HealthWize
Health Literacy Teaching
Resource for Refugee and
Other ESL Students

Produced by:
The Victorian Foundation for Survivors of Torture Inc.
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This teaching resource is part of a series of school resources developed in the context of VFST’s work with schools.

Other resources produced include:
• The Rainbow Program for Children in Refugee Families (2002)
• Kaleidoscope Program: Working with young people who are refugees (1996, 2000)

These resources are targeted at both primary and secondary level English Language Schools/Centres, mainstream schools and other educational settings. Copies of these resources are available at www.survivorsvic.org.au.
Many individuals, schools and organisations gave their time and advice to the development of HealthWize – Health Literacy Teaching Resource for Refugee and Other ESL Students.

Particular thanks go to the Project Steering Committee, the Brunswick English Language Centre and Noble Park English Language School, teachers and students from both schools who piloted the material, members of the expert task group who provided professional advice in the development of HealthWize and VFST staff.

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The global displacement of people and abuse of human rights is a fact of our time. There are at present over 20 million refugees and even more people of concern to the United Nations High Commissioner for Refugees. Over two-thirds of refugees are women and children. Since the Second World War, Australia has received over 650,000 refugees for resettlement and is one of sixteen countries around the world to have developed a formal refugee resettlement program. One of the greatest challenges for newly arrived refugees is being able to rebuild their lives and make a new home in Australia full of their hopes and dreams. Schools have a vital role to play in facilitating this process for young refugees and their families.

Refugees come to Australia from many countries and cultures, yet share many common experiences. Conflict, persecution and fear have compelled them to leave their homes and countries. They have endured great loss, deprivation and uncertainty. Their health and education needs are unlikely to have been addressed for long periods of time. These disruptive and traumatic experiences may have a lasting impact on the development of children and young people as they settle in their new country.

It is not uncommon for difficulties during the resettlement process to cause further disruption to opportunities for development. Families may well have been separated through war and surviving parents are likely to be traumatised, culturally and linguistically isolated and economically disadvantaged within Australian society. Regardless of their school experience, all children and young people from refugee backgrounds will have little knowledge of the support systems that are available to them, and may not know where to turn for advice.

The importance of the school being a supportive environment cannot be overstated. Schools have a key role to play in assisting children and young people and their families to overcome difficult and often traumatic pasts and in making a new home in Australia. Feeling valued through social connections with others, being able to participate in the community, developing English language skills and learning about Australian ways of life are all important for enhancing confidence and self-esteem. On arrival at their first Australian school, students will have had disrupted schooling and many will require specialist support to learn English. Many children and young people may be unfamiliar with the school environment having had little or no schooling prior to arrival in Australia. Others may have had very different, or negative, schooling experiences.

The HealthWize teaching resource is a multifaceted approach to addressing these barriers to health and education, and is particularly useful at early stages of settlement. It encourages
the development of health literacy, provides knowledge of the Australian health system, and develops skills to use health services. It tackles difficult emotional issues and suggests strategies for managing them. It provides the opportunity for students to consider their own health issues and to become aware of available support services while learning English. Teachers will find this a useful and accessible resource for students at the early stages of learning English as a second language.

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Glossary of English as a Second Language (ESL) terms

**Scaffolding:** providing the structure which students need to build and develop text to meet the conventions of a particular purpose.

**Pre-teaching:** the preparation of students in activities which introduce the necessary vocabulary, themes and structures so that students can understand the texts they have to study (e.g. the vocabulary, socio-historic context of a particular novel/film).

**Cloze:** filling in the gaps in written texts. Certain words are missing from the text and students have to use the linguistic clues in the context to complete the text. There are two types – open close (this means students are free to choose the word they supply) and closed close (a list of words is supplied and students select the suitable one for each gap).

**Cueing systems:** in the ESL context this means supplying cues like pictures to trigger the students’ response, e.g. a picture of a cat to elicit students to produce the word orally or in writing.

**Purpose features:** activities designed to assist students to identify the salient features by which we recognise the communicative purpose of the text.

**Pronoun referrals:** the introduction of a subject by a noun, then using a pronoun to refer to this subject, e.g. The car is in the garage. It is a green sedan.

**CALD:** Culturally and Linguistically Diverse.

**Word attack skills:** strategies a student uses to read a word, e.g. using a phonetic approach to decode letters or drawing on memory, experience, association or context to articulate the word.
## Overview of Key Understanding and Curriculum Links

<table>
<thead>
<tr>
<th>Unit</th>
<th>Activities</th>
<th>Language skills/focus</th>
<th>Key understandings</th>
<th>CSF2 links</th>
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</table>
| Unit 1 | A1: Healthy and unhealthy  
A2: Aspects of health  
A3: Classify health words  
A4: Good health  
A5: Abdul’s health habits  
A6: My health needs  
A7: Health profiles  
A8: My health habits | • Simple present – habitual use  
• Present continuous  
• Gerund as subject  
• Comparatives  
• Frequency adverbs  
• Talking about health needs  
• Talking about health habits  
• Make comparisons  
• Reading for specific information  
• Categorisation  
• Note-taking in table format  
• Working in pairs and groups  
• Mind mapping  
• Presenting information on a Venn diagram  
• Presenting information on a poster  
• Presenting information on a continuum  
• Using WordArt and ClipArt | Health: holistic view of health – physical health, emotional health (psychological, spiritual, mental health), social health; interdependency of health dimensions. | ESL Companion to the English CSF2:  
• Listening and Speaking Outcomes S1.2, S1.3, S1.4  
• Reading Outcomes S1.1, S2.1  
• Writing Outcomes S1.1, S1.2, S1.3, S1.4  
Health and Physical Education:  
• Health of Individuals and Populations, Level 4, Outcome HPIP0401 |
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<th>Language skills/focus</th>
<th>Key understandings</th>
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<tbody>
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<td>A1: Mapping the journey</td>
<td>Simple past tense questions and statements</td>
<td>Settlement: feelings of loss, impact on health and wellbeing; integrating past events constructively, continuity; adjusting to change and positive aspects of change; factors and behaviours that enhance wellbeing; difficult aspects of change improving over time.</td>
<td>ESL Companion to the English CSF2:  - Listening and Speaking Outcomes S1.1, S2.1, S2.3, S2.4  - Reading Outcomes S2.1, S2.2, S2.3  - Writing Outcomes S2.1, S2.2, S2.3, S2.4</td>
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<td>A2: Family gifts</td>
<td>‘Why’ and ‘how’ questions</td>
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<td>Health and Physical Education:  - Self and Relationships, Level 4, Outcomes HPSR0401 and HPSR0402</td>
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<td>A3: Something from my culture</td>
<td>Simple present</td>
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<td>A4: My hand</td>
<td>Imperatives</td>
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<td>A5: Young people talk</td>
<td>Complex sentences</td>
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<td>A6: An important person in my life</td>
<td>Conditional</td>
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<td>A7: Remembrance</td>
<td>Stress intonation and tone of voice</td>
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<td>A7: An important person in my life</td>
<td>Talking about feelings and emotions</td>
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<td>Expressing feelings</td>
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<td>A8: How are they feeling?</td>
<td>Expressing anger constructively</td>
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<td>A2: What makes us feel the way we do?</td>
<td>Hypothesising</td>
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<td>A3: What are these people feeling?</td>
<td>Mime</td>
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<td>A4: Facial expressions</td>
<td>Role play</td>
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<td>A5: Mime the emotion</td>
<td>Working in groups</td>
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<td>A6: Role play an emotion</td>
<td>Expressing anger</td>
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<tr>
<td>A7: How am I feeling? Where in my body am I feeling it?</td>
<td>Expressing similes and metaphors</td>
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<td>A8: Expressing anger</td>
<td>Write an emotion poem</td>
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<td>A9: Emotion similes and metaphors</td>
<td>Write a formula poem</td>
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<td>A10: Write an emotion poem</td>
<td>Reading and understanding a poem</td>
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<td>A11: Feelings and emotions crossword puzzle</td>
<td>Working in groups</td>
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Unit 3
Feelings and Emotions

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<th>Key understandings</th>
<th>CSF2 links</th>
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<tbody>
<tr>
<td>A1: How are they feeling?</td>
<td>Simple present</td>
<td>Emotions: identification of emotions; causes; impact on body and mind; coping strategies.</td>
<td>ESL Companion to the English CSF2:  - Listening and Speaking Outcomes S1.1, S2.1, S2.2, S2.3, S2.4  - Reading Outcomes S2.1, S2.2  - Writing Outcomes S1.1, S1.3</td>
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<tr>
<td>A2: What makes us feel the way we do?</td>
<td>Imperatives</td>
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<td>Health and Physical Education:  - Self and Relationships, Levels 4, 5, Outcomes HPSR0401, HPSR0402, HPSR0501, HPSR0502</td>
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<td>A3: What are these people feeling?</td>
<td>Complex sentences</td>
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<td>Unit 4</td>
<td><strong>Making Friends and Connections</strong></td>
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<tr>
<td>A1:</td>
<td>Friendship timeline</td>
<td>• Simple present questions and statements</td>
<td>Friends: importance of friends; universal qualities of friends; developing friendships; changing friendships; receptiveness and body language; maintaining connection with culture of origin; opportunities for making friends in Australia.</td>
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<td>A2:</td>
<td>People bingo</td>
<td>• Simple past</td>
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<td>A3:</td>
<td>Four things in common</td>
<td>• Present perfect</td>
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<td>A4:</td>
<td>Friendship proverbs</td>
<td>• Adjectives</td>
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<td>A5:</td>
<td>Qualities of friends</td>
<td>• Comparatives</td>
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<td>A6:</td>
<td>Friendly talk</td>
<td>• Initiate and maintain conversations</td>
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<td>A7:</td>
<td>Body language. Which person is likely to make friends?</td>
<td>• Give and receive compliments</td>
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<td>A8:</td>
<td>Tone of voice</td>
<td>• Make suggestions</td>
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<td>A9:</td>
<td>Making friends</td>
<td>• Offer to share/help</td>
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<td>A10:</td>
<td>Friendship categories</td>
<td>• Encourage others</td>
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<td>A11:</td>
<td>What I want my friend to know about me</td>
<td>• Ask to join in</td>
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<td>A12:</td>
<td>Nine uses for a friend</td>
<td>• Describe someone</td>
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<td>A13:</td>
<td>Making friends in Australia</td>
<td>• Body language</td>
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<td>• Tone of voice</td>
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<td>• Stress and intonation</td>
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<td>• Make a timeline</td>
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<td>• Mind mapping</td>
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<td>• Note taking</td>
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<td>• Write a poem</td>
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<td>• Write a description</td>
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<td><strong>Unit 5</strong>&lt;br&gt;<strong>How Can I change the Way I Feel?</strong></td>
<td>A1: What is stress? A2: Why are they stressed? A3: What causes us stress? A4: Stress signs A5: Understanding stress A6: Helpful and unhelpful thinking A7: Understanding the impact of helpful and unhelpful thinking A8: Shamin's strengths A9: My strengths A10: Stress busters A11: Will this strategy help me? Four Corners Game</td>
<td>• Modals – will/would, can/could • Simple present • Conditionals • Complex sentences • Strengths vocabulary • Expressing feelings • Talking about strengths • Talking about possibility • Hypothesising • Challenging self or others • Note-taking • Working in groups • Listening for specific information • Using intonation as a cue to meaning • Interpreting cartoons • Writing a descriptive essay • Reading for specific information</td>
<td>Stress: causes of stress, impact on mind and body; helpful and unhelpful coping strategies; integrating past events constructively.</td>
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<td><strong>Unit 6</strong>&lt;br&gt;<strong>I Have a Problem</strong></td>
<td>A1: What is the problem? What can they do? A2: Ljubiana's story A3: Amir's story A4: My supports A5: Migration and health A6: Who can I talk to? What should I do?</td>
<td>• Modals – can/could, will/would, should • Conditional statements • Simple present • Simple past • Talking about possibility • Talking about consequences • Talking about problems • Giving advice • Reading for specific information • Understanding sequence • Brainstorming • Concept mapping • Writing lists</td>
<td>Seeking help: importance of early identification and intervention to address problems; sharing problems; problem solving, acknowledging stresses of settlement; connection between health and ability to learn; formal and informal support people; role of professional ‘helpers’.</td>
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<td><strong>Unit 7</strong></td>
<td><strong>Health Professionals</strong>&lt;br&gt;A1: What work do health professionals do?&lt;br&gt;A2: What does a GP do?&lt;br&gt;A3: What does a counsellor do?&lt;br&gt;A4: Where can I find a dentist?&lt;br&gt;A5: ‘I’ve got a problem’, jazz chant.</td>
<td>• Simple present questions and statements&lt;br&gt;• Health-specific vocabulary&lt;br&gt;• Modals – might&lt;br&gt;• Expressing possibility&lt;br&gt;• Giving advice&lt;br&gt;• Making suggestions&lt;br&gt;• Rhythm/stress timing&lt;br&gt;• Skimming/scanning&lt;br&gt;• Reading for specific information</td>
<td>Health professionals: role of GPs, specialists, counsellors, social workers, optometrists, dentists, surgeries; referrals; confidentiality.</td>
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<td><strong>Unit 8</strong></td>
<td><strong>The Community Health Centre</strong>&lt;br&gt;A1: What is a Community Health Centre?&lt;br&gt;A2: Community Health Centre crossword puzzle&lt;br&gt;A3: Glenvale Community Health Centre&lt;br&gt;A4: Find a Community Health Centre near you</td>
<td>• Simple present&lt;br&gt;• Asking questions&lt;br&gt;• Health-specific vocabulary&lt;br&gt;• Talking about occupations&lt;br&gt;• Reading and finding specific information from brochures&lt;br&gt;• Using the internet to locate services&lt;br&gt;• Using the Yellow Pages&lt;br&gt;• Completing a crossword puzzle</td>
<td>Community Health Centres and services for young people: GPs, allied health professionals and youth workers, free or low-cost services, support groups and young people’s interest groups.</td>
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Health and Physical Education:<br>• Health of Individuals and Populations, Levels 3, 4, 5, Outcomes HPIP0302, HPIP0402, HPIP0502
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<tr>
<td>Unit 9</td>
<td>A1: Sam goes to the doctor&lt;br&gt;A2: Zahra makes an appointment&lt;br&gt;A3: Zahra prepares for her visit to the doctor&lt;br&gt;A4: Patient information&lt;br&gt;A5: Get the best from your visit to the doctor</td>
<td>• Simple past&lt;br&gt;• Simple present&lt;br&gt;• Polite request&lt;br&gt;• Imperatives&lt;br&gt;• Forming questions&lt;br&gt;• Asking for and giving information&lt;br&gt;• Using the telephone&lt;br&gt;• Using a telephone directory&lt;br&gt;• Filling in a form&lt;br&gt;• Recognising and using appropriate register&lt;br&gt;• Role play&lt;br&gt;• Writing connected text from notes</td>
<td>Preparing for appointment to see GP: interpreter, length of consultation time, choice of male/female doctor; preparation of questions and medical history; support person, dealing with environment of doctor’s surgery.</td>
<td>ESL Companion to the English CSF2: &lt;br&gt;• Listening and Speaking Outcomes S2.1, S2.3, S2.4&lt;br&gt;• Reading Outcomes S2.1, S2.4&lt;br&gt;• Writing Outcomes S1.1, S2.1, S1.2, S2.2, S1.3&lt;br&gt;Health and Physical Education: &lt;br&gt;• Health of Individuals and Populations, Levels 3, 4, 5, Outcomes HPIP0302, HPIP0402, HPIP0502</td>
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<tr>
<td>Unit 10</td>
<td>A1: What is Medicare?&lt;br&gt;A2: Complete a Medicare enrolment form</td>
<td>• Simple present&lt;br&gt;• Health care system specific language&lt;br&gt;• Reading for specific information&lt;br&gt;• Retelling&lt;br&gt;• Form filling&lt;br&gt;• Working in groups&lt;br&gt;• Problem solving&lt;br&gt;• Reading and understanding signs, forms and fact sheets</td>
<td>Concept of Medicare: explaining Medicare; services covered/not covered; concept of bulk billing; applying for Medicare card and age restrictions.</td>
<td>ESL Companion to the English CSF2: &lt;br&gt;• Listening and Speaking Outcomes S2.1, S2.2, S2.3, S2.4&lt;br&gt;• Reading Outcomes S2.1, S2.2, S2.3, S2.4&lt;br&gt;• Writing Outcome S2.1&lt;br&gt;Health and Physical Education: &lt;br&gt;• Health of Individuals and Populations, Level 6, Outcome HPIP0602</td>
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## Unit 11
### Health Rights and Responsibilities

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<td>• Simple present&lt;br&gt;• Simple past&lt;br&gt;• Talking about rights and responsibilities&lt;br&gt;• Talking about necessity&lt;br&gt;• Explaining&lt;br&gt;• Asking for clarification&lt;br&gt;• Asking about medication&lt;br&gt;• Asking about alternatives&lt;br&gt;• Interpreting meaning and writing in simpler terms&lt;br&gt;• Problem solving&lt;br&gt;• Working in groups&lt;br&gt;• Role play</td>
<td>Patient rights: confidentiality, information presented to be understandable for patient, seeking second opinion, refusing treatment, making complaint, support person.</td>
<td>ESL Companion to the English CSF2:&lt;br&gt;- Listening and Speaking Outcomes S2.1, S2.2, S2.3, S2.4&lt;br&gt;- Reading Outcomes S2.1, 2.2, 2.3, 2.4&lt;br&gt;- Writing Outcome S2.1</td>
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<td>A2: What do these rights mean?</td>
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<td>Patient responsibilities: providing complete information, answering questions honestly, co-operation and compliance, seeking help, supporting others in need, conduct in emergency situations.</td>
<td>Health and Physical Education:&lt;br&gt;- Health of Individuals and Populations, Level 6, Outcome HPIP0602</td>
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<td>A3: What do these responsibilities mean?</td>
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<td>A4: How do I say it?</td>
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<td>A5: Problem solving</td>
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<td>A6: Rights and responsibilities, role play</td>
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Background

The Victorian Foundation for Survivors of Torture (VFST) developed and piloted the HealthWize teaching resource as part of a schools project conducted from 2001 to 2004. The schools project contributed to VFST’s broader health promotion and direct service strategies in schools. Within the project, HealthWize was piloted in two English language settings, namely the Brunswick English Language Centre and the Noble Park English Language School.

The teaching resource was written by experienced English as a Second Language (ESL) teacher, Ms Althea Thomas, based on VFST’s extensive consultation with refugee students, their families, and health and teaching professionals working with them.

The writer received input from other experienced teachers and mental health and teaching professionals with expertise in health promotion.

Who will benefit from the teaching resource?

The HealthWize teaching resource has been developed for new-arrival students aged 12 to 18 and is targeted at those from refugee backgrounds. Nevertheless, it has been designed for a ‘whole-class’ approach and hence is suitable for use in classes where there are also non-refugee students.

It is expected that the materials will be used primarily in English language schools and centres but they are also suitable for mainstream ESL and Health programs. The first six units can be adapted for use in upper primary ESL programs. Many of the units are also suitable for use in young adult ESL programs, particularly those which target refugee youth.

The material is most suited to students at S2 level or a high S1 level on the ESL Companion to the English Curriculum Standards Framework (CSF2) document for Victorian government schools. However, with modification and additional scaffolding the material could also be used for students at a lower level. Students at S1 level can participate in some of the activities but will need additional literacy activities targeted to their needs.
The aims of the HealthWize teaching resource

Using language learning as the medium, the teaching resource aims to develop health awareness, health literacy, and skills in using formal and informal sources of health care and support.

The teaching resource recognises that students from refugee backgrounds may face particular physical and mental health issues as a result of their refugee and resettlement experiences, yet may have difficulty understanding and accessing an unfamiliar health and social support system. Schools provide an important context in which students can learn about health and health services in a non-stigmatising and natural way.

While there are other teaching resources exploring health issues, they are not specifically designed for young people at beginner-level English. VFST has, for example, developed other valuable resources such as the Kaleidoscope Program for delivery to small groups of refugee students, with the support of a mental health agency. HealthWize builds on and is designed to complement VFST’s existing group-based programs, but as a stand-alone resource.

The specific aims of HealthWize are to:
- enhance refugee young people’s awareness of their own physical and mental health,
- enable refugee young people to learn about informal sources of support available to them to address health issues,
- enhance refugee young people’s capacity to articulate social, emotional and physical health issues,
- enhance refugee young people’s ability and confidence to identify and access relevant formal sources of support within Australian health and social support systems,
- assist refugee young people to develop an appreciation of the barriers they may face in accessing health and support services and how these can be addressed,
- enable refugee young people to develop English language skills in reading, writing, speaking and listening in order to understand health issues and access health and social support services.
Teaching HealthWize

Units 1 to 6 of HealthWize are interactive and encourage students to learn about their emotional wellbeing. To ensure that students feel comfortable and safe sharing their stories and experiences, it is suggested that teachers establish rapport with their students before commencing teaching the resource.

The resource can be taught in a variety of ways. While it is preferable to teach it sequentially, the resource lends itself to selective teaching of units and related activities according to need. It is recommended, however, that high priority be given to the early units because of their attitudinal focus. Unit 5, which deals with ways to cope with stressful situations, is an optional unit. It requires presentation by teachers who have participated in some relevant training in conducting mental health promotion activities in the classroom.

Teachers may also use student activities selectively if time is limited and ESL teachers may make these decisions depending on their focus on language acquisition.

The resource can also be taught to meet a range of outcomes in the Health and Physical Education Key Learning Areas (KLAs).

Teachers may naturally have their own ideas on how to structure the teaching of HealthWize.

Time allocation

Time allocation for teaching the resource depends on the way teachers choose to use it and the level of English of their various students. Given that the resource has 11 units with numerous activities per unit it is realistic to recommend two double sessions per unit, amounting to a total of 22 double sessions for the entire resource.

The following scenarios are possible:
- teaching HealthWize once per week (one double session) – two school terms need to be allocated,
- teaching HealthWize twice per week or more frequently (and across different KLAs) – one school term is sufficient.
Supporting refugee students’ use of HealthWize

Having come from situations of war and conflict, students from refugee backgrounds have been exposed to traumatic events and are likely to have suffered a high degree of loss – from the loss of their homes and possessions to the more significant losses of friends, relatives, close family members and connections to their communities. On arrival in Australia, many refugee families face a high degree of social disadvantage.

As a result of these experiences some young people may suffer psychological difficulties, such as grief, depression, anxiety and post-traumatic stress symptoms, e.g. sleeplessness and flashbacks.

The following sections suggest ways in which students with refugee experiences might be supported by HealthWize.

Dealing with sensitive issues raised by students

The material in the teaching resource has been designed so that control over the level of disclosure of personal information remains with students themselves. However, given that many exercises draw on students’ experiences, there is a possibility that information of a personal, sensitive or traumatic nature may be disclosed. For some students, participation in the exercises in the teaching resource may be the first opportunity they have had to talk about themselves and their lives in a context that is safe and familiar.

If disclosure occurs the following approach is suggested:
• Acknowledge the feeling generated by the event (e.g. ‘That must have been very frightening for you’).
• Affirm the difficulties or bravery in speaking about the event.
• Acknowledge that those feelings have been felt by other students who have experienced a similar event.
• Acknowledge that even though the circumstances of the event have passed and students are now safe, the memories can remain and may still be distressing.
• Ask the student if there is anything further they would like to say about the event.
• Suggest that if they would like to discuss anything further, you would be available at a later time.

When traumatic or sensitive information is disclosed in a class context, it is important to be mindful of both the needs of the student concerned and the impact of disclosure on other students in the group. Where the information is of a sensitive nature, it is appropriate to follow up with the student after the class.

Disclosure of sensitive material may present an opportunity to identify strategies for dealing with issues, either with the individual student or with the group as a whole (either at the time or in a later session).
Identifying and referring students requiring counselling and support

When conducting the HealthWize program, students will be identified who require more intensive support to deal with their settlement and refugee experiences.

A referral for counselling may be required if students persistently show any of the following behaviours or they report difficulties:

- deterioration in school performance,
- frequent or extended school non-attendance,
- pain such as headaches, stomach aches or other illness,
- regressive behaviours such as bed-wetting, tantrums or clinging,
- aggression or reduced control over behaviour, extreme irritability,
- risk-taking behaviour, e.g. sexual activity, drug and alcohol abuse,
- depression, withdrawal, apathy or guardedness,
- fierce self-sufficiency, rejection of help,
- uncontrolled frequent crying or other extreme emotional reactions to mild events,
- sleep problems: too much or too little, nightmares,
- easily startled by noise,
- re-enactment of a traumatic event in play,

Dealing with disclosure during a group activity

A group of recently arrived refugee and migrant students, aged 14-17, were participants in a Kaleidoscope Program at their school. Students had been bringing items of clothing as their ‘cultural object’ and talking about what the clothes meant in their culture. One of the participants, who had been very quiet in the group, produced a beret and started to explain how he had obtained it. He described a battle on his street with soldiers being injured and dragged to safety by villagers. He said that he also attempted to drag a soldier to safety but the soldier died in his arms. He recounted the soldier giving him the beret to remember him by.

Total silence followed in the group. The group facilitator thanked him for what he had said and commented how difficult it must have been to speak about such a sad event. She went on to say that he was brave to tell and that it was a special memory which would not leave him. She also said, ‘The beret is very special and we are privileged to hear about it and be trusted with the story’. The facilitator asked the rest of the group if they wanted to say something. One student asked, ‘How did you do it?’. Another commented ‘It was sad to hear the story’.

In a follow-up with the student on his own, he said he needed nothing further. Notably, his participation in the group in subsequent sessions was more active than it had been before the disclosure.
• very poor concentration,
• fear, worrying a lot.

The school’s usual process for making a referral should be followed.

Where it is appropriate and consistent with school protocol, discuss the matter directly with the student:
• Approach them individually and express what you have noticed by way of a difficulty and how this has led you to wonder if they are having a problem with their current situation.
• Ask what might make things easier and whether you can help in any way.
• Let them know that it is not unusual for young people to feel that way, particularly if they have experienced hardships and violence before coming to Australia.
• Ask if they have had any bad experiences before arrival or since arrival which they may not want to talk about but which might be affecting them.
• Ask if they are having problems with not being able to concentrate or if they are having difficulty sleeping.
• Ask if they would like some help with their problems.
• Discuss possibilities for help.

Where consultation with parents or the student’s carer is required:
• Inform the parents or carer about what you have noticed in the way of a difficulty.
• Ask if they have noticed any difficulties at home, e.g. sleeplessness, irritability, anger, withdrawing or crying a lot.
• Ask them if they think the difficulties are connected to any bad experiences they or their child may have had before coming to Australia and/or since arriving in Australia.
• Discuss the possibility of getting additional help.
• If they are receptive, discuss the possibility of a referral to an appropriate agency.
• If it seems unlikely that they will pursue a referral with your assistance, plan another meeting with them in the future to discuss what is happening.

While aiming to involve parents, it is important to be aware that there may be circumstances in which it is not in the student’s best interest to do so (for example, where there are concerns about abuse). Further more, parents may not be ready to accept that their child needs help.

A referral for settlement support may be needed if students have issues relating to:
• housing,
• legal or migration matters, e.g. sponsorship,
• income support payments through Centrelink,
• family conflict,
• social isolation.
Contact details of local agencies providing counselling and settlement support are available from the school’s Student Welfare Coordinator or an equivalent person.

**Acknowledging students’ coping strategies**

Many new-arrival students and their families from refugee backgrounds face social disadvantage, poverty, unemployment, inadequate accommodation, language barriers and ill health. Students may not have a high level of parental guidance. In this context they may have developed coping strategies which serve them well in difficult circumstances but which may not necessarily be regarded as ‘healthy’. It is important to avoid negative labelling of these strategies as ‘bad’ or ‘unhealthy’. Rather, take opportunities to extend constructive ideas and explore other options.

**Cultural sensitivities**

Some cultural practices may mean that a student cannot participate in all activities. Teachers should use their judgement when selecting activities and in how they prepare students for the activities.

**Identification of students from refugee backgrounds**

It is important to note that some students may not feel comfortable with being identified as refugees. Reasons include the negative portrayals of refugees in the media and wider community.

**Eligibility for health and settlement support – visa categories**

This teaching resource is concerned with promoting access to health and community services. Government policies related to services available to humanitarian program entrants and asylum seekers change from time to time, and it is therefore suggested that teachers familiarise themselves with the current position. Detailed information on eligibility for services and programs by visa category, including that for international students and family, business and skilled migrants can be found at:

Establishing guidelines
It is important to set guidelines when using HealthWize material. The following sections make suggestions about class conduct, teacher facilitation and confidentiality.

Class conduct guidelines
Some of the exercises in the teaching resource seek to engage students in group discussion. Students are more likely to actively participate in these discussions if there is a climate of trust, respect and group cohesion.

Most schools and classrooms will have student conduct guidelines and teachers may have developed class rules for working in groups. Before starting the HealthWize program it is advisable to revisit or to develop rules and guidelines. Engaging young people in the process of developing formal conduct guidelines gives them a sense of ownership and ensures that the rules are discussed in terms they understand. In turn, this increases their motivation to adhere to the rules and helps to ensure that their rights are respected.

