Teacher’s Guide No. 1

Community and Environmental Health

Photo Credits: Lucky E. Dela Rosa and Jwyn E. Loquero (Media Arts Students)

(PLS. REDRAW. A PICTURE DEPICTING A HEALTHY COMMUNITY AND UNHEALTHY COMMUNITY)
CONTENT STANDARD: Demonstrates understanding of environmental health to attain community wellness

PERFORMANCE STANDARD: Consistently demonstrates healthful practices to prevent and control common community and environmental health problems

INTRODUCTION

A healthy community reflects a sense of well being. It is the foundation for achieving all other goals and is essential for a productive society. Thus, it also helps in building our country’s economy and in equipping our students to be healthier in order to learn and succeed academically.

In this module the learners will be introduced to social issues and problems regarding the threats of community and environmental destruction. It aims to develop the capacity to get involved in programs advocating community and environmental health. The learner can take part in maintaining and promoting healthful community and environment as well. This module is designed for the learners to reflect on how healthy their community and environment are, what they have done that adversely affect their health and what they should do to sustain community and environmental health.

In the first part of this material, the learners are given an overview of the unit, the concepts they will take up likewise, the things they are expected to do.

In the pre-assessment, the learners will be given the chance to recall what they had learned from the meaningful experiences of their lives relevant to environmental destruction.

The setting of the varied competencies is made as their guide to process the value of being responsible and be socially aware of their capacity to get involved in the series of projects they are expected to.

The materials will articulate four (4) lessons, which are categorically divided into four parts: What to Know, What to Process, What to Understand and What to Transfer.

The activities are designed for diverse learners, acknowledging their individual capacities, interests, and learning styles. Therefore, the learners will definitely realize their potentials of becoming responsive to the needs of their community and the environment as well.
LEARNING COMPETENCIES: At the end of this unit, the learners should be able to:

1. explain the concept of community health
2. describe the characteristics of a healthy community
3. recognize the benefits of a healthy environment
4. identify the most pressing environmental problems in the Philippines
5. analyze the impact of environmental problems on people’s health
6. apply community development and program planning skills to create effective and culturally relevant communication strategies and interventions to promote health
7. make decisions about buildings, businesses, services, housing areas and other structures to include in the environment of a healthy dream community

PRE-ASSESSMENT

Choose the best answer from the options below. Write the letter on the space provided before each number.

1. Which best describes community health as an art and science?
   A. It maintains, protects and improves the health of all members of the community through organized and sustained community efforts.
   B. It maintains and improves the health of all members of the community through organized and sustained community efforts.
   C. It protects and improves the health of all members of the community through organized and sustained community efforts.

Remind the students to answer this Pre-assessment for 10-20 minutes only. Checking of Papers should be done immediately.
2. Which does not describe a healthy community?

A. A clean and safe environment
B. An environment that meets everyone’s basic needs
C. An environment that promotes social harmony and actively involves everyone
D. An environment that is fully aware of its daily opportunities.

3. Which best describes the benefits of a healthy environment?

A. Less disease, less health care cost
B. Active community involvement
C. More budget for health problems, increases supply of medicines
D. More community projects for community development

4. Which of the following problem is a leading cause of environmental destruction?

A. Soil Erosion
B. Oil Spill
C. Illegal Mining
D. Deforestation

5. What environmental problem reduces the ability of soil to store water and support plant growth?

A. Soil Erosion
B. Oil Spill
C. Illegal Mining
D. Deforestation
What environmental problem does this picture depict?

A. Water pollution
B. Deforestation
C. Improper waste disposal
D. Flashfloods

7. Which is not an effect of Climate Change?

A. Dead trees from oil spillage
B. Increased risk of drought, fire and floods
C. More health related illness and disease
D. Economic losses

8. Which of the following environmental problems causes Climate Change?

A. Oil Spill   C. Pollution
B. Deforestation  D. Flashfloods

9. Which of the following programs of Department of Health promotes community health?

A. Maternal Health   C. Child Health Care
B. Primary Health Care  D. Control of Communicable Diseases

10. Why do we need to ensure community health in planning for community development?

A. To attain a luxury of life
B. To keep the safety of the community
C. To live in a clean, safe and comfortable home
D. To maintain an enjoyable lifestyle

LESSON 1: THE CONCEPTS OF COMMUNITY AND ENVIRONMENTAL HEALTH

OBJECTIVES

At the end of the lesson, the learners should be able to:
• explain the concept of community health and environmental health
• describe the characteristics of a healthy community

PART 1 – WHAT TO KNOW

This unit will introduce you to the concepts of community and environmental health, to make you aware of the importance of having a healthy community. You will be asked to participate in a series of activities involving health programs in your community.

