff being present in my class before I could take the girls into the changeroom to get changed, or down to the weightroom to start to work. Often, problems of communication or coordination led to the security staff being absent for the first ten minutes of the period. As each class is only one hour in length, this significantly cut into teaching time. Working with the clinicians however, was a positive, helpful experience; they put much personal energy and time into the project. I had not anticipated the clinicians getting as much out of the clinical sessions as they did. They got an insight into the girls as individuals and as a group that helped them in further counseling. This is a benefit of the group I had not anticipated.

Data Summary from Interviews With The Girls

Setting a Pattern of days

During trial 1, there were not assigned days for the Fitness and Focus activities (See Appendix D). There was a different combination of Fitness and Focus days each week. The girls found the jumping around from Fitness to Focus days unsettling. "I don't know what to expect when I come to class" (Girl 3). The girls were given monthly calendars to which they could refer to find out what the days' activities were, but the girls found the lack of predictability of days unsettling.

Choice of activities in the weightroom

The girls positively responded to being able to plan out their own weightroom activities "I liked the freedom in the weightroom, it was a break from the rest of the day" (Girl 3). The girls also liked the other Fitness day activities but not with the same success rate as the weightroom, it was by far the most popular Fitness activity.
Self Assessment

The girls reported that they enjoyed completing the self assessment at the end of every day. "The self assessment forces you to look at yourself" (Girl 6). "Its cool because you get to rate yourself" (Girl 7).

Completing the Sister's Package

The girls reported very much enjoying completing the Sister's Package. "I got to write about what [I] thought was important" (Girl 5) There was resistance however to having to look up information for the package in books. "I know all the information already, I don't need to look in ##*& books" (Girl 7). The girls liked the opportunity to write to someone they cared about (sister, brother etc.), "this makes the information more real" (Girl 3).

Discrepancy between perceived and actual knowledge

One of the interview questions asked the girls was "What information have you heard to death before coming here" (Question #3, Appendix B). Typical responses included "The 'just say no' to drugs thing I have heard a million times, only losers listen to that!" (Girl 4),and "I have heard most of the information before and some of it numerous times. Many schools/centers, and groups touch on the same topics in their programs" (Girl 3). In spite of these answers, the knowledge the girls displayed about drugs and sexuality during class discussions was at a very basic level. Many of the girls did not even have a working idea of how women got pregnant. (Fieldnotes #S17).

Time with the Clinicians

All girls reported enjoying having the clinicians visiting the class. They enjoyed the general conversation times that occurred during the clinical classes. The clinicians were not pushy and did not try to correct the girls when they said something wrong. When asked what she thought the role of the clinicians should be in our class, Girl 3 responded with "they should not think that they know everything, they should listen to us better".

Reactions to Outside Speakers

The Rape Crisis Centre of Halton came in to speak to the girls. Their talk ranged from topics such as date rape, to the services they offer at the Crisis Centre. The girls did not respond to any questions that the presenters asked them during the talk. One of the questions on the interview dealt with this presentation (See Appendix B for the interview questions). There were only two forms of answers that were received from the girls. Their response was either, "I don't care, it was really boring", or some form of the following:

- Didn't like it because they portrayed all guys in a bad light
- I think they were sexist bitches
- They are going to make us think that all guys are bad, they are going to get their own way and turn us into lesbians" (Fieldnotes #O20).

The girls' reactions to the 17-year-old teenage mother were vastly different. Many commented on how cute the baby was and how cool it was that the mother was 'just like them'.

Data Summary From Interviews With The Clinicians

New perspective on the girls

Through the discussions in the clinical sessions, the clinicians learned a great deal about how the girls perceive the world. Participating in the clinical sessions gave them a perspective on the girls they had not had before. The clinicians reported that the perspective they had of the girls while in physical education class gave them added information they could use when treating the girls outside of class. "I was impressed with the girls' honesty, wealth of opinion, and information" (Clin 2).

The clinicians also got a perspective on how much mis-information the girls harbored: "The girls info re: drugs and alcohol was memorable" (Clin 2), "I was surprised as to how naive the girls really were. I enjoyed their lively discussions, the girls had strong opinions that were mostly wrong" (Clin 1).

<u>Girls caught in negative spirals</u>

The clinicians reinforced the need to teach the health information in a personal way. They argued that the girls need help to transfer the facts they learn about drugs and alcohol towards personal situations. They described the girls at Syl Apps as being caught in a negative system. This system has inertia so that even if you stop one thing in that system, the negative spiral will still continue. Clin 1 explained what he meant by using the example of Girl 1. "Girl 1 is getting ready to leave Syl Apps soon. She has shown an understanding of the negative effects of drugs and alcohol during her time in the physical education class. But as soon as she gets home, she will enter back into a world where her relationship with her family is not a positive one, and there is abuse in the family. This is the start of the negative spiral: she feels unsafe at home so she takes a drink to avoid the hurt, she then leaves home and gets in trouble. The facts she learned about alcohol may stop her from taking that drink, but there is still enough inertia in the negative spiral to cause her to leave home and get in trouble any way"(Clin 1). A result of this negative spiral is that teaching straight information is not enough. We need to get across a message of how to break out of the spirals the girls are caught up in.

Clinician-student relationship

The clinical sessions were much more open and free flowing than the teacher-led sessions. According to one clinician, "the girls have heard it all before, hearing it from you again will not make them instantly change their opinion. You need to start the conversation 'where they are at' and progress from there. Always correcting and trying to 'make right' what they say will not help the girls think differently about drugs and alcohol (Clin 1). "The girls don't respond to lecture and nagging, they want to talk and be heard" (Clin 2).

Data Summary From Direct Observations

How the clinicians work

Through my observation of the interactions between the clinicians and the girls, I learned some of the techniques the clinicians use to change a conversation quickly from casual to personal. For example, the topic of one of the classes I observed was abuse. The clinicians led a general discussion about the definition of abuse, and what types of abuse there were. This led to a lively discussion on types of abuse for about twenty minutes. All the girls except one were participating in the conversation. As the conversation went on, some of the more outspoken girls talked about their past histories with abuse. At this point, one of the clinicians asked "Unfortunately, these are all things that have been experienced by people in the building or by yourselves [speaking to the girls], do you think that being familiar with or used to these things happening, that you would be more likely to participate in them as a parent or see them as not abusive?" (Fieldnotes #015). Most girls reacted with vehement expressions of "I will never do that to my kid because I know how it feels" or "I will never have kids so they don't have to suffer through the same things I have". Very quickly, the clinicians turned a general conversation topic into an intensely personal one.

Poor Social Skills

Most of the girls are not able to carry on appropriate social conversations. They quickly interpret comments other girls say as insults towards them. It seems to stem from the need for the girls to always look tough in front of the other girls - as soon as there is a possibility that they have been insulted, they jump on the comment and make a main issue of it. This makes it hard to have conversations that are productive because I am always putting out little fires of conflict between the girls (See sample of direct observation, Appendix C).

The Girls' belief about their knowledge level

The direct observation clearly showed how much the girls believe themselves to be knowledgeable about a topic and yet quickly change their opinion as a conversation goes on. For example, in one class which I directly observed, the clinician was speaking with the girls about drugs:

Clinician:	Once you get on the outside, how long will it take for you to get stoned?
Girl 1:	Within a day, it is like a ritual, our friends say 'hey, welcome back, have a toke'.
Clinician:	What about those who decide to quit while they are on the inside, what pressures to they find when they get out and the first thing someone does is offer them a toke?
Girl 1:	I can say no whenever I want, it is just fun. It is the coolest thing to do.

- Teacher: What if others weren't there to give it to you, would you search it out yourself? Girl 1&2: Yes, we would go on a search and destroy mission. Clinician: What about alcohol? Girl 2: I don't like it, it gives you a full bladder and it takes too long to get stoned. Clinician: If alcohol is too hard to get drunk with (takes too long), then why not just use cocaine hits? It would be much faster. Girl 3: Coke lasts just a few minutes, you come down too quick and that's how you get addicted so fast. Clinician: So you know the physiological effects of drugs. Girl 2: I know all this drug stuff. I know what's good and bad about it but I don't care I have been to so many psychologists, I have heard all this before.
- Clinician: What are the long term impacts of doing coke?

Silence from all girls

Discussion centered on doing drugs if you are pregnant

- Clinician: In your own ways, you have shown a sensitivity towards babies, you don't think it is right to harm them by exposing them to drugs. Why are you not showing the same sensitivity towards yourselves? What about the cost drugs have on you?
- Girl 3: There is no cost to doing cocaine because cocaine is not addictive, it's only in your mind. (Fieldnotes, #DOS25)

Throughout the conversation, the girls talked about how they knew the effects of drugs on their body yet when they were asked what the effects were, no one was able to answer. Additionally, note Girl 3 who discussed cocaine as being addictive at the

beginning of the conversation but had decided it wasn't addictive at the end of the conversation.

This is just one example of many that displayed how quickly the girls would change their opinion about something so that it suited their needs at the time.

TRIANGULATING THE DATA

Locus of Control

The biggest difference in perspective after triangulating the data is the discrepancy in opinion about the level of knowledge of the girls. The girls think they know all there is to know about drugs and healthy sexuality. The clinicians and I however, see how the girls' opinions change quickly from day to day and how these opinions do not seem to be influenced by fact. There is also a discrepancy as to the importance of one locus of control. The girls seem quite content to have whatever happens to them be someone else's fault. There was nothing that the clinicians and I could say that would convince them that they need to be responsible for the decisions they make and the consequences of those decisions.

Purpose of the clinical sessions

A discrepancy between the clinicians and I was the goal of the clinical sessions. The clinicians wanted to find out 'where the girls were at', whereas I wanted factual learning

to occur and be incorporated into the girls' consciousness. For this reason I was frustrated by what I saw as a lack of progress in the clinical sessions.

Sister's Package

I was as surprised at how much the girls' enjoyed doing the Sister's Package as I was generally disappointed with the results. This discrepancy resulted in a closer examination of my original intent of the Sisters package, the instructions that the girls were given, and the assessment tools used to track the girls progress.

CATEGORIES DEVELOPED FROM THE DATA

The next stage of data analysis was to organize the common trends found in the data summaries into categories. The categories that developed from the data summaries in trial 1 were:

- fits with curriculum
- fitness levels
- assessment
- engagement

- outside speakers
- clinical piece/teacher as therapist
- working with others in the building.

DEFINING THE MEANINGS OF EACH CATEGORY

Fits with Curriculum

I must ensure that the modifications that are made to the course as a result of this action research project do not change the course so much that it no longer fulfills the requirements for a credit. Safety guidelines are one of the requirements of the course that need to be considered.

Fitness Level

Each girl completed a monthly fitness assessment (See Appendix H). Due to the sporadic nature of the girls' attendance in class, it was impossible to complete statistical analysis of how the fitness levels of the girls improved over time. The fitness testing was useful in that it helped each girl design a fitness program that could individually suit her needs and track her progress over time.

Assessment

The purpose of assessment is to improve student learning. There were some assessment tools that I developed for this curriculum that succeeded in this goal, and some that did not. The fitness assessment helped the girls track their fitness level and guide them in ways to improve. Unfortunately, I rushed the girls too quickly through the assessment and did not give enough time for follow up, so it was not as effective a tool as it could have been.

The Sister's Package was designed to guide the students through a gradual learning experience about a topic of their choosing, but it did not end up fulfilling this role. What ended up happening was that the girls worked on a project once, handed it in, did not care about the feedback, and then wanted to progress to the next task. There was little thoughtfulness or learning that resulted from the assessment.

Engagement

I had been prepared for the students to resist getting involved in the Fitness day activities because of their unfamiliarity with sport. I was not prepared for the resistance I found when discussing drugs and sexuality. I had thought the girls would be inherently interested in some of the topics and I would not have to work so much to engage them in conversation.

Outside Speakers

Bringing people in was an effective tool to raise the girls' interest in a topic they may not pay attention to if it was only coming from the teachers. The girls responded strongly to the Rape Crisis Talk. I would like to foster this strength of reaction to other topics. Another benefit of having outside speakers come in to speak to the girls, is that the girls learn about what services are out there that they may want to make use of once they are released.

Clinical Sessions/Teachers and Therapists

The clinical sessions focused on getting a better understanding of what the girls' views were about sensitive topics like drugs and sexuality. They are meant to be a forum in which the girls can discuss how these issues have personally affected their lives.

Working with Others

I need to foster a healthy relationship with others in the building in order to teach this class successfully. This healthy relationship has been achieved with the clinicians, but there is more work to be done with the youth workers in the building.

Comparison of Categories

Comparing the categories developed at the end of this first trial of action research with the categories developed at the end of the small scale action research, gave an indication of how the focus of the course development has changed. There were three categories developed in the small scale research project. They were concerned with 1) how to work with other people in the building in order to deliver a quality course 2) how to structure the course so that the girls took some ownership of the material in the course, and, 3) ensuring that the course I delivered fulfilled all the curriculum requirements set out by the government.

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There were seven categories developed after the first trial of action research as compared to the three original categories. These seven categories fit into the general plan of the original three categories:

TABLE 2

Comparison of Categories between the original action research project and the first trial

Old	New
Working with others	outside speakers
	Clinical piece/teacher as therapist
	Working with others
Girl's ownership	Engagement of students
	assessment
Fits with curriculum	Fits with curriculum
	fitness levels

The 'Working with Others' category continues to include the aspects of how to work with others in the building as well as working with the clinicians to deliver some of the health curriculum. There is now a greater focus on what exactly the role of the clinicians should be in the classes, and how this role should be reflected in the classes in which the clinicians are not present.

The 'Girls' Ownership' category has expanded to include the question of how to engage the girls in their learning as well as how to effectively assess their learning. The more involved the girls are in the assessment process, the more ownership they will take in their work.

The 'Fits with Curriculum' category still includes the need for assessment tools to ensure that all government expectations have been met. The focus of the assessment has changed however, in that there is a greater emphasis on the process of the assessment tasks and a following up of the results of the assessment. More research needs to be done on methodology of designing assessment tools that will lead the students to produce more thoughtful projects.

Summary

The categories developed at the end of the first trial of action research show an expansion upon the categories developed at the end of the small-scale research project. The questions of what the role of the clinicians should be, and how to develop assessment tools that will result in more thoughtful outcomes needs to be addressed.

Chapter 4

MODIFICATIONS RESULTING FROM THE FIRST TRIAL OF RESEARCH

As discussed in Chapter 2, the next stage of the action research process is the development of action strategies based on the categories developed from the previous stage. The action strategies are in the form of suggested modifications to the girls' physical education course. These modifications, and any literature studies done to support the modifications, are outlined for each category.

Based on 'Fits With Curriculum' category:

If the course design were structured so that it covered all the topics laid out by the government in an extensive manner, it would take about two years to teach. In trying to cover all the government's expectations during the first trial of action research, the topics were covered too quickly. For the second trial of action research, there was a more focused approach as to which topics would be covered in a thoughtful manner, and which topics would be covered superficially. The government sets out the required topics as a list of expectations that must be met (See Appendix P). There were 10 expectations chosen to be focused on during the second trial of action research:

- use and combine movement skills in a variety of physical activities (e.g. apply locomotion/traveling, manipulation, and stability to a specific activity)
- demonstrate an improvement of their skills
- identify the requirements including basic equipment standards, preparation (e.g. warm-up and cool-down exercises, training requirements) and specific safety

issues that maximize performance and participation in recreation and sport activities

- demonstrate positive, responsible personal and social behaviour in physical activity settings
- describe specific types of physical and non-physical violence
- identify the factors that contribute to positive relationships with others
- demonstrate understanding of how to use decision making and assertiveness skills effectively to promote healthy sexuality
- demonstrate and use both decision making and assertion skills with respect to media influences and peer pressure related to alcohol, tobacco and other drugs
- explain the effectiveness of various conflict resolution processes in daily situations

 use appropriate social skills when working collaboratively with others (The Ontario Curriculum: Healthy Active Living, Coded Expectations, 1999).

These expectations were chosen out of the 63 expectations laid out in the government document (See Appendix P). The course was designed so that it still covered the remaining 53 expectations, but these were not a focus of the girls' Sister's Packages, or were not discussed during the clinical sessions. For example, some of the expectations under the Personal Safety and Injury Prevention (See Appendix P), were covered by having a speaker from the Halton Rape Crisis Centre visit the class.

The safety guidelines are also part of the government requirements for the physical education course. To ensure that all safety guidelines are met, general safety information would be discussed at the beginning of the course and included in the girls' booklets so they were aware of all expectations about clothing, equipment use and behaviour

The safety guidelines stipulate that "proper clothing must be worn" (Halton and Ontario Safety Guidelines in Physical Education, 1999). The wearing of uniforms was implemented during the first trial of action research to fulfill this guideline. The girls did not resist having to wear the tee-shirts as part of the uniform, but there was discomfort expressed at having to wear the shorts. Most teenage girls have a very poor body image (Payne & Hahn, 1989). For girls that have been the victims of abuse, poor body image is an even bigger problem (Chesney-Lind, & Shelden, 1992). As a result, for the second trial of action research, the need to wear shorts was not enforced. The girls had the option of coming to class in appropriate pants (track pants, tear-away pants etc.). If the girls did not wear the proper type of pant, they would be required to wear the shorts provided. Syl Apps has track pants available to all girls if they choose to wear them.