How conduct guidelines are developed will depend on the age and group dynamics in the class concerned. The following, more formal process is appropriate for younger students, but may be modified, at the discretion of the teacher, with older groups of students:
• Explain to students that over the coming weeks they will be studying some units on health and settlement in a new country.
• Ask the students to brainstorm how they would like to learn together and what rules would help them speak comfortably in the class. Record their responses.
• Discuss each of the points raised by the class, checking that they have a shared understanding. Check that the following are included and explained if not suggested by students themselves:
  – that one person speaks at a time,
  – that each person has a chance to talk,
  – that no one is pushed to talk or participate if they don’t want to,
  – that no one laughs or makes fun of what someone else says,
  – that what is said in the group stays within the group.
• The brainstorming can be done in small groups, with each group feeding back to the larger group.
• By sharing some of his/her own thoughts (where appropriate) the teacher can demonstrate his/her trust of the student group.
• Ensure that the term ‘respect’ is understood and make explicit the purpose of class rules, that is, to make sure that everyone in the class is treated fairly and with respect.
Teacher facilitation guidelines
Teachers can contribute to trust, respect and group cohesion by:
• keeping the class informed about the activities planned and their purpose,
• demonstrating a genuine interest in the welfare of the students, showing a caring attitude and warmth,
• being consistent,
• conveying knowledge of the refugee and resettlement experiences,
• allowing participants to be in control of the level of self disclosure. It is important to encourage self exploration, without pushing students to talk about feelings and events,
• validating emotions expressed by students,
• protecting privacy of students,
• promoting a sense of ownership of the process and activities by students.

Privacy and confidentiality
Students may be reluctant to seek help because they have privacy concerns. Teachers and schools need to maintain a balance between a student’s desire for privacy and meeting concerns about student safety, including mandatory reporting legislation requirements. Students need to know that they have a right to privacy but that confidentiality cannot be guaranteed if the teacher believes the student’s safety is at risk. The teacher should advise the student from the beginning that the teacher and student may have to seek help and advice from others and always inform students of any further action the teacher intends to take.

A student’s right to privacy in the classroom also needs to be discussed in the context of class rules. The rules may include an agreement not to name the person being talked about, as well as not discussing details of individual student disclosures outside the classroom.

Staff support
Because of the potential for disclosure of distressing information, teachers need to be familiar with the support that the school can offer to teachers as well as students. The Student Welfare Coordinator or a senior member of staff can provide initial support and advice. Before starting to work with the HealthWize material, familiarise yourself with school policies and practices on student welfare, privacy and confidentiality and mandatory reporting.

Related professional development could include:
• attending training offered by VFST to teachers working with students of refugee backgrounds,
• familiarising yourself with the cultural backgrounds of your students,
• familiarising yourself with local settlement and support agencies such as Community Health Centres and Migrant Resource Centres,
• familiarising yourself with health curriculum frameworks.
Teaching approaches and methodologies
The HealthWize program uses a range of ESL and general literacy strategies. These are discussed in the following sections.

Brainstorming
List information or create a bank of suggestions on a given topic as a whole class or in groups. The information can be presented as a list or as a mind map. You may begin with a list and then together order the suggestions into a visual summary. Encourage contributions from all students and accept all suggestions, although you may need to revise the syntax so that the meaning is clear. By building up a culture of acceptance, more students are likely to contribute.

Uses:
• as a predictive pre-teaching strategy,
• before to a writing activity to gather information and vocabulary,
• when introducing a unit or topic.

Role play and mime
In using mime, students are using non-verbal communication, i.e. how gestures, facial expressions and body movements communicate a message.

In using role play, students are practising language in a realistic and supportive context as well as developing decision-making, communication and assertiveness skills.

Different forms of role play prompts have been used in the teaching resource:
• scripted dialogues,
• detailed role instructions using cue cards,
• situation cue cards,
• broad scenarios,
• a single cue word, e.g. fear.

Suggested procedure:
• The language of making suggestions and negotiation should be pre-taught, e.g. Why don’t we, How about we, I think we should, We could, I could, You could, This would be better, That’s a great idea, Good thinking.
• Pre-teach language of appreciation and criticism, e.g. I liked the way X did Y, You could hear everything clearly, They were really listening to each other, X’s body language was very good, It was funny when.
• Group size depends on the task, but should be no bigger than four students.
• Allow time for preparation and practice.
• Role plays can be presented simultaneously if you feel that students will be less inhibited by not performing to the whole class.
• Allow time for whole class appreciation and discussion of the role plays and for time to
debrief with the players. Discuss feelings and attitudes. You can ask questions like, ‘How
did it feel to be the bully/the mother?’ Give students time to talk about their responses
and reactions to other players.

Reading
Depending on their levels, students will need varying amounts of scaffolding to understand
the reading passages. Use the CD/tape version or read the material aloud yourself while
students follow the text for an initial reading. If students are at S2 level they can then read
the text silently for themselves and/or read it in sequence in pairs.

Pre-reading strategies to familiarise students with the language and content of the passage
can include:
• use of visual support material where available to make predictions,
• use of headings, sub headings and specific text features, e.g. brochure format, to predict
  style of text and content,
• a pre-reading quiz with true/false questions done in pairs or groups,
• brainstorming of topic knowledge and previous experience relevant to topic,
• pre-teaching of essential vocabulary and concepts,
• students writing possible sentences predicting the content of the passage from key words,
• use of a know/what/learnt chart: What do I know about this subject? What do I want to
  know? What did I learn? The first two columns are completed before the reading and the
  third following the reading.

While reading, strategies to assist comprehension can include:
• Demonstrate and practise reading strategies such as questioning the text – What does he
  mean by…; making connections – That reminds me of …; visualising – I can see those stress
  hormones racing around the body; synthesising – I think she means that…
• Demonstrate word attack skills.
• Use re-reading to check understanding.
• Think, pair, share. Stop reading, ask a comprehension question, allow time to think,
  students share ideas with a partner, students share responses with class.
• Create a ‘cloze’ passage to encourage use of cueing systems.
• Specifically teach the purpose features of non-fiction text such as tables, diagrams,
  headings.

After reading, activities can include:
• retelling to a partner,
• discussion of comprehension questions in pairs or groups,
• true/false statements,
• generating new questions that ask for further information or questions to ask each other,
• text cohesion exercises, e.g. pronoun referrals,
• identifying main idea and supporting detail, e.g. box the main idea and underline
  supporting detail,
• close activities to check content understanding,
• vocabulary exercises,
• doing a visual representation of the text, e.g. create a mind map showing places you can make friends in Australia.

The choice of activities depends on the nature of the text. New-arrival students may be unfamiliar with and will need explicit teaching of reading activities such as converting a false statement to a true statement, interpreting tables, putting statements on a continuum and transferring information to a Venn diagram. The activities need to be modelled and scaffolded.

**Writing**

There are a variety of written activities and text types throughout the teaching resource, including lists, notes, information in tables, short answers, form filling, poems and some extended pieces of writing in different genres.

All writing should be modelled first on the board or on the overhead projector. For extended pieces of writing a suggested strategy sequence is:
• deconstruction of the model to analyse the content and language,
• brainstorming to build up field knowledge,
• modelling of a sample text and/or joint construction of a text,
• independent writing with drafting, revising and publication built into the process. Mini lessons on specific writing features, e.g. use of inverted commas or tense, can be taught as needed to a small group or to the whole class.

**Pronunciation**

Pronunciation practice can be integrated into the teaching program:
• Basic syllable stress can be taught with the introduction of new vocabulary using stress markers above the word, a clap or a ruler tap on the desk.
• Word and sentence stress can be taught using lines of dialogue, e.g. in Unit 9. Model marking the stress patterns on the overhead for line one and then ask the students to mark their copies for other lines, correcting it together on the overhead.
• Stress timing and rhythm can be taught with the jazz chant using a whole body response, clapping, stamping etc.
• Recognising and practising intonation patterns can be integrated throughout the units. Students can practise marking rising and falling intonation, e.g. marking rising intonation at the end of some questions, and generally falling at the end of many ‘wh’ questions. A kinaesthetic response using a hand and arm to show rising and falling intonation helps increase awareness.
Concept maps
Concept and mind mapping are suggested as means of presenting information visually so that relationships between ideas can be clearly seen:
• Concept mapping organises ideas in a hierarchy from the most general to the most specific, e.g. after brainstorming.
• Concepts are written in boxes or circles which are joined with lines or arrows, e.g. to present ideas found in a text. Linking words are written on or near the line linking the concepts and show the meaning relationship between concepts.

Mind mapping
Mind maps consist of a central word or picture with five or more associated ideas branching off from the central word/concept. Each one of these ideas can then have branches.

Uses:
• It is a useful tool for brainstorming as it encourages students to make associations and helps organise ideas.
• It can be used to plan writing.
• It can be used to present ideas found in a reading, listening or viewed text.

Teaching vocabulary
The teaching resource introduces a lot of new vocabulary including health specific vocabulary. The following are some suggestions for teaching and reinforcing new vocabulary:
• Group words under category headings provided by the teacher or into groups of students’ own devising.
• Create word webs using a base central word with related words fanning out, e.g. health, healthy, unhealthy, well, sick.
• Put related words on a continuum, e.g. depressed, miserable, unhappy, sad, cheerful, happy or ecstatic.
• Write a definition, draw a picture, write a synonym, use the word in a sentence.
• Play concentration games. Pair the word with a definition or with a picture.
• Create a crossword puzzle.
• Mime a word.
• Create word banks for each new topic, display in the classroom.
• Prepare cloze exercises.
• Create a word-find puzzle.
• Unscramble words.
• Teach students the ‘look, say, cover, write, check’ method to assist with spelling.
**Working in groups**

Many students will not be familiar with Australian learning styles, so it is important to discuss why we work in groups and to establish, as a class, rules and procedures for group work. These can be listed on a chart and displayed throughout the program. Point out the links with the school or class codes of conduct.

Group roles should be taught, e.g. group leader, recorder and reporter, and practised first with a simple task. Each person in the group should be given a chance to contribute.

Small groups of no more than four students work best. Groups chosen by the teacher often work more effectively than groups based on friendships. Some activities work best with homogeneous language level groups. At other times mixed level groups provide support for students with less English. Role plays are best done with mixed level groups.

During the group work the teacher and, if possible, a teacher aide circulate among the groups clarifying, motivating if necessary and generally monitoring the activity.

The reporting-back process is more effective if ideas are taken from groups in rotation rather than one group getting the chance to give all the important information first.

In the early stages of group work it is useful to model a group activity by using a fish bowl technique. You demonstrate an activity with a small group of students who you have prepared beforehand. You then ask the class to comment on how the group worked together, what kind of language was used, and what would have helped the group to work even better.
Teacher Notes and Student Worksheets

HealthWize
The student activities are complemented by an audio file. The audio file can be downloaded from www.survivorsvic.org.au. Text sequences recorded on the audio file are listed below and are identified by the loudspeaker symbol.

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<th>Duration</th>
<th>Sequence</th>
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<td>Health profiles</td>
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<td>Unit 2 Activity 5 (p30)</td>
<td>03:40</td>
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<td>Unit 3 Activity 3 (p44)</td>
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<td>What are these people feeling?</td>
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<td>Unit 4 Activity 13 (p76)</td>
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<td>Making friends in Australia</td>
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<td>Unit 5 Activity 2 (p86)</td>
<td>01:25</td>
<td>Why are they stressed?</td>
</tr>
<tr>
<td>Unit 6 Activity 5 (p114)</td>
<td>02:36</td>
<td>Migration and health</td>
</tr>
<tr>
<td>Unit 7 Activity 2 (p124)</td>
<td>03:40</td>
<td>What does a GP do?</td>
</tr>
<tr>
<td>Unit 7 Activity 3 (p128)</td>
<td>04:04</td>
<td>What does a counsellor do?</td>
</tr>
<tr>
<td>Unit 7 Activity 5 (p132)</td>
<td>01:26</td>
<td>‘I’ve got a problem’, jazz chant</td>
</tr>
<tr>
<td>Unit 9 Activity 1 (p145)</td>
<td>00:45</td>
<td>Sam goes to the doctor</td>
</tr>
<tr>
<td>Unit 9 Activity 2 (p148)</td>
<td>01:26</td>
<td>Zahra makes an appointment to see the doctor</td>
</tr>
</tbody>
</table>

Total duration 25:39
Key understandings

• Health and wellbeing encompass:
  – physical health,
  – emotional health (sometimes referred to as psychological, spiritual, or mental health),
  – social health.
• These health dimensions are interdependent.

Language focus

Simple present – habitual use
I ride a bike. I need eight hours sleep.

Present continuous
He’s riding a bike.

Gerund as subject
Riding a bike is healthy.

Comparatives
But, both

Frequency words
Every day, once a week, occasionally

Talking about health needs
I need eight hours sleep.

Talking about health habits
I eat a healthy breakfast.

Making comparisons
Eating fruit is healthier than eating junk food.

Skills

Reading for specific information
Categorisation
Note-taking in table format
Working in pairs and groups
Mind mapping
Presenting information on a Venn diagram
Presenting information on a poster
Presenting information on a continuum
Using WordArt and ClipArt

Text types

Short utterances
Short non-fiction text
Diagram
**CSF2 links**

ESL Companion to the English CSF2:
- Listening and Speaking Outcomes S1.2, S1.3, S1.4
- Reading Outcomes S1.1, S2.1
- Writing Outcomes S1.1, S1.2, S1.3, S1.4

Health and Physical Education:
- Health of Individuals and Populations, Level 4, Outcome HPIP0401

**Background issues**

The aim of this unit is to enhance young people’s awareness of their physical, emotional and social health, so that they can gain a sense of control and adapt to many changes. The main points are:

- There is an increasing acceptance in the Australian health care system of the World Health Organisation’s definition of health as a ‘complete state of physical, emotional and social wellbeing’. The understanding that there are different dimensions of health and that these are inextricably linked underpins the other units in the workbook.
- Young people generally tend to see health fairly narrowly in terms of physical health and the absence of illness and injury. This may be particularly the case for young people from non-English-speaking backgrounds owing to:
  - the fact that health systems in their countries of origin may have focussed, of necessity, on acute physical care;
  - the fact that many young people, particularly refugees, will have grown up in an environment of deprivation and hardship and hence may not be familiar or readily identify with the concept of optimal health. They may have come to accept poor health as something one needs to learn to live with;
  - the particular stigma attached to mental illness in some countries. Broader concepts of mental health and wellbeing may be confused with mental illness. For this reason the term emotional health is used throughout the resources rather than mental health.
- The notion of belonging or social connectedness is an important component of emotional health and social wellbeing. Depending on the level of the group, the teacher might want to explore the idea of belonging to a school, a family, a country or two countries as a component of emotional and social health.
- Factors that contribute to our health and wellbeing include having friends, being involved in activities, exercising, eating and sleeping well, spending time with family and friends, being happy at school, having adequate housing, feeling like we belong to a group, and being connected to a culture and religion.
Preparation for Unit 1 activities

- Enlarge visuals for presentation of concepts.
- Collect other visuals as needed to illustrate different dimensions of health.
- Photocopy and cut up a set of visuals for each group.
- Prepare flashcards for ‘Is this habit healthier than that habit?’ activity.
- Obtain CD/tape player and CD/tape.
- Prepare health habit cue cards for Activity 8.

Suggested activities

The aim of this unit is to teach the concepts of health, healthy behaviour and unhealthy behaviour. Because there is a degree of relativity in the notions of healthy and unhealthy it is wise to teach the concepts initially using a visual highlighting the difference. Show a visual of healthy behaviour and unhealthy behaviour, write the words, health, healthy, unhealthy on the board. Using the enlarged visuals for Activity 1 elicit healthy and unhealthy behaviours. Ask, ‘What is she doing? Is this healthy or unhealthy?’. There is likely to be productive discussion and disagreement about what is healthy and unhealthy behaviour. The visuals can be supplemented by magazine pictures or ClipArt visuals showing a range of healthy and unhealthy situations, e.g. playing sport with friends, eating healthy or unhealthy foods, spending relaxing time alone, people being aggressive or people talking calmly. A more advanced group can brainstorm other healthy and unhealthy situations.

Activity 1: Healthy and unhealthy (p12)

1. Working in pairs students group their visuals into two categories – healthy and unhealthy. They practise making sentences, e.g. Smoking cigarettes is unhealthy. Share results with the class. Model and practise comparative sentences using but. Students write sentences about the pictures.

2. Students then classify behaviours on a healthy/unhealthy habits continuum for eating, physical exercise, homework and study plans. This activity should generate discussion on what foods are better than others, what study habits are better than others etc. This activity aims to move students away from a black and white attitude to healthy and unhealthy behaviours. An occasional hamburger is OK, but eating chips and hamburgers every day isn’t great for your health. Make explicit the transition from the simple present, I eat fruit every day to the gerund, Eating fruit every day. Give each student a flashcard with a behaviour written on it and have them place themselves on a health continuum at the front of the class for each area of behaviour. Mark one end healthy and the other unhealthy. Once you have agreement from the class, write the health line continuums on the whiteboard or overhead projector.

3. Teach/revise the comparative form, healthier than.
Activity 2: Aspects of health (p14)

It’s OK to distinguish physical health, emotional health and social health but they do not correspond to mind, body and social relationships. Nevertheless you may have to use these words. ‘Body’ is straightforward but ‘mind’ is very complicated. In English it tends to mean thoughts and feelings to which we give words, but also includes feelings to which we have not given words.

So what needs to be taught is the way they are connected, that is:

- Physical health depends on how your body is, how your thoughts and emotions are, and how your relationships are.
- Similarly emotional health depends on how your body feels, what you are thinking and feeling, and how your relationships are.
- Social health depends on feeling well and thinking and behaving in ways which make relationships fulfilling.

Introduce the terms physical health, emotional health and social health using visuals of a positive and a negative situation to illustrate each aspect. Show that social health and emotional health are closely connected. Elicit/teach:

- Physical health is about our bodies but is influenced by feelings, thoughts, and how we get on with people.
- Emotional health is about the way we feel and is influenced by our bodies, thoughts, and how we get on with people.
- Social health is about how well we get on with people and is influenced by our bodies, how we feel, what we think and how we behave.

Practise the sentences:

- Health includes physical health, emotional health and social health.
- Emotional health and physical health are connected.
- Emotional health and social health are connected.
- Physical health, emotional health and social health are all connected.

Introduce new general vocabulary, as needed, e.g. diet, exercise, friends, family, sport, sleep, religion, hobbies.

Using enlarged visuals, discuss groupings as a class. Do all pictures fit into just one category? Ask students to classify visuals into things which affect the body, thoughts and relationships. Teachers may wish to draw a Venn diagram on the board (see p16). Students could place their visual on the diagram to initiate discussion about which components of health match the behaviour in the visual.
Practise making sentences using the visuals. For example:

- Eating a lot of junk food is not good for our physical health.
- Walking with a friend is good for our social health, our emotional health and our physical health.

Complete vocabulary and close exercises. Students can then write statements about the visuals.

To reinforce the three aspects of health, students could create a health pyramid and list activities and behaviours under the headings of physical, emotional and social health.

**Activity 3: Classify health words (p16)**

This activity gives students further practice in classification of words and behaviours associated with the three components of health. Go through the words and check understanding. Students may not be familiar with a Venn diagram and will need careful explanation and demonstration. Discuss the first few items as a whole class and show in which circle you would write each word or idea. Explain that the Venn diagram is useful to show when a ‘health word’ relates to more than one component of health. Complete the sentence activity.

**Activity 4: Good health (p17)**

The reading passage consolidates what has already been taught about the dimensions of health and their interconnectedness. Pre-teach the necessary vocabulary. Listen and read. Ask oral comprehension questions. Model how to complete a true/false exercise and show how a false statement can be made true. Complete the exercise. The passage could also be read as a co-operative close exercise by students in pairs.

**Activity 5: Abdul’s health habits (p18)**

This activity introduces students to other health habits and asks them to consider what category or categories they fit into. Emphasise that the three aspects are interdependent.

**Activity 6: My health needs (p19)**

Students make a poster or do a mind map, ‘My health needs’ with the word ‘health’ at the centre, to illustrate the different aspects of health. Model one on the board. Pre-teach and practise general statements like: *For me to be healthy I need eight hours sleep a night, I need a good diet, I need regular exercise, I don’t need cigarettes, I need to quit smoking, I need to talk about my problems, spend time with friends, exercise, plan my homework, see a doctor if I am sick etc.* Show and practise the distinction between need + object, as in I need food and need + infinitive, as in I need to eat.

Display the posters and use as a reference throughout the unit. Students could use WordArt, ClipArt or pictures from magazines to enhance their posters.
Activity 7: Health profiles (p19)
These health profiles raise the issue of balance in life being necessary for health and wellbeing. Have students look at the pictures and title and make predictions about the content of the passage. Read or listen to the profiles and discuss the health behaviours.

Prepare for the note-taking activity by asking students to underline or highlight helpful and unhelpful behaviours in different colours.

Model the note-taking activity on the overhead projector. Practise sentence making from the table in pairs using the example sentences as models. Students can also make comparative statements about Amir’s and Hoang’s health habits using but or however. In the next part of the activity the students make judgements on what Abdulkadir and Hoang need to do. The exercise recycles the ‘need to’ structure.

Activity 8: My health habits (p22)
Play a spin the bottle game using cue cards to prepare for the healthy habits activity. Students take a cue card and make a sentence, e.g. diet – I eat breakfast every morning. This activity and the written activity is designed to get students thinking about how well they are looking after their own health needs. Use your discretion about introducing unhealthy habits. You could use yourself as an example, e.g. I drink too much coffee or I don’t spend enough time with my friends.

Extension activities
• Do oral presentations of the ‘health needs’ posters in Activity 6 explaining the different dimensions of health.
• Students develop a health survey to ask their friends about their health habits, they collate and graph the results, write up and present their findings.
• Use the computer to make a big book to read to younger students illustrating the different dimensions of health. Example: Hi, my name is Mohammed. I feel happy and healthy when I joke with my friends.
• Create a collage from magazine pictures to show healthy lifestyles.
• Do a unit of work on ‘food and nutrition’.
• In groups students work out ways to present the different dimensions of health. The class guesses the actions and identifies the health dimensions.
• Make a ‘health’ crossword puzzle using crossword-maker software.

Assessment
• Students write an imaginary health profile for a person pictured in a magazine using the health profiles provided as models.
Visuals for Unit 1

- Doing aerobics is healthy.
- Playing soccer with your friends is healthy.
- Riding a bike is healthy.
- Smoking is unhealthy.
- Eating fruit is healthy.
- Studying at 2 am is unhealthy.
- Eating junk food every day is unhealthy.
- Making study plans is healthy.
- Eating junk food occasionally is healthy.
- Worrying all the time is unhealthy.
- Having friends is healthy.
- Being left out all the time is unhealthy.
- Sleeping eight hours a night is healthy.
- Laughing with friends is healthy
- Talking to someone about a problem is healthy.
- Going to the mosque/church/temple is healthy.
- Walking with a friend is healthy.
Words for health habit cue cards

diet    exercise    sleep    problems    friends    food    unhealthy habit
plans   sport       hobby    sick       good habit  family  relax
worry   talking     laugh    smoke     breakfast  lunch    sad
Activity 1: Healthy and unhealthy

Make five sentences about the pictures like this.
Example: Eating fruit is healthy but smoking cigarettes is unhealthy.

1. ________________________________________________________________

2. ________________________________________________________________

3. ________________________________________________________________

4. ________________________________________________________________

5. ________________________________________________________________

Is this habit healthier than that habit?
Put these habits on a health habits continuum line.

I eat one Big Mac a week
I eat chips every day
I eat pizza once a week

I study five hours every night
I never do homework
I do homework and read most nights
UNIT ONE
What is Health?

Compare health habits.
Make sentences about the health habits line.
Practise with a partner

Example: Eating fruit twice a day is healthier than eating chips every day.

1. ____________________________________________________________

2. ____________________________________________________________

3. ____________________________________________________________

4. ____________________________________________________________

I worry about tests a lot
I worry about my work all the time

I play sport every lunchtime
I walk for an hour twice a week
I push the TV control with my thumb

I eat fruit every day

I make a study plan

I eat fruit every day
I make a study plan

UNIT ONE Student Worksheets
Activity 2: Aspects of health

There are three aspects of health:
• physical health
• emotional health
• social health

These can be defined as follows:
• Good physical health includes our diet (or what we eat), exercise, sleep, being well.
• Good emotional health includes being able to relax, talk about our problems, deal with stress, experience happiness.
• Good social health includes doing things with friends, talking with friends, playing sport with friends, belonging to school, a family, a group of friends.

Make statements about the different aspects of health using these words.

bodies feel social
connected healthy relationships

1. Physical health is about our _____________________.

2. Emotional health is about what we think and _____________________.

3. Social health is about our ____________________ with other people.

4. When our bodies are ______________, it helps to make our thoughts and feelings healthy.

5. Emotional health and physical health are _____________________.

6. Emotional health and ________________________ health are connected.
Vocabulary: Match these health words with their meanings. The first one is done for you.

<table>
<thead>
<tr>
<th>Emotions</th>
<th>about our bodies</th>
</tr>
</thead>
<tbody>
<tr>
<td>Diet</td>
<td>deciding how and when we are going to do or achieve something</td>
</tr>
<tr>
<td>Exercise</td>
<td>things we like doing in our spare time, e.g. reading, skateboarding</td>
</tr>
<tr>
<td>Social health</td>
<td>what we believe in and how we practise it, e.g. Buddhism, Islam, Christianity, Judaism</td>
</tr>
<tr>
<td>Hobbies</td>
<td>how we keep our bodies fit, e.g. walking, running, dancing</td>
</tr>
<tr>
<td>Religion</td>
<td>what we do to rest our thoughts and bodies, e.g. listen to music, watch TV</td>
</tr>
<tr>
<td>Goals</td>
<td>our feelings, e.g. happy, sad, angry</td>
</tr>
<tr>
<td>Plans</td>
<td>the food we eat each day</td>
</tr>
<tr>
<td>Physical</td>
<td>what we want to do or be in the future</td>
</tr>
<tr>
<td>Relaxing</td>
<td>about ourselves and our relationships with other people</td>
</tr>
</tbody>
</table>
Activity 3: Classify health words
Put these health words or phrases into the circles on the diagram.

Physical health

Emotional health

Social health

Some words fit into two or three categories.

worry a lot
belong to a group
relax
exercise every day
talk

feel sad
food
play sport
close friends
hobby

laugh
church
sleep well
feel confident
temple

sickness
mosque
diet
homework plan
make goals
Complete sentences using these words.

<table>
<thead>
<tr>
<th>good</th>
<th>problem</th>
<th>physical</th>
<th>emotional</th>
<th>health</th>
</tr>
</thead>
<tbody>
<tr>
<td>family</td>
<td>exercise</td>
<td>harmful</td>
<td>laughing</td>
<td>sport</td>
</tr>
<tr>
<td>junk</td>
<td>sleep</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

1. Smoking is ____________ for our physical health.

2. Exercise is ____________ for our physical ____________ and our emotional health.

3. Playing ________ is good for our physical health and for our emotional health.

4. Eating a lot of ____________ food is not good for our physical health.

5. We need regular ____________ for our physical health.

6. Talking to someone about a ______________ is good for our emotional health.

7. Joking and ________________ with friends is great for our ________________ health and social health.

8. Having a good night’s _________ is good for our _________ and _________ health.

9. Feeling like we belong to a school and a __________ is good for our emotional health.

Activity 4: Good health

Read this passage.

Good health means more than just good physical health. It includes all the aspects of our life that make us feel well and happy and able to work towards our goals.

We need to make sure that we look after all our health needs. Our physical health needs include eating a healthy diet, having plenty of sleep, getting regular exercise and avoiding unhealthy habits like smoking. We also need to make time for our emotional health needs. This includes making time for relaxation, for having fun, and for our religion or spiritual belief. It is important for our emotional health to make plans and set goals that we can achieve and to talk to someone about any problems we have. It helps us to take control of our lives. Human beings need the company of other people. For our social health we need to spend time with our family and friends, doing enjoyable things together and talking together.
The three aspects of our health are linked together and can affect each other. For example, if we are feeling worried or very sad for a long time (emotional health), we are more likely to catch a cold or have stomach problems (physical health). If we feel unhappy (emotional health) we might avoid our friends or find it hard to make new friends (social health). We need to look after all aspects of our health to stay healthy and happy.

**Are these statements true or false? Make the false statements true.**

1. Smoking and drug-taking are harmful to our physical health.
2. If we are worried and sad for a very long time we might get sick.
3. It is important to keep a problem to ourselves.
4. The three aspects of our health are separate.
5. Our social health needs include the food we eat, sleep, and our exercise.
6. Our physical health needs include spending enjoyable time with our friends.

**Activity 5: Abdul’s health habits**

Abdul looks after his health. Here are some of the things he does.

Complete the table by ticking the health category or categories in which the health habit belongs.