Let us begin by talking about your ideal & present community

Activity 1: VENN DIAGRAM: Please refer to page 5 of the learner’s material

Processing Questions: (This could be done in Pairs for sharing purposes)

1. Can you say that your community is an ideal one? Explain.
2. What characteristics of a dream community would you like to have in your community?
3. How can you make your community an ideal one?

Activity 2. WORD REMOVAL - Please refer to page 6 of the learner’s material

Processing Questions: Call some volunteers to discuss their answers in front of the class. Different sets of students will answer each question.

1. What does the message tell us? Explain your answer.
2. Is acquiring health in the community relevant? Why?

The message has already been revealed, and you have made initial discussions about the relevance of health. But what does the word HEALTH mean? What is Community? What then is the definition of Community Health? Let us begin unpacking a load of concepts.
This is what you need to know:

**In the absence of the module, the teacher will use nomenclature cards for each definition. Employ strategies to help facilitate an active/interactive classroom instruction.**

According to the World Health Organization, **Health** is a state of complete physical, mental, and social well-being and not merely the absence of disease or infirmity, and the ability to lead a socially and economically productive life.”

**Community** is also defined as a sociological group in a large place sharing one environment. It therefore includes the individual and the family.

**Community Health** is defined as the art and science of maintaining, protecting and improving the health of all the members of the community through organized and sustained community efforts.

**Environmental Health** comprises those aspects of human health that are determined by **physical**, chemical, biological, social and psychosocial factors in the surrounding environment.

According to the World Health Organization (2002), the characteristics of a healthy community include:

1. A clean and safe physical environment
2. An environment that meets everyone’s basic needs
3. An environment that promotes social harmony and actively involves everyone
4. An understanding of local health and environment issues
5. A community that participates in identifying local solutions to local problems
6. A community whose members have access to varied experiences, means of interaction and communication
7. Accessible and appropriate health services and facilities
8. The promotion and celebration of historical and cultural heritage
9. A diverse and innovative economy
10. A sustainable use of available resources for all

**Instruct the learners to prepare their pen and paper for note-taking. Check their work!**
And read more!

Our government believes that a strong nation needs healthy citizenry. In order to achieve this, the Department of Health launched an approach in promoting community health through the partnership of the community, barangay, government organizations, and non-governmental organizations. This approach is called **Primary Health Care**.

*Primary Health Care Programs in the Community*

<table>
<thead>
<tr>
<th>Health Center Services</th>
<th>Functions</th>
</tr>
</thead>
<tbody>
<tr>
<td>Maternal Health Care</td>
<td>Pre-natal, Natal, Post-natal</td>
</tr>
<tr>
<td>Child Health Care</td>
<td>Immunizations, Control of diarrheal diseases</td>
</tr>
<tr>
<td>Nutrition Program</td>
<td>Operation Timbang, Food Supplementation</td>
</tr>
<tr>
<td>Population and Family Planning Program</td>
<td>Free Family planning</td>
</tr>
<tr>
<td>Control of communicable diseases</td>
<td>Tuberculosis control program</td>
</tr>
<tr>
<td>Environmental Sanitation program</td>
<td>Inspection of food establishments</td>
</tr>
<tr>
<td>Control on non-communicable diseases</td>
<td>Blood Pressure screening</td>
</tr>
<tr>
<td>Dental Health Program</td>
<td>Tooth Extraction</td>
</tr>
<tr>
<td>Reproductive Health Care</td>
<td>Counseling on family planning and RH</td>
</tr>
<tr>
<td>Medical Morbidity clinic</td>
<td>Provision of free medicines</td>
</tr>
<tr>
<td>National Voluntary Blood Services</td>
<td>Blood-letting activities at barangay level</td>
</tr>
<tr>
<td>Epidemiology and Surveillance program</td>
<td>Controlling outbreaks like Dengue</td>
</tr>
<tr>
<td>Disaster Management preparedness Program</td>
<td>Medical Services/assistance during disaster</td>
</tr>
<tr>
<td>Mental Hygiene</td>
<td>Adolescent counseling centers</td>
</tr>
<tr>
<td>Pharmacy Services</td>
<td>Distribution of medicines to all health centers</td>
</tr>
</tbody>
</table>

Did you know that the following services must be made available for **free** in your community because they are subsidized by the government to ensure that your health is being protected? **Yes, they are available and must be given for free**
Part II - WHAT TO PROCESS

Activity 3. THE HEALTH EXPERT – Please refer to page 9 of the learner’s material

- Encourage student’s critiques.
- Assign students to assess their classmate’s performance. Note:
  Evaluation for Improvement.
- Facilitate the critiquing.