In order to fulfill the expectation that the girls use "appropriate social skills when working collaboratively with others" (Appendix P), there needed to be more time spent on the classroom expectations than there was during the first trial. It needed to be clear that these classroom expectations were not punitive, but set up to help foster positive social relations. Too much of the time, the students were sent out of class, and they were not really sure what they had done wrong. There was too much focus on making sure the girls were punished for their behavior, and not enough focus on connecting what their behaviour was, to why the behaviour needed to be corrected, to what the girls and teacher could do together to make this happen (Brendtro, Brokenleg, & Van Bockern, 1990). As a result, for the second trial, the class expectations that were developed at the beginning of the year included a requirement to speak respectfully to each other. There was also more follow up with any girl who was sent out of class due to speaking disrespectfully to ensure that there was a reinforcement of the reasons behind the rule.

Based on 'Fitness Level' category

The second trial saw an increase in the intensity with which the girls were required to work. I initially thought that asking the girls to work hard was what was turning them off participating in class. It seemed that it was the girls' unfamiliarity with how to play sports, and the awkwardness they felt about their bodies that were the barriers. The weightroom was an area where there was the highest amount of participation. The girls reported that this was because the tasks were broken up into small, structured activities. Therefore, smaller, more structured activities were used when introducing sports such as basketball and badminton for the second trial.

The girls' participation in rhythmic gymnastics was high during the first trial. As a result, this was continued in the second trial.

Based on 'Assessment' category

In the first trial, the students were required to complete four Sister's Packages. In order to increase the amount of thought and time the students put into the package, this was altered for the second trial. The girls only needed to complete two packages during class time; the other two packages could be completed on their own time. The girls needed to complete a decision making exercise for each of the four packages they completed (See Appendix L). The intent of the decision making exercise was to help the girls make some connection between the information they were learning and how it related to the decisions they make about drugs and sexuality. More time was spent on the fitness assessment. The girls had to follow up on the results of their fitness tests. The follow up consisted of each girl developing an individual fitness plan that they had class time to carry out.

The use of pre and post tests was discontinued. The girls were discouraged by the written test and literacy was a problem. Because of the small number of the girls in the class, and the high variability as to who was in the class each day, the pre and post tests were not able to produce reliable data as to the success of the Focus days. As a result of the frustrations they caused the girls, and their lack of ability to produce data, they were not worth continuing.

A Movement Skills Assessment was designed that broke down the skills involved in playing team sports into small, achievable tasks (See Appendix N₁). The assessment was set up so that the skills were marked based on what percentage of the skill they were able to do correctly. For example, it did not matter if they got the ball in the basket when demonstrating a lay-up, if they performed 5 out of the 8 listed steps on how to do a lay-up, they got a mark of 5/8 for that skill. This idea was an adaptation of something I learned while taking a course on special education. During this course, the instructors spoke about a method for marking spelling based on the idea that a student doesn't just spell a word right or wrong, they could spell it 75% correctly.

The girls were still required to self assess themselves at the end of each day.

The clinicians and I continued to use the Tanya's Test of Temperament (See Appendix M) as a basis for discussion for the clinical sessions. Tanya's Test of Temperament is a questionnaire the girls fill out at the beginning and the end of their time in the course. It asks for general opinions about drugs, sexuality, living at Syl Apps, and the girls' sense of their locus of control.

Based on 'Engagement' category

Regular Fitness and Focus days were set up (Every Monday, Wednesday and Friday were Fitness; Tuesday and Thursday were Focus), to aid in the girls getting into a set pattern and hopefully not resisting as much as during the first trial

Engagement was a more difficult problem in the first trial than I had anticipated. The girls participated in the Fitness day activities adequately, but they did not show much interest in the Focus day tasks. I attempted to increase the girls' interest in the Sister's Package by asking them to write the project to their sister or someone they knew. The focus was 'What do you think that your sister should know about....'. The girls enjoyed writing to their sisters and important friends, but only if they could talk about information they already knew. They resisted having to research new information.

The emphasis of the Focus days needed to be modified so the girls were motivated to look for new information instead of relying on what they already knew. McClelland summarized research that has been done on teacher practices that encouraged or discouraged achievement motivation:

Adult Domination: When an adult prescribes what a youth is to do and how it is to be done, the child may remain dependent and does not learn to set and pursue personal goals.

Obedience: Adults who stress obedience and conformity in order to develop polite and manageable children inadvertently lower achievement motivation. Affection: Adult expressions of genuine interest, pleasure, and affection can increase measured achievement. Expectations: Low expectations and over-indulgence both lower achievement while realistic challenges with a high ratio of success to failure raises motivation. Independence: Autonomy must be playfully nourished from early childhood but aloof adults who "push the child from the nest" too early do not foster achievement. (McClelland, in Brendtro et al, 1990, p.72).

These aspects of motivating achievement were considered regarding the presentation of the Sister's Package in an attempt to make it more successful than it had been during the first trial. The package was designed so that it was not "adult dominated". There was variety of choice as to what topic the girls wanted to focus on, and what form their package could take. However, there was a greater emphasis on expectations than during the first trial. There were higher expectations given regarding the use of resources and the completion of the decision making worksheets (See Appendix K₂ for the revised Sister's Package used in trial 2).

The self-assessment tool was used as the motivating factor for the girls' participation in class. They were asked to reflect on their level of participation at the end of each class and give reasons why they did or did not participate. The girls were allowed one Fitness class a week in which they could choose to not participate. During this class, they were expected to work on their Sister's Package. They were expected to fully participate for the other two Fitness days, and if they refused to participate, they were removed from class.

Based on 'Outside Speaker' category

As this was successful during the first trial, this practice was continued for the second trial.

Based on 'Clinical Session/Teacher as Therapist' category

There is a lot of controversy over the issue of 'teacher as therapist'. Some groups say that the role of the teacher is strictly to teach, that there is no place in the classroom for personal conversations (Buffington, 1993). I had one conversation with a psychiatrist who argued that personal conversations between a student and a teacher could actually do disservice to a child because these conversations could result in the student-teacher relationship blurring into friendship. He argued that this blurring of relationships was unhealthy for the child because they could no longer feel secure within established boundaries.

I agree that boundaries must remain clear between student and child. But I do not think that personal conversations between student and teacher blur these lines. Lewis, (1993) argues that it is impossible to have a strictly academic relationship with your students. As soon as you discuss a topic that the student has personal experience with, you are doing therapy.

The topics covered in the girls' physical education program are all topics that most girls in Syl Apps, have had personal experience with (Chesney-Lind, & Shelden, 1992). Consequently, every time we were discussing these topics, therapy was happening. As a result, there was a more therapeutic approach towards the Focus day classes than occurred during the first trial. This was done by watching how the clinicians interacted with the students during the clinical classes and trying to model this in the classes when the clinicians were not there. The clinicians encouraged free flowing conversations during the clinical class. They did not worry if the discussions were not directly connected to the Focus day topic of the week. They gave gentle suggestions to the girls about how their comments demonstrated their false sense of being in control, but they did not overpower the students.

Each Tuesday Focus day was more academically focused. On these days, a small amount of information about a specific topic was provided and then discussed. The discussion centered around the girls expressing their opinions about what was learned.

Nichols (1988) argues that allowing students the freedom to talk is one of the most powerful empowerment strategies there is. She argues that often students don't respond to questions that are asked in academic classrooms not because they don't know the answer or don't care, but because they are tired of being discouraged and told they are wrong. During the second trial, I tried to allow the student just to talk, and not worry so much about always pointing out the errors of their statements.

Based on 'Working with Others' category

In an attempt to foster more positive working relations with others in the building, meetings were set up to discuss the girls' physical education course. I outlined the areas of frustrations I had experienced during the first trial and asked for help in solving these issues.

Summary

An action plan was developed that consisted of suggested modifications to the girls' physical education course for the second trial of action research. The next chapter describes what the course looked like for the second trial of action research and describes the data that was collected during that trial.

Chapter 5

FINDINGS FROM THE SECOND TRIAL OF ACTION RESEARCH

Description of the Girls' Physical Education Course During the Second Trial

Trial two ran through May and June 1999. There were 8 girls that participated in the course during this time. Again, each day was designated as either a Fitness or a Focus day, but this time there was a regular pattern to the days. Monday, Wednesday, and Friday were Fitness days, whereas Tuesday, and Thursday were Focus days. Only one clinician, the psychologist, attended the classes. He attended once a week, every Thursday throughout the trial. Outside visitors continued to play a part in the course. Halton AIDS network and Halton Women's Place visited throughout the trial

The uniform requirement was modified so that the girls had the option of being able to wear appropriate pants instead of wearing the shorts. The girls were expected to wear the uniforms each Fitness day, but were allowed to wear regular clothes for the Focus days.

Class expectations were again developed at the beginning of the trial. An expectation that was stressed was the expectation that people speak respectfully to one another at all times. Consequences for not meeting this expectation were discussed and agreed upon at the beginning of the trial. These consequences were more harsh than they had been during the first trial. For example, if a student broke the expectation of speaking respectfully, she received a time out immediately, whereas during the first trial, she would have been asked to stop twice before receiving her time out. When a student was disciplined for being disrespectful, I met with her and discussed what had happened before she was allowed back in class.

General safety guidelines were incorporated into each lesson to ensure the course was complying with the Halton District School Board's safety regulations (Halton and Ontario Safety Guidelines in Physical Education, 1999).

The Fitness day activities were repeated from the first trial, but there was a greater amount of time spent on the fitness assessment (See Appendix H₁), and the addition of a movement skills assessment (See Appendix N₁). The increased time on the fitness assessment was spent examining ways the girls could improve their level of fitness in specific areas. This was done by spending a class learning about each fitness component in detail and learning about ways to improve each component. The fitness components that were discussed included muscular strength, muscular endurance, flexibility, and cardiovascular fitness. Skills were taught that did not require a lot of equipment so that the girls could perform the exercises after school. The movement skills assessment (See Appendix N₁) that was developed aided in the progression of skills in basketball, volleyball and badminton. As a result there was more of an emphasis on team sports than there had been in the first trial. I encouraged any girl who had expertise in a sport to teach some skills to the class. This occurred in track, basketball and volleyball. I also used fitness videos more frequently in an effort to help improve the girls' cardiovascular fitness. I scheduled to take the girls outside in order to give an opportunity to play soccer and track. Unfortunately, we were often prevented from going outside due to staffing problems that occurred at the last minute. I continued to schedule a 'Girl's Choice Day' in which the girls could dictate what was done that day, once every 2 or 3 weeks.

The topics covered during the Focus days emphasized only the expectations discussed in Chapter 4. Thus, more time was spent on each topic. As a result, the Sister's Package was shortened so that the students needed to complete only 2 packages during class time in order to fulfill requirements for a credit. Due dates were no longer written on the course calendars. Instead, there were individual discussions with each student in which we determined when each package should be handed in. These dates were flexible based on the amount of class time the girls missed due to court, doctors' appointments etc. As a result, the rubric that assessed the packages was changed so that it no longer included a requirement that the packages were handed in on time (See Appendix K_2).

There was an added requirement for the girls to complete two decision making worksheets (See Appendix L) for each package completed. This was an effort to stress the importance of taking the information learned through working on the packages and incorporating it into the decisions they made. The decision making worksheets lead the girls step-by-step through a decision making process (Brammer, 1979). This process involved: stating a problem, stating the facts and feelings surrounding the problem, stating and exploring alternatives, gathering information, exploring implications, deciding from the alternatives, and evaluating the decision.

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The Clinical sessions were more unstructured than in the first trial. I did not try to pack new learning into those days as I had done initially. Each Focus Day examined how the information discussed in the previous Focus Day, affected the girls' concepts of themselves. For this reason, one of the first Focus Day activities was a self-portrait that was used as a basis for discussion (See Appendix O for samples).

DATA SUMMARIES

Data Summary from the Research Diary

Class expectations

Setting and enforcing the class expectations was a tiring process, but the result of following through on these expectations was a smoothly running class. "If I just push through the first two weeks of resistance the kids fall into a pattern, but those two weeks are tiring!" (Fieldnotes #J22). The rules were simple, basic and easy to follow. The consequences for breaking these rules were clear and directly related to the rule that was broken.

<u>Uniforms</u>

Many of the girls chose to wear appropriate pants instead of wearing the uniform shorts. Having the pant option resulted in less resistance to wearing the uniform than occurred in the first trial.

Splitting up components of fitness

Spending separate Fitness days on each component of fitness (flexibility, muscular strength, muscular endurance, cardiovascular) was successful. The girls had a more complete understanding of what each component meant. Though there was more time spent on the fitness assessment, I still felt that we rushed through the follow up.

Step by Step skills

The Movement skills assessment (See Appendix N_1) broke down skills into stages. The girls were allowed to assess themselves at whatever stage they felt comfortable. The girls were able to decide what skill they wanted to work on and what their goals were concerning that skill.

Girl 11 was new to the class today. She needs hearing aids and glasses yet wears neither for fear of being made fun of. We did the movement skills assessment for basketball. Though her skills were extremely weak, Girl 11 was able to pick one skill from the movement skills assessment that she was willing to try. She worked on how to throw a bounce pass (Fieldnotes#M20).

The movement skills assessment was successful because it allowed each student to mark how they progressed in each skill over time. They could also choose at what level they wanted the skills to be evaluated. For example, Girl 11 was evaluated on the bounce pass at the primary level (grades 1-3). The skills were broken down into very small stages in order to foster the girls' easy transition from one stage to the next.

Girls taking leadership

Participation increased when one girl took leadership of the class. This occurred when one girl had expertise in a particular sport and displayed this expertise to the other girls. "The [rhythmic gymnastics] class was successful because [Girl 13] was there, she is a great dancer, the other girls wanted to try what she was trying" (Fieldnotes #J18). The girls were encouraged to lead classes for their 'Girl Choice' days. This occurred for three classes during trial two. They ran lessons on track, basketball, and rhythmic gymnastics.

Not all 'Girl's Choice' days were structured lessons; sometimes the girls just choose to relax and play unstructured activities. The girl's choice days gave both the girls and I a break. "The girls and I played a little relaxed basketball but basically just talked, it was an important day because the girls and I had pleasant conversations, a nice change from the frustrating conversations we had last week (Fieldnotes #M31)".

Sister's Package

The Sister's Package continued to be a success. "The girls worked on their packages today, they enjoyed the freedom of doing this instead of the constraints of formal lessons as we have been doing for the past week" (Fieldnotes #J01).

There was still not enough thoughtfulness put into the Sister's Package. However, I gained a better understanding of where the design of the package was faulty and what I could do to change it:

I learned about a way in which to try and lead the girls through deeper thinking levels. I will incorporate these ideas in my final version of the Sister's Package. These ideas came from Betty Irving, a retired teacher from our board who came to one of our Special Education Classes. She showed us a simple wheel she called "Bloom's Wheel" [See Appendix K₃]. By asking students to design their Sister' package using this wheel, they will be forced into giving more thoughtful answers (Fieldnotes #D09).

Clinical Classes

The Clinical classes used Tanya's Test of Temperament (Appendix M), and the Teeshirt activities (Appendix O) as their basis for discussion. There was less of an attempt to link the discussions to a specific learning goal then there had been during the first trial.

I was still frustrated with the disjointed feeling of the clinical sessions. (A session that is supposed to be about abuse ends up in discussion of why all the girls don't like having other girls as friends (Fieldnotes #M25)). I was more comfortable with these seemingly unproductive classes, however, because the clinician and I learned more about the girls' misconceptions about drugs and sexuality as well as how they have been personally affected by them. The girls also tended to make unguarded statements that revealed much about how they saw the world.

Sensitive subjects

It was interesting to observe the girls' reactions to sensitive subjects. The girls would often protest about how silly the topic was, yet still pay attention to the discussion. "the girls put effort in to show they were bored with the conversation but they stayed quiet enough to hear what I was saying when I read through and commented on the handout" (Fieldnotes M16).

During clinical sessions, when a girl was showing discomfort discussing a particular topic, she was allowed to work on her Sister's Package. This seemed to relax the girls.

Locus of Control

The girls continued to display a skewed version of what it meant to be in control of their lives. For example, Girl 9, when choosing a drug project said "I would not do heroin because that is addictive, cocaine is not addictive" (Fieldnotes #M18). Girl 9 does cocaine and has created a fantasy world in which cocaine is not addictive so that it makes it O.K. for her to do. This seems to be a common thing, the drugs the girls do themselves are not addictive or harmful in any way but other drugs can be harmful.

Many of the girls have an external locus of control, what happens to them is somebody or something else's fault. They are not responsible:

Had an interesting conversation with Girl 11 today. We were discussing if she thought that going to a party of someone she didn't know would make her more vulnerable to assault than going to a party of someone she did know. All Girl 11 kept saying was, "I carry protection with me, I have things in my house to protect myself [meaning weapons], it won't happen to me". She would not discuss how to try and prevent an assault in the first place, she seemed to be saying, that as long as she carried a weapon, it would not be an issue (Fieldnotes #J08).

Struggle between flexibility and structure

My research diary contained many entries in which I speculate as to whether I tried to give too much ownership of the course to the girls. The Sister's Package, the sports they did for their movement skills assessment, the expectations at the beginning of the course, and the girl's choice days, were all areas in which the girls had ultimate say as to what went on. The original intent of this was to try and boost the girls' sense of ownership for their learning and thus hopefully increase their engagement in the course. A problem that resulted from this amount of freedom, was that the topics were not being covered as thoroughly or deeply as I would have liked them to be. Another concern about this was "flexibility is great for the girls, but too much stress for the teacher!" (Fieldnotes, #J15). I need to recognize that the way I am designing the course is extremely hard on the teacher.

Working with others

There was some improvement in the support I received from the security staff during this trial. There were still problems trying to arrange classes outside, to the point where I was more surprised when an outside class actually worked than when it didn't, "We played soccer outside today - IT ACTUALLY WORKED THIS TIME!" (Fieldnotes #M21)

Data Summary from Interviews with the Girls

Fitness Days

The girls continued to rate the weightroom days as their favorite Fitness days. They responded positively to the addition of the fitness videos and the movement skills assessment. The movement skills assessment was set up to break each skill down into very small components. The girls were required to work on improving one skill at a time. Most girls were better at the skills than they thought, so it was a self affirming exercise.