<table>
<thead>
<tr>
<th>Activity</th>
<th>Physical health</th>
<th>Social health</th>
<th>Emotional health</th>
</tr>
</thead>
<tbody>
<tr>
<td>I talk about my problems with someone I trust.</td>
<td>✔️</td>
<td></td>
<td></td>
</tr>
<tr>
<td>I practise the guitar.</td>
<td></td>
<td></td>
<td>✔️</td>
</tr>
<tr>
<td>I eat a healthy breakfast.</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>I sleep eight hours most nights.</td>
<td>✔️</td>
<td>✔️</td>
<td></td>
</tr>
<tr>
<td>I go to the mosque.</td>
<td></td>
<td>✔️</td>
<td></td>
</tr>
<tr>
<td>I like to rap dance with my friends.</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>I write to a friend in my country.</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>I have my teeth checked by a dentist.</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>I laugh a lot with my friends.</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>I keep a homework diary.</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>I belong to a soccer club.</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

HealthWize © VFST
Activity 6: My health needs

Make a health poster. Write ‘My health needs’ at the top of the page and ‘health’ in the centre of the page. Include your physical, social and emotional health needs.

Activity 7: Health profiles

How healthy are my habits?

Abdulkadir runs four times a week with friends, and trains and plays soccer twice a week with a Somali soccer club. He also lifts weights. He has a sore knee but he hasn’t told his coach because he doesn’t want to be left out of the team. Abdulkadir doesn’t eat a lot of junk food and he always eats a healthy breakfast. He travels to school each day with Ivan, who is a good friend. Abdulkadir doesn’t know what to do in future. He finds school boring and usually forgets to do his homework.

Hoang is often late for school because she studies until midnight most nights. She is always tired. She worries about school and getting a job because she wants to send money to her family in Vietnam. Hoang lives with her older sister, Thuy, who works from 4.00 pm to 12.00 midnight most nights. Hoang doesn’t eat breakfast but she usually buys a packet of chips on the way to school, which she eats at recess-time. Every lunch she goes to McDonalds and buys a Big Mac. Hoang is very shy and doesn’t talk to many students at the language centre. At lunchtime she sits in the playground and reads a book or does her homework. On Saturdays Hoang and her sister go to the Buddhist temple to pray. They are learning more about Buddhism with other Vietnamese students in a special class.
Make notes about Abdulkadir’s and Hoang’s health habits like this. Write notes to show where their habits fit on the health continuum.

<table>
<thead>
<tr>
<th></th>
<th>Abdulkadir</th>
<th>Hoang</th>
</tr>
</thead>
<tbody>
<tr>
<td>Helpful for physical health</td>
<td>doesn’t eat much junk food</td>
<td></td>
</tr>
<tr>
<td>Not helpful for physical health</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Helpful for emotional or social health</td>
<td></td>
<td>Alone at home every night</td>
</tr>
<tr>
<td>Not helpful for emotional or social health</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
Make sentences about Abdulkadir’s and Hoang’s health habits.

Practise in pairs.

Example: Abdulkadir doesn’t eat junk food. This is helpful for his physical health. Hoang doesn’t eat breakfast. This isn’t helpful for her physical health.

Write four sentences.

__________________________________________ _____________________________

__________________________________________ _____________________________

__________________________________________ _____________________________

__________________________________________ _____________________________

Make comparisons. Write three sentences.

Use words like ‘but’, ‘however’.

Example: Abdulkadir has a good friend but Hoang doesn’t have friends at school.

__________________________________________ _____________________________

__________________________________________ _____________________________

__________________________________________ _____________________________

What are Abdulkadir’s and Hoang’s health needs?

Write four sentences saying what you think Abdulkadir and Hoang need to do.

Example: Abdulkadir needs to tell his coach he has a sore knee.

__________________________________________ _____________________________

__________________________________________ _____________________________

__________________________________________ _____________________________

__________________________________________ _____________________________
Activity 8: My health habits

Make a list of your health habits under these headings. Include what you do now and things you might want to change. Write ☐ beside the habits you want to change.

For physical health think about:
• diet,
• exercise,
• sleep,
• habits like smoking.

For emotional and social health think about:
• what you do with friends,
• your work habits,
• what you do for relaxation,
• any hobbies you have,
• your religion if it is important to you,
• your family,
• what you do if you have a problem.

<table>
<thead>
<tr>
<th>Physical health</th>
<th>Emotional and social health</th>
</tr>
</thead>
<tbody>
<tr>
<td>Example</td>
<td></td>
</tr>
<tr>
<td>I eat fruit every day.</td>
<td>If I am worried, I talk to someone.</td>
</tr>
<tr>
<td>I drink too much coffee. ☐</td>
<td></td>
</tr>
</tbody>
</table>

Reflection

In this unit I learned
Key understandings

- Moving to a new country means change and can bring feelings of loss that may affect our health and sense of wellbeing.
- Change does not mean cutting off from our past. It is important to remember the good things. Change can be good or bad. Usually it means both.
- It is important to recognise the positive aspects of change and to be aware of factors and behaviours that can make change positive.
- Difficult or bad aspects of change usually get better over time.

Language focus

- Simple past tense questions and statements
- ‘Wh’ and ‘how’ questions
- Simple present
- Temporal conjunctions

Expressing likes and dislikes
Talking about the past

Skills

- Interviewing a partner and reporting back
- Listening respectfully
- Listening for specific information
- Locating places on a map
- Writing a recount
- Writing a memoir
- Reading and understanding a poem
- Working in groups

Text types

- Questions and answers
- Conversation
- Poem
- Description/memoir
- Recount
CSF2 links

ESL Companion to the English CSF2:
- Listening and Speaking Outcomes S1.1, S2.1, S2.3, S2.4
- Reading Outcomes S2.1, S2.2, S2.3
- Writing Outcomes S2.1, S2.2, S2.3, S2.4

Health and Physical Education:
- Self and Relationships, Level 4, Outcomes HPSR0401, HPSR0402

Background issues

When refugee young people move to a new country, a number of factors affect their well-being, e.g. loss of places and people that are important to them, adjustment to a new culture, learning a new language, making new friends. An awareness of these factors and their impact on health can help young people identify strategies for coping.

There are many new things which students encounter when they settle in a new country. Some of those new things feel good such as freedom, safety and being able to go to school. But some new things are very difficult such as not being able to communicate, belonging to a minority group, facing racism. Awareness of why things might be more difficult than expected and awareness of what may make things better provides an opportunity to adjust to change and build hopes for the future.

Loss of important things from the past can make adjusting to change very challenging. Recognising ways in which important aspects of life have continuity, such as affection for people and values, contributes to a sense of wellbeing.

Preparation for Unit 2 activities

- Obtain a large map of the world preferably laminated so that it can be drawn on and erased.
- Collect a set of atlases.
- Prepare an overhead transparency of the world map and the interview sheet.
- Ask students to bring something from their culture that is important to them.
- Obtain CD/tape player and CD/tape.
- Obtain art paper.
Suggested activities

Activity 1: Mapping the journey (p28)
1. Introduce this topic by explaining that we are going to talk about people’s journeys to Australia and why they came to Australia. As the class is likely to contain various categories of migrants, reasons for people coming to Australia can be brainstormed and listed on the board. Point out that some people leave their country by choice and that others do so by necessity or force. If students talk about traumatic personal circumstances follow the suggested procedure outlined in the introduction. Issues of confidentiality, respectful listening and the right to say only as much as individual students choose to, should be discussed before starting the activity.
2. Students mark their countries of origin on a large map of the world.
3. Pre-teach ‘country of origin’ and ‘destination’. Introduce and model questions like: When did you leave your country? Where did you go first? Where did you go after that? How did you travel? How long did the journey take? Depending on the level of the class, you can record the whole question on a wall chart or just use cue words to prompt questions. Practise the questions. Model an interview and the recording of information on the activity sheet.
4. Students ask a partner about their journey to Australia and their reasons for migration and record the information in their workbooks. They can use the atlases to locate places lived in or visited. They report back on their partner’s journey to the class.
5. Each student’s journey can be recorded on the large wall map. If the map hasn’t got a laminated surface, pieces of wool with pins could be used.
6. Write up one student’s journey as a wall story using only the non-sensitive information from the chart. Revise as a class using temporal conjunctions such as after that, then, next, finally to improve cohesion. Students write their partner’s journey as a recount for homework or if they prefer they can write about their own journey.

Activity 2: Family gifts (p29)
This activity introduces the idea of retaining something of value from the past. Pre-teach new vocabulary, e.g. coin, slipped, palm, blurred, hem, gift etc. You may need to show the generations visually on the board to clarify relationships. Read and discuss the poem in pairs. If students say they don’t have a gift or object, you could talk about non-material gifts such as advice.

Activity 3: Something from my culture (p29)
This activity extends the idea of valuing your culture and retaining continuity with positive aspects of the past. Because refugees and asylum seekers may not have any objects from their past, you may prefer that all students use the internet or the library to research their culture.
1. Introduce the term ‘culture’. Explore and define the concept of culture. List words such as food, language, religion, music, clothing, sport, celebrations on the board or create a mind map.

2. Students talk about and share their objects or their information on their country with the class. Encourage students to question each other.

**Activity 4: My hand (p30)**

Students make a personal identity statement which links the past and the present. It leads into the next activity where students listen to the experiences and thoughts of other young people. Students work in pairs to draw an outline of each other’s hands and work independently on their statements. They can do a rough copy of the text and redraft for the final version. Their pictures can be displayed if students agree. This should be a quiet reflective activity.

**Activity 5: Young people talk (p30)**

The listening activity leads directly into the discussion activity. Read the interview questions before listening to the interviews. Play the CD/tape through once for general understanding. Students could be asked to take notes under question headings for each of the two young people interviewed. Model note-taking and emphasise that students must write single word or two word utterances only. Play the CD/tape through again while students take notes. They can discuss the questions in pairs and report back to the class. It is very important that students come away from the discussion with the positive aspects of life in Australia being affirmed. With a more advanced class you may like to follow up the discussion with a writing activity. This could be personal narrative writing or an opinion essay, ‘The advantages of living in Australia outweigh the disadvantages’. If you choose this option the genre will need to be modelled prior to individual writing.

**Activity 6: Remembrance (p33)**

In discussing the passage be sensitive to the fact that there could be many students, particularly refugees, who have lost grandparents or who don’t know where their grandparents are. The emphasis should be on recognising the influence of a significant older person in their lives, not on the importance of direct family relationships. If any students show signs of distress follow procedures outlined in the introduction.

Pre-teach new vocabulary, e.g. cloth, thread, seamstress, knit, crochet, patterns. Students discuss questions in pairs and share responses.
Activity 7: An important person in my life (p34)
To prepare for writing a story about a significant person, deconstruct the story. Underline and discuss verb forms used, the language and content of each paragraph. Students write their own memoir using the example as a model. Students might like to add significant details of the person’s physical appearance. Depending on the level of the group, you could model a memoir based on a significant adult in your own life.

Extension activities
Students can make a concept map or poster to promote their culture using words and pictures.

Prepare a close activity sheet for one of the listening texts and use as a reading activity. You could delete content words, reference words, verbs, or every seventh word.

Assessment
Students write a story about an important older person in their life.
Activity 1: Mapping the journey
Talk to your partner about his/her journey to Australia.
Ask questions like this:

- Which country did you come from?
- Where did you go first?
- How long was the journey?
- Where did you go next, then, after that?
- When did you leave your country?
- How did you travel?
- How long did you stay there?
- When did you arrive in Australia?

Record their information on the chart below.

<table>
<thead>
<tr>
<th>First destination</th>
<th>Second destination</th>
<th>Third destination</th>
</tr>
</thead>
<tbody>
<tr>
<td>Where ?</td>
<td></td>
<td></td>
</tr>
<tr>
<td>How ?</td>
<td></td>
<td></td>
</tr>
<tr>
<td>How long ?</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Tell the class about your partner’s journey to Australia. Use words like first, then, after that and next.
Activity 2: Family gifts

Here is a poem about a boy and an object from his culture. The boy’s grandfather migrated to America from Russia.

Family Gifts

Grandpa came from Russia
He brought a coin with him
A coin his dad gave him
He sewed it in his hem
He always rubbed it in his hand
Until the picture blurred
One day he slipped it in my palm
And didn’t say a word

Victor Cockburn and Judith Steinbergh

Read the poem with a partner and talk about it.

Why do you think Grandpa’s father gave him the coin?
Do you think his father went with him to America?
Why didn’t Grandpa spend the coin? What did it mean to him?
Why did Grandpa give the coin to the boy writing the poem?
What does the gift mean to the grandfather and the boy?
Do you have a gift from someone or a special object that means a lot to you?

Activity 3: Something from my culture

Bring something to the class from your culture. It could be an object like a piece of clothing, a photograph, a piece of jewellery. It could be something from the internet that explains something about your culture, for example, a special celebration you have in your country. Tell the class about the object or the information from your country and say what it means to you.
**Activity 4: My hand**

Ask a partner to draw around your hand. Write these things in the five fingers:
- your name,
- where you come from,
- one thing you miss about your country,
- one good thing about living in Australia,
- one difficult thing about living in Australia.

Write something that you value in the palm of your hand, something that is important to you. It might be an object, a memory or a belief.

Decorate your picture.

**Activity 5: Young people talk**

Two students talk about their experiences in Australia. Ithibal is a 22-year-old female student from Iraq and Abdulkadir is a 17-year-old male student from Eritrea.

*Listen to their stories and discuss these questions with a partner:*

What do Ithibal and Abdulkadir miss about their country?
What do they find difficult about living in Australia?
What do they like about Australia?

Use the table provided to make notes while you are listening to the interviews to help you remember what they say.

<table>
<thead>
<tr>
<th>What does each student miss about their country?</th>
<th>Ithibal</th>
<th>Abdulkadir</th>
</tr>
</thead>
<tbody>
<tr>
<td>What does each student find difficult about living in Australia?</td>
<td></td>
<td></td>
</tr>
<tr>
<td>What does each student like about living in Australia?</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
Discuss in groups and take notes in the table below. Use ideas from Ithibal and Abdulkadir, and the ideas from your group discussion to answer these questions

<table>
<thead>
<tr>
<th>What is difficult about living in Australia?</th>
<th>What is good about living in Australia?</th>
</tr>
</thead>
</table>

**Ithibal’s and Abdulkadir’s stories**

*Ithibal and Abdulkadir talk about what they miss from their home country, what they find difficult about living in Australia, and what they like about living in Australia.*

My name is Ithibal. We used to live in the city in Iraq. My mum was a teacher there and I went to the same school. In Australia houses are a bit small but our house in Iraq was two storeys, with a big backyard with lots of trees and flowers. My mum used to love these things. We used to play in the street, lots of games, it was fun. I had lots of friends, I still remember them.

I remember the day we arrived in Syria. The first thing I wanted was an orange. I asked my mum if I could have one, but she said she didn’t have enough money. I remember crying, because I couldn’t have an orange!

At first it was really hard to make friends at school. I would ask my mum to come with me because I was scared, I didn’t want to talk. But after a while, I made friends, a lot of friends. I finished Year 10 at that school.

I remember crying when my mum told me we were going to Australia. I had no idea about it, but I didn’t want to go overseas. I don’t like travelling, even now. I don’t like moving because of all the moving we’ve had to do.

When I arrived here, I only spoke a few words of English. In Australia, everything is different. It’s a different language, a different culture. Even at school everything is different. In Syria, the students respect the teachers, but here, it’s different. But still I finished school and now I’ve just finished my first year of Applied Physics at RMIT.

If I dream about anything it’s to help my mum. She’s a really strong woman. I’d like to take my mum travelling. I don’t like travelling, but she loves it, she loves to go and visit all the mosques. Before, we couldn’t travel, because we didn’t have documents. Now that we’re in Australia, we’re free to move around. But until then, I just want to stay still for a while!
Abdulkadir
My name is Abdulkadir. I’m from Eritrea. I miss a lot of things from my country. I miss my
home, the house I grew up in. I miss my father because he’s not here, and my grandparents
because I grew up with them.

We used to do things with them. Every year after school finished, we used to go down to
the family house in Keren. We stayed with them for the summer holidays.

Australia is good because of school. We can learn a lot of things here that we can’t in our
country. In our country it was difficult to get to Uni, here it’s up to you if you work hard.
Friends here, they communicate. In our country, there is conflict between people from
different tribes, but here we don’t care about that. We only care that we come from the same
country. My friends here are Iraqi, Somali, Ethiopian and Eritrean from different tribes.

Activity 6: Remembrance
We all have memories of a loved older person who is important to us and who we learned
things from. It might be a grandparent, a family friend, or someone who looked after us
when we were younger.

This is a story about what Helen Zughaib learned from an important person in her life.

I Honour Teta by Helen Zughaib
Helen is a painter. She paints pictures with bright colours and patterns. She lives in Washington
U.S.A. This is her story about her grandmother.

This is Teta, my Lebanese grandmother (Teta means ‘grandmother’ in Arabic). She grew up
in Syria and Lebanon and came to America after World War 2.

When I was a child I loved going to Teta’s house – it was so warm and always smelled
delicious. Teta used to pinch my cheek and say, ‘I love you, I love you, I love you!’

Pieces of cloth, thread and wool were everywhere. Teta was a wonderful seamstress. The
clothes she made were beautiful and so unusual that you never knew what she would put
together. I learned about colours and patterns from Teta.

Teta sat with me for hours, teaching me how to knit and crochet. While we were knitting,
she shared stories about her childhood. She was an educated woman which was very
unusual in those days. She often advised me to ‘put education in my heart, not boys!’ Well
thanks to you Teta I put a love of art in my heart as well.

Story taken from Helen Zughaib with minor adaptations to suit the needs of English language learners (Helen Zughaib, ‘I Honour
my grandmother’ from Schiffini, A, Short, D and Villamil Tinajero, J 2000, High Point Level A: Success in English Language
Literature Content, California).
Reading and understanding
What are some of Helen’s memories of Teta?
What special gifts did Teta have?
What did Helen learn from Teta that she has carried with her in her life?
What are some of your memories of a loved older person?

Activity 7: An important person in my life
Write a short story about an important older person in your life.
Include the following information:
• Where did you know them?
• What are your memories of them?
• What activities did you do together?
• What did you learn from them that is important to you in your life now?
Look at Helen’s story. Plan your story like hers.

PARAGRAPH 1
Introduces the person

Says where she grew up and where she lives now

Teta is my Lebanese grandmother (Teta means ‘grandmother’ in Arabic). She grew up in Syria and Lebanon and came to America after World War 2.

PARAGRAPH 2
Talks about memories of her

When I was a child I loved going to Teta’s house - it was so warm and always smelled delicious. Teta would pinch my cheek and say, ‘I love you, I love you, I love you!’

PARAGRAPH 3
Talks about her special qualities and what the writer learned from her

Pieces of cloth, thread and wool were everywhere. Teta was a wonderful seamstress. The clothes she made were beautiful and so unusual that you never knew what she would put together. I learned about colours and patterns from Teta.

PARAGRAPH 4
Talks about things they used to do together.

Talks about advice the person gave her and what she learned from her.

Says why she is special.

Teta sat with me for hours, teaching me how to knit and crochet. While we were knitting, she shared stories about her childhood. She was an educated woman which was very unusual in those days. She often advised me to ‘put education in my heart, not boys!’ Well thanks to you Teta I put a love of art in my heart as well.

Reflection
In this unit I learned ______________________________________________________

______________________________________________________________________

______________________________________________________________________
U3 Feelings and Emotions

Key understandings

- It is important to recognise and name the emotions that we feel.
- We need to recognise what causes emotions and how they can affect us.
- Emotions can have an impact on our bodies and we need to recognise where we feel emotions in our bodies.
- There are coping strategies we can use (these are explored in more detail in Unit 5).

Language focus

Simple present  
I feel happy.

Imperatives  
Calm down, breath slowly.

Complex sentences  
I feel happy when.

Conditional  
I would feel sad if.

Talking about feelings and emotions  
I feel nervous when.

Expressing feelings  
I feel confused.

Expressing anger constructively  
I feel angry when you.

I want you to stop.

Hypothesising  
I would feel sad if.

Skills

Mime
Role play
Working in groups
Listening for stress and intonation
Annotating a diagram
Understanding simile and metaphor
Writing a formula poem

Text types

Short oral and written utterances
Poem
Proverbs
CSF2 links

ESL Companion to the English CSF2:
• Listening and Speaking Outcomes S1.1, S2.1, S2.2, S2.3, S2.4
• Reading Outcomes S2.1, S2.2
• Writing Outcomes S1.1, S1.3

Health and Physical Education:
• Self and Relationships, Levels 4, 5, Outcomes HPSR0401, HPSR0402, HPSR0501, HPSR0502

Background issues

• The capacity to identify and name emotions is important for:
  – knowing what one is feeling,
  – being aware that feelings can have a physical impact on the body, influence thoughts and behaviour,
  – being able to communicate feelings to others both in the course of day-to-day living and when seeking help.
• When talking about anger it is important to validate the emotion and draw the distinction between feeling angry and behaving aggressively. Distinguish between appropriate assertive behaviour and inappropriate aggressive behaviour. You could also discuss the fact that anger often cloaks other emotions such as fear, hurt, embarrassment or disappointment.
• You may choose to talk about some coping strategies at the same time as you are talking about the emotions of fear, anger, and anxiety.

Preparation for Unit 3 activities

• Obtain CD/tape player and CD/tape.
• Photocopy cue cards for mime activity onto card and cut up for group or whole class activity.
• Prepare the secret emotion cue cards for the group role play.
• Prepare overhead transparencies for modelling student tasks for Activity 7.
Suggested activities

Activity 1: How are they feeling? (p42)
1. Introduce the emotions of happiness, sadness etc. using pictures from magazines or using the faces worksheet. The main aim at this stage is to teach and practise the vocabulary of emotions.
2. Ways of practising vocabulary include photocopying the faces sheets, laminating them and making cards for pair or group games. Students can name the emotion, mime the emotion, give an example of a situation, or make a proud, worried, nervous etc. comment.
3. Practise pronunciation of vocabulary and mark word stress.

Activity 2: What makes us feel the way we do? (p43)
Brainstorm situations that make us feel different emotions. Model the complex sentence form. Complete written exercise individually.

Activity 3: What are these people feeling? (p44)
1. Pre-teach and practise additional emotion vocabulary – suspicious, relieved, frustrated, guilty, confused, disappointed. You could use the first activity to teach new vocabulary. Mark stress patterns.
2. Students listen to the extracts and circle the correct emotion on the worksheet. Play extracts at least twice.
3. Student read the scripts in pairs to practise intonation.

Activity 4: Facial expressions (p45)
Model the exercise using two students to demonstrate. Emphasise that not everyone will feel the same emotion for a situation. Some students may be excited at the prospect of going to school, others sad, others afraid. Students work in pairs to complete the exercise.

Activity 5: Mime the emotion (p46)
Pre-teach any new emotion words. This activity can be done as a whole class activity or in groups. Each student has a cue card (p40, 41) and is given three minutes to prepare a mime. The other students guess the situation and the emotion.

Activity 6: Role play an emotion (p47)
Put students in groups of three to four. Students prepare a role play depicting one or more emotions. Situations could include:

Anger: sporting field clash, teacher reacting to students arriving late to class after lunch
Fear: a frightening dream
Hopefulness: getting a driver's licence, going to a new school
Suspicion/guilt: thinking someone has stolen a precious possession / finding the object
Worry/relief: pet dog goes missing / finding the dog
Confusion: shopping for a new pair of shoes, choosing a new school

Activity 7: How am I feeling? Where in my body am I feeling it? (p47)
This activity is intended to make students aware of the physical reactions they have to different emotions and thus assist them to monitor the intensity of their feelings. An awareness of the reactions of their body can serve as an early warning signal for emotions that may become overwhelming, particularly in the case of worry or anger.

1. Read the passage. Discuss different physical reactions to emotions. Brainstorm each emotion. You may need to revise parts of the body so that students have the language to talk about where in the body they feel emotions. Teach new language items as students attempt to explain the feelings they have. Possible feelings and signs include:

   Sad: heavy heart/chest, sick feeling in stomach, weight on your head
   Happy: light feeling in head/heart, floating feeling
   Angry: tight muscles in neck, shoulders, fast beating heart, short panting breath, sweaty hands, hot face
   Worried: butterflies in stomach, tight feeling in chest, dry mouth, sweaty hands

2. Students work in pairs marking the diagram of the body with where they feel emotions and annotating the diagram. Model the activity on an overhead transparency.

3. The ‘How do you show your emotions?’ activity links situations and emotions with actions that express that emotion. It practices complex sentence forms. The first situation introduces the hypothetical form of the conditional with ‘would’ and the second situation uses past tense. Make the form and the function explicit and practise the forms. When discussing situations that cause anger, you could discuss triggers for anger, e.g. aggressive body language and ‘the look’, apparent swearing in another language, and invasion of personal space.

4. The ‘What do you do when you are sad?’ question makes students aware of their body language and their physical responses to emotions, e.g. I smile, I frown, I yell, I shout, I look down, I slump. This leads into the next activity on expressing anger and Unit 5 on coping strategies.

5. Students complete the written activity individually.
Activity 8: Expressing anger (p50)
Read the passage and discuss. Brainstorm and practise calming strategies such as:
• deep slow breathing,
• counting backwards or forwards,
• repeating a phrase such as, Cool it or I don’t need to be angry,
• visualising a calming scene.
Complete the written exercise.

Activity 9: Emotion similes and metaphors (p52)
Explain similes and metaphors. Give examples, e.g. as happy as a lark, as brave as a lion, my legs turned to jelly. Students could think of sayings in their own language that use metaphors or similes to describe feelings. They can research these at home with their parents. They could be compiled into bi-lingual display posters for each emotion. Complete written exercise individually.

Activity 10: Write an emotion poem (p52)
Read and discuss the poems. Model writing an emotion poem on the board or do a joint construction with everyone contributing to a class poem. Happiness is a good one to start with. Students can use the computer for their final drafts or do a poster display. The poems could be compiled into a classbook and used as a class reader. Students can practise reciting the poems in pairs.

Activity 11: Feelings and emotions crossword puzzle (p54)
Pre-teach new vocabulary as needed, e.g. ecstatic. Before completing the crossword practise the different forms of feeling words. Draw up a chart with column headings noun, verb and adjective. Complete together and display.

**Solutions:** Feelings and Emotions Crossword Puzzle

Across Clues: 1 angry, 4 happy, 5 joke, 6 worried, 12 embarrassed, 14: cared, 16 lonely, 18 relieved, 20 stomach, 21 suspicious, 23 nervous, 24 laugh, 25 calm, 26 excited.

Down Clues: 2 guilty, 3 bored, 4 hopeful, 7 red, 8 disappointed, 9 scared, 10 frown, 11 sad, 12 shy, 15 frustrated, 17 ecstatic, 19 face, 22 confused, 27 cry.

Extension activities
Role play expressing anger situations with one student acting as observer. Debrief at the end.
Model and write acrostic or concrete poems on different emotions.
Make a big book for reading to primary students illustrating emotion similes and metaphors.

Assessment
Teacher observation of role play.
Cue cards for emotion mime (Activity 5)

You are trying to thread a needle and you can’t do it. The hole is too small. You are frustrated.

You are late to class. You come to the door and knock. You come in. The teacher is angry. You feel guilty and embarrassed.

You are playing basketball. You keep trying for goal and you miss it every time. You are frustrated.

You are sleeping. You have a scary dream. You wake up. You are afraid, then relieved.

You receive a letter from a good friend in your country. They are coming to Melbourne. You are very happy and excited.

You are trying to work out a maths problem but you can’t do it. You are frustrated.

You got a special prize at assembly. You shake the principal’s hand. You look very proud.

You are waiting outside the Assistant Principal’s office because you are in trouble. You are nervous.

You are watching Tattslotto on TV. You check your ticket and see you have won! You are very happy. You are ecstatic!
UNIT THREE
Feelings and Emotions

You are playing soccer. You get the ball and take a shot at goal. You get the goal. You are happy and proud.

You go to pay for your lunch. You have lost $20. You look everywhere. You are very worried.

You are watching a soccer game. Your team just shot for goal and missed it. You are very disappointed.

It’s the weekend. It’s raining outside. You don’t know what to do. You are bored.

You are waiting at the station for the train. The trains are cancelled. You can’t go to school. Are you happy or disappointed?
Activity 1: How are they feeling?
Look at the faces and write the feelings under the faces.
Use these words.

<table>
<thead>
<tr>
<th>angry</th>
<th>happy</th>
<th>hopeful</th>
<th>embarrassed</th>
<th>proud</th>
</tr>
</thead>
<tbody>
<tr>
<td>frustrated</td>
<td>sad</td>
<td>bored</td>
<td>worried</td>
<td></td>
</tr>
</tbody>
</table>

This is great!  Everyone is looking at me.  I got 10/10 for maths!  I did well.

You broke my Walkman!  I’ll never get this right!  Stupid English.  I miss my friends.

Things will get better.  There’s nothing to do.  I’ve got a test tomorrow.

Pronunciation practise
Mark the stressed syllable in each word.

Example: embarrassed
Activity 2: What makes us feel the way we do?
Write down two things that make you feel an emotion.

What makes me feel happy?
Example: I feel happy when I play with my baby brother

______________________________________________________________________
______________________________________________________________________
______________________________________________________________________

What makes me feel worried?

______________________________________________________________________
______________________________________________________________________
______________________________________________________________________

What makes me feel embarrassed?

______________________________________________________________________
______________________________________________________________________
______________________________________________________________________

What makes me feel bored?

______________________________________________________________________
______________________________________________________________________
______________________________________________________________________

What makes me feel proud?

______________________________________________________________________
______________________________________________________________________
______________________________________________________________________

What makes me feel hopeful?

______________________________________________________________________
______________________________________________________________________
______________________________________________________________________

What makes me feel frustrated?

______________________________________________________________________
______________________________________________________________________
______________________________________________________________________
Activity 3: What are these people feeling?

Where’s Amira? It’s almost 5.30. She should be home from school by now. She always gets home by 5 o’clock. I hope she’s all right. Maybe she got the wrong train and she’s lost.

Oh there you are. Thank goodness you’re all right. I was so worried about you.

What do you mean, you went to Gina’s place. You knew I would worry about you. How dare you go without telling me?

I suppose her brother Tom and his friends were there. Were her parents at home? Amira, is there something you’re not telling me?

Well that’s fantastic. Did you really get the best mark in the class for maths today? You must get it from your mother. Beauty and brains. You’ve got them both! That’s my girl.

I know I should have done my homework. I had plenty of time but my brother had this really good Arabic video, so I watched that instead. I feel really bad now. I know I did the wrong thing.

I thought Huong liked me. We went to a movie together last week and she was really friendly but when I saw her today she just looked the other way. I don’t know what to think.

I can’t wait for Saturday. The best thing is happening. Samantha is coming to my house and we’re going to a party together!

Circle the emotion you hear the speaker expressing.

<table>
<thead>
<tr>
<th></th>
<th>1</th>
<th>2</th>
<th>3</th>
<th>4</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>happy</td>
<td>guilty</td>
<td>angry</td>
<td>proud</td>
</tr>
<tr>
<td>2</td>
<td>worried</td>
<td>sad</td>
<td>suspicious</td>
<td>guilty</td>
</tr>
<tr>
<td>3</td>
<td>proud</td>
<td>relieved</td>
<td>relieved</td>
<td>suspicious</td>
</tr>
<tr>
<td>4</td>
<td>confused</td>
<td>guilty</td>
<td>happy</td>
<td>excited</td>
</tr>
<tr>
<td>5</td>
<td>proud</td>
<td>relieved</td>
<td>confused</td>
<td>worried</td>
</tr>
<tr>
<td>6</td>
<td>happy</td>
<td>nervous</td>
<td>bored</td>
<td>suspicious</td>
</tr>
</tbody>
</table>
**Activity 4: Facial expressions**

**What emotion are you feeling? What does this emotion look like?**

Work with a partner. One person makes a face that shows how they feel about these situations. The other person draws the emotion they can see on their partner’s face. Remember, not everyone will feel the same emotion.

*What are the eyes doing? Are they wide open or half closed?*

*What are the eyebrows doing? Are they up or down? Straight or curved?*

*What does the mouth look like? Does it go up at the corners or down? Is it open or closed?*

1. You have just heard that your grandmother is coming to Australia.

   Emotion: *I feel happy*

2. You have just heard from your teacher that you are definitely going to your new school next term.

   Emotion: ____________________________

3. You tried to join in the boys’ basketball game and they told you to get off the court.

   Emotion: ____________________________

4. That was my tenth shot at goal and I missed it again!

   Emotion: ____________________________

5. Oh no Miss, not reading again! Nothing ever happens in that story.

   Emotion: ____________________________

Some people hide their feelings with a blank face. We sometimes say they are poker faced. Poker is a game of cards. Can you work out why we say someone is poker faced?
Activity 5: Mime the emotion

You are trying to thread a needle and you can’t do it. The hole is too small.

You are late to class. You come to the door and knock. You come in. The teacher is angry.

You are playing basketball. You keep trying for goal and you miss it every time.

You are sleeping. You have a scary dream. You wake up.

You receive a letter from a good friend in your country. They are coming to Melbourne.

You are trying to work out a maths problem but you can’t do it.

You get a special prize at assembly. You shake the principal’s hand.

You are waiting outside the Assistant Principal’s office because you are in trouble.

You are watching Tatts lotto on TV. You check your ticket and see you have won!

You are waiting at the station for the train. The trains are cancelled. You can’t go to school.

It’s the weekend. It’s raining outside. You don’t know what to do.

You are watching a soccer game. Your team just shot for goal and missed it.

You are playing soccer. You get the ball and take a shot at goal. You get the goal.

You go to pay for your lunch. You have lost $20. You look everywhere.
Activity 6: Role play an emotion
In your group, plan a role play about an emotion. Your teacher will give you a secret emotion. Think of a situation to show this emotion. Plan a two or three minute play. See if the class can guess your emotion.

Activity 7: How am I feeling? Where in my body am I feeling it?
We all feel sad, angry, worried, scared or just a bit low from time to time. This is normal behaviour for human beings. Sometimes we don’t know what we are feeling or why we are feeling the way we do. Our bodies tell us what we are feeling in response to different situations. We feel different emotions in different parts of our bodies. For example, if we are feeling afraid, our hands might get sweaty and our mouths dry. When you feel happy or sad, worried or afraid, bored or angry, where do you feel it in your body? Is it in your arms, legs, abdomen, stomach, upper chest, neck, shoulders, arms, or a combination of these? Does your face feel warmer or colder? Do your hands feel hot or cold, sweaty or dry? Do you breathe faster or slower? Is your heart rate slow or fast?
Where do I feel my emotions?
Work with a partner. Talk about where in your body you feel happy, angry, worried and sad. Show this on the drawing of the body. Draw a line from the body part and write what you feel.

Example: Sad – heavy feeling in the chest

How do you show your emotions?

1. Write one situation where you would feel happy, sad, angry, or worried.

   Example: I would feel angry if someone took my textas without asking.

2. Write one situation where you have felt this emotion in the past.

   Example: I felt angry when I thought Ibrahim was swearing at me in his language.

3. What do you do when you are happy, sad, worried or angry?

   Example: When I am angry I shout at people and I shake my fist at them.
SAD

Write one situation where you would feel sad.
______________________________________________________________________
______________________________________________________________________

Write one situation where you felt sad in the past.
______________________________________________________________________
______________________________________________________________________

What do you do when you are sad?
______________________________________________________________________
______________________________________________________________________

HAPPY

Write one situation where you would feel happy.
______________________________________________________________________
______________________________________________________________________

Write one situation where you felt happy in the past.
______________________________________________________________________
______________________________________________________________________

What do you do when you are happy?
______________________________________________________________________
______________________________________________________________________

ANGRY

Write one situation where you would feel angry.
______________________________________________________________________
______________________________________________________________________

Write one situation where you felt angry in the past.
______________________________________________________________________
______________________________________________________________________

What do you do when you are angry?
______________________________________________________________________
______________________________________________________________________
WORRIED

Write one situation where you would feel worried.

______________________________________________________________________

______________________________________________________________________

Write one situation where you felt worried in the past.

______________________________________________________________________

______________________________________________________________________

What do you do when you are worried?

______________________________________________________________________

______________________________________________________________________

Activity 8: Expressing anger

Everyone feels angry at some times in their life and may have good reasons to feel angry. Anger can be useful. It can give us the energy we need to try to fix a bad situation such as when someone treats us unfairly, takes our things away or tries to hurt us. It’s what we do with our anger that is important. It is not useful to hit someone or hurt them back. This will make the problem worse. It is useful to:

• Calm down.
• Plan what to do and say to make things better.
• Look for someone else who can help you, e.g. a teacher or a friend.
• Talk to the person about what they have done.

Ways to calm down

What can you do to calm down when you are angry? Brainstorm with a partner.

Example: Breathe slowly and deeply

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__________________
Talking to the person who made you angry

After you calm down tell someone how you feel and what you want them to do.

Look at the situations that made you angry. Write down an ‘I feel’ statement and an ‘I want’ statement for each situation.

Example: Jose keeps bumping my desk. I feel upset when you keep bumping my desk. I want you to be more careful.

SITUATION 1__________________________________________________________
I feel ________________ when___________________________________________
I want you to ___________________________________________________________

SITUATION 2__________________________________________________________
I feel ________________ when___________________________________________
I want you to ___________________________________________________________

SITUATION 3__________________________________________________________
I feel ________________ when___________________________________________
I want you to ___________________________________________________________
Activity 9: Emotion similes and metaphors

Sometimes we use the language of poetry to describe how we feel emotions. For example, when we are worried or nervous we might say, *I've got butterflies in my stomach.*

What are these people feeling?

Draw a line from the saying to the emotion. The first one is done for you. Some emotions may match more than one saying.

- My stomach was in a knot - afraid
- My face was as red as a beetroot - happy
- I was floating on air - nervous
- My hair was standing on end - nervous
- My legs went to jelly - nervous
- My heart was breaking - sad
- She had a spring in her step - angry
- I feel heavy hearted - embarrassed
- He was getting hot under the collar

Activity 10: Write an emotion poem

Read these poems about different emotions.

**Fear**

Fear is black like storm clouds  
It tastes like charcoal  
It smells like empty houses  
It looks like a dark lonely street  
It sounds like echoing footsteps  
It feels like being alone
Happiness
Happiness is sunshine yellow
It tastes like mangoes and cream on a sunny day
It smells like the perfume my mother wears
It looks like a lined and loving face
It sounds like laughter
It feels like two arms holding me tight

Anger
Anger is fire engine red
It tastes like pepper and hot chilli
And smells like smoke from a dragon’s nostrils
Anger looks like an erupting volcano
And sounds like the steam from a thousand kettles
Anger feels like a sizzling barbecue. Ouch!

Loneliness
Loneliness is clear white like the snow in winter.
I see a blanket of white with bare trees.
I hear silence.
I smell soup and smoke from the farmhouse in the valley.
I touch the rough branches of a lonely tree, just like me.
I taste my cold salty tears as they drop to the ground.

Emotion poems have been adapted from ideas found at www.chester.ac.uk~mwillard/ict/PPTs/Simile.ppt
Tips for writing emotion poems can be found at http://www.primaryresources.co.uk/english/pdfs/00emotion.pdf

Write an emotion poem.
Use all your senses. Write your poem like this.
Line 1 What colour is the emotion?
Line 2 What does it taste like?
Line 3 What does it smell like?
Line 4 What does it look like?
Line 5 What does it sound like?
Line 6 What does it feel like?

Don’t forget to read over your poem and revise it.
When you are happy with it, you could type it up on the computer.

Recite your poem.
Practise reading your poem aloud to a partner. You could then read it to the class.
Activity 11: Feelings and emotions crossword puzzle
Across
1. When you are _____________ it is a good idea to calm down before you speak. (5)
4. When I am _______________ I feel like smiling all the time. (5)
5. When my friends tell a funny ___________ , I laugh. (4)
6. I am ________________ about my father. I know there is something wrong. (7)
12. My face goes red when I am _______________________. (11)
14. When my friend was ill I ________ for her. (5)
16. When you don’t have friends you feel ______________ . (6)
18. I found my lost money. I am so ______________ ! (8)
20. I am nervous. I feel sick in my ______________. (7)
21. Someone stole my Walkman. I’m ______________ of Joe. (10)
23. I am always ______________ before a test. (7)
24. When I ___________ and joke with my friends I feel happy. (5)
25. You are angry. You should __________ down before you speak. (4)
26. My best friend is coming to Australia! I am so ______________ ! (7)

Down
2. I know I did the wrong thing. I feel ____________. (6)
3. There is nothing to do in the school holidays. I’m _______________. (5)
4. I think I will pass my exam. I am feeling ________________. (7)
7. My face goes _______ when I am embarrassed. (3)
8. I can’t go to the school I wanted to go to. I am _________________. (12)
9. I am ____________ when the electricity goes off and there are no lights. (6)
10. When I am unhappy I don’t smile, I _______________. (5)
11. When I am ________________, I can’t smile or laugh. (3)
13. I want to make friends with Fartun but I am ________. I don’t know what to say. (3)
15. I was _________________ because I kept missing the goal. (10)
17. Very, very happy – jump up and down, happy. _________________ (8)
19. You can know what someone is feeling when you look at their ___________. (4)
22. Will I do this or will I do that? I don’t know what to do. I’m _________________. (8)
27. Sad movies make me ___________. (3)
Reflection
In this unit I learned ____________________________________________________

____________________________________

____________________________________

____________________________________
Key understandings

- Friends are an important source of emotional and practical support.
- There are universal qualities we value in friends, such as trust and honesty.
- Friendships take time to develop and need nurturing.
- Friendships change as our circumstances change.
- We can be open to friendships through our body language and through being friendly.
- We can have different kinds of friends connected with the different parts of our life (e.g., school, sport, religious groups).
- There is a range of formal opportunities for young people to make friends in Australia.
- Maintaining connection with culture of origin organisations can be a source of friendships.

Language focus

Simple present questions and statements

What sport do you like? I like soccer.

Simple past

I met Fartun in 1999.

Present perfect

Fartun has been my friend since/for.

Adjectives

understanding, loyal, trustworthy, honest

Comparatives

both, neither, nor, neither of us

Initiating and maintaining conversations

Giving and receiving compliments

I like your story

Making suggestions

How about, Do you feel like

Offering to share or help

Would you like some? Do you want some help?

Encouraging others

You're doing well. Keep it up.

Asking to join in

Is it OK if I join in?

Describing someone

Body language

Tone of voice

Skills

Making a timeline

Role play

Mind mapping

Note-taking

Writing a poem

Writing a description
Text types
Short utterances
Informal dialogues
Notes
Short oral and written text
Poem
Proverbs

CSF2 links
ESL Companion to the English CSF2:
• Listening and Speaking Outcomes S1.1, S2.1, S1.2, S2.2, S1.3, S2.3, S1.4, S2.4
• Reading Outcomes S1.1, S2.1, S2.4
• Writing Outcomes S1.1, S2.1, S1.3, S2.3, S1.4

Health and Physical Education:
• Health of Individuals and Populations, Level 3, Outcome HPIP0301
• Self and Relationships, Levels 3, 4, Outcomes HPSR0302, HPSR0303, HPSR0402, HPSR0403

Background issues
• One of the significant challenges facing refugee young people is making friends in a new country.
• Friendships are not only important for general health and wellbeing, but can be a vital source of emotional and practical support in times of stress and transition.
• Refugee students report that one of their fears in moving to a mainstream school is that they will not have any friends.
• Accessibility and quality of friendships can be limited by language, isolation, inter-generational and intercultural issues, identity formation, parental settlement constraints and pre-arrival stress.
• Many refugee young people will have come from countries where friendships were generally made informally in the community. This contrasts with Australia where opportunities to socialise with other young people tend to be more formally structured (e.g. sporting activities, clubs, school).
• Connections with their culture and community of origin can be important sources of support for refugee young people as well as providing opportunities for them to maintain their cultural identity.
Preparation for Unit 4 activities

- Obtain CD/tape player and CD/tape.
- Photocopy the Human Bingo Activity sheet.
- Enlarge the body language picture and make an overhead.
- Obtain large sheets of paper for friendship timelines.

Suggested activities

Explain that the purpose of this unit on friendship is to help us to make new friends and to think about how friends are important to our emotional health and social wellbeing.

Activity 1: Friendship timeline (p64)

1. Complete an example of your own friendship timeline on the board. Mark important dates and write significant events on one side of the line and the names of your friends on the other side of the line. You could use colour markers and a legend to show the length of the friendships. Make the point that friendships can change as circumstances and our interests change. Make explicit that the kinds of events they mark on their timelines will be different from yours. Give some examples, such as left Eritrea, arrived Kenya.

2. Students draw timelines. A piece of art paper or butcher's paper may be better for including more information.

3. Make past tense and present perfect sentences about friendships from the timelines in pairs. See examples on student worksheets. Teach or revise since and for.

4. Have a class discussion on what they learned about friendships, i.e. that friendships may change as circumstances change. The discussion can lead into sharing of ideas on how you look after friendships.

Activity 2: People Bingo (p65)

The purpose of the next two activities is to give students the confidence and the language to approach other students. Use the activities to teach or revise and practise question forms. Display a chart with the actual question forms used. Students can refer to this if necessary during the activity. Students move around the room asking questions to complete their boxes. No person's name can be used more than twice.

Activity 3: Four things in common (p65)

Explain what ‘in common’ means. Brainstorm possible questions students could ask others to find out things they have in common. More advanced students can develop their own questions and interview sheet or you can use the Worksheet on p66. Pair students with someone they don't have a friendship with or ask students to choose someone they don't normally sit with.
Teach or revise the comparative such as: Both Ivan and I like football. I like football but Mohammed likes basketball. Neither of us likes volleyball. Lower level students will need additional oral and written practise to illustrate the meaning and form of the comparatives. For example: I like football, Mahmud likes football, we both like football. Students report back on what they found in common with other students using sentences with but, both and neither.

Questions for discussion after the activity can include:
• What thoughts and feelings do you have when approaching someone you don’t know well or haven’t spoken to before?
• What makes it easier to approach someone and start talking to them?
• What makes it harder?
• How can we make sure that everyone in our school, including new students, feels welcome and included?

Activity 4: Friendship proverbs (p67)
Pre-teach any new vocabulary. Read and discuss the proverbs in pairs. Students say what they think they mean and what qualities in a friend they exemplify. Note any new friendship qualities that can be added to the master list created in Activity 5, e.g. protective. The class could make a bi-lingual poster of friendship proverbs in different languages.

Activity 5: Qualities of friends (p68)
1. Brainstorm qualities of friends in groups after modelling the activity. Use the prompt question from the activity sheet. During the reporting back process list qualities or record them on a mind map. This can be a master list of friendship qualities that students add to throughout the unit. Introduce new vocabulary as it arises, e.g. someone who doesn’t share your secrets is trustworthy, someone who you can rely on to support you. Introduce and practise negative forms, e.g. disloyal, untrustworthy.
2. Practise pronunciation of new words, marking stress patterns, e.g. trustworthy, intelligent.
3. Students check the list of qualities given against their own lists. Note that intelligent and popular are introduced for discussion purposes only. After students complete the ranking exercise you could do a friendship quality continuum exercise. Give each student a flashcard of a quality. They place themselves on a continuum in front of the class from most important to least important and explain their choice. Other students can challenge their ranking, but must give reasons.
4. Read the results of the survey of Australian students. Discuss examples of ways students could do these things. Clarify meanings of unfamiliar vocabulary, for example, pleasant expression, compliments, without going over the top, show an interest in. Ask for additions to the master list, e.g. sympathetic.
**Activity 6: Friendly talk** (p70)
This activity practises the functions mentioned by students in the survey in Activity 5. Practise the functions intensively, paying attention to stress and intonation. With the giving and receiving of compliments, the importance of appropriate topics for compliments and the use of appropriate voice tone/register should be discussed. Students could also list the compliments on a continuum from *not very strong* to *very strong* or *over the top*.

You could practise the different functions with a Spin the Bottle game or pair activities using cue cards. Examples of prompts for cue cards could be: *ask to join a volleyball game, offer to share lunch*.

**Activity 7: Body language. Which person is likely to make friends?** (p72)
Using an enlarged picture, brainstorm the body language of the friendly person and the grumpy person. Use students to mime body language.

Label the illustration provided in Activity 7. Body language for the friendly person could be: *smiling face, facing the other person, shoulders back, looking at the other person, good eye contact*. Body language for the unfriendly person could be: *turned away, shoulders hunched, frowning*. Students can label their drawings in their book. Discuss and share cultural aspects of body language such as eye contact, appropriate body space and touching. The Australian culture values eye contact. Body space and touching varies, depending on the closeness of a relationship. Discuss what is appropriate and not appropriate.

**Activity 8: Tone of voice** (p72)
Demonstrate how meaning is changed by the emotion we show in our voice. Use one statement said in different ways to show change of meaning. For example ask, ‘What are you doing?’ in a frightened voice, a sad voice, a happy, excited voice, a bored voice. Write a short question or statement on the board and practise saying it in different ways by throwing students a ball and giving an emotion cue word. Practise the ‘sorry’ exercise in pairs.

**Activity 9: Making friends** (p73)
Students work in pairs or threes to role play friendship scenarios.

**Activity 10: Friendship categories** (p74)
Model the activity using your own friendships as an example.

Students make notes and practise in pairs. For the written paragraph, demonstrate the tense changes if students choose a friend from the past.

Brainstorm the places students could meet friends from their community in Australia, e.g. the church, mosque, temple, ethnic school, some sporting clubs, through family friends.
Activity 11: What I want my friend to know about me (p75)
The important things about me and questions I would like to ask a potential friend could include personal qualities, achievements, fears, past experiences, special interests.

Activity 12: Nine uses for a friend (p75)
Discuss the different purposes that friends serve – e.g. comforter, supporter, they make us laugh, someone we talk things over with or someone to share experiences with. Explain mirror, sounding board, hairdresser. Check whether the qualities in the poem are on the master list of qualities.

Students can write a friendship poem using the same model. They could illustrate it with stick figure drawings, and make a class book of poems.

Activity 13: Making friends in Australia (p76)
The reading passage introduces students to ways they can meet other young people in Australia. Many migrant and refugee students speak of the lack of neighbourhood social life in Australia which was often their major source of friendships in the country they come from.

1. Discuss the focus questions. Pre-teach necessary vocabulary. Listen to the reading passage on CD/tape. Read the passage again checking comprehension. Do a ‘think, pair, share’ activity on ways you can meet friends in Australia.
2. For the mind map include places you can make friends and what types of activities they might offer.
3. This activity should be supplemented by local information where possible, e.g. local council holiday program brochures.
Extension activities

• Make a friendship qualities crossword puzzle.
• Write a three paragraph story about the best friend you have ever had.
• Interview a parent or relative about their friendships.
• Research activities offered for young people by local youth groups and sporting clubs, ethnic community organisations, Migrant Resource Centres and local council.
• The internet has many sites that have information on issues associated with friendship. See Resources section for some suggestions.

Assessment

Teacher observation of participation in role play.
Friendship categories paragraph writing.
Activity 1: Friendship timeline

Your life is made up of many stages. Draw a timeline and list all the important stages in your life underneath each other (see example below). On the other side of the timeline write the friendships you made during the different stages.

For example:

Born ____________________________
Started school ____________________________
Changed school ____________________________
War started ____________________________
Moved to (village, city or country) ____________________________
Arrived refugee camp ____________________________
Arrived Australia ____________________________

Make sentences from your timeline like this. Tell your partner.

I met Fartun in 1999.
I met Fartun in camp.
Fartun was my friend from ____________ to ______________.
Fartun was my friend for four years.
Rita has been my friend since 2003.
Rita has been my friend for two years.

Discuss

Have you always had the same friend?
Why do friends change?
How can we look after our friendships?
Activity 2: People Bingo

<table>
<thead>
<tr>
<th>Can you find someone in the room who:</th>
<th>Name</th>
</tr>
</thead>
<tbody>
<tr>
<td>Likes pizza</td>
<td></td>
</tr>
<tr>
<td>Comes to school the same way you do</td>
<td></td>
</tr>
<tr>
<td>Was born in August, September or October</td>
<td></td>
</tr>
<tr>
<td>Has a younger brother and a younger sister</td>
<td></td>
</tr>
<tr>
<td>Has lived in two countries before coming to Australia</td>
<td></td>
</tr>
<tr>
<td>Has a pet</td>
<td></td>
</tr>
<tr>
<td>Is older than you are</td>
<td></td>
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<tr>
<td>Likes rap music</td>
<td></td>
</tr>
<tr>
<td>Likes playing soccer</td>
<td></td>
</tr>
<tr>
<td>Has been in Australia for more than six months</td>
<td></td>
</tr>
</tbody>
</table>

Activity 3: Four things in common

- Students work alone to answer the questions in the column headed ‘Your name’ on the interview sheet.
- When students have finished ask them to find a partner and conduct a discussion to discover the things they have in common following the questions on the interview sheet. Each student should note responses from their partner on the sheet under ‘Partner 1’.
- Ask students to find a new partner and repeat the exercise and note responses under ‘Partner 2’.
- Then ask students to identify the four things they have in common with each of their interview partners and complete the ‘Four things we have in common’ activity sheet.

If students have not found four things in common with their interview partners, ask them to:
- speak again with their interview partners until they find four things in common, or
- conduct more interviews with other students.
Four things in common: Interview sheet

<table>
<thead>
<tr>
<th>Question</th>
<th>Your name</th>
<th>Partner 1</th>
<th>Partner 2</th>
</tr>
</thead>
<tbody>
<tr>
<td>What sport do you like?</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>What sport do you dislike?</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>How many brothers and sisters do you have?</td>
<td></td>
<td></td>
<td></td>
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<tr>
<td>What did you like about school in your country?</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>What did you dislike about school in your country?</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Where do you live?</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>How do you come to school?</td>
<td></td>
<td></td>
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<tr>
<td>What is your favourite food?</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>What do you dislike about living in Australia?</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>What do you like about living in Australia?</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
Four things we have in common

Partner 1: ________________________  Partner 2: __________________________

Four things we have in common  Four things we have in common
1. ____________________________  1. ______________________________
2. ____________________________  2. ______________________________
3. ____________________________  3. ______________________________
4. ____________________________  4. ______________________________

Activity 4: Friendship proverbs

A proverb is a wise saying. What are these proverbs saying about friends?

A good friend shields you from the storm.
Chinese proverb

As for clothes, the newer the better, as for friends, the older the better.
Korean proverb

Real friends will share even a strawberry.
Slovakian proverb

Do you have any proverbs about friends in your language?
Ask your family.
Activity 5: Qualities of friends

What makes a good friend? Discuss in groups.

What do good friends do?  
What words describe a good friend?  
Example: They listen to your problems.  
Example: They are kind.

Share your ideas with the class. Make a class list of friend qualities.

Were these qualities on your list?

honest  
funny  
trustworthy  
helpful  
encouraging  

kind  
loyal  
understanding  
good listener  
generous

Pair these qualities of friends with their meaning.

Honest won’t tell your secrets

Trustworthy says nice things to help to keep you going

Funny tells you truthfully what they think

Understanding will give you whatever they can, e.g. time, money

Generous will stay a true friend even in difficult times

Loyal knows how you think and feel and is kind and sympathetic

Encouraging makes you laugh

Can you unscramble these friendship qualities?

senoht  
rytuswtorht  
dnik  
engsouer

yalol  
rgienoucgnna  
pleflhu  
nfynu
Which qualities are most important in a friend?
Number these qualities from 1 to 10 – 1 is the most important, 10 is the least important.

funny  trustworthy  understanding
intelligent  encouraging  generous
popular  loyal  kind  honest

1.  6.
2.  7.
3.  8.
4.  9.
5.  10.

Australian students talk about friendship
A group of students in an Australian school was asked what they liked about their friends. This is what they said.

Good friends:
• show an interest in other people and ask questions
• go around with pleasant expressions on their faces
• laugh at people’s jokes
• are good at giving compliments without going overboard
• are kind and sympathetic
• ask, not demand, to join in games or activities
• are welcoming to new students
• offer to help others
• encourage other people
• invite people to do something
• are happy to share
• are good at thinking of something interesting to do
• are fair
• are good at organising games and activities

Is their list similar to your class list?
Are there any new qualities to add to your class friendship list?

______________________________________________________________________
Activity 6: Friendly talk

Give and receive compliments.

*I like your hair.*
*I really like your hair.*

*Your hair looks nice.*
*Your hair looks really nice.*

*Great haircut!*
*Cool haircut!*

*What a fantastic haircut!*
*That's the best haircut!*

1. What could you say to a teacher?

____________________________________________________________________

2. What could you say to a good friend or someone you know well?

____________________________________________________________________

3. What could you say to another student that you like who isn’t a close friend?

____________________________________________________________________

Most people find it more difficult to receive compliments than to give them. They look embarrassed or look away. A simple thank you and a smile is enough to show that you appreciate a compliment.

Give a compliment and ask a polite follow-up question.

Work with a partner. Practise giving and receiving compliments and follow up with one or more polite questions.

Example: *I like your scarf.*
*Where did you get it?*

*I like your poem.*

____________________________________________________________________

2. ______________________________

Can you give me the recipe please?

3. You always wear beautiful scarves.

____________________________________________________________________

4. ______________________________

Where did you buy it?

5. Cool T shirt!

____________________________________________________________________
Make a suggestion. Invite a friend to do something.

Let’s play volleyball.
Would you like to play volleyball?
Why don’t we play volleyball?

Make three suggestions for things to do with a friend.

1._____________________________________________________________________
2._____________________________________________________________________
3._____________________________________________________________________

Ask to join in games or activities.

Do you mind if I join you?
Can I play too?

Write three situations when you could ask one of these questions.

1._____________________________________________________________________
2._____________________________________________________________________
3._____________________________________________________________________

Offer to share things with others.

Would you like some chips?
Do you want some chips?

Offer to share three things with others.

1._____________________________________________________________________
2._____________________________________________________________________
3._____________________________________________________________________

Other friendly language.

Show sympathy.
Encourage someone.

Don’t forget to ask your friends polite questions about themselves.
Don’t forget to be friendly to new students.
Activity 7: Body language. Which person is likely to make friends?

What do you notice about the body language of these two people? Label the drawing.
Example: smiling face sad face

Activity 8: Tone of voice

We can show people we are friendly by the tone of our voice. The tone of our voice changes the meaning of what we say. We can say the same thing in different ways and change the meaning. For example, babies don't understand everything we say but they know from the tone of our voice if we are angry or pleased.