Sister's Package

The Sister's Package was described as "really cool" (Girl 11), "I liked the choice, it

sometimes was relevant to me" (Girl 9) "Boring, but O.K." (Girl 10), "I liked writing

stories"(Girl 12).

There was still resistance to the research requirement (Fieldnotes # M31). The girls enjoyed writing stories because "it didn't matter if the story was true or not, we didn't have to tell" (Girl 12). The stories they wrote rarely contained references to information they researched. For example:

Hello my name is [girl 12], and I am doing a project on date rape and I choose to write a story what id be feeling if I got rape. This story is not true I'll never forget that day when I was walking and I saw ya comin my way you were so fine that I had no words to say I wanted ya in my arms, ya came to me and said Hi and Then we walked to a coffe shop and ya bought me a piece of pie We talked for hours I felt so Hi becuase of the way I felt for you little did I know That ya had a plan to ruin my life it was easy for you cause you we 19 teen I was only 14 From That day on you took me out to place so we could hold each other and dream. You told me great things like you Told me you loved me you cared for me I still diden't relizes all that you said was liEs to get me to think you did care and to get me to trust you more than I wanted to. and then you asked me to your house for dinner I said YES and ask you to pick me up at 7:00 pm. so you came and picked me up. as we were driving I realized we were goin the oppisit way I asked you were we were going and you suddly turned around and told me to shut my mouth. I got scared so I just ran my fingers Through my hair and Told myself to Think but it WAS to late I just remember The Pain in my head and the blurring as you roughly Drag me Through a forest I KICKED I SCREAMED and Told you no and you Stopped next to a Tree and STARTED Kicking me Scearming what I you saying no to I was to scared to say anything and Then you said I you saying to this and you rip my pants and underwear of and raped me. Thats all I remember, I woke up put on what was

left of my pants and found my way home bruised in pain and feeling dirty. I did'ent care about what they say in books don't shower or changed after rape, but I did'ent care I showered anyways trying to scurb That dirty feeling away. but I felt like it was all my fault for falling for you after it happened I did not eat sleep even try killing myself I feel so gross. Eventually I Told the police an he did 3 years secure for assalt and rape (Story written by Girl 12).

Perceived vs. Actual Knowledge

It was interesting to note, that, according to the girls, the drugs they did themselves were not addictive, while other drugs were addictive. "I would not do Heroin, that is addictive, Cocaine, what I do, is not... I make a lot of money out of selling cocaine because the people will do anything to get it" (Girl 9). When asked why 'people will do anything to get it' if cocaine was not addictive, Girl 9 responded, with "Who cares! Its not addictive!".

The girls also displayed faulty thinking when discussing sexuality. "unprotected sex with a guy is O.K. as long as you trust them" (Fieldnotes #M31) but the girls were not able to tell me what trust was or how you knew you had a trusting relationship with someone.

The girls were pickier about what was O.K. for a baby then for themselves. "I would never let my kid get into drugs" (Girl 10), "I am not talking to my friend ever again, she did coke when she was pregnant" (Girl 9). Note that Girl 9 is the girl that sells coke, does it herself, and insists that it is not addictive. When asked about why it is O.K. for them to do something but not O.K. for a child, the girls were unable to answer.

Sensitive Topics

One of the interview questions asked "What information was totally new?" All of the girls during trial two answered 'abuse'. When asked what they thought about the class discussions on abuse, the answers ranged from "I haven't thought about it" (Girl 12), "really stupid because I don't like talking about that stuff" (Girl 10), "If I was teaching the class, I would not talk about abuse, it makes people uncomfortable" (Girl 9), "I think I liked it but I am not sure" (Girl 13). The reaction to the topic of abuse was much more emotional than any other topic discussed. "I don't like talking about that beating up stuff, I can talk about anything else" (Girl 10).

Clinical class

There were more ambivalent responses concerning the clinical classes during trial two than there had been in trial one. Responses included "I don't care, but it was helpful" (Girl 12), "I don't know, I don't care" (Girl 11) I think some of this ambivalence was related to the more in-depth discussions about abuse that occurred during trial two. When asked about the informal discussions that occurred in clinical classes, all girls reported enjoying them
Reactions to Outside Speakers

The girls enjoyed the presentations from the Halton Aids' Network and Halton Women's Place. These presentations were more relaxed and low key than those during the first trial.

Data Summary from the Interviews with the Clinician

Nature of Clinical Sessions

I expressed to the clinician my frustration with some of the clinical classes that spent the whole time discussing 'where the kids were at'. I told him that sometimes I felt like they were a waste of time: "No, you are just not used to the way girls can react in a clinical setting. An unstructured session like the one we have just had is not unusual. It is what you have to go through in order to get anything out of them, sometimes sessions are useful, and sometimes they aren't, that is just life" (Fieldnotes #M25).

For these girls, 'where they're at' seems to be discussions of why they got into Syl Apps and what life was like when they were on the outside. This topic of conversation usually provoked discussion and relieved tense situations.

Concern was expressed in regard to the students working on the Sister's Packages during the clinical sessions. "You were having the students produce too much in terms of the package [this]-was getting in the way of conversations (in reference to the girls working on the packages during clinical class)" (Clin 1). The Clinician's focus for the clinical sessions was trying to get the girls involved in the conversation; to him, the educational aspect of the discussion was secondary. "being able to get the girls involved in an engaging conversation is quite a feat" (Clin 1).

Where the girls are coming from

The clinical class continued to give the clinician added information about the girls. "girls have very skewed perspectives of what they believe in - discussions will at least help us get inside their head more,". There was also a relationship built between the clinician and the girls that could be carried into more formal treatment sessions. "The girls are more relaxed, it does not feel like a clinical session so the girls may open up more here, reveal more about themselves here than they would otherwise" (Clin 1).

Movement of girls in and out of the class.

Frustration was expressed at the constant flux of girls in the class. This flux meant that the conversations had to keep going back to 'where the girls were at', instead of getting deeper into topics. The clinician expressed that this situation of constant flux was probably a reality in the future of the building and thus might as well be considered in planning the program.

Environment of Syl Apps

The clinician commented that in his experience, for a program to be truly successful, all areas of Syl Apps need to be considered. He suggested that "the girls lack sufficient skills to function within the community at large, as a building, we need to work together to help and teach them those skills" (Clin 1).

Data Summary from Direct Observation

How the Clinicians work

The clinician continued to work with the girls in a non-confrontational, nonjudgmental manner. An added insight that was noted during trial two was the clinician's skill at not reacting to wild statements made by the girls and how this lack of reaction resulted in the wild comments ceasing.

Locus of Control

The girls showed little ability to take responsibility for their actions:

Clin 1:	[Girl 9], what did you do to get in here?
Girl 9:	I was pissed off with someone and so I took their car and tried to drive it off a bridge.
Clin 1:	Is there an alternative to driving it off a bridge?
Girl 9:	Well I had the keys, so what else was I supposed to do?

The girls also displayed how their own external loci of control would affect how they related to others:

Clin 1:	What would you do if a good friend was in an abusive relationship?
Girl 9:	I don't know, its her fault, she is the one that picked the guy in the first place, what am I supposed to do about it?
Girl 10:	She doesn't have to stay with him, it's not my problem!
Girl 11:	Its not happening to me, so I don't care.

Outside Visitors

The girls responded positively to having outside speakers. They listened more intently and for a longer period of time then they would in a regular class. The girls actively participated in discussions. These discussions gave added insight into how the girls saw the world. For example, when Halton Women's Place came in, the girls were easily able to make a list of what they wanted in a partner (money, good looking, nice shoes, have a car) but not so able to list what they did not want in a partner ("him to force me to do things" (Girl 9), short guys, bad shoes, ripped clothes). They mostly focused on external traits and where unable to articulate about how a partner should act in the relationship.

Sensitive topics

The girls were more comfortable talking about drugs than about abuse. Classes that focused on abuse for the entire period saw many more behaviour disturbances than other classes.

Strong initial resistance

The girls put a great amount of energy into resisting new activities. For example, the girls were given a questionnaire that asked them about their conflict styles:

After being given the questionnaire, [Girl 10] stared at her nails for about 5 minutes The whole time saying things like 'this is so stupid, we always have to do stupid bull shit things, why can't we do something where we actually learn something!'. All ignored her complaining. She then sat quietly for about 5 more minutes then started to complete the questionnaire (Fieldnotes #DOM18).

The girls also put effort into displaying to the other girls their superiority over the topics discussed in class, "The girls were almost trying to one up each other to display how bored they were - but at the same time, they were quiet enough to hear what [Clin 1] was saying" (Fieldnotes DOM21).

TRIANGULATING THE DATA

Locus of Control

There was a continued difference of opinion about what it meant to be in control of one's life. The clinician and I still saw the girls as having a skewed sense of reality, while the girls thought they had it all figured out. It was interesting to note how the girls could create the world they needed in order to justify their actions. A good example is their notion that the drugs that they do themselves are not addictive, it is only other kinds of drugs that are addictive. There was no changing this opinion even when there were two girls in the room. One did not do cocaine and thought it was addictive, the other did cocaine and did not think it was addictive - this did not seem to be an issue for ether person.

Purpose of the clinical sessions

My concept of what the clinical sessions should look like changed throughout the second trial. I am more comfortable with a loose discussion format than I was before. I am still frustrated that it is not connected with the Focus day subject of the week.

There was a difference of opinion about the girls being allowed to draw and scribble during the clinical discussions. I saw it as a relief from tension, and the clinician saw it as a little too distracting. The girls reported enjoying being able to do this, saying it helped them to relax.

The discussions about abuse were difficult for everyone. I spent most of my time diffusing behaviour situations. The clinician was hard pressed to kept the conversations on track, and the girls reported that discussing abuse made them uncomfortable.

Sister's Package

There was the same discrepancy of opinion about the Sister's Package for trial two as there was for trial one. The girls really enjoyed working on the package while I was frustrated by the lack of thought and small amount of factual data that went into the packages. The clinicians felt that I was asking for too much volume of work by asking for four Sister's Packages, and that this was interfering with the clinical discussions.

Things everybody liked

There were many aspects of trial two that we all agreed were successful: the Girl's Choice day, the pattern of regular Fitness and Focus days, the outside visitors, separated days on each component of fitness, and the uniforms.

CATEGORIES DEVELOPED FROM THE DATA

As in trial one, the next stage of data analysis was to organize the common trends found in the data summaries into categories. The categories that developed from the data summaries in trial two were:

- fits with curriculum
- fitness
- assessment
- flexibility vs. structure
- outside speakers/role models
- clinical class locus of control
- working with others in the building

DEFINING MEANINGS OF EACH CATEGORY

Fits with curriculum

This category remains the same from the first trial: the modifications that are made to the course as a result of this action research project must not be so extreme that the course no longer fulfills the requirements for a credit. This includes ensuring that assessment tools are developed to monitor all expectations and that safety guidelines are followed.

<u>Fitness</u>

The category of fitness is more developed than in the first trial. It was initially identified as the girls completing a monthly fitness assessment to track their progress. It now involves more of a follow up from the fitness assessment. This follow up involves spending more class time on completing mini-tests on each fitness component to ensure the girls have an understanding of what each component means.

The fitness aspect of the course also involves step by step skills that will help the girls to overcome their fear of trying something new. The girls refuse to try new tasks because they are unfamiliar with trying new things and because they have not been supported in the past (Chesney-Lind, 1988). Their refusal skills are so ingrained, they are trapped in a cycle of negativity. The step by step skills make the trying of new activities as comfortable and supported as possible. The Movement skills assessment (Appendix N_1) addresses these issues.

Assessment

There was an improvement in the assessment tools used in the second trial. The Sister's Package was smaller, and more controlled (See Appendix K₂), the movement skills assessment led the students through learning how to play a sport, and the self-assessment rubric forced the students into self reflection. There were still problems with the lack of thoughtfulness the girls put into the Sister's Package, and the little amount of time given to following up the fitness assessments.

Flexibility vs. Structure

I am still debating about how to get the girls involved in the learning (how to get them to take ownership of what is going on, be engaged in the learning, and take some of the information we learn and try to incorporate it into the decisions they make in every day life). The base issue is how to find that fine balance between giving flexibility and ownership so the girls will become engaged while at the same time, having a structured, predictable pattern from within which the girls feel safe

Outside speakers / Role Models

An importance of outside speakers came through this round that I had not realized before. The outside speakers are people that will give opinions and facts about drugs, sex, abuse etc. that will impact the girls differently than if they are hearing it from me. But

another aspect of the outside speakers that I had not anticipated, was their function as role models. The girls are surrounded by the opinions of their classmates. These opinions are often as skewed as their own. The outside speakers offer a different opinion that the girls may choose to adopt.

Clinical Class/Locus of Control

The clinical sessions are giving both the clinicians and myself a better idea of the girls' sense of their locus of control. Once we have an idea of who and what the girls see as being responsible for what happens in their lives, we can start from that point to try and make suggestions for how these thought processes can change. We have seen that the girls have an extremely external locus of control. They don't ever have to take responsibility for their decisions because it was somebody else's fault.

In order to achieve this end, the clinical classes must have a relaxed, not paternal focus. There must be discussion without rebuke. An aspect of Focus days also needs to be 'getting to know each other and ourselves' in order to foster the personal discussions. One way this can be achieved is with the tee-shirt activity/self portrait (Appendix O).

Working with others

The working with others category is unchanged from the first trial. The aspect of needing to work successfully with others in the building is one that will always need to be considered before there is an attempt to teach this course.

Comparison of Categories

The categories developed from both trials are quite similar. Trial two, however, saw some of the categories becoming more exact in their meanings.

TABLE 3

First Second fits with curriculum fits with curriculum fitness levels Fitness assessment Assessment flexibility vs. structure engagement outside speakers outside speakers clinical piece/teacher as therapist clinical class/ locus of control working with others in the building working with others

Comparison of Categories Between the First and Second Trial

The 'Fits With Curriculum' category remained much the same. There is still an emphasis on ensuring that the course developed meets all the governmental expectations. However, there is less of an emphasis on the course being one that could be taught in a 'regular' highschool. The "Fitness' category was expanded to include more follow up and more step-bystep activities. This was a change from the first trial that focused only on the testing in which the girls learned at what levels of fitness they were functioning.

The 'Assessment' category also expanded to include more detailed and structured assessment tools.

The 'flexibility vs. structure' category replaced the 'engagement' category from the first trial. This reflected the realization that the way I was trying to get the girls engaged in the course was to try and foster their sense of ownership in the course. This ownership was fostered by having a flexible course in which the girls had influence in determining how it was run. The problem with this flexibility was that I was not always satisfied with what the girls chose to do.

The "outside speaker' category remained the same with the added focus of using the speakers as role models.

There was a focusing of purpose of the clinical class through the second trial. The purpose of the clinical class is to help the girls develop an internal locus of control. In order to help the girls do this, informal conversations are necessary. I am now more in tune with the clinicians as to how the clinical classes should be run.

The 'Working with Others' category remained the same

Summary

The categories developed at the end of the second round of action research are similar to the categories developed after the first round but show that the areas of assessment, the clinical class, and flexibility vs. structure need modification for the final version of the course.

Chapter 6

MODIFICATIONS RESULTING FROM THE SECOND TRIAL OF ACTION

RESEARCH

As discussed in Chapter 2, the next stage of the action research process is the

development of action strategies based on the categories developed. The action strategies

are in the form of suggested modifications to the girls' physical education course. These

changes, and literature studies done to support them, are outlined for each category

Based on the 'Fits with Curriculum' category:

The final course developed was centered around the same 10 expectations as

discussed in Chapter 4:

- use and combine movement skills in a variety of physical activities (e.g. apply locomotion/traveling, manipulation, and stability to a specific activity)
- demonstrate an improvement of their skills
- identify the requirements including basic equipment standards, preparation (e.g. warm-up and cool-down exercises, training requirements) and specific safety issues that maximize performance and participation in recreation and sport activities
- demonstrate positive, responsible personal and social behavior in physical activity settings
- describe specific types of physical and non-physical violence
- identify the factors that contribute to positive relationships with others
- demonstrate understanding of how to use decision making and assertiveness skills effectively to promote healthy sexuality
- demonstrate and use both decision making and assertion skills with respect to media influences and peer pressure related to alcohol, tobacco and other drugs
- explain the effectiveness of various conflict resolution processes in daily situations.

 use appropriate social skills when working collaboratively with others (See Appendix P for a complete list of expectations).

The assessment tools for the final course were designed to ensure these expectations were covered in a thoughtful manner (See the 'assessment' category in this chapter for more detail). Smaller assessment tools were developed in order to track the girls' understanding of the remaining expectations.

The final course was designed so that it could be covered in a semester. This resulted in a drastic reduction in the number of assignments given to the girls in order to be able to fit the course into that time period. For example, instead of needing to complete a written report explaining the components of the four food groups, the girls will only be asked to complete a mapping exercise that will have them organize different foods into their separate categories. The mapping exercise could be completed as a 15 minute in-class assignment, whereas the written assignment would take 2 or 3 Focus days to complete. Other expectations will be covered using informal question and answer, small quizzes, and worksheets.

Based on the 'Fitness' category:

The final course uses the same strategies for the Fitness days as had the second trial. One day a week will be spent in the weightroom in which the girls track their progress (See Appendix I). The Fitness days will take on more of a pattern than they had during the second trial. The pattern will include, changing into the uniform, doing a 5 minute warmup, stretching for 5 minutes and then starting the activity of the day. At the end of the class, the students will complete a 5 minute cool down then change out of their uniforms.