Say the word ‘sorry’ in these different ways. Practise with a partner.
• You don't really mean you are sorry. You sound bored.
• You are still angry with the person.
• It doesn't worry you that they are upset.
• You really mean you are sorry.
Activity 9: Making friends

Work in groups. Plan a role play.

1. A new student comes to the school. He or she is sitting by themselves in the playground. What happens?

2. You go to a youth group at the mosque or your church. You see a person you think might be a possible new friend. What do you do?

3. You have just started at your new school. Someone comes up to you. They can't speak much English and they are lonely. Find out something about them and what their interests are.

Don't forget your friendly body language and tone of voice.
Activity 10: Friendship categories

There are many types of friends, not just old and new ones. Make a friendship chart. Write the name of your friend, the qualities they have, and how they show these qualities. You can choose old friends from your country or new friends in Australia.

<table>
<thead>
<tr>
<th>Friendship category</th>
<th>Friend’s name</th>
<th>Qualities</th>
<th>How they show these qualities</th>
</tr>
</thead>
<tbody>
<tr>
<td>School friend</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Childhood friend</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Family friend</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Neighbourhood friend or community friend</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Tell your partner about your friends.

Example: Anna is a friend from my community. We go to the same ethnic school. She’s funny. She makes me laugh in class and we often get into trouble. She’s very generous. One time when I forgot my lunch, she made me eat half of hers.

Writing

Write a paragraph about one of your friends using ‘Anna’ as a model.
______________________________________________________________________
______________________________________________________________________
______________________________________________________________________
______________________________________________________________________
______________________________________________________________________
Activity 11: What I want my friend to know about me
Making a new friend takes time. It takes time to know someone really well and to learn that we can trust them, particularly if we don't speak the same language. Think about what is important to you in a friendship.

Make a drawing of both hands. In the fingers of one hand write:
• the important things about you that you would like a friend to know.

And in the fingers of the other hand write:
• what you want to know about a person to find out if they could be a friend.

Activity 12: Nine uses for a friend
Here is a poem about friendship

Nine uses for a friend

My friend is

Listener
Back rest
Dancing partner
Mirror
Sounding board
Hairdresser
Hand warmer
Handkerchief
Laughing partner

Best friend now and forever

Adapted from Ziefert, H., and Doughty, R., 2001, 39 Uses for a Friend, G. P Putnam’s Sons, New York

Discuss the poem with a partner.
How does her friend help the person writing the poem?
What qualities does she have?

Can you think of ‘nine uses for a friend’?
Write a poem about your best friend using this one as a model. You could draw some stick figure pictures to show what qualities they have.
Activity 13: Making friends in Australia

Discuss with a partner.

• How did you meet friends in your country? Did you go to the same school or live in the same town? Why do you think you became friends?
• Where can you meet and make friends from your culture in Australia?

Listen to this passage.

Meeting friends doesn’t always just happen. Sometimes we need to make an effort to meet new people and to help friendships grow. One good way of meeting new friends is to find groups of people that do the same sort of things that you enjoy doing. Where can we find these groups?

Most secondary schools have lunchtime or after-school activities. These might include playing sports, like basketball, soccer or volleyball, or quieter activities like chess, yoga or drama. Ask other students or the Year Level Coordinator in your new school what clubs or activities they have. If you are interested in reading or computers, ask when the library or the computer laboratory is open.

Youth clubs and sports clubs are other places that you can meet young people. These are organised by different groups, including ethnic communities, Migrant Resource Centres and local councils.

Most local councils have holiday programs, with activities like playing sport, going on excursions, seeing films and art activities. You pay a small cost. Ask the Student Welfare Coordinator or the Year Level Coordinator to help you find out about these programs.

Keeping in contact with people from your culture and ethnic community is a good way of meeting new friends that you have a lot in common with. Going to the mosque, the temple or your church is one way of meeting people. Some communities have special festivals such as Chinese New Year and some ethnic communities have language and culture classes on the weekends. Can you think of other ways of meeting people from your community? Ask a family friend who has been in Australia for longer than you.

Discuss the passage. What do these expressions mean?

Make an effort
Keep in contact with
Have a lot in common with
Pair the expression with the meaning.

make an effort share many of the same interests
keep in contact try hard
have a lot in common stay in touch (talk to)

Reading and understanding.
What are three ways you can meet new friends in Australia? Tell your partner.

1. ________________________________________________

2. ________________________________________________

3. ________________________________________________

Make a mind map of where we can make new friends in Australia.
Include information from the reading passage. Show where you can meet friends and what activities you might do there.

Reflection
In this unit I learned _____________________________________________________________.
__________________________________________________________________________
__________________________________________________________________________
Unit 5 deals with the ways to cope with stressful situations. It is an optional unit. It requires presentation by teachers who have participated in some relevant training in conducting mental health promotion activities in the classroom.

Key understandings

• It is important to understand the causes of stress and the impact that stress can have on our minds and bodies.
• There are positive coping strategies we can use to help ourselves feel better when we are feeling distressed.
• We need to distinguish between helpful and unhelpful coping strategies.
• It is important to recognise that we can't change events but we can is to change the way we think about them.

Language focus

<table>
<thead>
<tr>
<th>Modals</th>
<th>will/would can/could</th>
</tr>
</thead>
<tbody>
<tr>
<td>Simple present</td>
<td>I feel bored.</td>
</tr>
<tr>
<td>Conditionals</td>
<td>If you work hard, you will learn English.</td>
</tr>
<tr>
<td>Complex sentences</td>
<td>When I am stressed, my mouth goes dry.</td>
</tr>
<tr>
<td>Strengths vocabulary</td>
<td>Courageous, independent, hardworking.</td>
</tr>
</tbody>
</table>

Expressing feelings       | I feel worried.       |
Talking about strengths   | I am hardworking.     |
Talking about possibility | I could do this.      |
Hypothesising             | I would feel happy if |
Challenging self or others| Is this really true? What is the evidence? |

Skills

Note-taking
Working in groups
Listening for specific information
Using intonation as a cue to meaning
Interpreting cartoons
Writing a descriptive essay
Reading for specific information
Text types

Short utterances
Notes
Lists
Non-fiction text
Description
Cartoons

CSF2 links

ESL Companion to the English CS2:
• Listening and Speaking Outcomes S2.1, S2.2, S2.3, S2.4
• Reading Outcomes S2.1, 2.3
• Writing Outcomes S1.1, S2.2, S2.3

Health and Physical Education:
• Self and Relationships, Levels 5, 6, Outcomes HPSR0501, HPSR0502, HPSR0601, HPSR0602

Background issues

• It is not uncommon for people from refugee backgrounds to experience emotional distress. Refugee young people appear to have a high rate of unexplained physical symptoms such as sleeplessness, headaches and gastric problems. It is therefore important that students realise that physical pain may be linked to emotional distress.
• The settlement process has many different stages and sometimes we move one step forward and take two steps back. Acknowledging the demands associated with change and setting realistic personal goals are important first steps.
• Stress is a word to describe experiencing many demands that we feel we cannot cope with.

Preparation for Unit 5 activities

• Obtain CD/tape player and CD/tape.
• Obtain paper for group comments on cartoons.
• Enlarge and photocopy strength cards.
• Enlarge and photocopy the coping statements for the ‘Four Corners’ activity and cut into strips or make cards. Prepare signs for the four corners of the room.
• Enlarge and photocopy the ‘strength’ words with their meanings. Cut off the definitions, and cut up into strips. Prepare a set for each group.
Suggested activities

Activity 1: What is stress? (p85)
Introduce the concept of stress. Worry, sadness, fear and anger can be signs of stress. You can use the illustration of bending a stick back – it stretches and bounces back. Will it break? Yes, if there is too much pressure on it. A balloon is the same. The rubber will stretch and get weak and eventually break. In the same way, too many demands on us can cause sadness, anger, and fear and make our bodies feel weak.

Groups discuss the stress messages in the cartoons and report back.

Messages from the cartoons are:
- Cartoon 1: Stress can feel like a heavy weight when life is difficult.
- Cartoon 2: The boy is stressed because he is being bullied. The stress is ongoing. (Make sure you talk briefly about what he must do and what other students can do in a bullying situation.)
- Cartoon 3: Trying to cope with too many things at once causes stress. Not everyone experiences stress in the same circumstances. One person sees only difficulties, another challenges. (Be careful that students don’t make value judgements but simply recognise difference.)

Activity 2: Why are they stressed? (p86)
Introduce CD/tape. These people are stressed. What are they stressed about? How are they feeling? Discuss as a class or in pairs.

Activity 3: What causes us stress? (p87)
Students work in groups to discuss and list the things that can cause stress. Causes are too many demands and difficulties and not knowing how to cope with them.

Model examples on the board of possible stressors for each area mentioned. It is important to do this activity in a group so that stressful situations can be talked about in general terms rather than personalised. Students will get support from the group as they find out they are not alone in their fears.

As part of the reporting back exercise, discuss whether everyone saw the same things as stressors and whether they were big or little stressors.
Activity 4: Stress signs (p88)

Brainstorm the signs of stress. Introduce vocabulary as needed. Move down through parts of the body. What happens to our head? How do we feel in our stomach/neck/shoulders? What happens to our breathing/our heart rate? How do our muscles feel?

Possible signs include:
Physical  headache, loss of appetite (or eat too much), upset stomach, trouble breathing or rapid breathing, dry mouth, tight muscles, stiff neck, sore shoulders, having less energy, rapid heart beat, getting colds and flu more often
Emotional  not being able to concentrate, mind stuck on one thing, getting upset easily, having trouble sleeping, forgetting things easily, feeling angry, wanting to be alone a lot, feeling like you don’t want to do anything
Social  arguing with friends and family, not wanting to mix with others

Write statements on and around the diagram of the body or draw around each other’s bodies on butcher’s paper and annotate that.

Make complex sentences. The first pattern expresses possibility, the second asks students to say what happens to them when they are stressed.

Activity 5: Understanding stress (p89)

Read and discuss the passage. Complete the vocabulary.

Activity 6: Helpful and unhelpful thinking (p91)

Discuss how thoughts have an important influence over the way we feel. Explain that helpful thinking can make us feel better about demands we face. Explain to students that the class will be discussing examples of helpful and unhelpful thoughts (or thinking). Students work through the list of thoughts identifying those that are helpful and unhelpful.

Activity 7: Understanding the impact of helpful and unhelpful thinking (p92)

Using scenario one on p92, explain that helpful and unhelpful thoughts can influence feelings and actions in response to a situation. Read scenario 1 to the class, discuss how different thoughts influence feelings and actions. Have students complete scenario 2 and 3.
Activity 8: Shamin’s strengths (p95)

This activity introduces personal strengths in context and is designed to illustrate that we can continue to utilise strengths which have helped us in the past, in new contexts.

Students record Shamin’s skills and strengths in note form. Shamin is hardworking, a good student, fun-loving, understanding, has a good sense of humour, loves learning, likes challenges, is organised, resilient, creative, good at sport and a team player. Using the information in the table, students make sentences showing how Shamin’s skills and strengths will be helpful to her in her situation now. Teach or revise the probable form of the conditional ‘If you do X, Y will happen’. Explicitly teach the verb forms and practise with other examples before students attempt the giving advice exercise.

Activity 9: My strengths (p97)

1. This activity teaches personal strengths vocabulary. Students can be supported to recognise that through the refugee and migrant experience they have demonstrated and developed many of these strengths. Teach/revise and practise the new vocabulary from the ‘strength words’ list.
2. Give each group or pair a set of strength words and a set of definitions. They pair a strength word with its meaning. A concentration game would provide further practise.
3. As a whole class activity, put the strength cards on a table and ask students to select a word that they think describes them and to say why. They make a sentence: I think I am courageous because… They can select a word that another student has also chosen. If students find it hard to see good qualities in themselves, ask how they think someone else would describe them.
4. Read Ruby’s essay. Students write an essay about their strengths using Ruby’s essay as a model.

Activity 10: Stress busters (p100)

Introduce this activity by giving examples of strategies you use to cope with stress. In groups, students brainstorm strategies they use to relieve stress. Introduce the concept of useful and not useful strategies. Ask them to classify their own strategies into either useful or not useful and to classify the list provided.
Activity 11: Will this strategy help me? Four Corners Game (p101)

- Seat the class in a circle. Explain idea and procedure of the game and do one example scenario.
- Distribute three coping strategies to each student. You may add additional strategies from students’ own lists.
- Write a difficult situation on the board and explain the situation. Choose situations to suit the needs of the class, that you feel comfortable dealing with and which will not cause distress to particular students.
- Each student moves to one corner of the room depending on whether they think their chosen strategy is very helpful, helpful, not helpful or harmful in that situation.
- Students read their card out and can be asked to justify their choice. They could explain whether their strategy is useful for relaxation or for problem solving. Repeat the activity with students using one of their other strategy cards. Debrief and discuss whether other strategies would be more appropriate in this situation.
- Make the point that we need a range of coping strategies to deal with different situations. We need relaxation and distraction strategies as well as problem-solving strategies. Point out that because some challenges are ongoing and have to be dealt with over a long time, having more than one or two strategies is essential. Refer students back to the dimensions of health when discussing particular strategies.
- Be careful to be non-judgemental when discussing strategies. For example, there are situations for some students where a day off school may be an appropriate strategy.

Extension activities

- Explore the role of humour as a coping-with-stress strategy. Create a humour display board with jokes and cartoons. Choose examples that are appropriate and culturally accessible.
- Do a strengths mind map. For each strength show how it helps you at school, with friends, at home.
- Identify a strength that you would like to develop. Can you think of ways that you can do this?
- Students could write sentences and download pictures from the internet for a group children’s book on strengths. For example, ‘If I could be an animal, I would be a _________ because they are __________.’

Assessment

Students write a strengths essay
Teacher observation of participation in individual and group activities
Activity 1: What is stress?
What are these cartoons saying about stress?

CARTOON 1
How is this man feeling?
What does stress feel like to him?

CARTOON 2
What is happening to this boy?
How is he feeling?
What is the cartoon saying about stress?

CARTOON 3
What are these two people trying to do?
What is difficult for them?
Are they both feeling the same?
What is this cartoon saying about stress?
Activity 2: Why are they stressed?

Who is talking? Are they old or young? What do they do? What is making them stressed?

I’m so stressed. I’ve got an exam tomorrow and I just know I’m going to fail. I’m letting my parents down.

I can’t get a job. I’ve been looking for weeks. How can I take care of my family? And I have to pay back the money my brother gave us for our fares to Australia.

I’ll never learn English. I’ll never have any friends. I don’t want to go to school.

No letter again today. I know she doesn’t love me anymore. What can I do? She’s thousands of kilometres away. I can’t give her up. I love her too much.

I can’t stop this baby crying. I’m such a bad mother. And I’m so tired!

Why are they always picking on me? They swear at me in their language. They whisper things about me so I can’t hear what they are saying. They won’t let me join in their games.
Activity 3: What causes us stress?

Work in groups. Make a list of the things that can cause stress in our lives.
Think about home, school, changing countries, other people.
Example: Not speaking English well

______________________________________________________________________

______________________________________________________________________

______________________________________________________________________

______________________________________________________________________

______________________________________________________________________

______________________________________________________________________

______________________________________________________________________

Now go through your list and write can't change, can change beside each one.
Did the same things cause stress for everybody in your group?
Activity 4: Stress signs

What happens to our bodies when we are stressed?

Work in pairs. Label the drawing of the body with some of the ways we feel stress in our bodies and minds, e.g. sweaty hands.

Make six sentences like this:

*When we feel stressed, we might have a stomach ache or a headache.*

*When I am stressed, my mouth goes dry.*

1. __________________________________________

2. __________________________________________

3. __________________________________________

4. __________________________________________

5. __________________________________________

6. __________________________________________
Activity 5: Understanding stress

Read this passage.
Stress is experienced when there are things which need to be done or coped with and we do not feel that we can do them or cope with them. An exam does not cause stress if you feel confident about doing well. It can cause a lot of stress if you think you are going to fail. At times there are so many things to be done like learning new things in a new language, going home and helping your mother, and looking after your younger brothers and sisters. At such times you would feel stressed. Sometimes what might look like a small problem for somebody else is a big problem for you. You cannot tell if a problem or task is big or little without knowing a lot about the situation.

Stress can feel like fear, anger, guilt, sadness or hopelessness. Sometimes it is difficult to know exactly what you are feeling. Sometimes you do not seem to feel any emotion but your body feels weak or you have a headache, a stomach ache or another physical symptom.

Stress which goes on for a long time can make you feel unhealthy. But it is important to know that if you have been through many difficult situations it is normal to feel stressed. Some people can cope with difficult situations for a long period of time without becoming unhealthy.

There are things you can do to handle stress. They include: reducing the demands on yourself, solving problems, thinking in a different way, changing your feelings and getting help from somebody else.
Using the passage on understanding stress, pair these sentences to make true statements about the passage.

Stress is experienced when there are things which need to be done… …fear, anger, guilt, sadness or hopelessness.

Sometimes, what might look a small problem for somebody else… …can make you feel unhealthy.

Stress can feel like… …to handle stress.

Stress which goes on for a long time… …or coped with and we do not feel we can do them or cope with them.

There are things you can do… …is a big problem for you.

True or false: Understanding stress

1. Stress can feel like hopelessness, fear, guilt, anger and sadness. __________

2. An exam would cause the same stress to everybody. __________

3. Having to do many things at once can cause stress. __________

4. Sometimes stress can affect your body. __________

5. It is not normal to feel stressed when you have been through many difficult situations. __________
Activity 6: Helpful and unhelpful thinking

One way to handle stress is to think in a different way. Unhelpful thinking can make you feel more stressed. Helpful thinking can help you change your attitude and begin to feel better about the demands you face.

Are you thinking helpful or unhelpful thoughts today?

Mark these statements with H if the person is thinking helpful thoughts and U if the person is thinking unhelpful thoughts. Rewrite the unhelpful thoughts to make them helpful.

I’m so dumb, everyone in this class is better than I am.

I know I can’t read very well yet, but I am learning quickly.

I wish I had worn a different shirt. I look terrible.

What a stupid thing to say. She won’t like me now.

I’m really excited about the party. It will be fun.

This is not the best haircut I have ever had, but my hair grows fast.

I’ll never have another friend like my friend in my own country.

I know I can’t read very well yet, but I am learning quickly.

I wish I had worn a different shirt. I look terrible.

What a stupid thing to say. She won’t like me now.

I’m really excited about the party. It will be fun.

This is not the best haircut I have ever had, but my hair grows fast.

I’ll never have another friend like my friend in my own country.
Activity 7: Understanding the impact of helpful and unhelpful thinking

Look at these situations. See the examples of helpful and unhelpful thinking. How does each type of thinking influence feelings and actions?

Read Scenario 1, which has been completed for you. Then complete Scenario 2 and 3.

Scenario 1: Sitting a maths test

Helpful thoughts

I’m sure I studied this question last night. If I just keep calm, I know I’ll work it out.

I would feel nervous but clear-headed.

I would re-read the question and think about what it means. I would underline the important words. I would try to work out the answer.

Unhelpful thoughts

I am hopeless, I’ll fail this test. I have never been any good at maths.

I am going to feel stupid. Look at Amad, he’ll pass the test.

I would feel hopeless and depressed.

I would give up and not try to do that question or the other question. I would fail the test.

Thoughts - What could I say to myself?

Feelings - How would I feel?

Actions - What would I do?
Scenario 2: A new school
You are leaving the language centre at the end of the term. You arrive at the office of your new school for an orientation visit. What could you say to yourself? How would you feel? What do you think you would do if you felt like this?

Helpful thoughts
I am a bit nervous but I know I can make a new beginning. I have done it before.

Unhelpful thoughts
I feel terrible. I don’t know anyone. I can’t speak English.

Thoughts - What could I say to myself?

Feelings - How would I feel?

Actions - What would I do?
Scenario 3: A possible new friend

You have just started at your new school. You really like a girl in your class. You smile at her but she turns away and talks to her girlfriends. What could you say to yourself? How would you feel? What do you think you would do if you felt like this?

<table>
<thead>
<tr>
<th>Helpful thoughts</th>
<th>Unhelpful thoughts</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Thoughts</strong> -</td>
<td><strong>Thoughts</strong> -</td>
</tr>
<tr>
<td>What could I say to myself?</td>
<td>What could I say to myself?</td>
</tr>
<tr>
<td><strong>Feelings</strong> -</td>
<td><strong>Feelings</strong> -</td>
</tr>
<tr>
<td>How would I feel?</td>
<td>How would I feel?</td>
</tr>
<tr>
<td><strong>Actions</strong> -</td>
<td><strong>Actions</strong> -</td>
</tr>
<tr>
<td>What would I do?</td>
<td>What would I do?</td>
</tr>
</tbody>
</table>
Activity 8: Shamin’s strengths

Everyone has skills, values and qualities that help them cope with different situations. These strengths make us who we are. They have helped us to solve problems in the past and will help us to solve problems in the future. They can also help us to feel better about situations. What are Shamin’s strengths? How can they help her now?

Read this passage.

Shamin is a 16-year-old Afghani student who has been in Australia for six months. She has just started at a new school in the western suburbs of Melbourne.

Shamin lived in Kabul until she was 10 years old. At this time Afghanistan was ruled by the Taliban, who did not allow girls to go to school. But Shamin loved learning and she asked her father and mother to teach her to read. She practised her reading and writing at home every day. She loved writing stories and reading them to her younger brothers and sisters. Shamin was hungry to learn and read all the books she could find. She was also a talented artist and used to draw pictures to entertain her family. She said drawing helped her to relax.

Shamin’s mother took the family to Pakistan after her father was arrested because she was afraid of the government in Afghanistan. In Pakistan the family lived in a crowded refugee camp. It was difficult finding enough food and water for the family but Shamin organised her brothers and sisters to collect water and food and helped her mother cook for the family. Life was difficult but Shamin made many friends in the camp. She was an understanding person and a fun-loving girl. She used to make her friends and family laugh because she could always see the funny side of life. She went to school in Pakistan and learnt a new language, Urdu. She was excited to have new books to read and new subjects to learn and her teachers were very pleased with her progress. She discovered she was good at sport. She learnt to play volleyball and was a good team player.

Shamin didn’t want to come to Australia. She didn’t want to leave her many friends in Pakistan. Shamin is not happy at her new school. Nothing seems familiar. She gets lost finding her classroom and she can’t understand some of the teachers. She misses her teachers and the new friends she had made at the language centre and doesn’t want to speak to anyone because she feels embarrassed about her English. She is feeling very sad and lonely.
What are Shamin’s strengths? What can Shamin do?
Make a list of Shamin’s skills and her personal qualities.

<table>
<thead>
<tr>
<th>Shamin’s skills</th>
<th>Shamin’s personal qualities</th>
</tr>
</thead>
<tbody>
<tr>
<td>Good at sport</td>
<td>Loves learning</td>
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</table>

Did you list these skills and qualities?
Shamin is hardworking, a good student, fun-loving, understanding, has a good sense of humour, loves learning, likes challenges, is organised, can survive difficulties, she is a talented artist, she’s good at sport, a team player and she helps others.

Tell Shamin about her strengths and how they will help her now.

Example: You are understanding. This will help you to make friends.

Give Shamin advice.
Make sentences with ‘if’. Practise in pairs.

Example: If you play the violin, it will help you to relax.
Activity 9: My strengths

These words describe personal strengths or things that make us strong in our minds. Look at what these words mean.

**Courageous**
You are brave, and can control scared feelings.

**Independent**
You like to do things on your own without needing other people to help you.

**Hardworking**
You work hard and don't waste your time.

**Fit**
You are strong and physically healthy.

**Assertive**
You stand up for your rights.

**Optimistic**
You think good things will happen in the future.

**Understanding**
You are a good listener. You understand what other people are thinking and feeling.

**Organised**
You plan and manage your time and your things well, e.g. you keep your space at home tidy, you make study plans.

**Caring**
You care about other people, you are friendly and loving.

**Creative**
You are good at the arts, e.g. painting, photography, jewellery making. You like creating or making new things.

**Competent**
You are good at what you do, e.g. competent at schoolwork, a competent driver.

**Cheerful**
You are happy. You look on the bright side of life even when things are difficult.
Fair  You look at both sides of a problem or argument. You don’t take sides before you hear from both people.

Thoughtful  You are always thinking about what is good for other people. You think before you speak or do something.

Honest  You always tell the truth. You don’t cheat.

Determined  You work hard to get what you want. You don’t give up when there is a problem.

Generous  You are kind and share what you have with other people.

Resilient  Bad things can happen to you but you keep going and stay strong.

Adaptable  You can fit into new situations and new groups of people.

Helpful  You like doing things for other people.

My strengths
Chose three strengths that describe you. Say how these have helped you in the past or can help you now and in the future. Remember that being a migrant or a refugee means that you have had to develop some of these strengths.

Example:  

_I am caring_  
_I care about my friends and family._  
_I liked helping people in the camp._  

_I am determined_  
_I know what I want to do with my life._  
_When life is difficult I don’t give up, I keep trying._
Ruby, a student from an English Language School, wrote an essay about her strengths and personal characteristics. Read her essay.

My name is Ruby. I am going to tell you about myself.

I am an organised person. I can find my stuff very easily. I know where it is. I always put my things back after I use them. I like a clean room and a clean desk. All my essays have been filed. I set up many files on my computer so I can find my documents quickly.

My mother says I am a thoughtful girl. I care about the people around me. I like communicating with others and helping them when they need help. I like to smile and be friendly. I believe if we have more smiles, the world will be better and more peaceful.

My friends think I am competent. I am very pleased about that. I was the leader of my class many times when I was in Taiwan. I do my best at everything and I also learn many things while I am doing it. I enjoy learning and my life.

Write an essay about your strengths.

| FIRST PARAGRAPH | Introduce yourself. |
| SECOND PARAGRAPH | Write about the quality you have that you value most. Say how you show this quality and how it has helped you in your life. |
| THIRD PARAGRAPH | Write about the quality you have that your parent or guardian values most in you. Give examples of what you do and what you believe. |
| FOURTH PARAGRAPH | Write about the qualities that your friends see in you. |
| FIFTH PARAGRAPH | Make a conclusion statement about yourself. |
Activity 10: Stress busters

We all need ways of managing stress. Imagine stress is a big balloon hanging over your head. A stress buster is what you can do to help break that balloon or at least relieve stress. In groups, brainstorm things you do to help you when you feel sad or depressed or stressed.

Sometimes we use strategies that are not helpful for us in the long term although they might make us feel better in the short term.

Look at these strategies. Which strategies do you use? Do you find them helpful or unhelpful? Write H beside the helpful ones and U beside the unhelpful ones.

I have a hot shower or bath.  
I go to bed and stay there.  
I try to keep my feelings to myself.  
I telephone a friend.  
I punch someone.  
I give someone a hug.  
I watch a funny video.  
I send an email to a friend.  
I eat lots of junk food.  
I cry.  
I play sport at lunchtime.

I go for a run or a long walk.  
I make a ‘what to do and say’ plan.  
I blame myself. I say, ‘It’s all my fault’.  
I bite my nails.  
I write in my diary.  
I go to a quiet place like the library.  
I take the day off school.  
I listen to music.  
I tell someone how I feel.  
I joke and laugh with my friend.  
I watch my goldfish swimming.
Humour is the best medicine.

Did you know that:
- Laughing 100 times is the equivalent of 15 minutes on an exercise bike.
- There are laughing clubs all over the world where people get together to laugh.
- Experiments show that even fake laughter improves your mood.
- An experiment showed that people who held a pen between their teeth laughed more at funny cartoons than people who didn’t have a pen between their teeth. Try it.

Activity 11: Will this strategy help me? Four Corners game

This is a game where you select a strategy to help you cope with a stressful situation.

Rules of the game
- Choose a strategy card.
- Is your strategy very helpful, helpful, not helpful or harmful for this situation?
- Go to the corner of the room that fits your choice and explain why you think your strategy is helpful or not helpful.
- Choose another strategy card for the same situation and repeat.
Possible scenarios include:

• Someone is bullying you at school. They call you racist names and say rude things about your family everyday.

• Your boyfriend/girlfriend has broken off the relationship. You still really like him/her.

• You have had a letter from a friend in your country with some sad news.

• You are upset because you wanted to go to a friend’s birthday party on Saturday night.

• Your parents never let you go anywhere with your friends because they are worried that something might happen to you.

• You go to a new school and you don’t know anyone. Everyone seems to belong to a group and you feel left out, alone and unhappy.

• You work hard at school but you have just failed an assignment.

• You don’t get on with your stepfather. You argue all the time.

Reflection
In this unit I learned_____________________________________________________
______________________________________________________________________
______________________________________________________________________
______________________________________________________________________
Key understandings

- It is important to recognise when we need help with a health problem as there are benefits in identifying and fixing a problem at an early stage.
- It is important to talk to someone about a problem even if the problem seems small.
- Big problems can be solved by taking small, achievable steps.
- The stresses of settlement can cause health problems.
- Good physical, social and emotional health is important for learning.
- People I can talk to about problems include informal support people such as:
  - family, friends and relatives,
  - other people in my ethnic community or religious leaders, and formal supports such as:
    - teachers, Multicultural Education Aides and the Student Welfare Co-ordinator,
    - settlement workers at Migrant Resource Centres,
    - social workers at Community Health Centres.
- The role of a counsellor is to help young people understand problems better and to help find solutions.