The final course will see an even greater amount of time devoted to learning about each component of fitness (flexibility, muscular strength, muscular endurance and cardiovascular). The girls will be expected to complete small assessments in each of these separate components of fitness before they complete the full scale fitness assessment.

The final course will also see additional measures of fitness being tested. Senior physical education students from other high schools will be asked to come in and work one on one with the girls doing the fitness testing and help them develop their action plans.

Due to the success of the movement skills assessment, the final course will spend more time playing traditional team sports (basketball, volleyball, badminton) than I had originally thought would be successful. Much of the time will be spent learning how to do the individual skills, but there will also be time spent on how to incorporate those skills in a game situation.

Based on the 'Assessment' category:

There were changes made to the four major assessment tools used in the final course. These assessment tools are the Fitness Assessment, the Movement Skills Assessment, the Self Assessment, and the Sister's Package.

The fitness assessment was changed so that the differences between each level were smaller. For example, in the old fitness assessment, a girl had to be able to do between 20 and 30 curl ups to achieve a level 2 for muscular endurance; anything under 20 curl ups was a level one (See Appendix H_1). In the new assessment (See Appendix H_2), if the girl completes 10 curl ups, she receives a level 1, 15 curl ups is a level 1b, and 20 curl ups is a level 2. This makes it possible for the girls to see small progress instead of having to make major gains before changes are seen.

The fitness assessment was also included into a larger package called the fitness profile (See Appendix H₂). This profile involves the students having to assess their level of fitness, devise an action plan to improve their levels, and track their progress through the action plan. This fitness profile will be 30% of the students' final grade in the course. This fulfills the government's requirements that there be a summative evaluation worth 30% as part of the course (Healthy Active Living Course Profile, 1999). The focus of the fitness profile is the development of an action plan to improve fitness levels and following up on this plan. The plan involves scheduling a two week period in which the students plan daily activities that help them improve in a specific fitness level. There is also a log in which the girls have to document if they followed through in their plan. The intent of this focus on action plans, is to try and encourage the girls to get into patterns of physical activity at Syl Apps that continue once they are released from secure custody. It is well known that participation in physical activity reduces the risk of antisocial behavior among adolescents (Williams, 1994). The movement skills assessment was reworked to include requirements that the girls learn some of the rules of the game and requirements to work with a partner (See Appendix N_2).

A teacher-assessed participation rubric was developed for the final course. The girls' assessment of their own level of participation is still an aspect of the course, but the focus of this self assessment will be on reflecting about their participation in class, and will not address any of the expectations for the course. The teacher-assessed participation rubric addresses the participation expectations of the course.

The Sister's Package saw the most significant changes (See Appendix K₃). The final version of the Package is much more structured than the original. It leads students stepby-step through the development of their projects (See Gathering Data, Appendix K₃). There is a much greater emphasis on the process of developing the Package. This is reflected on how the packages will be marked: 20% of the mark for the gathering data stage, 20% for the rough draft, 50% for the final draft, and 10% for the presentation of their packages. This emphasis on the process of the Package and the presentation of their work addresses the concerns about the lack of thoughtfulness that resulted from the original Package assignment. The format of the final Sister's Package is based on the suggestions of Linda Pogue (1999). She presented "Setting Criteria For Evaluation" at the 1999 Conference on *Communicating Student Learning*. She suggested a process that could be followed that would result in quality projects from the students. This process includes:

- Teacher activation of the affective domain through lesson discussions
- Brain storm with students about what aspects of the discussion they want to learn more about
- Students gather data about the information regarding aspects which interest them
- Student and teacher discuss gathered data and teacher helps them to start to focus their information
- Students complete a rough draft
- Student/teacher discuss the rough draft and then student creates final product
- Student/teacher discuss what mark the project would get at this stage and make suggestions for change
- Student makes final changes and hands in final product
- Student shares their project with rest of class (Pogue, 1999).

The Sister's Packages used in the first two trials had the girls researching information from books in the library. Many of the girls struggled with how to extract the needed information from the books. As a result, short, easy to read summaries of information were developed that the girls could use when working on the Sister's Packages. The girls will be expected to select pieces of information from several summaries when designing their Packages. The Package will also have to be written with a certain person in mind "What information about drugs do I want my sister/ nephew/ dad/ friend/etc. to know)." The information in the Package will have to be directed to that person. The girls only have to complete two Packages in order to receive their credit. The expectations that these two Packages address are:

- 1. Demonstrate understanding of how to use decision making and assertiveness skills effectively to promote healthy sexuality (e.g. healthy human relationships, avoiding unwanted pregnancies and STD's such as HIV/AIDS).
- 2. Demonstrate and use both decision making and assertion skills with respect to media influences and peer pressure related to alcohol, tobacco, and other drugs (See Appendix P).

Note that both expectations address the need to find out information about a topic as well as the need to use decision making skills about that topic. The final product that the girls hand in will also address the expectations of: showing 1) a knowledge of required facts and terms regarding healthy sexuality/drugs, 2) an understanding of the concepts and principles of decision making and assertiveness skills, 3) an understanding between the relationship between the decision making skills and the use of drugs/choices in sexuality, 4) a variety of forms of communication (See Final Product Rubric Appendix K₃).

The process of how the girls worked through the Sister's Package is also emphasized more in the final version. The girls will need to show: the formulation of a question, deciding who the audience and purpose of the product will be, planning on how to answer it, selecting information to answer it, analyzing and interpreting the information, and forming conclusions about the information, (See Process Rubric Appendix K₃). There is also an expectation that the girls present their work (See Presentation Rubric Appendix K₃).

Based on the 'Flexibility vs. Structure' category:

There is a decrease in the amount of choice given to the girls in the final course. There are still choices given, but they are provided in a much more structured manner. The structure that is enforced in the final course includes: regularly scheduled Fitness and Focus days in which one of those Fitness days examines the four fitness components, a Girls' Choice day every second Friday, class expectations developed together and

reviewed at the beginning of each month, fitness testing and follow up occurring every Wednesday, and every Thursday being a clinical class. It is only from within the comfort and safety of the structure that the girls are encouraged to take ownership of their learning.

From within these structures, the girls are provided choices. These choices include: Which sport they want to be assessed for their Movement Skills Assessment, the opportunity to lead part of a Girl's Choice day, the option of whether to wear track pants or shorts, and the option to miss part of one Fitness day a week. In the trial runs of the course, the girls were allowed to chose one Fitness day a week in which they did not participate in the activities. They were required to bring down work from their Sister' package and work on that. In the final course, this privilege will be reduced to only being allowed to sit out for half of a class instead of a whole class in order to ensure that the girls will be participating in at least two and a half days of physical activity during the week.

Based on the 'Outside Speakers/Role Model' category:

Arranging for outside visitors to present to the class is encouraged in the final course. The outside visitors should be role models; people who are close in age to the girls, have had similar experiences, and have a relaxed and friendly presentation style. These role models will present different ways of thinking, which hopefully, will

demonstrate to the girls that realities exist other than the ones the girls have created for themselves

Another advantage of the outside speakers will be to highlight services that the girls can access once they leave the secure setting. For example, they can learn about the rape crisis counseling offered by Halton Women's Place, or the anonymous HIV testing offered by Halton AIDS network.

A follow up to outside speakers will be the development of a discharge package. This package will focus on information the girls collect about service agencies in the area they will be living. The final course will see each girl receiving such a package upon discharge from Syl Apps.

Based on the 'Clinical Class/Locus of Control' category:

The focus of the clinical class is clearly described in the final course. It follows three basic suggestions given by Dr. Meen at the Syl Apps Symposium last year "Basic ingredients for the development of successful treatment interventions are, 1) providing a non-toxic environment in the setting, 2) recognizing that there is no such thing as the 'quick fix' for these young people and 3) recognize that immaturity is a precious part of the adolescent scene" (Meen, 1997). The clinical classes will be centered around setting up a safe place in which the girls feel free to discuss sensitive material without the fear of reproach. The classes will serve as a place in which the clinicians and the teacher can learn about what misconceptions the girls have about sexuality, drugs and what it means to be

responsible for one's actions. These misconceptions can then be addressed in the Focus days.

There should not be a set agenda for the clinical classes. There could be triggers for the conversation such as Tanya's Test of Temperament (See Appendix M), self portraits (See Appendix O), or the decision making sheets (See Appendix L), but free conversation should be allowed.

The clinical classes should be the primary time when abuse is discussed as it is such a sensitive area for most girls. The clinicians can follow up on these discussions through individual counseling at a later time. It must be recognized that discussion of sensitive topics can be a lengthy process because of the resistance that must be overcome first. The expectations about respectful behavior must be strictly adhered to so that the clinical class feels like a safe place. However, it must be remembered that "emotionally disturbed pupils behave in immature ways during periods of stress, They will lie, fight, run away, regress, and deny the most obvious realities. We can anticipate immature behavior from children in conflict" (Cullinan, Epstein, & Lloyd, 1983 p. 154). Therefore, there must be some allowances for the girls to remove themselves, act in an immature way, get it out of their system and then return.

The clinical classes should not have an educational focus in the sense that the girls are corrected when they express misconceptions. These misconceptions should be corrected during another Focus day. This 'non-preachy' approach can help to build relationships between the students and myself "Pupils learn through a process of

unconscious identification with significant adults in their lives. This means the teacher's personal appearance, attitudes, and behavior are important factors in teaching" (Cullinan, 1983, p.155).

The clinical class should also focus on teaching the girls what 'therapy' is and where they can access psychological help once they are out of this secure setting. This information should be included in their discharge package.

A major change in the clinical classes for the final course is the discussion of action plans. This would involve starting a conversation off with "What would you do if your friend got raped?". Different scenarios would then be discussed. Knowledge that is noted to be lacking in the discussion of these scenarios would then be followed up on in the next Focus day.

Based on the 'Working with Others' category:

The final course focuses on how to work with others in the building who are connected to the girls. Initially, I worried about duplicating what was happening in other programs in the building. This has now changed. The final course encourages a common theme across the building - the focus of locus of control. The same message should be emphasized in cottage group, therapeutic recreation, and all other activities in the building so there are the same behavior expectations and similar discussions. The final course suggests that other vocational schools should be contacted to try and arrange for intramural team competition. If 5 or 6 girls from another school came to Syl Apps, the girls could practice their new found skills in a real life situation.

Summary

The final course was developed based on the modifications discussed above. The Appendices have samples of the key aspects of the final course. The next chapter summarizes the learning from this action research project.

Chapter 7

SUMMARY

In this project, I used action research as a tool to improve the girls' physical education course at Syl Apps. The issue that prompted the project was the struggle that we were having in trying to deliver the standard physical education course. The purpose of the project was to develop a course that would fulfill the requirements for a highschool credit, yet meet the needs of the girls at Syl Apps.

Through the two cycles of action research that were completed in this project, it became apparent that the needs of the girls were: 1) a course that would set strict boundaries but be flexible enough so that they could take ownership of their learning; 2) a course that would be predictable; 3) a course that would break down fitness tasks into small, non-intimidating activities so they could experience success no matter what their skill level; 4) assignments that led them through a project step-by-step but was designed so that the girls could decide what information was important to include; and 5) a safe, nonjudgmental forum in which to discuss sensitive issues.

Literature searches were completed on assessment and evaluation, motivation and engagement in learning, teaching sensitive topics, learning disabilities, fitness testing, and the issue of teacher as therapist. Through the knowledge gained from the data analysis in the action research and the literature searches completed, a girls' physical education course was designed. Action research was chosen as the instrument for this project because "Action research is based on the theory of reflective rationality and sees the construction of research knowledge as integral with the development of action" (Altrichter, 1995, p.207). Altrichter (1995), described reflective rationality as having three assumptions: "1) that complex problems demand specific solutions, 2) that these solutions can only be developed inside the context in which the problem arises and in which the practitioner is a crucial and determining element, and 3) the solutions cannot be successfully applied to other contexts but they can be made accessible to other practitioners as hypothesis to be tested" (Altrichter et al, 1995, p. 207). The girls' physical education course at Syl Apps fulfills all the assumptions of reflective rationality: it is a complex problem that demanded specific solutions, these solutions were developed within the context in which the problem arouse, the practitioner (myself) was a crucial and determining element, and the solution, (the course) cannot be directly applied in other environments, but can be used as a basis for thought.

It is hoped that other physical education teachers can take some suggestions from this course that was developed, but its primary audience is the girls at Syl Apps.

Limitations of the Study

There was a constant flux of girls in and out of the course as the trials went on. As a result, it was impossible to perform statistically relevant tests to determine if the girls' fitness levels or knowledge about drugs and sexuality improved over the duration of the

course. Additionally, the girls that were in the class had sporadic attendance due to appearances at court, being kept back from school on behaviour programs, and medical appointments, so there was variability in each girl's experience of the course. I had considered asking the administration to schedule the course so that there was a set number of girls who would be in the class the entire duration of the trial. This would have enabled me to get statistical evidence regarding the girls' change of knowledge, but it would not reflect reality. This course has to be successful in a real classroom, and a real classroom within a secure facility will see a great flux of girls throughout a semester.

I struggled with which data collection methods to use throughout the study. The secure setting of Syl Apps placed many constraints on which data collection methods were accessible to me (due to confidentiality issues around the Young Offenders Act). I worry that the girls' voice in the data collection was not as strong as my own. The girls generally do not articulate themselves well, so although their perspective was given throughout the interviews, I don't think it came through as strongly as I would have liked. A lot of insight into the girls was gained through notes I made in my research diary and through direct observation, but both of those had to go through the filter of my bias. The conversations that occurred in the clinical class and the work that the girls completed also gave insight into what the girls thought.

Directions for Future Research

There needs to be more investigation regarding the best way to integrate clinical sessions within a classroom. Having the clinical classes as part of this course has strengthened the course's ability to help the girls internalize the information, but I think there is more potential than we have used to date. I also think there is the potential in adapting the clinical class into a regular classroom. The teacher could set one day a week aside and allow for free discussion times about sensitive topics, however, this would require careful planning before implementation.

There should be a centre-wide evaluation of the educational programs at Syl Apps. I think this would best be done using Utilization Focused Evaluation (Patton, 1997). Utilization Focused Evaluation is similar to action research in that it has the practitioners in the field as active participants in the evaluation. "Utilization Focused Evaluation begins with the premise that evaluations should be judged by their utility and actual use; therefore,...the focus in utilization-focus evaluation is on intended use by intended users" (Patton, 1997 p. 20).

Conclusion

Even with these limitations, I think that my action research project was successful in fulfilling the criteria for a quality action research project. Altrichter et al (1995) defines these as being:

- To develop and improve practice through research in the interests of all those concerned.
- To develop the knowledge and practical understanding of those involved in the research process.
- To develop the professional knowledge of teachers as a whole
- To develop and improve education as a discipline. (Altrichter et al 1995, p.74)

I think action research should be encouraged in schools. When the practitioner is actively engaged in the change process, there will be a much greater buy in, than if the change is imposed. "Reflective rationality depends on the development of a more dynamic learning culture, based upon the understanding that local initiatives exist already, and that their growth process should be supported rather than being ruptured and thwarted by imposed change. If specific innovations are forced upon schools, this tends to reduce their coping power and problem-solving capacity and to increase their dependence - because their existing potential for innovation is not encouraged but ignored and thus, in the long run, damaged" (Altrichter, 1995, p.203). In this instance, action research resulted in suggestions for change that should lead to a more successfully running girls' physical education course at Syl Apps School.

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Appendix A: Introduction to Girls Healthy Active Living

Welcome!

We will spend the next few months focusing on many aspects of what it means to live a healthy active life. We will spend roughly 2 days a week in the classroom and 3 days a week doing fitness activities. (See calendar attached).

[Clin 1 and Clin 2] will be joining us for some of these sessions.

At the end of the course, you will have learned about problem solving and decisionmaking skills, conflict resolution, social skills, drugs, personal safety, nutrition, healthy sexuality, as well as about various fitness activities. As the course progresses, you will be required to demonstrate this knowledge by putting together a package of information about these topics that you could use to share with others.

We will also be keeping track of how your fitness level has progress due to the physical activity we engage in the course. There are 4 components of fitness: cardiovascular, muscular strength, muscular endurance, and flexibility. We will be doing activities that will help us to improve in all these areas.

We will also be focusing on our social skills. We will be examining our actions towards others at the end of each class and reflecting on these actions at the end of each week.

We will be developing a set of class rules together on the first day of school. There are some expectations that I have for the class that will be included in these rules. These expectations are:

- That we treat each other with respect
- What is discussed inside our health classes is kept inside the class. It is not discussed in the cottages or in other classes.
- If a health day topic is not completed on the day assigned, we will cut into our physical activity day following to finish the health day work.
- Uniform policy

Note about confidentiality: If there is a disclosure about sexual abuse/child abuse during our discussions, I am required by law to report this.
During the course I will be interviewing you on your opinions about how the course is going. The purpose of the interview is to gain information about how I can change this course to make it as beneficial as possible for the people participating in it. You will also be asked to take a short quiz at the beginning and end of the course so I can see how your sense of yourself has changed over the course. I will be keeping a diary every day in which I will record some of your comments and actions throughout the class. The information I get from the interview diary and quiz will be used as part of my Masters project. I will not be including any names with the data. I may also be including some of the samples of your work into my project.

To show that you understand my expectations for the course and how I will use the information gained from the interviews, diaries and quizzes, please date and sign below:

Date: _____

Signed:

Appendix B: Interview Questions Used

Interview Schedule	
Interview date:	
Person being interviewed:	
Dates they have been in class:	

Setting up the situation

I would like to discuss with you your opinions about the HAL course so far. I am constantly trying to improve the course so it can be as beneficial as possible for the girls taking it. Your thoughts about what you liked and disliked will help me to do this. OK?

- 1. What have you liked about the focus day classes we have had together? Is there bits of information or feelings that you have had during these classes that have surprised you or stuck in your head?
- 2. Have you heard or discussed any of this information in other groups within Syl Apps?
- 3. What of this information have you heard to death before coming here?
- 4. What information was totally new?
- 5. What information made you uncomfortable to talk about?

- 12. What structures in the class do you think help to encourage participation in class and reduce the amount of disrespectful behaviour towards others in the class
 - designing of rules at beginning of class
 - design of self assessment rubric
 - doing the self assessment at the end of each class
 - journal at end of week
 - ownership of some of what goes on in class
- 13. What other suggestions do you have about how the ownership of the class can be put more on the students and away from the teacher?
- 14. Do you have any other general comments about the class and how it is run?

Thanks for your time.

Appendix C: Sample of Direct Observation

Present in room:	5 girls present, Girl 1, Girl 2, Girl 3, Girl 4, Girl 5
	1 teacher, (me)
	Small room (one half size of classroom)
	2 round tables

Setting:

- Girl 11 and Girl 12 sitting on top of table
- Girl 10 sitting quietly in chair on another table. Girl 9 sitting at same table as Girl 10 but one seat away
- Girl 13 sitting on the floor looking out the door.
- Girl 11 had gotten into a fistfight the week before with Girl 8 in the class who was not present in class today. Girl 12 is supposed to be released in 1 week. Girl 10 has court tomorrow. Girl 13 is from the treatment cottage.

.....

Start of class:

Tanya:	Today is our focus day. We have been looking at issues of sexuality and relationships. These are topics that we will return to, but I would like to take a small break from them today. I am starting to plan our focus days for the next couple of months and I am interested in the kinds of topics you would like to talk about. Please feel free to give any suggestions no matter how far fetched you might think they sound. Remember that we are to treat our classmates with the respect you yourself would like to be treated so when people are giving suggestions, allow them the freedom to do so without being taunted. I will write your suggestions down and do what I can to incorporate them into our focus days.
Girl 13:	(still looking out the window into the hall) shouts out in bullet like fashion; weightlifting, basketball, 21, actual game, volleyball, soccer, drug thing, personal journal, rollerblading
Girl 11:	(stands up on table) don't be an idiot, I'm not writing anything. Soccer man!
Girl 13:	(looking at Girl 11 but not acknowledging her presence) Girls group stuff, you know, nails and stuff. (Walking towards me) I want to be an OPP officer you know here is the pamphlet of what it is like, can you keep this pamphlet for me so I don't lose it?

- Girl 11: nails would be cool.
- Girl 12: my mother had fake nails
- Girl 9: shut up **** you have no mother
- Girl 12: it's not my fault she abandoned me as a child. Taaaaaaanya! they are picking on me again! (head in knees and cries)
- Tanya: Ladies remember we need to be respectful of one another. Let's focus back on the focus days. Remember that we are only taking about every Thursday, the days we are not in the gym or in the weight room, I want to know what topics you are interested in discussing and learning about in these classroom sessions.
- Girl 10: (reading a magazine)
- Tanya: Girl 10, do you have any thoughts on possible focus day topics?
- Girl 10: (looks up at me, then back down towards magazine).
- Girl 11: I can't believe I got SOP [serious occurrence program where they are kept in cottage and not allowed to attend any recreation programs for a 24 hour period] just for fighting this **#* chick.
- Tanya: Girl 11 why don't you take a 5 minute time out and reflect on what it means to treat others with respect because you are not doing it now.
- Girl 11: (bounces out of room towards the time out room)
- Girl 9: Girl 13, in treatment how much allowance do you get for buying supplies to do your nails?
- Girl 12: The SOP program does suck. I was in isolation last night for nothing, it was just because of the staff that were on.
- Girl 9: you screamed all-night and kept us up!
- Girl 13: treatment program is great, we don't have SOP or anything, when you get into fights or you scream, they just give you time in your room. Treatment is great.

Girl 11:	(returns from time out room) So if I get myself into treatment, I can have money to buy stuff for my nails? How do you get into treatment?
Tanya:	I am glad to see you are taking interest in the workings of the building Girl 11 but we are getting off topic. Let's talk specifically about issues surrounding sexuality. What exact questions and with what sensitivity do you girls think sex should be addressed in focus days?
Girl 9:	Girl 13 get off the floor you ** # * #* you are driving me nuts, you are talking too much!
Tanya:	Girl 9 take 5 minutes.
Girl 11:	I like her idea about rollerblading
Girl 12:	How do I lose weight? Do you like my hair? Staff says I look like Shirley Temple
Girl 13:	(two inches from my face standing up) Ways to get fit, food supplements, drug abusecan you take us to tuck? Maybe we could go to tuck every focus day, it could be like a reward or something!
Girl 11:	I want to be able to defend myself
Girl 13:	yeah but if you have a criminal record and you hurt someone defending yourself, the cops won't believe you.
Tanya:	What about sexuality issues?
Girl 13:	Like rape.
Girl 11:	you have a ****#### cute nose Girl 12
Tanya:	Girl 11, what do you think about the sensitivity issue?
Girl 11:	Tanya, can we try kickboxing? We could start by learning how to skip.

Girl 13:	I think you are right Tanya.
Girl 9:	**##* they would never let us box in here you **##*
Tanya:	it is something I will look into, maybe if we just studied the footwork and the upper body strength components, and not the punching part.
Girl 9:	yeah, then I could protect myself if I was raped or something.
Tanya:	What reasons do you think we have a separate physical education class just for girls and we don't mix with the boys?
Girl 11:	Duhh. Self defense so I can't get raped. I guess I can't carry a weapon because it would just get turned back on me.
Tanya:	Let's try a different tactic. I am handing out a piece of paper and a pencil to each of you. You don't need to write your name on it, just write down the kinds of topics you would like to see discussed in our focus days. Once I have a statement from everybody, we can head to the gym and shoot some baskets for a couple of minutes.

Monday	Tues.	Wednesday	Thursday	Friday
SEPTEMBER 1998	 8th FOCUS 1 Outline of course Expectations Booklets/Calendars/assignm ents start to develop rubric Crabwell and Gromet Self assessment 	 9th FOCUS 1 finish developing rubric development of class rules run through the booklets self assessment 	 10th FOCUS 1 IDEAL what is it? IDEAL example IDEAL go through own examples self assessment 	 11th FITNESS introduction to weight room how to stretch fitness log experimentation time self assessment journal
 14th FOCUS 1/FITNESS focus day pretest weight room discovery look through SHAPE self assessment 	 15th FITNESS Weightroom: stretch cardio leg/shoulder/arm self assessment 	 16th FOCUS 2 Steve and Hilary introduction questionnaire discussion re questionnaire and decision making self assessment 	 17th FITNESS Weightroom: stretch cardio chest/back/abs self assessment 	 18th FITNESS Introduction to Weightroom Assessment 4 components of fitness intro. assessment activities self assessment journal time
 21st FITNESS weightroom assessment continued fitness assessment worksheets self assessment 	 22nd FOCUS LIBRARY Drug Awareness pre test spin the bottle What does your sister need to know? Individual risk survey self assessment 	23rd FITNESS OUTSIDE? • Soccer • warm-up • drills • scrimmage • decide on drug awareness topics • self assessment	 24th FOCUS 4a Steve and Hilary Drug Awareness factors that influence abuse refusal skills assertiveness self assessment 	 25th FOCUS 4b Steve and Hilary Drug Awareness continued drug awareness self assessment journal time
 28th FOCUS FITNESS OUTSIDE? LIBRARY time to work on drug package outside for soccer drills and scrimmage self assessment 	 29th FITNESS Weightroom Hub and Spoke self assessment 	 30th FOCUS 5 Drug Awareness continued drinking alternatives Erin and Alex scenario IDEAL situations Frank's story self assessment 		

Monday	Tuesday	Wednesday	Thursday	Friday
October 1998			1st FOCUS/FITNESS Drug awareness cont'd discuss IDEAL homework finish FRANK'S story DRUG PACKAGE DUE introduction to rhythmic gymnastics self assessment	2nd FITNESS Drug package 1 day late rhythmic gymnastics self assessment journal time
Sth FITNESS Drug awareness package 2 days late Weightroom: • legs, arms shoulders • log exercises • self assessment	6th FOCUS Steve and Hilary Drug awareness over 2 days late • conflict resolution • self assessment	 7th FOCUS Steve and Hilary conflict resolution continued. self assessment 	8th FITNESS Weightroom • warm-up • stretch • chest, back, abs • log exercises • self assessment	9th FOCUS conflict resolution • communication • how do we listen? • non verbal • self assessment • journal time
12th THANKSGIVING	 13th FITNESS Weightroom Fitness assessment Personal fitness goal setting final assessment self assessment 	14th FOCUS Steve and Hilary • Personal Safety • self assessment	 15th FOCUS Steve and Hilary Personal safety cont'd self assessment 	16th FITNESS Basketball skills scrimmage self assessment journal
19th FOCUS LIBRARY? Personal Safety preventing violence fact sheet about date violence time to work on sister's assignment possible outside speaker	 20th FITNESS/FOCUS LIBRARY time to work on personal safety package basketball skills, scrimmage self assessment 	 21st FITNESS Aerobics possible guest instructor introductory principles self assessment 	22nd FOCUS LIBRARY Sexuality choose 2 topics to do for sex package go through handouts self assessment	23rd FOCUS LIBRARY Sexuality cont'd • work on sex packages • self assessment • journal
26th FITNESS Aerobics self assessment	27th FITNESS Weightroom Hub and Spoke Iog into workbook self assessment	 28th FOCUS Teenage Pregnancy Ontario teen pregnancy scene Are you ready to be a parent? What's in it for me 	29 FITNESS Badminton self assessment	30 FITNESS basketball self assessment journal

Appendix E: Class Expectations

<u>Class Expectations</u> <u>Sept 9th, 1998</u> Written by the girls in Tanya's Healthy Active Living Class

1. When one person talks, everybody listens.

Consequences if this expectation is not met:

- ask the person to be quiet
- ask them again
- have them move to an individual desk to work on their own
- time out room
- 2. Respect other people's thoughts, do not degrade someone else

Consequence if this expectation is not met:

- discuss why the person is laughing or being disrespectful
- discussion with prime teacher about how to be respectful of others
- removal from class for a day
- 3. Discussions are confidential, they are not to be talked about outside this classroom. (Exception to this is a disclosure of abuse).

Consequence if this expectation is not met:

- ask them to stop
- have them write a letter of apology and have them discuss with their prime teacher about confidentiality
- 4. Working with people we find hard to work with.

Ways to do this:

- ask the teacher to work with someone else or by ourselves
- make an extra effort to allow that person to speak and respect what they say

Appendix F: Self-Assessment Rubric

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(Written by the Girls in Trial one, Sept, 1998)

	Level 1	Level 2	Level 3	Level 4
Attitude	Negative attitude shown	Avoided negative comments	I made an effort to participate positively	I cooperated and showed respect for peers and staff
Interest	I spaced out	I never had a useful comment	I was enthusiastic but it could have been better	I worked hard and it showed
Group Interaction	I was rude to peers	All through class I ignored everybody	I was sarcastic with staff and peer but not causing serious problems	Everybody loved me today
Participation	I did what I wanted and when people had something to say, I got irritated. People also got irritated	People had to direct me what to do	I did well but often needed to be encouraged	I was very enthusiastic and encouraged my peers. I did what I was supposed to do

Appendix G: Weekly Journal Entry

Journal

Based on my weekly chart of progress, the areas I did well this week were:

The areas that I need to work on are:

A specific example of how I can work on this is:

Additional thoughts about the week:

Appendix H1: Fitness Assessment Trial 1 and 2

Fitness Assessment

The purpose of doing a fitness assessment is to give us an idea of what areas we are strong in and what areas we need to work on. Then we can design a fitness program that addresses the weak areas so that next time we do a fitness assessment we will see improvements

We are going to assess the four components of fitness: flexibility, muscular strength, muscular endurance and cardiovascular efficiency (fitness of your heart, lungs, blood and blood vessels)

Cardiovascular fitness

Cardiovascular fitness helps you to increase your energy level, letting you be active for longer periods of time without tiring or getting out of breath. Cardiovascular fitness also helps you to look good because it helps you to control your weight and develop a good physique or figure.

Cardiovascular fitness can be improved by following FIT:

- F frequency: exercise at least 3 days a week
- I intensity: raise your heart rate to your target heart rate zone
- T time: keep your heart rate in target zone for at least 15 minutes

Muscular Endurance

Muscular endurance is the ability of the muscles to work for long periods of time without getting tired. People with good muscular endurance find it easier to maintain a good posture and are less apt to have backaches, muscle soreness, and injuries

Improving muscular endurance

- F exercise at least 3 days a week
- I for low intensity, lift your own body parts such as your arms, for higher intensity, Lift between 20-70% of the maximum weight you can lift for that particular Exerciseⁱ
- T complete at least 9 repetitions. Increase repetitions gradually up to 25. Begin with One set, work up to three sets for advanced muscular endurance

Muscular strength

Muscular strength is the amount of force a muscle can exert. Strength allows the muscles to lift where endurance allows the muscles to lift for longer periods of time. Muscular strength can help prevent some health problems such as preventing backache.

Improving muscular strength:

- F at least 3 days a week. Do not do 2 days in a row as the muscles need to rest.
- I gradually increase the load for each set, you should still be able to complete 12 reps for the last set. If you cannot, the load is too heavy
- T begin with 2 sets of 12 repetitions, work up to 3 sets of 15 reps. Rest 1 minute between sets.

Flexibility

Flexibility is the ability to move your joints through a full range of motion. Good flexibility helps you to perform tasks more easily than does poor flexibility. It also reduces your risk of soreness or muscle injury.

Improving flexibility

- F stretch each muscle group daily if possible. Stretch after warming up before a workout as well as after the workout
- I The muscle must be stretched beyond its normal length.
- T Hold each stretch for 10 to 30 seconds. Do not bounce when you stretch.

Once the fitness assessment has been finished. Take time to complete the personal fitness goal setting, how are you reaching your goals, and personal action plan calendar sheets that you will find in your package. These will help to give some direction as to how to start to improve in the areas of fitness that you would like to work on.

Fitness Assessment Worksheet

Name:

Componen t	Ро	ssible Tests	Level 1	Level 2	Level 3	Level 4	Date	Date	Date
Flexibility	٠	Sit and Reach	up to 30 cm	30-40 cm	45-60 cm	> 60 cm			
Muscular Strength	•	Standing Broad Jump	up to 165 cm	165-175 cm	175-188 cm	> 188 cm			
	•	Strength Index	up to 0.3	.36	.68	>.8			
	•	Push ups	up to 3	3-15	15-20	>20			
Muscular Endurance	•	Curl Ups	up to 20	20-30	30-50	>50			
	•	90 deg wall sit	up to 1 min	1-1:30	1:30-2:00	>2 min			
	•	Chin ups	up to 6	6-8	8-10	>10			
Cardiovas cular	•	Step test	up to 60 fitness points	60-70 fitness points	70-80 fitness points	> 80 fitness points			
	•	Sustained vigorous activity	up to 8 min	8-12 min	12-15 min	>15 min			

Appendix H₂: Final Fitness Profile

<u>Fitness Profile</u> Syl Apps Healthy Active Living <u>1999/2000</u>

30% of your grade for this course will be determined by your FITNESS PROFILE

The Fitness profile should be composed of: Fitness Assessment Worksheet with 3 dates of fitness assessment: beginning of semester mid semester end of semester
Discuss rubric with teacher that will be used to assess fitness profile date:
Personal Fitness Inventory date completed:
Personal Fitness Goal Setting completed after the beginning of semester assessment date completed:
Personal Action Plan Calendar that incorporates all components of fitness date completed:
Log (Fitness in Action) dates completed:
Action Plan Journal date completed:
Self Assessment of Fitness Action Plan date completed:
Discuss Action Plan with teacher date completed:

Review rubric with teacher and discuss what mark the fitness profile would get if handed in at this point date:

Physical fitness summary of assessment date completed:

Personal fitness goal setting final assessment date completed:

discussed fitness goal setting final assessment with teacher date completed:

Reviewed rubric with teacher and discuss the final level for the fitness profile date:

Fitness Assessment Worksheet

Name:

Component	Pos	sible Tests	Level 1	Level 1b	Level 2	Level 2b	Level 3	Level 4	Date	Date	Date
Flexibility	•	Sit and Reach	up to 20 cm	20-30 cm	30-35 cm	35-45 cm	45-60 cm	> 60 cm			
Muscular Strength	•	Standing Broad Jump	up to 155 cm	155-165 cm	165-170 cm	170-175 cm	175-188 cm	> 188 cm			
			up to .2	.23	.35	.56	.68	>.8			1
	•	Strength Index	up to 3	3-5	5-10	10-15	15-20	>20			
		Push ups	up 10 5				15 20	- 20			
Muscular Endurance	•	Curl Ups	up to 10	10-15	15-20	20-30	30-50	>50			
	•	90 deg wall sit	up to 30 sec	30 sec- 1 min	1-1:15	1:15 - 1:30	1:30-2:00	>2 min			
	•	Chin ups	up to 3	3-5	5-6	6-7	8-10	>10			
Cardiovascular	•	Step test	up to 50 fitness points	50 60 fitness points	60-65 fitness points	65-7 fitness points	70-80 fitness points	> 80 fitness points			
				5-8 min	8-10 min	10-12 min	12-15 min	>15 min	1		
	•	Sustaine d vigorous	up to 5 min								
	I	activity							1		

.