Language focus

**Modals**
can/could, will/would, should

**Conditional statements**
If you have a problem, you should talk to someone.
I have a toothache.

**Simple present**
She talked to the Student Welfare Co-ordinator.

**Talking about possibility**
You can see a dentist.

**Talking about consequences**
If Admir doesn't see a dentist his toothache will get worse.
I have a toothache.

**Talking about problems**
If you have a toothache you should see a dentist.

**Giving advice**

Skills

- Reading for specific information
- Understanding sequence
- Brainstorming
- Concept mapping
- Writing lists
Text types

Short written texts
Short oral utterances
Lists
Expository text

CSF2 links

ESL Companion to the English CSF2:
• Listening and Speaking Outcomes S2.1, S2.2, S2.3, S2.4
• Reading Outcomes S2.1, S2.2, S2.3, 2.4
• Writing Outcomes S1.1

Health and Physical Education:
• Health of Individuals and Populations, Levels 4, 5, Outcomes HPiP0402, HPiP0502

Background issues

• The quality of the relationships between peers and between a young person and a service provider or school is the most influential factor in motivating young people to seek help.
• Adolescents generally prefer informal sources of support.
• Campaigns like ‘It’s OK to tell’ and ‘Tell, Tell, Tell’ have encouraged young people to seek help for themselves or their friends.
• Because of the more traditional roles of teachers in countries of origin, some young people may not be used to the idea of teachers as people they can talk to about a problem.
• Young people are more likely to seek help with a problem if they have a positive view that taking action is likely to be helpful. Problems can sometimes seem so large that young people feel powerless to do anything about them.
• Many students from refugee backgrounds will be unfamiliar with the role of counsellors as these allied health care professions are poorly developed in many refugee source countries. In many new-arrival communities there is emphasis on families working through problems together. Seeking help outside the family may not be encouraged. Refugee young people, however, may be very familiar with the notion of spiritual guidance, talking to an elder, seeking communal support and participating in highly structured collective activities. The role of counsellors is developed further in Unit 7.
• Other barriers to seeking professional counselling may be:
  – a fear that talking about problems will only make them worse,
  – lack of affinity with talk-based approaches,
  – fear of stigma stemming from the belief that only people who are weak or abnormal or who have an identifiable mental illness seek counselling,
  – fear that their confidentiality will be breached (the confidentiality issue is discussed in Unit 7).
• Accessible and affordable dental care is often an issue for refugees and other new arrivals. Information on dental services available in Australia is contained in Unit 7.

Preparation for Unit 6 activities
• Obtain CD/tape recorder and CD/tape.
• Photocopy situations onto cards for the Spin the Bottle game.

Suggested activities

Activity 1: What is the problem? What can they do? (p108)
Students reflect on help-seeking practices in their country for particular problems and compare them with what they would do in Australia. Students who have been in transit countries and in camps can choose to write about the camps, their home country or a transit country. The activity will give teachers further insight into students’ previous experiences. Feelings could include: in pain, sick, miserable, stressed, anxious, angry, worried, unhappy.

Activity 2: Ljubjana’s story (p110)
This activity is designed to get students to reflect on how a serious problem can be solved by taking small steps. It also asks students to think about their responsibilities in supporting friends and family members who need help.

Discuss the sequence of steps. What did Ljubjana’s friend do? What did Ljubjana do next? What happened next? After completing the written exercise, students can report back, using sequence markers like first, second, third, to reinforce the fact that problem solving is sequential.

Activity 3: Amir’s story (p112)
This case study illustrates how not attending to a problem can have serious consequences and that we have choices we can make to help solve a problem. It is important that students realise, however, that there was nothing Amir could do about his toothache until he got to Australia as he did not have access to proper dental care in his own country. The message from the study should be that seeking help with a problem in the early stages can prevent bigger problems later.

New vocabulary could include: tooth decay, filling, bad breath.

Students write in note form the consequences of seeing a dentist and not seeing a dentist.

Consequences could include: fix the toothache, fill the teeth, stop bad breath, stop the pain, sleep better, work better and toothache is worse, pain is bad, teeth decay, have bad breath, can’t sleep, can’t work, catch colds and flu.

Students practise in pairs making conditional sentences from the graphic organiser.
Activity 4: My supports (p113)
Brainstorm a list on the board or do a mind map of the types of people who could help with problems. Students make their own personal support maps.

Activity 5: Migration and health (p114)
The passage is long but has important messages – see Key understandings.

As a preliminary activity, brainstorm problems that students and their families faced when they first arrived. Unfamiliar vocabulary for some students may include *asylum seekers*. Handle discussion carefully without encouraging personal disclosure. If it happens, follow the procedures outlined in the introduction. The concept of counsellor is introduced as a professional person who helps you by talking. What a counsellor does will be explored further in the next unit on health professionals.

A suggested approach to reading is as follows but adapt according to the level of the group.

List four to five key words from each paragraph, e.g. paragraph 1: migrating, problems, physical and emotional health. Check understanding, tell students these words are in the reading. Ask if they can predict what the paragraph will be about. They could write possible sentences.

Play the CD/tape through once or read the passage aloud. Ask general comprehension questions. Students read the passage in pairs alternating the reading. After reading a paragraph, students tell their neighbour what they think the paragraph is saying.

More advanced students can identify and draw a box around the main idea in each paragraph, which is the first sentence in each case and underline supporting detail.

Another approach is to use three different colours to highlight the topic sentences, further information and examples.

The writing activity emphasises that there are appropriate people to seek help from. Students may come up with problems like housing, money etc. Usually families already have support people such as social workers working with them. You can talk about social workers at Migrant Resource Centres or Community Health Centres as appropriate people to help. But refer students to the Student Welfare Co-ordinator as an initial contact person.
Activity 6: Who can I talk to? What should I do? (p115)
The emphasis in this Spin the Bottle game is on talking about a problem with an appropriate person as a first step to problem-solving rather than working through a problem. Seat the students in a circle. Refer students to the lists of people they said could help them. Spin the bottle. The teacher takes a situation card, reads it aloud to the group and holds it in front of them so students can refer to it if necessary. The student who has the bottle facing them, says what they would do. The other students can agree or disagree with the ideas and make other suggestions. Remove any situation cards that might be too sensitive for particular students.

Extension activities
Provide information on Kids Help Line (1800 55 1800) and Lifeline (131114).

Assessment
Informal assessment of student performance in Spin the Bottle activity.
Activity 1: What is the problem? What can they do?

I’ve got a bad stomach ache. I always feel sick.

How is he/she feeling? ____________________________________________________
______________________________________________________________________
______________________________________________________________________

What did you do about this problem in your country? _________________________
______________________________________________________________________
______________________________________________________________________

What can you do about the problem in Australia? _____________________________
______________________________________________________________________
______________________________________________________________________

I’ve got a bad toothache.

How is he/she feeling? ____________________________________________________
______________________________________________________________________

What did you do about this problem in your country? _________________________
______________________________________________________________________

What can you do about the problem in Australia? _____________________________
______________________________________________________________________
UNIT SIX

I Have a Problem

I can't afford to pay for my school books and excursions.

How is he/she feeling?
____________________________________________________________________
____________________________________________________________________

What did you do about this problem in your country?
____________________________________________________________________
____________________________________________________________________

What can you do about the problem in Australia?
____________________________________________________________________
____________________________________________________________________

I don't sleep well. I'm having bad dreams. I feel like I want to punch someone all the time.

How is he/she feeling?
____________________________________________________________________
____________________________________________________________________

What did you do about this problem in your country?
____________________________________________________________________
____________________________________________________________________

What can you do about the problem in Australia?
____________________________________________________________________
____________________________________________________________________
Activity 2: Ljubjana’s story

Ljubjana is a 17-year-old girl from the former Yugoslavia. Ljubjana’s family lived in a displaced person’s camp in Croatia for two years before going to Germany and then migrating to Australia. They were often hungry in the camp. They did not know when they were going to eat and some days they had no food at all.

Ljubjana’s friends at the language centre noticed that she never ate her lunch. When they asked her about it, she said she wasn’t hungry. Everyday she gave her lunch to her younger brother. He was eating her lunch as well as his. Ljubjana lost a lot of weight. She was very thin. She was tired all the time and could not think in class. Her friends were very worried about her.

Talk with a partner. What is the problem here?
What can Ljubjana do? What can her friends do? What can her brother do?

Write sentences using ‘can’.

Example: Ljubjana can talk to her mother.

Ljubjana

____________________________________________________________________
____________________________________________________________________

Ljubjana’s friends

____________________________________________________________________
____________________________________________________________________

Ljubjana’s brother

____________________________________________________________________

Ljubjana’s story had a happy ending. Her friend Lily convinced Ljubjana to talk to the Student Welfare Co-ordinator about her problem. The Student Welfare Co-ordinator talked with Ljubjana and arranged for her to go to a doctor who spoke her language. The doctor understood Ljubjana’s problem and Ljubjana could talk to him about why she wasn’t eating. Together they worked on a plan that would help her. Ljubjana began to put on weight and to have more energy. She now eats her lunch every day, enjoys her classes and is very grateful to her good friend Lily for helping her.
Complete the sentences to show what happened.

Lily convinced Ljubjana to talk to the Student Welfare Co-ordinator.

Ljubjana talked to _______________________________________________________

The Student Welfare Co-ordinator made an appointment with____________________

The doctor and Ljubjana __________________________________________________

Ljubjana started to _______________________________________________________

What people helped Ljubjana?
Make a list.

______________________________________________________________________
______________________________________________________________________
______________________________________________________________________
Activity 3: Amir’s story

Amir is from the former Yugoslavia. During the war he could not look after his teeth properly. When he arrived in Australia he had a bad toothache in two of his teeth. He didn’t want to tell his parents because they had so many other things to worry about. He took some tablets to help the pain but it didn’t fix the problem. After a few months the pain got worse and more teeth started to hurt. One of his front teeth was a funny colour and he didn’t like to smile. The pain made it hard to sleep. Pain and little sleep made it difficult to learn at school.

One day the school nurse spoke to the students about looking after your teeth. She explained that tooth decay can give you bad breath and it can have a bad effect on your physical health. You can catch colds and flu more easily.

The nurse told the students about the free emergency dental care you can receive at the Dental Hospital and the dentist at the Community Health Centre. Amir told the Student Welfare Co-ordinator and his parents about his problem.

Making choices. What can Amir do? What will happen? Finish the diagram.
Practise with a partner. Make five sentences about the diagram.
Example: If Amir tells the Student Welfare Co-ordinator, he will see a dentist.
If Amir doesn’t see a dentist, he won’t fix his toothache.

1._____________________________________________________________________
2._____________________________________________________________________
3._____________________________________________________________________
4._____________________________________________________________________
5._____________________________________________________________________
Activity 5: Migration and health

Read and listen to this information.

Migrating to a new country can be difficult. There are many things that are new. There are different ways of doing things, new ways of learning at school and new friends to make. Parents and other adults have their own problems with making their way in a new country. They may have problems with organising housing, finding work, finding enough money to feed, clothe and educate their children. Refugees and asylum seekers may have extra problems when they settle in a new country. They have often lived through a war. At the same time, everyone is missing their family and friends from their own country. All these things can affect our physical and emotional health. We may feel sick and even small problems can seem like very large problems.

The good news is that there are many people who want to help you with your problems. A good place to start is by talking to someone you feel comfortable with. It might be someone from your family, a friend or a religious leader. At school, it might be your home group teacher or a Multicultural Education Aide who speaks your language. Every school has a Student Welfare Coordinator whose special job is helping students with their problems. She or he will organise an interpreter if you need one. You can also talk to a doctor or a social worker about a problem. There are other people whose job is to help people solve their problems by talking. They are called counsellors.

Talking about your problems to someone is helpful for two reasons. Firstly, you feel better because you don't feel alone with your problem, someone else knows how you feel. Secondly, the person you talk to can help you to work out the next step in solving your problem and find you the right professional help if you need it.

Who can help?

List some problems that you faced when you came to Australia. Beside each problem write a person or people you could talk to about this problem.

<table>
<thead>
<tr>
<th>Problems</th>
<th>Who can help?</th>
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<tbody>
<tr>
<td>Example: New ways of learning</td>
<td>Teachers, MEAs, friends</td>
</tr>
<tr>
<td>1.</td>
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<td>2.</td>
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</tbody>
</table>
Activity 6: Who can I talk to? What should I do?

Spin the Bottle game

- You can’t afford to go on the school camp.
- You are upset because you had an argument with your best friend.
- Some kids on the train threw your bag out the window. They said they will ‘get you’ tonight.
- You are worried that you are not learning English very fast.
- You can’t do your homework because you have to work in your uncle’s restaurant every night.
- Someone in the playground is making racist comments about you.
- You feel lonely and sad. You are missing your old friends.
- You can’t do your schoolwork well because you are feeling sad.
- Your money from Centrelink seems to have stopped.
- You have a lot of aches and pains in your body.
- You can’t see the blackboard properly. You haven’t told anyone.
- You live with your father and new stepmother. You haven’t seen your mother for ten years. Your father gets angry with you. You don’t like your stepmother.
- You are a 16-year-old boy. You think you want to leave home because you want all your Centrelink money for yourself.
- You are worried about a friend. They seem sad all the time and have missed a lot of school.
Reflection

In this unit I learned

______________________________________________________________________

______________________________________________________________________

______________________________________________________________________

______________________________________________________________________
Key understandings

- There are two kinds of medical doctors in Australia: general practitioners (GPs) who look after your general health, and refer you to the right person for care; and medical specialists who look after specific aspects of your health.
- GPs can assist with emotional health problems as well as physical health problems.
- You need a referral from a GP to see a specialist.
- A GP won’t always prescribe medicine.
- It is a good idea to find a GP you can talk to and see them consistently.
- GPs are located in surgeries in the community and Community Health Centres.
- Seeking help from counsellors is not a sign of weakness or mental illness.
- A range of services and professionals offer counselling support.
- Counsellors and GPs are bound by confidentiality laws.
- There are other health professional who can help, e.g. social workers, optometrists and denists.

Language focus

Simple present questions and statements
A GP looks after your general health.

Health-specific vocabulary
referral, treatment, medicine

Modals
might

Expressing possibility
A doctor might or might not

Giving advice
You should, You must

Making suggestions
You could

Rhythm/stress timing

Skills

Skimming and scanning
Reading for specific information

Text types

Interview
Dialogues
Non-fiction text
Jazz chant
**CSF2 links**

ESL Companion to the English CSF2:
- Listening and Speaking Outcomes S2.1, S2.2, S2.3, S2.4
- Reading Outcomes S2.1, S2.2, S2.3, S2.4
- Writing Outcomes S1.1

Health and Physical Education:
- Health of Individuals and Populations, Levels 3, 4, 5, Outcomes HPIP0302, HPIP0402, HPIP0502

**Background issues**

- GPs play an important role in the Australian health care system. They serve as a ‘gateway’ to many other health and social services and have an increasing role in the identification and assessment of mental health and social issues. A referral from a GP is required in order to see a medical specialist.
- Many young people attend hospital emergency services for general medical care.
- In Australia most GPs work from small community-based practices and people are encouraged to maintain a relationship with a particular GP to ensure continuity of care.
- While there will be times when medication is important for both physical and mental health problems, there is an increasing awareness among health professionals in Australia that medicines may not be the best way to deal with some health problems and in some cases may do more harm than good. The debate about the use or overuse of antibiotics is not a debate that is being had in all countries.
- Students from refugee and culturally diverse backgrounds:
  - may see the role of the doctor as primarily to do a physical check-up and prescribe medicines,
  - may be unfamiliar with the role of doctors in responding to mental health and well-being issues,
  - may have been accustomed to getting medical care through larger clinics, where their relationship would have been with the clinic rather than an individual doctor.
- See notes for Unit 6 in relation to counselling.

**Preparation for Unit 7 activities**

- Obtain CD/tape recorder and CD/tape.
- Make an overhead transparency of the jazz chant or prepare a chart for Activity 5.
Suggested activities

Activity 1: What work do health professionals do? (p121)
The purpose of this activity is to introduce students to the roles of different health professionals. Use the visuals to teach the concepts where possible. Practise pronunciation of language items and mark the stressed syllables. Depending on the level of the class you could introduce some examples of medical specialists, but beware of new vocabulary overload. Other strategies for reinforcing vocabulary and spelling could be scrambled words and a concentration game pairing a picture card with the meaning.

Activity 2: What does a GP do? (p124)
As a preliminary activity brainstorm with students what happens when someone is sick in their country and what they know about doctors in Australia. Pre-teach some of the health-specific vocabulary, including patient, physical examination, medical tests. Students use the question notes to cue possible questions as a predictive activity. Play the CD/tape of the interview through once. Students follow the text. Check understanding. Play again. Complete the written activities individually and the discussion activities in pairs or groups.

Activity 3: What does a counsellor do? (p128)
The purpose of this activity is to provide information on counselling services and counteract some of the fears and misconceptions in some communities about the role of counsellors. See teacher notes for Unit 6 for a fuller discussion of these issues.

Before playing the CD/tape, review who a counsellor is and what they do. Discuss to whom students talked in their own countries about particular kinds of problems. Discuss who they talk to now.

Play the interview. Check understanding. Make explicit the different kinds of counsellors and the different ways of finding them. Explain that students can self-refer but that a good person to talk to first is the Student Welfare Co-ordinator who can help them decide the best person for their particular needs.

Complete the written exercises individually or in pairs. Parts of the passage could be completed as an individual or co-operative close exercise.
Activity 4: Where can I find a dentist? (p130)

Teeth problems are common problems with new arrivals. This activity provides students with information about dental services in Victoria. It provides practice in reading for specific information from tables.

Before reading the table, review dental care practices in countries students have lived in.

Use the reading activity to provide practice in strategies for reading non-fiction text. Ask students to scan the text to see what they think it is about. Look at the heading and column headings. Explain the purpose of tables because students may be unfamiliar with this form of presenting information. What information is provided in the table? Read the introduction and then look at the detail in the table. They will need support in reading and understanding the information. Students can complete the written activities individually or in pairs.

Activity 5: ‘I’ve got a problem’ jazz chant (p132)

This activity reinforces formal and informal supports for health problems. Language practice activities focus on ways of making suggestions, rhythm, intonation and stress timing.

- Read the jazz chant using normal intonation.
- Review the making suggestions/giving advice structure in the chant.
- Have the students listen to the chant following the written version.
- Discuss any unfamiliar words and repeat any difficult sounds or new or difficult structures.
- Listen to the chant again.
- Have the students repeat each line of the chant after you, having established a clear strong beat by clapping or using rhythm sticks.
- Half the class chants the problem line, the other half the advice line.
- Once the students feel comfortable with the chant, divide the class into two groups and have one group take the problem part and the other group take the advice part.
- You could prepare a cloze version of the chant and use either as a reading or listening cloze.
- Students can write further couplets for the chant.

Extension activities

- Use the internet to locate translated information on visiting a GP. See bibliography section for websites.

Assessment

- Students write an ‘I’ve got a problem’ rap.
Activity 1: What work do health professionals do?

These people are health professionals. What work do you think they do?

Write these words under the pictures.

General practitioner  Counsellor  Medical specialist  Social worker
Physiotherapist  Dentist  Optometrist  Podiatrist

Mark the stress patterns for each word.
**What is their job?**

There are many different people who are trained to look after our health needs. Pair the two parts of the sentence to make a statement about the work that these different health professionals do.

<table>
<thead>
<tr>
<th>Professional</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>A general practitioner (GP)</td>
<td>is a doctor who looks after a particular problem, e.g. heart condition</td>
</tr>
<tr>
<td>A social worker</td>
<td>helps you organise your life, e.g. organise housing, schooling, work</td>
</tr>
<tr>
<td>A medical specialist</td>
<td>is a doctor who looks after your general health</td>
</tr>
<tr>
<td>A counsellor</td>
<td>treats problems with your speech</td>
</tr>
<tr>
<td>A dietician</td>
<td>helps you solve emotional problems through talking</td>
</tr>
<tr>
<td>A podiatrist</td>
<td>checks and treats problems with your muscles</td>
</tr>
<tr>
<td>A speech pathologist</td>
<td>checks your eyes and prescribes glasses</td>
</tr>
<tr>
<td>An optometrist</td>
<td>checks and treats problems with your feet</td>
</tr>
<tr>
<td>A dentist</td>
<td>advises you what to eat and drink if you have a special problem, e.g. allergies</td>
</tr>
<tr>
<td>An ethnic health worker</td>
<td>checks and treats problems with your teeth</td>
</tr>
<tr>
<td>A physiotherapist</td>
<td>is someone who works with a particular ethnic community on health issues, e.g. Vietnamese women's health worker</td>
</tr>
</tbody>
</table>
Activity 2: What does a GP do?

Essen and Ivan are reporters for the ‘The New Arrival News’. They spoke to two health professionals about their jobs.

Essen spoke to Dr Brown, who is a General Practitioner at the Community Health Centre.

Prediction

Essen wrote these notes to help her remember what questions to ask. What questions do you think she will ask Dr Braun?

- Two kinds of doctors in Australia?
- GPs job?
- Where to find GP’s?
- Doctors always give patients medicine?
- Important to see same doctor every time?
- New arrivals worry about their English.

ESSEN

What are the two kinds of doctors in Australia, Dr Brown?

DR BROWN There are GPs and there are specialists. A GP looks after your general health and a specialist is a special doctor for particular problems. For example, a cardiologist is a heart specialist.

ESSEN

What exactly does a GP do?

DR BROWN Patients come to see me with physical or emotional health problems. I work out what their problem is. I talk to the patient, I might do a physical examination and I might organise some tests. I talk with a patient to work out if they need to see a specialist. Or I might recommend that they see a counsellor to talk through some problems.

ESSEN

Can I go straight to a specialist?

DR BROWN No, you must go to a GP first. I write a letter to the specialist called a referral. You take this letter to your appointment with the specialist.

ESSEN

Where can new arrivals find GPs? In some countries you go to a hospital to see a doctor.

DR BROWN Most GPs are in private clinics, but you can also find GPs in some Community Health Centres.
ESSEN  Many new arrivals go to a hospital to see a doctor. Is this a good idea?

DR BROWN  If you have a general health problem you should go to a GP, but it is best to go to a hospital or call an ambulance on 000, if there’s a real emergency like a heart attack.

ESSEN  Do you always give a patient medicine?

DR BROWN  No. It depends on the problem and the cause of the problem. Some physical problems need medicine. For example, if you have a skin rash you might need a cream.

Sometimes stress can cause physical problems like headaches, not sleeping and some aches and pains. Talking about the problems that gave you the stress and working out ways of dealing with the problems, might help you more than taking medicine. Every patient is different.

If a patient needs medicine, I write a prescription and they take it to the chemist.

ESSEN  Is it OK if I see a different doctor each time I have a problem?

DR BROWN  It’s better if you see the same doctor, as they will get to know you and your medical history. You can always go to another doctor if you’re not happy and you want a second opinion.

ESSEN  Many new arrivals worry because their English is not good enough to speak to the doctor. What can they do?

DR BROWN  Their friends might know a doctor who speaks their language. Or they can make an appointment with a doctor and ask for an interpreter to come to their appointment. Or they can ask the doctor to use the Telephone Interpreter Service.

ESSEN  Should I only visit a doctor if I have a problem?

DR BROWN  No. You can ask a doctor for a medical check-up to make sure that there is nothing wrong with your health. It is better to find out if there is a problem and fix it before it gets serious.

ESSEN  Thank you, Dr Brown, for your time.

DR BROWN  It’s a pleasure. Nice to talk to you.
Vocabulary

There are a lot of new medical words in the interview. Use these words from the interview in the sentences below.

- tests
- physical examination
- medical history
- prescription
- medical check-up
- referral
- patient
- second opinion
- medicine

1. You need a r____________________ from your GP before you can see a specialist.

2. A doctor might do a physical e__________________________________________________
   to help her decide what your problem is. For example, she might listen to your heart.

3. The doctor might do medical t_________________________________ to help her
   decide what your problem is. For example, she might take some blood from your arm.

4. A doctor might write you a p___________________________________________ for
   medicine and you will take it to the chemist.

5. A person who visits a doctor or goes to hospital is called a p_____________________.

6. If you are not happy with a doctor, you can get a second o_____________________
   from another doctor.

7. A doctor writes down things you tell her and what she finds out. When you come for
   another visit she will look at her records. In this way she can get to know your
   m___________________________________ h____________________________________.

8. You can ask the doctor for a general medical c______________________________.
   He will do a complete physical examination and talk to you to see if you have a health
   problem.

Making sentences using ‘might’ and ‘will’

We use will to predict the future

The GP will ask you questions

We use might or might not to talk about possibility

The GP might do tests

What are two things a GP will do when you visit her?

1._____________________________________________________________________

2._____________________________________________________________________
What are some of the things a GP might or might not do when you visit her? Look at the interview.
1. 
2. 
3. 
4. 

Understanding the interview
Discuss with a partner:
What kind of problems can you see a GP about? Give some examples.

Where can you find a GP?

If you don’t speak English well what help can you get for a visit to the doctor?

What other questions would you like to ask Dr Brown?
Compare doctors in Australia and doctors in your country.

What is different about doctors in Australia and doctors in your country?
Work with a partner.

<table>
<thead>
<tr>
<th>Doctors in Australia</th>
<th>Doctors in _____________</th>
<th>Doctors in ______________</th>
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</thead>
<tbody>
<tr>
<td></td>
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</table>

Activity 3: What does a counsellor do?

Ivan interviews Maria, who is the youth counsellor at the Community Health Centre. Her special job is to work with young people who have a problem or who need help because they are feeling sad, depressed, anxious or confused.

IVAN Maria, what does a counsellor do?

MORIA Well, a counsellor helps people by talking with them. He or she will help you to understand why you are feeling like you are and help you to work out what to do so that you feel better.

IVAN What if a counsellor tells you to do something and you don’t want to do it?

MORIA Ah, well counsellors don’t tell you what to do. You decide what to do. They help you to look at a problem from different sides and work out what to do to feel better. You might see the problem in a new way. For example, if someone was making you unhappy because they were bullying you at school, a counsellor might help you to understand the bully better and help you to work out good things to do and say to stop them or to protect yourself.

IVAN What kind of problems do young people come to see you about?
MARIA Oh, all sorts of problems. They might have problems with their family or have boyfriend or girlfriend problems. They might have problems at school. Or they might just be feeling really sad because of things that have happened to them in the past. Sometimes people feel really sad and they don’t know why.

IVAN But if I have a problem I can talk to someone in my family. Why do I need to go and see a counsellor?

MARIA Yes, many people do talk to a family member or a friend first and that is helpful. But a trained counsellor can help you to see a problem from all sides because they are not so close to you. And sometimes it is easier to tell a counsellor things that you don’t want to tell a relative or a friend. Maybe you don’t want to worry them or you feel embarrassed.

IVAN How can I find a counsellor?

MARIA Different people do counselling. There are school counsellors, social workers, youth workers. You could ask your GP or the Student Welfare Coordinator at school for the best person to help you. The Migrant Resource Centre can help you too. And Community Health Centres can also refer you to a counsellor. Foundation House has special counsellors who work with people who feel sad and anxious because of their experiences in a war. It is important to feel comfortable with your counsellor. If you don’t feel easy talking with them, you should stop seeing them and find another counsellor.

IVAN Some people say that if they go to a counsellor that means they are weak. They think they can fix their own problems.

MARIA No, going to a counsellor does not mean you are weak. It means you are strong enough to say, ‘I’ve got a problem and I want to do something about it’.

IVAN What if a counsellor tells my secrets?

MARIA Counsellors, doctors and interpreters can’t tell your secrets. What you tell them is confidential, it is just between you and them. The only time this is not true is if they believe you or someone else is not safe. Then the law says they have to tell someone. They would discuss this with you first.

IVAN Thanks for talking with me. I’m sure that our readers will find this information really useful.

MARIA Thank you. Just tell your readers that the most important thing is to ask for help if they need it. Or if they have a friend they are worried about, they should talk to them about getting help.
Understanding the interview

Discuss with a partner:
What are three places you can go to find a counsellor?

______________________________________________________________________
______________________________________________________________________
______________________________________________________________________

How does a counsellor help you?

______________________________________________________________________
______________________________________________________________________

Activity 4: Where can I find a dentist?

Essen and Mohammed knew that many new arrivals had problems with their teeth. They found out what dental treatment was available and the cost. This is a table from an article on dentists that they wrote for ‘The New Arrival News’.

<table>
<thead>
<tr>
<th>Dental service</th>
<th>Who can go</th>
<th>Cost</th>
<th>Where are they</th>
</tr>
</thead>
<tbody>
<tr>
<td>Private dentists</td>
<td>Anyone (short or no waiting time)</td>
<td>Can be expensive</td>
<td>In private clinics in the community</td>
</tr>
<tr>
<td>Public dentists</td>
<td>Anyone with a Health Care Card or Pensioner Concession Card (can be long waiting list)</td>
<td>Small cost</td>
<td>In most Community Health Centres and the Royal Dental Hospital</td>
</tr>
<tr>
<td>School Dental Service</td>
<td>All primary school children and children whose parents/guardians have a Health Care Card.</td>
<td>Free</td>
<td>Ask the Student Welfare Co-ordinator in your school or call School Dental Service on 1300 360 054</td>
</tr>
<tr>
<td>Youth Dental Program</td>
<td>Students in Years 9-12 under 18 who have a Health Care Card or whose parents/guardians have a Health Care Card (can be long waiting list)</td>
<td>Free</td>
<td>In some Community Health Centres – call 1300 360 054 for information</td>
</tr>
<tr>
<td>Emergency dental care</td>
<td>Anyone (bad toothache)</td>
<td>Small cost – free if under 18</td>
<td>In Community Health Centres (limited spaces per day) and the Royal Dental Hospital</td>
</tr>
</tbody>
</table>
Reading tables

Tables help us to find the information we need quickly.

1. What is the main heading for the table?

______________________________________________________________________

2. What are the column headings?

______________________________________________________________________

3. How much does the youth dental program cost?

______________________________________________________________________

4. How do I find a community dental clinic near me?

______________________________________________________________________

5. Where can I get emergency dental care if I have a bad toothache?

______________________________________________________________________

Are these statements true or false?

1. If you have a very bad toothache you must wait for up to one week before you can see a dentist.

2. School students under 18 who have a Health Care Card must pay to see a dentist.

3. There are shorter waiting times to see private dentists.

4. Health Care Card holders pay a small cost to see a private dentist.

5. There are long waiting lists to see a public dentist unless it is an emergency.

Rewrite the false statements to make them true.

______________________________________________________________________

______________________________________________________________________

______________________________________________________________________
Activity 5: ‘I’ve got a problem’ jazz chant

Listen and repeat after each jazz chant.

I’ve got an earache
Why don’t you see a doctor?

I’ve got a stomach ache
Why don’t you see a doctor?

Ouch I’ve got a toothache
You should see a dentist

I feel really sad
Then talk to a friend

Someone is teasing me
You should tell a teacher

I need help with Centrelink
Go and see a social worker

I feel really stressed
Talk to a counsellor

I think I’ve had a heart attack
You must call an ambulance

Give advice to a friend.

Look at the jazz chant. Write down all the different ways that you can tell someone to do something.

Example:   See a doctor

______________________________________________________________________
______________________________________________________________________
______________________________________________________________________

Reflection
In this unit I learned
Key understandings

- Community Health Centres offer a range of supports for refugee young people including:
  - general practitioners and other health professionals,
  - youth workers,
  - bi-lingual workers,
  - free or low cost services,
  - support groups and young people’s interest groups.
- Services vary according to location.

Language focus

Simple present: They have bi-lingual workers.
Asking questions: When is the Community Health Centre open?
Health-specific vocabulary: podiatrist, physiotherapy, dietician
Talking about occupations: A podiatrist treats problems with your feet.

Skills

- Reading and finding specific information from brochures
- Using the internet to locate services
- Using the Yellow Pages
- Completing a crossword puzzle

Text types

- Crossword puzzle
- Brochures
- Formal talk
- Telephone directory
CSF2 links

ESL Companion to the English CSF2:
• Listening and Speaking Outcomes S2.1, S2.2, S2.3, S2.4
• Reading Outcomes S2.1, S2.2, S2.3, S2.4
• Writing Outcomes S1.1, S1.2, S1.3

Health and Physical Education:
• Health of Individuals and Populations, Level 5, Outcome HPIP0502

Background issues

• Community Health Centres, because they provide multiple services concentrated in one location, are an appropriate one-stop shop for newly-arrived migrant and refugee youth.
• Building relationships with Community Health Centres is an important strategy for increasing young people’s access to services.
• Many young people attend hospital emergency services for general medical care. It would appear that this is because many new arrivals are more familiar with institutionally-based medical care. A Community Health Centre which has a GP on site is a more appropriate venue for general health care than a hospital, which should be used for emergencies only.

Preparation for Unit 8 activities

• Collect brochures from Community Health Centres that service areas where your students live.
• Obtain a set of Yellow Pages telephone directories.
Suggested activities

Activity 1: What is a Community Health Centre? (p136)
Community Health Services are introduced in this activity. Revise health professionals vocabulary and introduce new vocabulary as needed. Use the visuals to reinforce concepts where available.

Activity 2: Community Health Centre Crossword Puzzle (p138)
Do the crossword puzzle. Emphasise that not all centres offer all services.

**Solutions:** Community Health Centre Crossword Puzzle

Across Clues: 1 Speech Pathologist, 5 Physiotherapist, 8 Dentist, 9 Appointment, 11 Dietician, 12 Feet, 13 Muscles, 14 Podiatrist

Down Clues: 1 Social Worker, 2 Optometrist, 3 Nurse, 4 Receptionist, 6 Youth Worker, 7 Counsellor, 8 Doctor, 10 Eyes

Activity 3: Glenvale Community Health Centre (p140)
Use this activity as an exercise in reading brochures and looking for specific information. Teach features of text such as use of asterisks, headings, abbreviated language, e.g. *no referral necessary*. Explain that this is not a real health centre but that all health centres have information brochures that explain their services and include the same kind of information. Use real brochures as a follow-up reading activity.

Activity 4: Find a Community Health Centre near you (p140)
Students can use the Yellow Pages or the internet to locate a health centre near them. The *Making a Healthy Start in Australia* booklet (Victorian Foundation for Survivors of Torture 2001) also lists centres.

Extension activities

- Students could compile a bi-lingual poster dictionary of services offered by health centres.
- Explore the NSW Health internet site which has a wide number of publications on health issues in a range of community languages including, ‘Are you making the most of health services in your area?’ on Community Health Centres.
- Organise a visit to your local Community Health Centre. You should consider organising interpreters and meeting a range of health professionals.
- Organise for a staff member from the local Community Health Centre to visit and speak to the students at the school, e.g. youth worker.

Assessment

Provide students with pamphlets from local health centres that serve your students. Students find specific information on services, opening hours etc.
Activity 1: What is a Community Health Centre?

It is a building with many health services.
It provides health care to people and their families who live in the area.
It tells you what health services are available in the community.
It provides programs to help people stay healthy.

What services can you find at Community Health Centres?

- Not all Community Health Centres offer the same services.
- Most Community Health Centres have doctors on site.
- They often have bi-lingual workers on site.
Find out the people who provide certain services at a Community Health Centre. You can refer to the list below this table or Activity 1, Unit 7 if you have forgotten some services.

<table>
<thead>
<tr>
<th>Definition of service this professional provides</th>
<th>Professional</th>
</tr>
</thead>
<tbody>
<tr>
<td>A … looks after your general health.</td>
<td></td>
</tr>
<tr>
<td>A … checks and treats problems with your teeth.</td>
<td></td>
</tr>
<tr>
<td>A … helps to solve emotional problems</td>
<td></td>
</tr>
<tr>
<td>A … helps you organise your life, e.g. organise</td>
<td></td>
</tr>
<tr>
<td>A … treats problems with your speech.</td>
<td></td>
</tr>
<tr>
<td>A … advises what to eat and drink if you have</td>
<td></td>
</tr>
<tr>
<td>A … checks and treats problems with your muscles.</td>
<td></td>
</tr>
<tr>
<td>A … checks and treats problems with your feet.</td>
<td></td>
</tr>
<tr>
<td>An … works with a particular ethnic community</td>
<td></td>
</tr>
<tr>
<td>An … checks your eyes and prescribes glasses.</td>
<td></td>
</tr>
</tbody>
</table>

Social worker, physiotherapist, dietitian, counsellor, dentist, podiatrist, speech pathologist, ethnic health worker, optometrist, doctor
Activity 2: Community Health Centre crossword puzzle
Across
1 A _____________ ________________ treats problems with your speech. (6, 11)
5 A _________________ treats problems with your muscles. (15)
8 A ____________ looks at your teeth and may do a filling. (7)
9 You can telephone or call at the front desk to make an __________ to see a doctor. (11)
11 A ________________ gives you advice about what to eat if you have a problem,
   e.g. diabetes. (9)
12 A podiatrist treats problems with your ___________. (4)
13 A physiotherapist might give you exercises for sore _______________. (7)
14 A _____________ treats problems with your feet. (10)

Down
1 A ________________ helps you organise your life, e.g. school, work, housing. (6,6)
2 An _________________ checks and treats problems with your eyes. (11)
3 A Community Health ____________ helps the doctor. (5)
4 The person who sits at the front desk is called the _________________. (12)
6 A ________________ ______________ works with young people. (5, 6)
7 A ________________ helps you to solve your problems by talking with you. (10)
8 A ________________ looks after your general health. He is also called a GP. (6)
10 An optometrist checks your _____________. (4)
### Activity 3: Glenvale Community Health Centre

<table>
<thead>
<tr>
<th>GLENVALE COMMUNITY HEALTH</th>
<th>HOURS OF SERVICE</th>
<th>WHAT SERVICES DO WE OFFER?</th>
</tr>
</thead>
<tbody>
<tr>
<td>42 Elm Street, Glenvale Phone 9562 3511</td>
<td>Monday - Friday 8.00 am – 6.00 pm</td>
<td>• Medical</td>
</tr>
<tr>
<td></td>
<td>Saturday 9.00 am – 12 noon Drop in or phone for appointment</td>
<td>• Dental *</td>
</tr>
<tr>
<td></td>
<td></td>
<td>• Counselling</td>
</tr>
<tr>
<td></td>
<td></td>
<td>• Physiotherapy*</td>
</tr>
<tr>
<td></td>
<td></td>
<td>• Youth health</td>
</tr>
<tr>
<td></td>
<td></td>
<td>• Podiatry*</td>
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<td></td>
<td>• Speech pathology</td>
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<td></td>
<td></td>
<td>• Social work</td>
</tr>
<tr>
<td></td>
<td></td>
<td>• Optometry</td>
</tr>
<tr>
<td></td>
<td></td>
<td>• Family Support</td>
</tr>
<tr>
<td></td>
<td></td>
<td>* small fee</td>
</tr>
<tr>
<td></td>
<td></td>
<td>No referral necessary</td>
</tr>
</tbody>
</table>

**INTERPRETERS**
- Telephone interpreter service
- On site interpreter by arrangement

**COST**
- Many services are free
- There may be a small fee for some services

**Read this brochure from a typical Community Health Centre.**

Find the following information

1. What hours is the Community Health Centre open on Saturday?

2. What are the two kinds of interpreters you can use?

3. Do you need a referral from your doctor before you see the physiotherapist?

4. Which services do you have to pay a small fee for?

### Activity 4: Find a Community Health Centre near you

Use the Yellow Pages telephone directory to find your local Community Health Centre or you could use the internet.

**Reflection**

In this unit I learned______________________________________________________
______________________________________________________________________
Key understandings

- It is important to make an appointment to see a doctor for these reasons:
  - You can request an interpreter.
  - You can request a longer appointment time.
  - You can ask for a male or female doctor if you prefer.
- You can make an appointment by phone or in person.
- You can prepare for an appointment by writing down your questions, symptoms and relevant past history.
- It may be helpful to take a friend to the appointment.
- It is helpful to know how to deal with the general environment of a doctor’s surgery.

Language focus

Simple past

- She broke her leg.
- My leg hurts.

Simple present

- I’d like a
- Can I have

Polite request

- Ask the doctor
- Tell the doctor

Imperatives

- Forming questions
- Asking for and giving information

Can I have a contact number

Skills

- Using the telephone
- Using a telephone directory
- Filling in a form
- Recognising and using appropriate register
- Role play
- Writing connected text from notes

Text types

- Short oral utterances
- Instructions
- Spoken and written dialogues
- Notes
- Forms
CSF2 links

ESL Companion to the English CSF2:
• Listening and Speaking Outcomes S2.1, S2.3, S2.4
• Reading Outcomes S2.1, S2.4
• Writing Outcomes S1.1, S2.1, S1.2, S2.2, S1.3

Health and Physical Education:
• Health of Individuals and Populations, Levels 3, 4, 5, Outcomes HPIP0302, HPIP0402, HPIP0502

Background issues

• Advance planning for health care may be an organisational challenge for young people, particularly if they face a number of stresses. In practice young people may be more motivated to seek care when they are faced with an immediate problem. Making an appointment in advance is important as it ensures that the young person does not have to wait for a long time to see the doctor and can make provision for an interpreter.
• Many new arrivals may be unfamiliar with the concept of the medical appointment. In many countries people were seen in clinics in order of arrival.
• Most doctors in Australia schedule short appointments unless the patient specifically requests a double or long appointment. Communicating through an interpreter and dealing with complex issues makes a longer appointment time necessary.
• Many new arrivals are unaware that they have access to free interpreting services when making an appointment or for a consultation (tel 131 450). Bookings for on-site interpreters must be made at least two weeks in advance (except for emergencies) and must be made by the doctor or the surgery. GPs have a special priority number. Language, dialect and gender should be specified when making the booking. GPs and patients also have free access to the Telephone Interpreter Service. Some GPs and receptionists are unaware of the service, so patients may need to inform them.

Preparation for Unit 9 activities

• Photocopy ‘Making an Appointment’ cards for Activity 2
• Obtain CD/tape recorder and CD/tape.
Suggested activities

Activity 1: Sam goes to the doctor (p145)
The dialogue illustrates the negative effect of inappropriate register and the time-wasting aspect of not making an appointment. Listen to the CD/tape and discuss.

Activity 2: Zahra makes an appointment (p148)
Brainstorm reasons for making appointments. Read the introduction. Discuss why you would book an interpreter rather than rely on family or friends to interpret for you. Ask students to predict interchanges: What will you say to the receptionist? What will the receptionist ask you? List on the board. Play the CD/tape through once. Play it again, stopping at different points and ask the students to predict the response. Students read the dialogue in pairs. For lower level students you could prepare a close version of the dialogue for additional practise. Students practise generating dialogues in pairs using the cue cards.

Activity 3: Zahra prepares for her visit to the doctor (p151)
Discuss the importance of preparation for a doctor’s appointment so that you don’t forget important information or the questions you want to ask. What kind of things will the doctor want to know? Expand the notes orally as a joint construction activity. Students practise together in pairs and do the written exercise individually.

New vocabulary will include: treatment, symptoms and allergy.

Activity 4: Patient information (p152)
This activity provides practise in reading and completing forms. Check understanding of terms like next of kin, marital status. If the information asked for is not contained in the dialogue, they can invent it. The focus is on understanding the kinds of information required in patient information forms.

Activity 5: Get the best from your visit to the doctor (p153)
As a revision activity, brainstorm what students need to remember to do before visiting the doctor. Read and discuss.

Complete the vocabulary exercise. Examples of treatment could include: medicine, exercises, hot/cold packs, rest, relaxation techniques, change of diet, exercise. Examples of symptoms could include: sore arm/leg, feeling tired, rash. Examples of medication could include: tablets, medicine, ointment/cream.

Practise what you need to remember when visiting the doctor orally in pairs using the prompts. Language focus is on imperatives. You will need to teach and practise: Tell the doctor about (+nouns) and Tell the doctor to (+infinitive of the verb).

Prepare a cloze version of the text to reinforce content.
Extension activities

• Write a ‘Making an appointment’ dialogue in pairs or individually using the cue cards.
• Role play a ‘Making an appointment’ dialogue where things go badly.
• Use the Yellow Pages locality guide to research medical practitioners and advertised services in students’ local area. For example, find a practise with female doctors that bulk bills.

Assessment

Role play making an appointment with a receptionist.
Activity 1: Sam goes to the doctor
Sam wants to see a doctor. He goes to a busy medical centre and talks to the overworked receptionist.

Listen to the dialogue.
Sam wants to see a doctor. He goes to a busy medical centre and talks to the overworked receptionist.

SAM: I want Dr Murray.
RECEPTIONIST: Have you got an appointment?
SAM: No.
RECEPTIONIST: You’ll have to wait your turn. Take a seat.

Three-quarters of an hour passes.
RECEPTIONIST: Are you waiting for Dr Murray?
SAM: Yes of course.
RECEPTIONIST: How do I know who you are waiting for? Some people! Mrs Wright, you can see Dr Murray now.

Discuss:
Sam is not getting on very well with the busy receptionist. Do you think she will try to help him? What did he say wrong?
There are ways of speaking that sound more polite than other ways. Sam did not mean to sound impolite, but he upset the receptionist and she replied in a rude way. What could he have said?

**Polite request**
- Can I see Dr Murray please.
- Could I see Dr Murray please.
- I would like to see Dr Murray.
- I’d like to see Dr Murray.

**Not so polite**
- I want to see Dr Murray.
- I want Dr Murray.

**Polite answer**
- Yes, that’s right.
- Yes, I am.

**Not so polite**
- Yes, of course.

**It is fine to say, ‘of course’ if someone asks you to do something, but it can sound rude if they are asking you for information.**

- *Could you open the door please?*  
  *Yes, of course (polite)*

- *Are you going this way?*  
  *Yes, of course (not polite)*

Most receptionists in medical clinics are understanding and helpful to new English learners but it can help your communication if you ask for help politely.

**Are these statements polite or a bit rude?**
Tick the polite question or statement.

- Give me a Medicare form.
- I’d like an interpreter.
- I want a female doctor.
- I’d like a long appointment.

- Can I have a Medicare form please?
- I want an interpreter.
- Could I see a female doctor?
- Give me a long appointment.
When you need to see a doctor it is a good idea to make an appointment. You can telephone the doctor or you can visit the surgery to make an appointment.

You can:
- ask the receptionist if this is a free medical service,
- ask for an interpreter,
- ask for a long appointment time if you need it,
- ask for a male or female doctor if you want one.
Activity 2: Zahra makes an appointment

Zahra wants to go to a doctor. It is her first visit. She has a problem with her leg and doctors in Iran have told her that she may need an operation. She decides to make an appointment because she needs an interpreter to help her explain her medical history to the doctor.

Listen to the dialogue and then practise it in pairs.

RECEPTIONIST Good afternoon. Can I help you?

ZAHRA I'd like an appointment to see a doctor. I need a long appointment and I'd like an interpreter please.

RECEPTIONIST What's your name? Have you been here before?

ZAHRA Zahra el Moudi. M.O.U.D.I. No, this is my first visit. Can I see a female doctor?

RECEPTIONIST Sure. You can see Dr Jones. Is it urgent? It takes up to two weeks to get an interpreter. We can use the telephone interpreter service if it's urgent.

ZAHRA No, I can wait.

RECEPTIONIST What about June 7th at 2.30 pm?

ZAHRA Can you make it a bit later?

RECEPTIONIST 4 pm?

ZAHRA That's fine.

RECEPTIONIST Now what language do you need? Do you want a female interpreter?

ZAHRA Farsi. And, yes, I'd like a female interpreter.

RECEPTIONIST That won't be a problem. Give me a contact number just in case.

ZAHRA 9389 8909.

RECEPTIONIST See you on the 7th and don't forget to bring your Medicare card.

ZAHRA I won't. Thanks for your help. Bye.
Practise making an appointment with a partner.
Don't forget to use polite language.

Scenario 1

<table>
<thead>
<tr>
<th>Patient</th>
<th>Receptionist</th>
</tr>
</thead>
<tbody>
<tr>
<td>1: You want to make an appointment:</td>
<td>2: Greet the patient, ask their name and ask if this is their first visit:</td>
</tr>
<tr>
<td>‘May I make an appointment, please.’</td>
<td>‘May I have your name, please? Is this your first visit to our</td>
</tr>
<tr>
<td></td>
<td>Community Health Centre?’</td>
</tr>
<tr>
<td>3: It is your first visit:</td>
<td>5: Ask them if the problem is urgent.</td>
</tr>
<tr>
<td>‘Yes, this is my first visit.’</td>
<td>7: Ask what language they need.</td>
</tr>
<tr>
<td>4: You want a long appointment and you want an interpreter</td>
<td>9: Ask if they need a male or female interpreter.</td>
</tr>
<tr>
<td>6: The problem is not urgent.</td>
<td>11: Tell them a date and time.</td>
</tr>
<tr>
<td>8: Tell them the language you need.</td>
<td>13: Give them an earlier time.</td>
</tr>
<tr>
<td>10: You don’t mind if the interpreter is male or female.</td>
<td>15: Say goodbye.</td>
</tr>
<tr>
<td>12: The date is OK but you want an earlier time.</td>
<td></td>
</tr>
<tr>
<td>14: Thank the receptionist and say goodbye.</td>
<td></td>
</tr>
</tbody>
</table>

UNIT NINE  Making an Appointment
Scenario 2

<table>
<thead>
<tr>
<th>Patient</th>
<th>Receptionist</th>
</tr>
</thead>
<tbody>
<tr>
<td>1: You telephone the Community Health Centre.</td>
<td>2: You are the receptionist at Glenvale Community Health Centre. You answer the phone and greet the caller.</td>
</tr>
<tr>
<td>3: You want to make an appointment.</td>
<td>4: Ask them if they have been to the health centre before.</td>
</tr>
<tr>
<td>5: This is not your first visit. You want to see Dr Grey. The matter is urgent. You want an appointment today.</td>
<td>6: Tell them they can see Dr Grey at 1.00 pm. Ask if they want an interpreter.</td>
</tr>
<tr>
<td>7: You don’t need an interpreter. You will bring a friend with you. The time is OK.</td>
<td>8: Remind them to bring their Medicare card.</td>
</tr>
<tr>
<td>9: Thank the receptionist and say goodbye.</td>
<td>10: Say goodbye.</td>
</tr>
</tbody>
</table>
Activity 3: Zahra prepares for her visit to the doctor

Zahra wants to be prepared for her appointment to the doctor so she makes some notes about her problem and the questions she wants to ask. She also writes down her allergy.

What does Zahra want to say to the doctor?

Work with a partner. Use Zahra’s notes to speak to the doctor and to ask questions. Role play the questions.

Medical history

Doctor in Iran said need another operation to reset leg. Family escaped Pakistan. Not possible to have operation at refugee camp.

Symptoms
Leg aches. Hurts when I walk a lot. Makes me limp. Usually sore at night.

Allergies
Penicillin

Questions
Operation necessary? 
Cost? 
Time to get better? 
Walking bad for leg? 
Other treatment?
Activity 4: Patient information

When Zahra went to her doctor’s appointment, the receptionist asked her to complete an information form like this. Fill in the form for Zahra. Invent any information you don’t know.

GLENVALE
COMMUNITY HEALTH CENTRE

Patient Information

Name _______________________________________________________

Address _____________________________________________________

_______________________________________Telephone_____________

Date of Birth_________________________ ____Age__________________

Marital Status___________________________Sex__________________

Next of Kin_____________________________Relation_______________

Address of Next of Kin________________________________________

_______________________________________Tel No _______________

Allergies_____________________________________________________
Activity 5: Get the best from your visit to the doctor

When you go to the doctor remember to do these things:

• Make notes of things you want to tell the doctor and questions you want to ask.
• Write down any medication you are taking or take the box with you.
• Tell the doctor about allergies you may have. For example, some people are allergic to penicillin.
• Tell the doctor about your medical history, about any medical problems you had in the past and about your symptoms.
• Answer questions as honestly as you can and tell the doctor about any problems which might be making you feel sick.
• Ask the doctor to write down important information for you, for example, about your problem, your treatment or instructions for your medication.
• Think about taking a relative or friend with you to help you.

Vocabulary

allergies   symptoms   treatment   medication

1. Write a sentence or two to show the meaning of the word.
2. Write examples of the word.
3. Draw a picture to help you remember the meaning of the word.

Example:

**ALLERGY**

**Meaning**
Some people are allergic to some foods, medicines or insect bites. They might get very sick.

**Examples**
penicillin   eggs   bee sting
Remember to …

Tell your partner five things they should do when they go to the doctor. Take turns at finishing the sentence.

Tell the doctor about __________________________________________________________

Ask the doctor to ____________________________________________________________

Write down _________________________________________________________________

Answer _________________________________________________________________

Tell the doctor about ________________________________________________________

Reflection

In this unit I learned ____________________________________________

______________________________________________________________________

______________________________________________________________________

______________________________________________________________________
Key understandings

• Medicare is the universal health care system in Australia.
• Medicare covers some medical costs but does not cover allied health or private hospitals.
• Some doctors use bulk billing. You can ask the doctor if they bulk bill.
• You can apply for your own Medicare Card when you are 15.

Language focus

Simple present
Medicare pays for

Health care system specific language
Bulk bill, rebate

Skills

Reading for specific information
Retelling
Form filling
Working in groups
Problem solving
Reading and understanding signs, forms and fact sheets

Text types

Non-fiction text
Fact sheets
Forms
Signs

CSF2 links

ESL Companion to the English CSF2:
• Listening and Speaking Outcomes S2.1, S2.2, S2.3, S2.4
• Reading Outcomes S2.1, S2.2, S2.3, S2.4
• Writing Outcome S2.1

Health and Physical Education:
• Health of Individuals and Populations, Level 6, Outcome HPIP0602
Background issues

- New arrivals may not be familiar with Australia’s Medicare system.
- In refugee home countries health care tends to be provided either free of charge by governments or aid agencies or by private practitioners on a fee-for-service basis.
- Most refugee young people will have a limited capacity to pay for medical services and hence will be reliant on services that bulk bill.
- Refugee young people can access health care services with their parents by using the family Medicare card or by using their own Medicare card, which they are entitled to apply for once they have turned 15. Attending a doctor without their parents’ knowledge needs further discussion. There may, however, be situations where students wish to attend a doctor without having a parent or guardian present. They can still do so even without a personal Medicare card by giving the receptionist their parent’s name which appears on the card and their address. The receptionist can then call Medicare for the number.
- All permanent residents and Temporary Protection Visa holders are eligible for Medicare.

Preparation for Unit 10 activities

- Bring your own Medicare Card to class.
- Prepare copies of fact sheets for distribution.
- Order copies of Medicare enrolment forms from a Medicare office (tel 132 011) or download from the internet at www.hic.gov.au or use the form provided in Activity 2

Suggested activities

Activity 1: What is Medicare? (p158)
Show a sample of a Medicare card. Brainstorm what students already know about Medicare. When do they use it? What is it for? Do they or their parents have a card yet? Read and discuss the reading passage. The following is a suggested strategy but can be modified depending on the needs and level of the class.

- Divide students into four groups. Appoint a group leader. Explain the process.
  - Give each group the ‘Facts about Medicare’ information sheets A, B, C or D.
  - The group leader asks the group to make a prediction on content by asking, What do you think this reading is about?
  - Give students four minutes to read their fact sheets.
  - The group leader asks, Are there any words we don’t understand? Students pool their knowledge or ask a teacher or aide for assistance.
  - The leader asks students to summarise their information sheet by asking, What have we learnt about Medicare? Students take turns to give information.
• Form new groups with one student from each of the original groups. Appoint a group leader.
  – The leader asks each member of the group, What did you learn about Medicare?
  – Each member says what they learnt about Medicare from their fact sheet.
  – The group leader or their appointee reads a problem and asks, Who has information that can help us with this problem? and Is the answer in the reading passage?
  – They decide as a group what the recorder should write.
  Groups report back.
• Discuss the issues raised as a whole group.

Activity 2: Complete a Medicare enrolment form (p161)
The exercise provides practise in form filling. The form should be marked ‘draft’. The issue of when students apply for their own card needs to be handled sensitively. Most students will continue to use the family card but those seeking greater independence will want to apply for their own card. You could say something like:

Most of you will use your family card when you need to visit a doctor. If you are living separately from a parent or guardian, however, you will need your own card. Or there might be a time when you want to discuss something privately with a doctor. You might want to discuss with your parents when you should get your own card.

Extension activities
  Translations are available in a number of languages.
• Research eligibility and information on benefits that you can get with a Health Care Card or Pensioner Concession Card.

Assessment
Form completion.
Activity 1: What is Medicare?

Medicare is Australia’s system of paying for health care. This is the way the government pays for some of the costs of health care.

Some doctors and optometrists bulk bill. This means Medicare pays all the cost. Try to find a doctor who bulk bills. Doctors who bulk bill usually display a sign like this:

Look for a sign that says, ‘Direct Bills’ or ‘Bulk Bills’.

Some doctors charge you. You pay the doctor and then fill out a form at a Medicare office to claim the money back. Medicare pays a fixed amount for a visit to the doctor. If the doctor charges more than the fixed cost then you pay the rest.
How do I get a Medicare card?

- Your parent/guardians apply for a family card.
- If you are 15 or over, you can apply for your own card or you can use the family card.
- You apply for a Medicare card at a Medicare office. Ring 132 011 to find out where they are.
- You will need your passport and visa.

When do I need my Medicare card?

- When you go to a doctor who bulk bills
- When you go to a chemist for the first time to get a prescription
- When you go to a hospital
- When you go to a Medicare office to get back money paid for a visit to a doctor

What medical costs does Medicare pay for?

- Visits to GPs
- Visits to specialists (with GP referral)
- Eye tests
- X-rays and medical tests if there is bulkbilling
- Public hospital visits

Medicare doesn’t pay for:

- Dentists
- Ambulances
- Medicines
- Private hospitals
- Physiotherapy
- Glasses

Ambulances are free if you or your parent/guardian has a Health Care Card.