•

PERSONAL FITNESS GOAL SETTING

For each component of fitness decided whether or not your results were in a healthy range for your age and gender. If not, your goal statement should reflect what you are going to do to improve that component and also should be one that can be measured. If you are within the healthy range, your goal statement should reflect how you are going to maintain that level. Goals should be realistic and very specific- for you.

FLEXIBILITY Goal:

Actions:

.....

MUSCULAR STRENGTH Goal:

.....

Actions:

.....

MUSCULAR ENDURANCE Goal:

.....

Actions:

CARDIO RESPIRATORY EFFICENCY

Goal:

.....

Actions:

.....

OTHER

Goal:

Actions:

.....

.....

PERSONAL FITNESS GETTING STARTED DATE:

Complete the following questions:

- 1. To me, Fitness means...
- 2. Physical activity and Fitness are important to me because
- 3. Other than physical education class, I am active in the following activities (and how often)
- 4. In the past, physical activities I have enjoyed are..
- 5. In the past, physical activities I did not enjoy are...
- 6. Compared to when I was younger, I now participate in [more] or [less] or [about the same] amount of physical activity.
- 7. Challenges or reasons why I have changed my participation in physical activity now are..
- 8. How do you think these changes could be overcome?

PERSONAL ACTION PLAN CALENDAR THIS FAR YOU HAVE BEEN:

- Tested on different components of fitness
- Assessed your level of fitness
- Set goals to either maintain or improve your fitness level

Use this calendar to plan activities that will help you attain each of your fitness goals. Each activity must be specific (i.e. include numbers, distances, specific exercises, etc.).

Sunday	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday
	1					
					1	

FITNESS IN ACTION

Date	Physical Activity what, how long, intensity (HR)	Component of Fitness	Response (record your thoughts and feelings after each physical session)

ACTION PLAN JOURNAL

Each student is expected to keep a daily journal. The daily journal will include:

- If the activities planned were completed
- Reasons why planned activities were not completed
- Any added activities that were not planned

At the completion of the action plan, students are to answer the following questions.

- 1. Do you consider yourself to be an active person? Explain.
- 2. Show how your action plan included all components of fitness
- 3. What are some personal reasons why you did not follow your action plan?
- 4. What are some solutions to becoming a more active person?
- 5. What aspects about yourself did you learn setting and following this action plan?

PHYSCIAL FITNESS SELF ASSESSEMENT "HOW AM I DOING?"

Physical Fitness:

Does your Fitness Action Plan include:

- Activity every day?
- A wide variety of activities?
- Activities that enhance your cardiorespiratory fitness?

Not yet	Some of the time	Most of the time	Always and in
			new ways

Cardiorespiratory Fitness:

Are you able to participate in vigorous physical activity (e.g. skipping, run/walk, games, power walk, and sports) while maintaining your target heart rate?

□ Up to 8 minutes	□ From 8 to 10	□ From 10 to 15	Beyond 15
	minutes	minutes	minutes

Flexibility

Do you participate safely in warm up and cool down stretching of large muscle groups?

Rarely Sometimes Most of the time Always	
--	--

PHYSICAL FITNESS SUMMARY OF ASSESSMENT

DATE:

- 1. Did you achieve your goals?
- 2. Why do you feel that you did/did not achieve your goals?
- 3. How do you feel about achieving/not achieving your goals?
- 4. What have you learned about physical fitness?
- 5. What have you learned about setting goals?

PERSONAL FITNESS GOAL SETTING FINAL ASSESSMENT

1. List what goals you achieved

2. Why do you feel you achieved these goals?

3. List what goals you did not achieve

4. Why do you feel you did not achieve these goals?

5. What have you learned to be important while setting goals?

.

CATEGORIES	LEVEL 1	LEVEL 3	LEVEL 3	LEVEL 4
Expectation/	With assistance	recalls the	Connects the	Connects the
Expectation/ Knowledge of Motivating Factors	recalls the motivating factors of physical activity	notivating factors of physical activity	connects the motivating factors of daily physical activity to his/her action plan	motivating factors of daily physical activity to assist others with their action plan
Monitoring	Completes all	Completes all	Completes all	Completes all
	components of their	components of their	components of their	components of their
	fitness log 1x/wk	fitness log 2x/wk	fitness log 3x/wk	fitness log 4-5x/wk
Effort demonstrated	Occasionally works	Works hard with	Consistently	Consistently strives
During Fitness	hard (e.g. goes	encouragement	demonstrates a	for personal best
Activity	through the motions)	_	determined effort	
		Sometimes		Encourages others to
	Be easily distracted	distracted from task	Stays on task	stay on task
	from task and often	and sometimes		
Knowledge of	distract others Demonstrates	distracts others Demonstrates some	Demonstrates	Demonstrates
Fitness Components	limited knowledge of	knowledge of each	considerable	thorough knowledge
r mess components	each health related	health related fitness	knowledge of each	of each health
	fitness component	component and its	health related fitness	related fitness
	and its relationship	relationship to active	component and its	component and its
	to active living	living	relationship to active	relationship to active
			living	living
	Demonstrates limited knowledge of career opportunities related to sport and recreation	Demonstrates some knowledge of career opportunities related to sport and recreation	Demonstrates considerable knowledge of career opportunities related to sport and recreation	Demonstrates thorough knowledge of career opportunities related to sport and recreation
Goal Setting	Demonstrates	Demonstrates some	Demonstrates	Demonstrates
	limited evidence that he/she can set.	evidence that he/she can set, modify and	considerable evidence that he/she	thorough evidence that he/she can set,
	modify and achieve	achieve fitness goals	can set, modify and	modify and achieve
	fitness goals	achieve nuless goals	achieve fitness goals	fitness goals
Safe Use of	Uses procedures,	Used procedures,	Used procedures,	Demonstrates and
Procedures,	equipment and	equipment and	equipment and	promotes the safe
Equipment and	facilities safely and	facilities safely and	facilities safely and	and correct use of
Facilities	correctly only with	correctly with some	correctly	procedures,
	supervision	supervision		equipment, and
			Uses proper exercise technique	facilities
			Participates in warm	
			up and cool down	
			activities	
			Proper usage of	
			fitness equipment	
CODIED WAT	TIDEDMESTON	OF THE HALTON		COL DOADD

FITNESS PROFILE RUBRIC

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Appendix I: Weightroom Tracking Sheet

Strength Training Record Form

Name: _____

Cardio

Date								
	Time/Heart							
	Rate							
Cycle								
Jump Rope								
Step								

Legs

Date						1	1		
	S/R/R								
Leg extension									
Leg press									
Leg lifts-back (ham)									
Leg lifts- side (add/ab)									
Heel raise (calf)									
				1					

Abdominal

_ . _ . _ . . . _

Date							1		
	Number								
Upper								[1
Lower								T	
Oblique								[
								1	

Arms

111115									
Date									
	S/R/R/								
Biceps seated									1
Biceps Standing									1
Biceps with Rope						1			1
Triceps kickback								1	
Triceps		T				T			
Extension									

Chest

_

Date									
	S/R/R/								
Pushup									
Bench Press									
Peck Deck									

.

Shoulder

Date									
	S/R/R/								
Press up									
Anterior									
Posterior									
Medial									
<u></u>									

Back

Date									
	S/R/R/								
Lat pull down to front									
Seated Row									

Appendix J: Focus Day Pretest

Focus Day Pretest

Note: the purpose of this test is to see how much you learn over the next couple of months. We will be taking this same test in November and then looking back to see how our answers compare with the answers we wrote at the beginning of the course.

So please do not be intimidated, don't be afraid to write down answers you are not sure about.

Name:	
Date:	

Decision-making

1. You need to make a decision about whether or not to start to smoke. Describe the process you would go through to try and make the decision (who would you talk to, what are some of the pros and cons?). Please try and write at least 10 points.

- 2. a) What do you think is in tobacco smoke? (try to list 3 things)
 - b) What diseases does cigarette smoking cause? (Try to name 2)
- 3. What are the four components of fitness?

4. Describe some exercises you could do that you think would help to strengthen your legs. (try to describe 3 different exercises)

Chose 1 of the following questions. Include at least 5 points in your answer.

- I. What are some changes that happen to your body during puberty?
- II. Describe a woman's menstrual cycle. When in that cycle is she most likely to get pregnant:
- III. How is AIDS transmitted from one person to another?
- IV. Draw a picture of female reproductive organs. Name the parts and list their function.

Appendix K₁: Sisters Package Trial 1

Healthy Active Living What would you like your sister to know?

By the end of this course, you will have become an expert on all sorts of topics that can help you to make informed decisions about how you treat your body. We will have learned about drugs, sexual health, conflict resolution, personal safety, and nutrition, fitness programs and problem solving and decision making.

You are to design a package of information that you think would be most helpful for someone close to you that is trying to make a decision regarding how to live a healthy life. This person could be a sister, mother, or a close friend, someone that you care about.

Feel free to design this package in whatever format you would like. It could take the form of paragraphs, pictures, comic strips, videotaped interviews, audiotaped songs, a play, a reflective journal or any combination of the above.

The package must include information from all the following areas:

Problem solving and decision making

- Decision making process (IDEAL). A description of what it is and examples of how it can be used.
- Apply IDEAL to specific situations regarding substance use/abuse, healthy sexuality, nutrition, mental and emotional health, safety, and fitness.

Conflict resolution

- Identify recent changes in a relationship and possible reasons for these.
- Identify and assess strengths and weakness in a variety of situations.
- Apply the steps of conflict resolution (compromising, accommodating, avoiding, collaborating) to situations you encounter in school, with friends, in the cottage
- Discuss anger management techniques.

Social Skills

- Inclusion of your weekly journals based on your social interaction that week
- Explain why working together cooperatively is important using examples from history, from real life and current events.
- Articulate the benefits of working together (e.g. enhanced creativity, improved quality of product, increased understanding, improved peer relations, etc.).

Drugs

- Compare the proper and improper use of medicines and other substances
- Explain the reasons for laws governing the use of substances
- Research on the social influences and pressures that promote substance use and abuse (basic needs, self esteem/body image, personal values and attitudes, positive/negative role models, media influences including advertising, peer influence (positive/negative), alternatives to drug use.
- Evaluate refusal skills to deal with peer pressure pertaining to substance use and abuse situations (walk away, give an excuse, say no, say no repeatedly, change subject, reverse the pressure)
- Explain different symptoms of stress and positive ways to relieve stress
- Analyze protective factors that lead to a drug free lifestyle.
- Describe the effects of the following types of drugs: street drugs (choose 2 only), alcohol, tobacco and steroids. Discuss Fetal Alcohol Syndrome as one of the effects
- Identify support groups and help agencies.

Nutrition

- Analyze the factors which have the greatest influence on body weight (body type, metabolic rate, diet, exercise, emotions, heredity)
- Discuss the effects of eating disorders on the body
- Analyze all food eaten and activity levels for a week
- Analyze the benefits of healthy eating and habits for active living
- Analyze the impact of body image on self esteem
- Evaluate the influences on perceived ideal body image for males and females
- Analyze means of counteracting societal pressures leading to eating disorders.
- Using the Canadian Food Guide, design a healthy eating plan for yourself for a week. You must give justification for your choices.

Personal Safety

- Identify and give multiple examples of categories of serious violent incidents that must be reported to the police
- Analyze the impact of violence in the media and propose strategies to counteract the impact.
- Explain procedures to receive emergency help and explain the difference between emergency and non-emergency situations.
- Explain the role of people in the community who provide safety services.
- Explain support services for victims of violence
- Discuss mediation and negotiation as appropriate strategies to prevent violence
- Propose strategies that would enable peers to recognize the value of schools and communities that are safe and violence free
- Discuss the importance of diversity of people and differing points of view in society.

- Identify sexual assault and harassment and their legal implications
- Analyze situations that are potentially dangerous to personal safety e.g. date rape, acquaintance rape, hitchhiking, drug/alcohol abuse

Healthy Sexuality

- Explain the body's defense against disease and a healthy immune system
- Analyze methods that prevent the spread of communicable diseases
- Apply knowledge of symptoms, transmission and treatment of STD's in case studies including HIV and AIDS
- Relate physical, social and emotional changes in both the male and female that are associated with puberty
- Apply knowledge of the reproductive cycle to fertility and health.
- Evaluate methods of conception control
- Discuss myths and stereotypes relevant to sexuality
- Explain steps involved in making decisions about choices and sources of help in teen pregnancy
- Identify scenarios and design strategies to set and maintain sexual limit setting
- Discuss ways in which one could take action to reduce sexual harassment and sexual assault in the classroom, school and community.
- Explain the role of various community agencies related to sexual harassment and assault

You must choose 2 points from each heading and include information about them in your package. You will be expected to complete sections of the package as we go along in the course, they will be marked individually and the individual marks will help to make up your final mark for the course.

Choice of topics

List below each heading the two topics you have decided to include in your package.

Problem solving and decision making

Conflict resolution
Social skills	
Drugs	
Nutrition	
Personal Safety	
Healthy Sexuality	

	Level 1	Level 2	Level 3	Level 4
accuracy of information	information not accurate	some information accurate	all information accurate	 all information given accurate source of information referenced
Presentation of information	 little information presented in an attractive manner 	 some information presented in an attractive manner 	all information presented in an attractive manner	 information presented in an attractive, easy to understand manner information presented in an original manner
information given in a thought provoking manner	 straight information, does not require the person to think or ask questions about themselves 	• The person reading the package is sometimes being asked to reflect on themselves and the consequences of their actions.	• The person reading the package is always being asked to reflect on themselves and the consequences of their actions.	 The person reading the package is always being asked to reflect on themselves and the consequences of their actions. The person is also required to journal or keep track of this reflection in some manner.
grammar and spelling (if applicable)	 many mistakes in grammar and spelling 	 occasional mistakes in grammar and spelling 	grammar and spelling consistently correct	 grammar and spelling consistently correct smooth flow of sentences
timeliness	 package handed in more than 2 days late 	 package handed in 2 days late 	 package handed in 1 day late 	• package handed in on the date due
correct amount of information	 section includes information from only 1 topic in that section 	 section includes some information from 2 topics in that section 	• section includes complete information from 1 topic in the section and some information included from another topic in that section	 section includes complete information from at least 2 topics in that section if unsure about completeness of information, the teacher was asked for help

Each section of the package will be marked according to the following rubric:

Appendix K₂: Sister's Package, Trial 2

Healthy Active Living What would you like your sister to know?

By the end of this course, you will have become an expert on all sorts of topics that can help you to make informed decisions about how you treat your body. We will have learned about drugs, sexual health, conflict resolution, personal safety, and nutrition, fitness programs and problem solving and decision making.

You are to design a package of information that you think would be most helpful for someone close to you that is trying to make a decision regarding how to live a healthy life. This person could be a sister, mother, or a close friend, someone that you care about.

You must compete at least 4 packages in order to obtain your credit in this course.

You can choose from the following list of package options:

- Conflict resolution / Social Skills
- Drugs
- Healthy Sexuality
- Personal Safety
- Nutrition

Procedure for Package Completion:

- 1. You must complete 2 topics under each package heading
- 2. The packages can be completed in a variety of forms: paragraphs, pictures, comic strips, videotaped interviews, audiotaped songs, a play, a reflective journal or any combination of the above. You are expected to try many types of assignments (example, you will not be able to always write an essay).
- 3. The packages will be evaluated using the attached rubric
- 4. If your average mark for the 4 packages combined is less than 50% you will not achieve your credit.

Packages:

Conflict resolution/Social Skills/Decision Making

- Describe 4 different decision making strategies, (Use pages 304, 305 in Reconnecting Youth (RY) as a reference) and complete 'Are you taking Steps' page 306 RY for 3 different decisions you have made in your life.
- Stress Triggers: Complete session 1 and 2 starting page 322 in RY and Skill one page 334
- Knowing your Anger Triggers and Reactions: Complete session 1 and 2 starting page 368 in Ry and describe 3 relaxation techniques that can be used to control anger.
- Essay Assignments:
 - What type of parent will you be?
 - Write an essay about the type of parent you plan to be someday. Include a discussion of the types of rules you will have and the manner in which you plan to bring up your family.

Letter to a newborn baby

• Write a letter to a newborn baby giving him or her advice on growing up in today's world. Share your years of wisdom with the newborn. Tell him/her what you have learned over the years, and what experiences have been valuable learning experiences for you. Give the baby advice on getting along with people, getting ahead in life, how to set goals, etc.

Goals

• What are your goals for yourself in life? What do you hope to accomplish as an adult? What career do you think you'd be interested in pursuing? What training or preparation will you need for that career?

Self Pride

- What was something you did that made you really feel good, and made you really feel proud of yourself? Describe the situation and give specific details in an essay.
- Create a story of a conflict between friends and show how it was resolved. Use the Creating a Story Problem Solving Model page 7b and 8 in B. Irving's pamphlet.
- Create a set of cards identifying techniques for stress reduction/conflict resolution/ decision making strategies/ etc. and develop a card game with them
- Create finger puppets and write a play that discusses some of the issues from this section
- Create a scrap book of magazine articles and personal summaries of the topics of this section
- Prepare a book report from a book you read on a subject related to this section
- Write a fairly tale that describes a situation from this section, it should include a problem and a resolution to that problem.
- Design a radio announcement that highlights points of interest from this section
- Prepare a comic strip that discusses a situation from this section
- Write a song
- Write 5 lesson plans as if you were a teacher who wanted to discuss this topic with her class.
- Discuss how you think people 50 years from now might tackle this issue
- Complete a written report on a topic from this section using the independent research tracker (found in assessment folder)

	Lev	el 1	Leve	el 2	Leve	el 3	Lev	el 4
IDEAL	•	no IDEAL example was completed	•	One IDEAL example was completed	•	Two IDEAL examples were completed	•	Two IDEAL examples were completed that related directly to the topics chosen for that package
accuracy of information	•	Information not accurate	•	some information accurate	•	all information accurate	•	all information given accurate source of information referenced
presentation of information	•	little information presented in an attractive manner	•	some information presented in an attractive manner	•	all information presented in an attractive manner	•	information presented in an attractive, easy to understand manner information presented in an original manner
information given in a thought provoking manner	•	straight information, does not require the person to think or ask questions about themselves	•	The person reading the package is sometimes being asked to reflect on themselves and the consequences of their actions.	•	The person reading the package is always being asked to reflect on themselves and the consequences of their actions.	•	The person reading the package is always being asked to reflect on themselves and the consequences of their actions. The person is also required to journal or keep track of this reflection in some manner.
grammar and spelling (if applicable)	•	many mistakes in grammar and spelling	•	occasional mistakes in grammar and spelling	•	grammar and spelling consistently correct	•	grammar and spelling consistently correct smooth flow of sentences
timeliness	•	package handed in more than 2 days late	•	package handed in 2 days late	•	package handed in 1 day late	•	package handed in on the date due
correct amount of information	•	section includes information from only 1 topic in that section	•	section includes some information from 2 topics in that section	•	section includes complete information from 1 topic in the section and some information included from another topic in that section	•	section includes complete information from at least 2 topics in that section

Drugs

- Complete the "Drug Use and Non-Use History" page 130 in RY. Describe the Frequently Seen Stages in Adolescent Chemical Use, use Page 131-132 in Ry as a reference, but add you own insight as well. Describe things you could do to stop a friend from traveling farther and farther down this list.
- Complete "Lines of Support" and "Risky People and Places" starting page392 in RY. Describe ways in which you could change the Risky people and places chart to decrease the risk.
- Essay Assignment: Drinking and Driving

- Drinking and driving are a deadly combination. What do you feel would be an appropriate punishment for anyone convicted of driving under the influence of alcohol? It should be a punishment that would really be an effective deterrent to convince people to not drive drunk. Use the Creative Problem Solving Method Page 5 in Barbara Irvings' pamphlet.
- Create a story of a friend with a drug problem and show how it was resolved. Use the Creating a Story Problem Solving Model page 7b and 8 in B. Irving's pamphlet.
- Create a set of cards dealing with drugs and develop a card game with them
- Create finger puppets and write a play that discusses some of the issues from this section
- Create a scrap book of magazine articles and personal summaries of the topics of this section
- Prepare a book report from a book you read on a subject related to this section
- Write a fairly tale that describes a situation from this section, it should include a problem and a resolution to that problem.
- Design a radio announcement that highlights points of interest from this section
- Prepare a comic strip that discusses a situation from this section
- Write a song
- Write 5 lesson plans as if you were a teacher who wanted to discuss this topic with her class.
- Discuss how you think people 50 years from now might tackle this issue
- Complete a written report on a topic from this section using the independent research tracker Possible topics could include:
 - comparing the proper and improper use of medicines and other substances
 - explaining the reasons for laws governing the use of substances
 - Research on the social influences and pressures that promote substance use and abuse (basic needs, self esteem/body image, personal values and attitudes, positive/negative role models, media influences including advertising, peer influence (positive/negative), alternatives to drug use.
 - evaluate refusal skills to deal with peer pressure pertaining to substance use and abuse situations (walk away, give an excuse, say no, say no repeatedly, change subject, reverse the pressure)
 - Analyze protective factors that lead to a drug free lifestyle.

- Describe the effects of the following types of drugs: street drugs (choose 2 only), alcohol, tobacco and steroids. Discuss Fetal Alcohol Syndrome as one of the effects
- Identify support groups and help agencies.

	Lev	el 1	Leve	el 2	Leve	el 3	Lev	el 4
IDEAL	•	no IDEAL example was completed	•	One IDEAL example was completed	•	Two IDEAL examples were completed	•	Two IDEAL examples were completed that related directly to the topics chosen for that package
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information given in a thought provoking manner	•	straight information, does not require the person to think or ask questions about themselves	•	The person reading the package is sometimes being asked to reflect on themselves and the consequences of their actions.	•	The person reading the package is always being asked to reflect on themselves and the consequences of their actions.	•	The person reading the package is always being asked to reflect on themselves and the consequences of their actions. The person is also required to journal or keep track of this reflection in some manner.
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Nutrition

- Create a story of a friend with a nutritional problem and show how it was resolved. Use the Creating a Story Problem Solving Model page 7b and 8 in B. Irving's pamphlet.
- Create a set of cards dealing with nutrition and develop a card game with them

- Create finger puppets and write a play that discusses some of the issues from this section
- Create a scrap book of magazine articles and personal summaries of the topics of this section
- Prepare a book report from a book you read on a subject related to this section
- Write a fairly tale that describes a situation from this section, it should include a problem and a resolution to that problem.
- Design a radio announcement that highlights points of interest from this section
- Prepare a comic strip that discusses a situation from this section
- Write a song
- Write 5 lesson plans as if you were a teacher who wanted to discuss this topic with her class.
- Discuss how you think people 50 years from now might tackle this issue
- Complete a written report on a topic from this section using the independent research tracker Possible topics include:
 - analyze the factors which have the greatest influence on body weight (body type, metabolic rate, diet, exercise, emotions, heredity)
 - discuss the effects of eating disorders on the body
 - analyze all food eaten and activity levels for a week
 - analyze the benefits of healthy eating and habits for active living
 - analyze the impact of body image on self esteem
 - evaluate the influences on perceived ideal body image for males and females
 - Analyze means of counteracting societal pressures leading to eating disorders.
 - Using the Canadian Food Guide, design a healthy eating plan for yourself for a week. You must give justification for your choices.

	Lev	el I	Leve	12	Leve	13	Lev	el 4
IDEAL	•	no IDEAL example was completed	•	One IDEAL example was completed	•	Two IDEAL examples were completed	•	Two IDEAL examples were completed that related directly to the topics chosen for that package
accuracy of information	•	Information not accurate	•	some information accurate	•	all information accurate	•	all information given accurate source of information referenced
presentation of information	•	little information presented in an attractive manner	•	some information presented in an attractive manner	•	all information presented in an attractive manner	•	information presented in an attractive, easy to understand manner information presented in an original manner
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timeliness	•	package handed in more than 2 days late	•	package handed in 2 days late	•	package handed in 1 day late	٠	package handed in on the date due
correct amount of information	•	section includes information from only 1 topic in that section	•	section includes some information from 2 topics in that section	•	section includes complete information from 1 topic in the section and some information included from another topic in that section	•	section includes complete information from at least 2 topics in that section

Personal Safety

- Create a set of cards dealing with personal safety issues and develop a card game with them
- Create finger puppets and write a play that discusses some of the issues from this section
- Create a scrap book of magazine articles and personal summaries of the topics of this section
- Prepare a book report from a book you read on a subject related to this section
- Write a fairly tale that describes a situation from this section, it should include a problem and a resolution to that problem.
- Design a radio announcement that highlights points of interest from this section

- Prepare a comic strip that discusses a situation from this section
- Write a song
- Write 5 lesson plans as if you were a teacher who wanted to discuss this topic with her class.
- Discuss how you think people 50 years from now might tackle this issue
- Complete a written report on a topic from this section using the independent research tracker Possible topics include:
 - Analyze the impact of violence in the media and propose strategies to counteract the impact.
 - Explain the role of people in the community who provide safety services.
 - explain support services for victims of violence
 - discuss mediation and negotiation as appropriate strategies to prevent violence
 - Discuss the importance of diversity of people and differing points of view in society.
 - identify sexual assault and harassment and their legal implications
 - analyze situations that are potentially dangerous to personal safety e.g. date rape, acquaintance rape, hitchhiking, drug/alcohol abuse

	Leve	el 1	Leve	12	Leve	13	Leve	el 4
IDEAL	•	no IDEAL example was completed	•	One IDEAL example was completed	•	Two IDEAL examples were completed	•	Two IDEAL examples were completed that related directly to the topics chosen for that package
accuracy of information	•	Information not accurate	•	some information accurate	•	all information accurate	•	all information given accurate source of information referenced
presentation of information	•	little information presented in an attractive manner	•	some information presented in an attractive manner	•	all information presented in an attractive manner	•	information presented in an attractive, easy to understand manner information presented in an original manner
information given in a thought provoking manner	•	straight information, does not require the person to think or ask questions about themselves	•	The person reading the package is sometimes being asked to reflect on themselves and the consequences of their actions.	•	The person reading the package is always being asked to reflect on themselves and the consequences of their actions.	•	The person reading the package is always being asked to reflect on themselves and the consequences of their actions. The person is also required to journal or keep track of this reflection in some manner.
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Healthy Sexuality

- Create a story dealing with sexuality and show how it was resolved. Use the Creating a Story Problem Solving Model page 7b and 8 in B. Irving's pamphlet.
- Create a set of cards dealing with sexuality and develop a card game with them
- Create finger puppets and write a play that discusses some of the issues from this section
- Create a scrap book of magazine articles and personal summaries of the topics of this section
- Prepare a book report from a book you read on a subject related to this section
- Write a fairly tale that describes a situation from this section, it should include a problem and a resolution to that problem.
- Design a radio announcement that highlights points of interest from this section
- Prepare a comic strip that discusses a situation from this section
- Write a song

- Write 5 lesson plans as if you were a teacher who wanted to discuss this topic with her class.
- Discuss how you think people 50 years from now might tackle this issue
- Complete a written report on a topic from this section using the independent research tracker Possible topics include:
 - explain the body's defense against disease and a healthy immune system
 - analyze methods that prevent the spread of communicable diseases
 - apply knowledge of symptoms, transmission and treatment of STD's in case studies including HIV and AIDS
 - relate physical, social and emotional changes in both the male and female that are associated with puberty
 - Apply knowledge of the reproductive cycle to fertility and health.
 - evaluate methods of conception control
 - discuss myths and stereotypes relevant to sexuality
 - explain steps involved in making decisions about choices and sources of help in teen pregnancy
 - Discuss ways in which one could take action to reduce sexual harassment and sexual assault in the classroom, school and community.
 - explain the role of various community agencies related to sexual harassment and assault

	Lev	el 1	Leve	el 2	Leve	13	Lev	el 4
IDEAL	•	no IDEAL example was completed	•	One IDEAL example was completed	•	Two IDEAL examples were completed	•	Two IDEAL examples were completed that related directly to the topics chosen for that package
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Marks:

Package	Mark out of 28	Percent
#1		
#2		
#3		
#4		
Total of all four packages		

Appendix K₃: Final Sister's Package

Student Information for the Sister's Project

Date:

Name: _____

You need to complete 2 Sister's projects in order to achieve a credit. One Project focusing on *healthy sexuality* and one project focusing on *drugs*. Both projects need to emphasize how decision making and assertiveness skills will affect the choices you make.

The projects will be assessed as follows:

Final project	50%
Rough draft	20%
Gathering data	20%
Presentation of data	10%

The final project and rough draft will be assessed using the *Final Project Rubric* The gathering data will be assessed using the *Gathering Data Checklist* The presentation will be assessed using the *Presentation Rubric*

Complete the following pages to ensure you are completing all steps necessary to produce a quality project.

Date:	Name:
	projects by the end of this course.
Circle the project you are wo	
encie the project you are we	IKing on now.
•	ding of how to use decision making and assertiveness skills v sexuality (e.g. healthy human relationships, avoiding IV/AIDS.)
	decision-making and assertion skills with respect to media related to alcohol, tobacco, and other drugs
indences and peer pressure i	elated to alcohol, tobacco, and other drugs
Step 1	
Choose a general topic to inv	estigate.
The general topic I will invest	tigate is:
~ ~	
Step 2 Shares the second state	and a frame with the improvement of the density
	nation from which to investigate the topic
The sources of information a	e and
Step 3 Record the sources of information	ation you chose on the Bloom's Wheel
Step 4	
Investigate the 2 sources of ir	ofrmation
-	ormation are and
Step 5	
Make a data summary of you	•
· · · · ·	ph of information that highlights the main points of the
pieces of photocopied text)	. It can be done by hand, on computer, or by highlighting on
The dates I made the data sur	nmaries are and
The dutes I linde the dute su	
Step 6	
	rith your teacher and decide on a smaller topic for
investigation	-
Date of teacher conference: _	
Topic for investigation:	

.

<u>Step 7</u> Choose the audience you want to gear the project to Audience will be ______

Step 8

Complete rest of Bloom's Wheel to come up with an Action Plan for how to proceed

Step 9

Complete a decision making model that relates to the question chosen

<u>Step 10</u>

Re-look at data summaries and decide what should be part of project. May need to investigate further sources.

<u>Step 11</u>

Re-examine work done in class on decision making and assertiveness. Decide what part of this information should be included in project.

<u>Step 12</u>

Discuss the data you have decided to include in your project with your teacher Date of Discussion:

<u>Step 13</u>

Complete rough copy of the project using the Final Product Rubric as a guide as to what to expect

Gathering Data (20% of mark)

Name:	
-------	--

	Met	Not Met
Chose a general topic to investigate (on drugs or sex)		
recorded choice of sources on Bloom's Wheel		
investigated 2 sources of information		
made a data summary from these two sources of information		
discussed the data gathered with teacher and came up with a more focused question to investigate for the Sister's project		
chose the audience I want to gear the project to		
completed rest of Bloom's Wheel to have an action plan for how to proceed with Sister' project		
completed a decision making model that relates to question		
re-looked at the data summaries and decided which information to include in the project		
discussed these data summaries with the teacher		
complete a rough copy of the project		1



My Replet

Sloom's Wheel

Used with permission from Halton District School Board

Final Product Rubric - first run through (rough copy):

Name: _____

	Level 1	Level 2	Level 3	Level 4
Communication (clarity)	 communicates main ideas with limited clarity 	 communicates main ideas somewhat clearly 	• communicates main ideas with considerable clarity	 communicates main ideas very clearly
Communication (audience)	does not gear project to gain attention of chosen audience	 somewhat gears project to gain attention of chosen audience 	 mostly gears project to gain attention of chosen audience 	 style and delivery of project geared to engage audience to a high degree
Use of language and vocabulary	• weak use of appropriate vocabulary (greater than 7 grammatical errors)	 fair use of appropriate vocabulary (5-7 grammatical errors) 	 good use of appropriate vocabulary (2 – 4 grammatical errors), including correct health terminology 	 excellent use of appropriate vocabulary (less than 2 grammatical errors), including correct health terminology
Knowledge	 demonstrates little knowledge of facts and terms 	 demonstrates some knowledge of facts and terms 	 demonstrates considerable knowledge of facts and terms 	 demonstrates thorough knowledge of facts and terms
Making Connections	 No clear connection between decision- making skills and use of drugs/choices about sex. 	 Somewhat clear connection between decision making skills and use of drugs/choices about sex. 	 Clear connection between decision-making skills and use of drugs/choices about sex. a specific example of decision making model provided 	 Clear connection between decision-making skills and use of drugs/choices about sex. decision making model and personal examples included
Creativity	 little imagination showed in project 	 some creativity in project standard approach using common resources 	 imaginative approach well thought out; creativity in delivery 	 highly original approach; shows resourcefulness creativity in design and delivery; excellent use of resources

Final Product Rubric - final copy

	Level 1	Level 2	Level 3	Level 4
Communication (clarity)	 communicates main ideas with limited clarity 	• communicates main ideas somewhat clearly	• communicates main ideas with considerable clarity	 communicates main ideas very clearly
Communication (audience)	does not gear project to gain attention of chosen audience	 somewhat gears project to gain attention of chosen audience 	 mostly gears project to gain attention of chosen audience 	 style and delivery of project geared to engage audience to a high degree
Use of language and vocabulary	• weak use of appropriate vocabulary (greater than 7 grammatical errors)	 fair use of appropriate vocabulary (5-7 grammatical errors) 	 good use of appropriate vocabulary (2 – 4 grammatical errors), including correct health terminology 	 excellent use of appropriate vocabulary (less than 2 grammatical errors), including correct health terminology
Knowledge	demonstrates little knowledge of facts and terms	 demonstrates some knowledge of facts and terms 	 demonstrates considerable knowledge of facts and terms 	 demonstrates thorough knowledge of facts and terms
Making Connections	 No clear connection between decision- making skills and use of drugs/choices about sex. 	 Somewhat clear connection between decision making skills and use of drugs/choices about sex. 	 Clear connection between decision-making skills and use of drugs/choices about sex. a specific example of decision making model provided 	 Clear connection between decision-making skills and use of drugs/choices about sex. decision making model and personal examples included
Creativity	 little imagination showed in project 	 some creativity in project standard approach using common resources 	 imaginative approach well thought out; creativity in delivery 	 highly original approach; shows resourcefulness creativity in design and delivery; excellent use of resources

Presentation

Name:	
Induic.	

	Level 1	Level 2	Level 3	Level 4
Communication (clarity)	 communicates main ideas with limited clarity 	• communicates main ideas somewhat clearly	 communicates main ideas with considerable clarity 	 communicates main ideas very clearly
Communication (audience)	 does not gear project to gain attention of chosen audience audience not engaged 	 somewhat gears project to gain attention of chosen audience audience somewhat engaged 	 mostly gears project to gain attention of chosen audience audience mostly engaged 	 style and delivery of project geared to engage audience to a high degree audience strongly engaged
Knowledge	 demonstrates little knowledge of facts and terms 	 demonstrates some knowledge of facts and terms 	 demonstrates considerable knowledge of facts and terms 	 demonstrates thorough knowledge of facts and terms
Making Connections	 No clear connection between decision- making skills and use of drugs/choices about sex. 	 Somewhat clear connection between decision making skills and use of drugs/choices about sex. 	 Clear connection between decision-making skills and use of drugs/choices about sex. a specific example of decision making model provided 	 Clear connection between decision- making skills and use of drugs/choices about sex. decision making model and personal examples included
Creativity	 little imagination showed in project 	 some creativity in project standard approach using common resources 	 imaginative approach well thought out; creativity in delivery 	 highly original approach; shows resourcefulness creativity in design and delivery; excellent use of resources

Evaluation of Sister's Project

	Base mark	Percentage	Weighting	Final mark
Gathering data	/10		x .2	
Rough Draft	/24		x.2	
Final Project	/24		x.5	
Presentation	/20		x.1	

.