OR

You can pay ambulance insurance each year.
Medicare problems

Use the information in the fact sheets and the ‘What is Medicare?’ reading passage to solve these problems. You can also use what you learned in other units to help you.

Problem 1
Dung needs to go to a doctor. He can’t afford to pay. What should he do?

Problem 2
Pishtiwan’s mother went to hospital in an ambulance. Someone told her that ambulance trips cost a lot of money. She is worried she will have to pay. She has a Health Care Card. Will she have to pay?

Problem 3
Mohammed is 17. He doesn’t live with his family. He is living in a flat with some friends. He needs to go to a doctor. His name is on his family Medicare card. What can he do?

Problem 4
Fatima’s mother is having trouble with her eyes. She thinks she might need glasses. She doesn’t know how you get glasses in Australia. A friend told her Medicare pays for glasses. Is the friend right? What does her mother have to do first? Will Medicare pay?

Problem 5
Francesco is 17. He has moved out of home and is living with some friends. He wants to apply for his own Medicare card. What does he have to do? What documents does he need?

Problem 6
Mr El Moudra went to a doctor who bulk bills. The doctor sent him to have some tests and the laboratory sent him a bill. What can he do?

Problem 7
Anastasia went to a doctor who charged her for the visit. He wrote a prescription for some antibiotics. Anastasia took the prescription to a chemist. This was the first time Anastasia had been to this chemist. When did Anastasia need to show her Medicare card?
Activity 2: Complete a Medicare enrolment form

Practise filling in forms. Write your details on the Medicare enrolment form.

Medicare Enrolment Application

This form should be used to enrol for Medicare and to obtain a Medicare card.

What you need to do...

**STEP 1 — Collect the relevant documents**
You need to provide relevant documents to determine your eligibility for Medicare enrolment. You must have one eligibility document and two residency documents from the lists below. If you cannot provide the appropriate documents, call Medicare on 132 011*.

**Eligibility documents**
If you were born in Australia you must provide one of the following documents:
- Australian passport
- birth certificate or birth extract, or
- Australian armed services papers.

If you were born overseas you must provide:
- your Australian or overseas passport or travel document issued by the Department of Foreign Affairs and Trade with a valid visa.

**STEP 2 — Complete the form**
Complete the form using a blue or black pen. If you need help completing the form, you can:
- call Medicare on 132 011*
- call the Aboriginal and Torres Strait Islander Access Line on 1800 555 995, or
- visit your nearest Medicare office.

**STEP 3 — Lodge the form**
Bring your completed form and original documents to your nearest Medicare office.

If you live in an area remote from a Medicare office, or there are genuine reasons for not being able to attend, you may post your application, together with original or certified copies of your documents and your reasons for not being able to attend in person, to GPO Box 9822 in your capital city.

**Returning to Australia/Visa Applicants**
If you are an Australian citizen returning to live in Australia, a visitor to Australia or you have applied for an Australian permanent resident visa, please read the information on the back of this form as you may need to provide additional documents with your application.

**Family/Group Medicare cards**
People can choose to be on separate Medicare cards or be included with other people at the same address.

Where multiple persons are included on a Medicare card, one person needs to be identified as the cardholder. The cardholder will be sent general information on Medicare matters.

**Medicare Safety Net**
The Medicare Safety Net helps people cope with high medical expenses. It is available to individuals as well as families. Individuals are automatically registered, however, families need to register for the Safety Net. For more information about the Medicare Safety Net, call 132 011* or visit any Medicare office.

* Local call rates. Calls from mobile phones and pay phones incur additional charges depending on the carrier.
## Section 1 — Cardholder’s details

- All correspondence, including the Medicare card will be sent to the cardholder.

1. **Your full name**
   - Mr
   - Mrs
   - Miss
   - Ms
   - Other

   **Family name**
   **First name**
   **Second name**

2. **Your contact details**
   - Mailing address
   - Residential address (if different from mailing address)
   - Postcode
   - Telephone
     - Work
     - Home

3. **Will you be listed on the Medicare card?**
   - No
     - Please explain why you will not be listed (e.g., Power of attorney, carer, parent arranging card for child), then go to Section 2
   - Yes
     - Please give the following details
     - Date of birth
     - Previous Medicare No. (if applicable)
     - Previous name (if applicable)
     - If born outside Australia

## Section 2 — Details of all other people to be shown on the Medicare card

- It is not necessary to repeat the cardholder’s information.
- This form allows for six people to be listed on your Medicare card (including the cardholder). If more than six names are to be included on your card, please attach the additional details on a separate sheet.

<table>
<thead>
<tr>
<th>Family name</th>
<th></th>
<th>First name</th>
<th></th>
<th>Second name</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>Date of birth</td>
<td>DD</td>
<td>MM</td>
<td>YYYY</td>
<td>Male</td>
<td>Female</td>
</tr>
<tr>
<td>Previous Medicare No. (if applicable)</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Previous name (if applicable)</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>If born outside Australia</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Reason for entry to Australia</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Entry date</td>
<td>DD</td>
<td>MM</td>
<td>YYYY</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Departure date</td>
<td>DD</td>
<td>MM</td>
<td>YYYY</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Is this person of Aboriginal or Torres Strait Islander origin?</th>
<th>No</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Yes — Aboriginal</td>
</tr>
<tr>
<td></td>
<td>Yes — Torres Strait Islander</td>
</tr>
</tbody>
</table>

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<tr>
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<tr>
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<td></td>
<td></td>
<td></td>
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</tr>
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<td>MM</td>
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<td>Departure date</td>
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<td></td>
<td>Yes — Aboriginal</td>
</tr>
<tr>
<td></td>
<td>Yes — Torres Strait Islander</td>
</tr>
</tbody>
</table>

* Note: Responding to the Aboriginal or Torres Strait Islander question is voluntary.

For persons of both Aboriginal and Torres Strait Islander origin, mark both “Yes” boxes.
UNIT TEN
Paying for Health Care in Australia

Section 3 — Duplicate card

A duplicate card is a copy of your Medicare card. If you have
more than one person on your Medicare card you may find it
useful to have a duplicate card.

Do you require a duplicate Medicare card?
No
Yes

Section 4 — Declaration

The Aboriginal and Torres Strait Islander question is voluntary.
This information will be used to improve government health
program and outcomes for Indigenous people. You can have
this information removed from your HIC records at any time by:
• calling the Aboriginal and Torres Strait Islander Access Line
on 1800 556 965, or
• visiting your nearest Medicare office.

Privacy note

The information you provide on this form will be used to
determine eligibility for Medicare benefits and to maintain a
record of entitled persons for the government programs
administered by HIC. Collection of this information is
authorised by law and may be disclosed to the Department of
Health and Ageing, Centrelink, the Department of Veterans’
Affairs and the Department of Immigration and Multicultural
and Indigenous Affairs. Information concerning any
identification number given to you by HIC and your eligibility
for a benefit administered by HIC may be provided to a person
who renders a hospital, medical or pharmaceutical service, to
a member of the staff of that person, or to a person nominated
to administer your affairs.

I declare that to the best of my knowledge and belief, all
information provided on this form is true and correct.

Cardholder’s
signature

Date

Note: It is an offence under the Health Insurance Act 1973 to
make a false statement relating to Medicare benefits.
The information on this application form is correct at the time
of printing and is subject to change.
Reflection
In this unit I learned____________________________________________________
______________________________________________________________________
______________________________________________________________________
______________________________________________________________________
Key understandings

- Under the Australian health care system, all patients have certain rights. These include:
  - a right to confidentiality,
  - a right to have information presented in a way that can be understood,
  - a right to a second opinion,
  - a right to refuse or stop treatment,
  - a right to make a complaint,
  - a right to be supported by someone else.

- In order to obtain the best quality care for ourselves and others, we have certain responsibilities. These include:
  - a responsibility to give complete information,
  - a responsibility to answer questions as honestly as we can,
  - a responsibility to seek information,
  - a responsibility to give treatment a chance to work,
  - a responsibility to follow medication directions,
  - a responsibility to call an ambulance in an emergency and stay with the person until help arrives,
  - a responsibility to support our friends and family to seek help.

Language focus

Simple present
- He wants to play football.
- Sonia had a swollen finger.

Simple past
- She has the right to
- She should
- This means that
- Can you say it in simple language?
- When do I take it?
- Is there something else I can try?

Talking about rights and responsibilities

Talking about necessity

Explaining

Asking for clarification

Asking about medication

Asking about alternatives
Skills
Interpreting meaning and writing in simpler terms
Problem solving
Working in groups
Role play

Text types
Charters/policy documents
Short written texts

CSF2 links
ESL Companion to the English CSF2:
• Listening and Speaking Outcomes S2.1, S2.2, S2.3, S2.4
• Reading Outcomes S2.1, 2.2, 2.3, 2.4
• Writing Outcome S2.1

Health and Physical Education:
• Health of Individuals and Populations, Level 6, Outcome HPIP0602

Background issues
• Australia’s health care system is relatively complex and young people may be unaware of their health rights. Young people may need to contact a number of services before they find one able to help them. Having located an appropriate service-provider, it may be difficult for refugee young people in particular to establish a rapport with and trust in the provider. They may be unaware of their right to seek a second opinion or to find another service in the event that they are dissatisfied or uncomfortable with a health care provider. Migrant and refugee young people may be unaware of their right to seek an advocate from a Migrant Resource Centre, the school, Foundation House or a youth centre.
• A fear that their confidentiality will be breached has been found to be a significant barrier to seeking help for young people in general and may be particularly so for refugee young people owing to:
  – negative experiences of doctors or other authority figures in the course of their refugee experiences,
  – the presence of an interpreter (particularly if the young person is from a small ethnic community).
Students need to know that doctors, counsellors and interpreters are bound by law to protect confidentiality.
• Schools are bound by mandatory reporting procedures if there is concern for a student’s safety. Teachers need to make themself familiar with statewide policy and their own school policy and procedures. You can explain the exception to the right to confidentiality to the students in terms like this:

*Teachers, doctors and counsellors have a duty of care, which means that they need to protect a young person by reporting if they are told that:*  
• someone is seriously hurting them or not looking after them properly,  
• they are seriously thinking about hurting themselves,  
• they have hurt or are seriously thinking about hurting someone else.  
*A young person can request that the process of passing on information is discussed with them first.*

• The Health Services Commissioner is a health ombudsman who receives and resolves complaints from health service users about health service-providers. The outcomes can be changes to procedures, better education of health personnel and in some cases compensation. You can contact the Health Services Commissioner on tel. (03) 8601 5200.

**Preparation for Unit 11 activities**

• Make a transparency of ‘Your Health Rights’ and ‘Your Health Responsibilities’.
• Make transparencies of ‘What do these rights/responsibilities mean?’ for Activities 2 and 3.
• Make a transparency of ‘How do I say it?’ for Activity 4
• Order Health Rights posters from SouthEast Health on tel (02) 9382 8346.
• Photocopy problems for distribution to groups.
• Photocopy role play scenarios for distribution to groups.

**Suggested activities**

**Activity 1: What are your health rights and responsibilities? (p170)**  
Discuss the concept of rights and responsibilities. The school’s Code of Conduct is a good example to use. Read the rights and responsibilities statements and discuss them.

**Activities 2 and 3: What do these rights/responsibilities mean? (p172 and 174)**  
These exercises ask students to say in simple English and in practical terms what these rights and responsibilities mean for them. They will need discussion and explanation. Model possible responses on the overhead projector. See the response sheet for possible explanations. For a low level group you may prefer to give them the response sheet to read through and discuss. The response sheet could be given out as a reference to all students.
In relation to the need to provide full information, a key message in the workbook is that health comprises physical, social and emotional health and that people can seek help from a GP in all these areas. However, while disclosure of past physical problems can be critical for effective care, disclosure of information about past trauma and current stresses should remain in the control of the young person themselves. Disclosure will only be constructive in the context of a trusting relationship. Avoid conveying the impression that young people must disclose psychological and social issues that may be affecting their health.

Similarly, when discussing the need to give honest answers to questions it needs to be borne in mind that the loss of trust in others is a common casualty of the refugee experience. Young people may be understandably reluctant to disclose information until they have a well established and trusting relationship with a health care provider. Avoid the impression that young people are not behaving honestly if they withhold information.

**Activity 4: How do I say it? (p176)**
This activity teaches appropriate language for students to express their rights. The language will be used in the role plays and the problem-solving activity.

Use the transparency to introduce the language. Practise intensively in pairs using verbal or written prompts. You could practise with a Spin the Bottle activity. When the bottle faces a student they are given a verbal or written prompt, e.g. *Ask about medication, ask for a second opinion, tell the doctor you don't understand.*

**Activity 5: Problem solving (p177)**
The activity illustrates the importance of rights and responsibilities in the context of real life situations. Vocabulary which will need to be pre-taught/revised includes: *operation, asthma, diabetes, contraception, flashbacks.* Appoint group leaders and recorders. Give one or more problems to each group to discuss. Groups report back. Make sure that all relevant rights and responsibilities are discussed. When students report on recommended strategies follow up with: ‘What would you say in this situation? What would you say to the doctor/counsellor?’

**Activity 6: ‘Rights and responsibilities’ role play (p179)**
Distribute the scenarios to each group. Follow procedures outlined in the How to Use HealthWize section for role plays.
Extension activities

• Write dialogues for the role plays.
• Do a verb close activity.

Assessment

Individual and group performance on problem-solving activity.
Activity 1: What are your health rights and responsibilities?

The government in Australia looks after its citizens’ health by giving them health rights. There are also things we can do to look after ourselves and others. These are called our health responsibilities.

Your Health Rights

You have a right to:
- See a doctor that you can trust and can talk to, who is polite and shows respect
- Get information in language you understand
- Ask for important information to be written down
- Get a second opinion
- Say no to treatment or ask that it be stopped
- Confidentiality (within limits of your safety or another person’s safety)
- Have a friend or family member with you during an appointment
- Complain to the Health Services Commissioner if you have a problem with your treatment by a health professional
Your Health Responsibilities

You have the responsibility to:
• Tell the doctor or counsellor anything that might be relevant to how you are feeling, e.g. medical history or any symptoms you may have
  • Answer questions as honestly as you can
  • Ask questions if you don’t understand, e.g. about a medical problem or about treatment
  • Follow medication directions
  • Give treatment a chance to work, e.g. don’t stop taking antibiotics before they are finished
  • Seek help if you have a physical or emotional problem

You also have the responsibility to:
• Support your friends and family if they need help with a physical or emotional health problem, e.g. suggest they get help and offer to go with them
  • Call an ambulance if there is an emergency and stay with the person until help arrives
Activity 2: What do these rights mean?
Look at your rights and say what you think they mean or give an example.

<table>
<thead>
<tr>
<th>Rights</th>
<th>What does this mean?</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>You have a right to:</strong></td>
<td>I think this means:</td>
</tr>
<tr>
<td>See a doctor that you can trust and can talk to, who is polite and shows respect</td>
<td>Have a doctor I can talk to. They treat you like a person not just a problem. I can see a female doctor if I want.</td>
</tr>
<tr>
<td>Get information in language you understand</td>
<td></td>
</tr>
<tr>
<td>Ask for important information to be written down</td>
<td></td>
</tr>
<tr>
<td>Get a second opinion</td>
<td></td>
</tr>
<tr>
<td>Say no to treatment or ask that it be stopped</td>
<td></td>
</tr>
<tr>
<td>Confidentiality (within limits of your safety or another person's safety)</td>
<td></td>
</tr>
<tr>
<td>Have a friend or family member with you during an appointment</td>
<td></td>
</tr>
<tr>
<td>Complain to the Health Services Commissioner if you have a problem with your treatment by a health professional</td>
<td></td>
</tr>
</tbody>
</table>
## Rights response sheet

<table>
<thead>
<tr>
<th>Rights</th>
<th>What does this mean?</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>I have a right to:</strong></td>
<td></td>
</tr>
<tr>
<td>See a doctor that I can trust and can talk to who is polite and shows respect</td>
<td>I think this means: See a doctor I can talk to. They treat you like a person not just a problem. I can see a female doctor if I want.</td>
</tr>
<tr>
<td>Get information in language I understand</td>
<td>The doctor gets an interpreter for me. They explain things to me in words I can understand.</td>
</tr>
<tr>
<td>Ask for important information to be written down</td>
<td>'Can you write down what I have to do with my tablets' or 'Write down the medical name of my problem' so I can find out more information.</td>
</tr>
<tr>
<td>Get a second opinion</td>
<td>I can see another doctor. Maybe the doctor will suggest different treatment and then I can decide what I want to do.</td>
</tr>
<tr>
<td>Say no to treatment or ask that it be stopped</td>
<td>'I don’t want an operation. Is there something else I can do?’ ‘These tablets are making me feel strange. I don’t want to take them anymore.’ ‘Can I have the test another day?’</td>
</tr>
<tr>
<td>Confidentiality (within limits of my safety or another person’s safety)</td>
<td>The doctor/counsellor won’t tell anyone what I said. But if they are worried that I might hurt myself or another person they have to tell.</td>
</tr>
<tr>
<td>Have a friend or family member with me during an appointment</td>
<td>I can take a friend with me for comfort and to help me remember things.</td>
</tr>
<tr>
<td>Complain to the Health Services Commissioner if I have a problem with my treatment by a health professional</td>
<td>Maybe a doctor gives you the wrong treatment and it makes you sick. I can then tell the Health Services Commissioner.</td>
</tr>
</tbody>
</table>
## Activity 3: What do these responsibilities mean?

Look at your responsibilities and say what you think they mean or give an example.

<table>
<thead>
<tr>
<th>Responsibilities</th>
<th>What does this mean?</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>I have the responsibility to:</strong></td>
<td><strong>I think this means:</strong></td>
</tr>
<tr>
<td>Give full information (to a doctor I trust)</td>
<td>Tell them my medical history and symptoms. It can help to tell the doctor I am worried but I don’t need to talk until I am ready to trust the doctor.</td>
</tr>
<tr>
<td>Answer questions as honestly as I can</td>
<td>[Blank]</td>
</tr>
<tr>
<td>Ask questions if I don’t understand</td>
<td>[Blank]</td>
</tr>
<tr>
<td>Follow medication directions</td>
<td>[Blank]</td>
</tr>
<tr>
<td>Give treatment a chance to work</td>
<td>[Blank]</td>
</tr>
<tr>
<td>Seek help if I think I need it</td>
<td>[Blank]</td>
</tr>
<tr>
<td>Support my friends and family if they need help with a physical or emotional health problem</td>
<td>[Blank]</td>
</tr>
<tr>
<td>Call an ambulance if there is an emergency and stay with the person until help arrives</td>
<td>[Blank]</td>
</tr>
<tr>
<td>Responsibilities</td>
<td>What does this mean?</td>
</tr>
<tr>
<td>-------------------------------------------------------</td>
<td>---------------------------------------------------------------------------------------------------------------</td>
</tr>
<tr>
<td>I have the responsibility to:</td>
<td>I think this means:</td>
</tr>
<tr>
<td>Give full information</td>
<td>Tell them my medical history and symptoms. It can help to tell the doctor I am worried but I don’t need to talk until I am ready to trust the doctor.</td>
</tr>
<tr>
<td>(to a doctor I trust)</td>
<td></td>
</tr>
<tr>
<td>Answer questions as honestly as I can</td>
<td>Give as much information about my physical and emotional health as I can. Make sure the information is correct.</td>
</tr>
<tr>
<td>Ask questions if I don’t understand</td>
<td>Ask about a medical problem or when I have to take the medicine.</td>
</tr>
<tr>
<td>Follow medication directions</td>
<td>Take my medicine or tablets when I am supposed to. It is not good to take someone else’s medicine. Their problem is different. Some medicines have different side effects on different people.</td>
</tr>
<tr>
<td>Give treatment a chance to work</td>
<td>Some treatment takes a while to work. Exercises might fix a bad back but I have to keep on doing them.</td>
</tr>
<tr>
<td>Seek help if I think I need it</td>
<td>Get help if I think I have a physical or emotional problem. Problems get worse if you don’t do anything about them.</td>
</tr>
<tr>
<td>Support my friends and family if they need help with a physical or emotional health problem</td>
<td>Talk to a friend about getting help. Tell them who to see e.g. Student Welfare Co-ordinator. Say ‘I will go with you if you want.’</td>
</tr>
<tr>
<td>Call an ambulance if there is an emergency and stay with the person until help arrives</td>
<td>If someone is in danger I should call 000 and stay with the person until help arrives.</td>
</tr>
</tbody>
</table>
Activity 4: How do I say it?

Tell the doctor/counsellor and the interpreter you are worried about confidentiality.

Please don’t say anything to anyone about this.
Please don’t tell my mother, my friend, the bully about this.

Tell the doctor you don’t understand and want them to explain.
Can you say that again please?
I don’t understand what you are saying. Can you explain it in simple language?
Can you write the name for me please?

Ask about medication.
When do I take it?
How many times a day?
Do I take it with food, before meals or after meals?
Are there any side effects?
How long do I take it for?
Do I need to take all the medicine if I feel better?

Say no to treatment.
I don’t want to take sleeping pills.
I’m not happy about taking sleeping pills.
I don’t like taking sleeping pills.

Ask that treatment be stopped and give a reason.
This medicine is making me feel strange. I want to stop taking it.
I want to stop the tablets because they are making me sleepy.

Ask about other treatment.
Can I try some other treatment?
Is there something else I can try?
Is there something else I can do?

Tell the doctor you want a second opinion.
I would like a second opinion. Can you recommend someone?
I want time to think about it. I think I will get a second opinion.
Activity 5: Problem solving

Work with a group. Read the problems. Think about what rights and responsibilities are important in this situation. Think about what the person can do now. Think about the best thing to do and say.

Problem 1

Nadia needs to go to the doctor. She has diabetes. She speaks some English but not enough to explain her symptoms to the doctor. She tells the receptionist she needs an interpreter. The receptionist says they don’t have anyone at the surgery who speaks Arabic. She says Nadia will have to go to another doctor.

What are Nadia’s rights?
What is the receptionist’s responsibility?
What can Nadia do now?
What do you think she should do?

Problem 2

Mario (16) wants to talk to the doctor about contraception. He wants to go to his family doctor because the doctor speaks Italian, but he is worried that the doctor might tell his parents. He doesn’t have his own Medicare card.

What are Mario’s rights?
What are the doctor’s responsibilities?
What can Mario do?
What do you think he should do?

Problem 3

Sonja went to a doctor with a sore and swollen finger. She forgot to tell the doctor she was allergic to penicillin. The doctor asked her about allergies but Sonja didn’t understand the question. He gave Sonja a penicillin injection and now her lips and tongue have swelled up and she has sores on her arm.

What are Sonja’s rights?
What are her responsibilities?
What are the doctor’s responsibilities?
What should Sonja do now?
Problem 4
Ahmed hurt his knee playing soccer. He hurt the same knee twice in Pakistan. The doctor in Pakistan said he needed an operation. Ahmed doesn’t want to have an operation and he wants to play soccer, so he didn’t tell his Australian doctor about the other times he hurt his knee. The doctor prescribed some tablets to make the swelling go down and told Ahmed not to play soccer for two weeks. He told him to come back and see him in two weeks time.

What might happen?
What are Ahmed’s rights?
What are his responsibilities?
What should Ahmed do now?

Problem 5
Estafania is 15. When she was 5 years old she saw bad things happen during the war in her country. Sometimes she gets flashbacks and has difficulty breathing. The problem passes but she is frightened when it happens. She has not told anyone about the problem. It happened at the language centre one day. She was gasping for breath. The school thought she was having an asthma attack and called an ambulance. The hospital found out that she did not have asthma but could not work out what was wrong and sent her home.

What could Estefania have done differently?
What are her rights?
What can she do now?

Problem 6
Said is going to see a counsellor. He needs an interpreter. The last time he saw the counsellor the interpreter was a woman from his community who knew him and his family. He felt too embarrassed to say what he really felt and he was worried that the interpreter might tell his mother what they were talking about.

What are Said’s rights?
What are his responsibilities?
What should he do to solve this problem?
Activity 6: Rights and responsibilities role play

Scenario 1
Who? Nadia and a receptionist
Where? The doctor’s surgery
What happens? Nadia wants an Arabic interpreter. The receptionist is rude. She doesn’t want to help Nadia. She says they don’t have anyone who speaks Arabic working at the surgery. Nadia tells her about the telephone interpreter service. The receptionist is not interested. She tells her to go to another doctor. Nadia tells her politely that she will go to another clinic where the receptionist is more helpful.

Scenario 2
Who? Dejan and a doctor
Where? The doctor’s surgery
What happens? Dejan hurt his ankle playing basketball. Dejan’s doctor tells him he mustn’t walk on the ankle for six weeks. Dejan isn’t happy about this because his team, The Tigers, are on top of the ladder and he wants to play in the premiership in four week’s time. He asks the doctor about other treatment. The doctor says he can try tablets to help the swelling and do gentle exercises but he must not play basketball for six weeks. Dejan tells the doctor he wants a second opinion. The doctor says that is his right and tells him the name of a specialist.

Scenario 3
Who? Quyen and a doctor
Where? Community Health Centre
What happens? The doctor tells Quyen she has a chest infection. She needs to rest for a week and take antibiotics. She asks Quyen if she is allergic to any medicines. Quyen tells her she is allergic to penicillin. The doctor says she will give her a different antibiotic. She must take one tablet three times a day. Quyen asks her when she needs to take the medicine. The doctor tells her to take them before meals. Quyen asks her if there are any side effects with the tablets. There are usually no side effects but she must not take them with alcohol.
Scenario 4

Who? Said and a counsellor

Where? On the telephone

What happens? Said had a counselling session with a school counsellor. The interpreter was female and a good friend of his aunt. Said was not happy with the session because he could not say what he was feeling. He was worried that the interpreter would tell his aunt what he was saying.

He telephones the counsellor to speak to her about the problem. He tells her about the problem and asks if he can have a male interpreter next time.

The counsellor apologises and says she will make sure that it doesn’t happen again. She tells him not to worry that the interpreter will tell his aunt because everything that is said in a counselling session is confidential. She will organise a male interpreter for him.

Scenario 5

Who? Abdurahman and a doctor

Where? Doctor’s surgery

What happens? Abdurahman and his entire family have bronchitis. They are coughing all day and feel miserable. Abdurahman speaks more English than his brothers and sisters so he goes to the doctor. He tells the doctor his symptoms and the doctor listens to his chest. He tells Abdurahman he has bronchitis and needs antibiotics. Abdurahman is not allergic to penicilllin. The doctor tells him to take the tablets three times a day after meals until the tablets are finished. Abdurahman tells him he needs another prescription because there are not enough tablets for his sick brothers and sisters. The doctor says he must not ever share medicine with anyone. He suggests to Ahmed that he brings his sick brothers and sisters to the surgery.

Reflection

In this unit I learned__________________________________________________________

______________________________________________________________________
Resources

HealthWize
Useful Contacts

Life line 13 1114

Kids Helpline 1800 55 1800

Health Services Commissioner (03) 8601 5200 or toll-free: 1800 136 066

Medicare Hotline 132 011

Telephone Interpreter Service 1300 655 082

Telephone Interpreter Service GP priority number 1300 131 450

Royal Dental Hospital (03) 9341 0345

The Victorian Foundation for Survivors of Torture (VFST) (03) 9388 0022
All website information is accurate as of May 2004. All resources produced by The Victorian Foundation for Survivors of Torture can be downloaded from www.survivorsvic.org.au.


Barrett, P. and Sonderegger, R. 2001, The Multicultural Life Skills Program for New Young Australians, Griffith University and Trans-cultural Mental Health Centre, NSW.


Bounce Back Series 2003, McGrath & Noble, Aust.: Level 1 Lower Primary, Level 2 Middle Primary, Level 3 Upper Primary to Junior Secondary, Teachers Handbook. The Bounce Back resiliency program offers practical strategies to help young people cope with the complexity of their everyday lives and learn to ‘bounce back’ when they experience sadness, difficulties, frustrations and hard times. The program comprises a teacher’s handbook and three teacher’s resource books.


Day, Carmel 2000, Food for a New Beginning, Adult Migrant Education Services, Melbourne.
Deal, Russell *Strength Cards for Kids*, St Lukes Innovative Resources, Bendigo Australia.


Department of Human Services Victoria, *Problem with a Health Service or Concerns about your Health Privacy?*, available at www.health.vic.gov.au/hsc/.


Schifini, A. Short, D. and Villamil Tinajero, J. 2000, ‘High Point Level A: Success in English Language Literature Content’, Hampton-Brown, California.

South East Health, *Youth Health Rights*, posters and wallet cards, tel (02) 9382 8346, fax (02) 9382 8158.

Stone, Deanna 2000, *Meeting New Challenges*, Macmillan Education Australia. This workbook is suitable for all states but it specifically addresses Level 6 of the strands ‘Health for Individuals and Populations’ and ‘Self and Relationships’. ‘Maximising Your Health’ is
ideal for Year 9 students, however it is flexible enough to suit either year level depending on your school’s program.


Triple J Real Appeal for Young Refugees, Refugee Stories, at www.abc.net.au/triplej/realappeal/refugeestories.

Tromp, T. Food and Nutrition Curriculum, Tottenham English Language Centre, Melbourne.


Victorian Foundation for Survivors of Torture 2000 a, Easing the Transition, Melbourne.