Final percentage: _____

Appendix L: Decision-Making Worksheet

HEALTHY SEXUALITY

DECISION-MAKING MODEL

What is the cocision to be made?

L Give the details of the struggon.

- FACTS: FEELINGS:
- What feelings are Debug espectatived in the situation.

4. Check the wording of your certhiest question. Should it report the same?

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Appendix M: Tanya's Test of Temperament

Date: Name:

Tanya's Test of Temperament

Rate on a scale of 1 to 5, how much you agree with each statement

- 1. Agree Entirely
- 2. Mostly Agree
- 3. Uncertain
- 4. Mostly Disagree
- 5. Totally Disagree
- 1. I find it difficult to let an issue go if I know I am right and the other person won't agree with me _____
- 2. I get angry when others make fun of me
- 3. Most adults don't really understand what it's like being a teenager today _
- 4. Using drugs and alcohol is a personal decision that each person needs to make on their own, not one that should be controlled by laws
- 5. Most teenagers have a good understanding of sexually transmitted diseases and the risks of unprotected sex _____
- 6. Most people use drugs and alcohol to feel better when they are upset or anxious ____
- 7. I am less likely than others my age to follow fashion fads or other trends _
- 8. The more physically attractive you are the greater your likelihood or success in life
- 9. Most teenage girls could successfully raise their own child if they had to
- 10. Girls who do not become sexually involved with their boyfriends will find it difficult to keep them ____
- 11. In my relationships with boys, I expect them to take a leadership role in planning our dates or at least paying for them
- 12. Boys are more respectful of girls now than they were in my parent's time
- 13. If I'm feeling down I like to have someone to share my troubles with _____
- 14. How well you succeed in life has a lot to do with good luck _
- 15. Without the support of a family most teens will find it very difficult to succeed
- 16. Locking kids up in Secure Custody will decrease the likelihood of them getting into trouble again
- 17. Lesbian relationships are more common than most people assume
- 18. You can decrease the likelihood of being raped by 'dressing down'

19. I will likely use drugs or alcohol one released from Open/Secure Custody _

20. The friends that I will hang out with when I leave don't get into trouble with the law

21. The police are into as many illegal activities in their own lives as anybody else

22. Adults tend to place too much emphasis on school as being the only way to succeed

23. Some people just don't 'get the message' until someone beats it into them ____

- 24. I wish things had been very different in my life ____
- 25. My future looks promising ____
- 26. My weight is a concern to me _
- 27. I feel stressed out more often than I should
- 28. My friends have been more supportive of me than my family _____
- 29. I expect to live to a ripe old age _
- 30. I would like to get into Acting when I get older _____
- 31. I get depressed a lot ____
- 32. I wish my parents had treated me better ____
- 33. Despite all of my knowledge, I might still engage in unprotected sex in the next few years ____
- 34. I would like to have kids when I am older _
- 35. Marriage is an old fashioned tradition that I don't really believe in
- 36. People who abuse drugs and alcohol just like to be stoned, it isn't really a problem _____
- 37. Ripping off a 'rich' person isn't as bad as stealing from the poor
- 38. I shouldn't get hassled about having committed a crime once I've done my time
- 39. You should always tell people exactly what you think of them ____
- 40. I try to take care of my body as best I can_
- 41. Girls who get locked up in Custody tend to have more problems getting along with people than do other girls in the community
- 42. Being locked up at Syl Apps wasn't that bad
- 43. I won't get locked up again
- 44. I could use some help dealing with my emotions ____
- 45. This questionnaire was too long ____

Appendix N1: Movement Skills Assessment, Trial 2

<u>Healthy Active Living</u> <u>Movement Skills Assessment</u>

There are 5 movement skills: Sending, Receiving, Keeping, Travelling, and Stabilizing.

This assessment will focus on **Sending Skills only**. It uses the sports of Basketball, Volleyball and Badminton to assess sending skills.

Your sending skills will be assessed according to the rubric attached. (I have included the rubric for all movement skills for your reference, for this assessment, pay attention to the sending skills portion only).

The rubric talks about "skills being performed as described". The skills should be performed as described in the exemplars attached.

For the assessment you are to:

- 1. Choose 3 sending skills you would like to be assessed on.
- 2. Practice those skills using the exemplars attached
- 3. Perform each of the skills 5 times for the teacher
- 4. In order to achieve a level 4, the skill should be performed as described in the exemplars all 5 attempts.

Movement Skills Assessment

Trial	Skill 1 Skill 2	Skill 3
1		
2		
3		
4		
5		
Final level for the	9	
skill		

Appendix N2: Final Movement Skills Assessment

Movement Skills Assessment

Name: _____

Skills in Isolation:

Skill			
Faking a pass to a guarded teammate			
Shooting from various distances while being guarded			
Catching a thrown ball while being guarded			
Rebounding a ball			
Dribbling with alternate hands			
Changing hands against a defender			
Changing speed and direction			
Moving to maintain a guarding position			
Moving in offensive strategies i.e. cutting, screening			

Demonstrated learning of skills in a game situation: (check off when you see these skills being demonstrated)

These checklists will help to track your consistency and level of performance. The attached rubric will help determine your final mark in this class.

HEALTHY ACTIVE LIVING

.

CATEGORIES	1	2	3	4
Running, hopping, rope skipping, sid	le stepping, grapevine, skiing, skating,	gliding, sliding, fleeing, chasing, dodg	ging, pivoting, lay-up approach	
Traveling	The student will:	The student will:	The student will:	The student will:
Moves under control in various	1. Rarely perform skills as	1. Inconsistently perform skills as	1. Usually perform skills as	1. Consistently perform skills as
directions, at various speeds and	described	described	described	described
levels, independently and with	2. Rarely be in control	2. Inconsistently be in control	2. Usually be in control	2. Be in control at all times
others			3. Occasionally use variations to	3. Routinely use variations to the
		l	basic skills	basic skills
Ready position, rolling, balancing, the		twisting, supporting, pulling, rocking,		
<u>Stabilizing</u>	The student will:	The student will:	The student will:	The student will:
Moves in a controlled manner, with	 Rarely perform skills as 	1. Inconsistently perform skills as	1. Usually perform skills as	1. Consistently perform skills as
or without equipment in different	described	described	described	described
directions, at various speeds and	2. Rarely be in control	2. Inconsistently be in control	2. Usually be in control	2. Be in control at all times
levels, independently and with			3. Occasionally use variations to	3. Routinely use variations to the
others		· · · · · · · · · · · · · · · · · · ·	basic skills	basic skills
		g, underhand serve, batting, underhand		
Sending	The student will:	The student will:	The student will:	The student will:
Propel objects (ball, birdie) in	 Rarely perform skills as 	1. Inconsistently perform skills as	1. Usually perform skills as	1. Consistently perform skills as
various directions and at various	described	described	described	described
speeds to self, others and objects	2. Rarely be in control	2. Inconsistently be in control	2. Usually be in control	2. Be in control at all times
(wall) independently and with	3. Rarely hit large 'targets'	3. Inconsistently hit large 'targets'	3. Occasionally use variations to	3. Routinely use variations to the
others			basic skills	basic skills
			4. Usually hit large 'targets'	4. Consistently hit large 'targets'
Stopping, goaltending, trapping, cat				
Receiving	The student will:	The student will:	The student will:	The student will:
Receives an object (ball, birdie)	1. Rarely perform skills as	1. Inconsistently perform skills as	1. Usually perform skills as	1. Consistently perform skills as
from various directions at various	described	described	described	described
speeds from self, others and objects	2. Rarely be in control	2. Inconsistently be in control	2. Usually be in control	2. Be in control at all times
(wall) independently and with	3. Rarely be in position	3. Inconsistently be in position	3. Occasionally use variations to	3. Routinely use variations to the
others			basic skills	basic skills
			4. Usually be in position	4. Consistently be in position
Dribbling, bouncing, carrying, fakin			· ····································	· · · · · · · · · · · · · · · · · · ·
Keeping	The student will:	The student will:	The student will:	The student will:
Maintains possession of an object	1. Rarely perform skills as	1. Inconsistently perform skills as	1. Usually perform skills as	1. Consistently perform skills as
(ball) while stationary or moving,	described	described	described	described
in various directions, at various	2. Rarely be in control	2. Inconsistently be in control	2. Usually be in control	2. Be in control at all times
speeds, independently and with			3. Occasionally use variations to	3. Routinely use variations to the
others			basic skills	basic skills
			L	l

4 . 9 %

Appendix O: Samples of Tee-shirt activity and self-portraits

Tee-shirt activity

- On the left sleeve write or draw: two things you do well
- On the right sleeve: something you like about being your age
- On the collar: a word you'd like people to say when they describe you
- On the left lower side: a wish you have for yourself
- On the right lower side: something you want to be when you grow up
- In the centre under name: something you like to do in free time (Gibbs, 1987, p.151).





Appendix P: Ministry of Education's Expectations for the Healthy Active Living Course

Grade 9, Healthy Active Living Education, Open

This course emphasizes regular participation in a variety of enjoyable physical activities that promote lifelong healthy active living. Students will learn movement skills and principles, ways to improve personal fitness and physical competence, and safety and injury prevention. They will investigate issues related to healthy sexuality and the use and abuse of alcohol, tobacco, and other drugs, and will participate in activities designed to develop goal setting, communication, and social skills.

Physical Activity

Overall Expectations

By the end of Grade 9, students will:

- PAV.01X demonstrate personal competence in applying movement skills and principles;
- demonstrate knowledge of guidelines and strategies that enhance participation in recreation and sport activities.

Specific Expectations

Movement Skills and Principles

- PA1.01X use and combine movement skills in a variety of physical activities (e.g., apply locomotion/traveling, manipulation, and stability skills to a specific activity);
- PA1.02X demonstrate understanding of the importance of movement principles in performing isolated or combined movement skills (e.g., manipulation, locomotion and stability);
- identify appropriate movement principles (e.g., that the production of maximum velocity requires the use of joints from largest to smallest) in learning and refining movement skills (e.g., an overhead clear in badminton);
- PA1.04X demonstrate improvement in their skills.

Sport and Recreation

By the end of Grade 9, students will:

PA2.01X	٠	demonstrate understanding of specific rules and guidelines for
		participation in recreation and sport including team, group, dual and
		individual activities (e.g., the scoring rules in rugby, etiquette such as
		allowing faster participants to pass on a cross country ski trail);

- identify the requirements including basic equipment standards, preparation (e.g., warm- up and cool-down exercises, training requirements) and specific safety issues that maximize performance and participation in recreation and sport activities;
- PA2.03X explain appropriate strategies or tactics that enhance performance in specific situations and conditions (e.g., passing versus dribbling a basketball against a defender, shifting gears in cycling to adjust to changing conditions);
- PA2.04X describe career opportunities related to sport and recreation.

Active Living

Overall Expectations

By the end of Grade 9, students will:

- ALV.01X participate regularly in a balanced instructional program that includes a wide variety of enjoyable physical activities that encourage lifelong participation;
- ALV.02X demonstrate improvement in personal health-related physical fitness;
- ALV.03X demonstrate safe practices regarding the safety of themselves and others.

Specific Expectations:

Active Participation

- AL1.01X participate regularly in physical activities, choosing a wide range of activities (e.g., individual, small- and large-group, outdoor, and aquatic activities);
- AL1.02R demonstrate positive, responsible personal and social behaviour (e.g., striving for personal best, practicing regularly, encouraging others, playing fair) in physical activity settings;
- AL1.03X identify the factors that affect choices of activities with potential for lifelong participation and enjoyment.

Physical Fitness

By the end of Grade 9, students will:

- ML2.01X monitor personal plans for daily, health-related fitness activities (e.g., self-designed or computerized programs) that reflect their personal fitness goals;
- AL2.02X participate in personal health-related fitness programs;
- AL2.03X maintain or improve personal fitness levels by participating in physical vigorous activities for sustained periods of time (e.g., a minimum of two ten-minute time periods or one twenty-minute time period for a minimum of four times a week);
- AL2.04X monitor exercise intensity (e.g., using a manual or computerized heartrate monitor, breath sound check, talk test);
- AL2.05X describe the benefits of each health-related fitness component and its relationship to active living (e.g., the relationship of cardiovascular fitness to increased stamina and lower risk of heart disease; the relationship of healthy eating to improved well being).

Safety

AT 2 01V	
AL3.01X	• apply guidelines and procedures related to safe participation in physical
	activity (e.g., using equipment correctly, wearing appropriate attire,
	using appropriate facilities, meeting expectations regarding
	supervision, using proper posture in minimizing injury);
AL3.02X	• demonstrate behaviour that minimizes risk to themselves and others
	(e.g., participating in warm-up, and cool-down exercises, checking ice
	conditions prior to skating, spotting for weight training);
AL3.03X	• identify strategies to deal with emergency situations related to physical
11125-0021	activities;
AL3.04X	• demonstrate understanding of cardio-pulmonary resuscitation (e.g.,
	one-person adult CPR).

Healthy Living

Overall Expectations

By the end of Grade 9, students will:

- HLV.01R identify the factors that contribute to positive relationships with others;
- HLV.02X explain the consequences of sexual decisions on the individual, family and community;
- HLV.03X demonstrate personal strategies to deal effectively with the social influences that contribute to the use and abuse of alcohol, tobacco, and other drugs (e.g., cannabis);
- **HLV.04X** identify strategies to minimize potentially dangerous situations (e.g., violence prevention, injury prevention).

Specific Expectations

Healthy Growth and Sexuality

- HL2.01X identify the developmental stages of sexuality throughout life;
- **HL2.02R** describe the factors that lead to responsible sexual relationships;
- HL2.03X describe the relative effectiveness of methods of preventing pregnancies and sexually transmitted diseases (e.g., abstinence, condoms, oral contraceptives);
- HL2.04R demonstrate understanding of how to use decision-making and assertiveness skills effectively to promote healthy sexuality (e.g., healthy human relationships, avoiding unwanted pregnancies and STDs such as HIV/AIDS);
- HL2.05X demonstrate understanding of the pressures on teens to be sexually active;
- HL2.06X identify community support services related to sexual health concerns.

Substance Use and Abuse

By the end of Grade 9, students will:

- **HL3.01X** identify facts and myths related to the use and abuse of alcohol, tobacco ad other drugs (e.g., cannabis);
- **HL3.02X** explain the effects of the use and abuse of alcohol, tobacco and other drugs;
- HL3.03X identify the major factors (e.g., environmental influences such as peer pressure, media influences, adolescent attitudes) that contribute to the use of alcohol, tobacco and other drugs;
- HL3.04X identify the school and community resources involved in the education, prevention and treatment of the use and abuse of alcohol, tobacco, and other drugs;
- HL3.05X demonstrate and use both decision-making and assertion skills with respect to media influences and peer pressure related to alcohol, tobacco and other drugs.

Personal Safety and Injury Prevention

By the end of Grade 9, students will:

- **HL4.01R** describe specific types of physical and non-physical violence (e.g., manipulation, intimidation, sexual harassment, verbal abuse);
- HL4.02X assess the impact of non-physical abuse on victims;
- HL4.03X identify the causes of abuse and violence;
- HL4.04X describe solutions and strategies to address violence in the lives of young people;
- HL4.05X explain how the school, the local community and other community agencies are involved in developing strategies (e.g., a school's code of conduct) to prevent or end the violence in young people's lives;
- **HL4.06X** demonstrate effective personal strategies to minimize injury in adolescence.

Living Skills

Overall Expectations

- LSV.01X use appropriate decision-making skills to achieve goals related to personal health;
- LSV.02X explain the effectiveness of various conflict resolution processes in daily situations;
- LSV.03X use appropriate social skills when working collaboratively with others.

Specific Expectations

Decision-making

By the end of Grade 9, students will:

- LS1.01X identify personal strengths and areas for growth;
- **LS1.02X** demonstrate how they have achieved short-term goals based on a personal vision;
- **LS1.03X** demonstrate understanding of the impact of parents, the media and culture on values and goals related to healthy active living;
- LS1.04X produce sequential action plans to achieve personal health goals.

Conflict Resolution

By the end of Grade 9, students will:

- LS2.01R demonstrate understanding of personal values that can lead to conflict;
- LS2.02R use assertiveness techniques to avoid escalating conflict;
- LS2.03R demonstrate active listening skills (e.g., identify non-verbal feelings expressed by others, paraphrasing the message, asking questions for clarification) when managing conflict;
- demonstrate the appropriate steps of conflict resolution in situations encountered in class, at school, with friends, and at home;
- demonstrate understanding of the triggers of conflict (e.g., defensive behaviour in a group situation) to prevent escalation;
- identify coping skills (e.g., involvement in physical activity, talk it out, participating in alternative activities or hobbies) to deal with internal conflict and stress that often accompanies change.

Social Skills

- LS3.01R contribute to the success of the group verbally and non-verbally (e.g., by completing a fair share of the group task by, acknowledging others' contributions to the task);
- LS3.02R explain the benefits and disadvantages of working with others;
- **LS3.03R** give and receive assistance (e.g., through peer mentoring);
- use appropriately a variety of methods for reaching group agreement (e.g., through consensus, by taking votes in which the majority rules).