Activity 4. PRIORITY EXPRESS – Please refer to page 9 of the learner’s material

- Let the students read the instructions. If they have questions, acknowledge them!

Activity 5. WHAT MATTERS TO YOU? – Please refer to page 10 of the learner’s material

- The activities designed here are also subject for group work. Encourage them to presented their output in a creative manner.

Processing Questions: Tell your classmate about your top and less priority.

1. Why did you choose it as your topmost priority? Explain.
2. Why did you consider it as your least priority? Explain

PART III -- WHAT TO UNDERSTAND
Activity 6. Inspect – Retrospect  This can be participated in DIADS/ TRIADS – Please refer to page 11 in the learner’s material

Processing Questions:
1. From your answers above, can you consider your community healthy? Why or Why not? Explain.
2. What services are not observed in your community?
3. What programs can you do to acquire such services?

Activity 7. Community Health Team Profile- Please refer to page 12 of the learner’s material

Processing Questions:
1. Who among the community health team are not present in your community?
2. What can you do if some members are not present in your community?
3. How will you convince the members of your community to take part in community health services?

PART IV-- WHAT TO TRANSFER

Form groups of 8 members. Remind them to choose a leader. Every member should contribute a placard with a message. No one is exempted. Ask them to copy the rubrics for an easy recording of scores after the activity.

Activity 8. Miting de Avance (Group Activity) – Please refer to page 13 of the learner’s material
Activity 9. **Speech-Perfect** - Please refer to page 13 of the learner’s material

*The speech will be written on a piece of paper. It is better to use the mother tongue language or any language of their preference.*

Lesson 2—Community Health Problems

**OBJECTIVES**

At the end of the lesson, the learners should be able to:

- enumerate the different community health problems
- recognize the value produced by a healthy environment

**PART 1—WHAT TO KNOW**

Community health problems are prevalent nowadays. With the advent of the modern technology, people neglect the importance of the basic need for safety. A safe environment will ensure quality life that will lead to a more productive citizen of the country. This lesson will emphasize to the learners their role in eradicating community health problems and engrossed with the realities that our environment is threatened due to human activities.

*In the absence of the module, the teacher will provide the material. It should be legibly written or reproduce this copy.*

Activity 10. **ALPHABET SOUP** - Please refer to page 14 of the learner’s material

Activity 11. **CODE-DECODE** - Please refer to page 15 of the learner’s material

Processing Questions:

1. What does the message convey?
2. According to mother earth, the rhyme is a gift, do you believe her? Explain your answer.
3. If you were mother earth, what could be your gift of rhyme to human kind?

The message that you have revealed will definitely bring you to the irony of a dime. Let’s get started and discuss the Community Health Problems.

**Instruct the learners to copy the concepts on their notes for their review. Check their notebook.**

PERENNIAL COMMUNITY HEALTH PROBLEMS

Different perennial problems happen in the different regions of the country. They vary according to factors like: economy, politics, geography, culture and social context. There are places which experience community health problems like:

- water-borne and communicable diseases
- armed conflicts
- natural disaster
- highly urbanized zones
- overpopulated areas
Solid Waste Management is one program of the government to help lessen the amount of Refuse in our country. Let’s take a deeper look at the details of this campaign.

Refuse are the dump, food waste or discarded materials.

Note: Readings for the kind of refuse materials can be found in the learner’s material on page 16-18

Activity 12. Catch and Match

From the array of examples of waste inside the box, classify each item to its appropriate group in column A. Write your answer in Column B.

<table>
<thead>
<tr>
<th>Kinds of Refuse</th>
<th>Examples</th>
</tr>
</thead>
<tbody>
<tr>
<td>Rubbish</td>
<td>Broken glass</td>
</tr>
<tr>
<td>Sewage Treatment residue</td>
<td>Septic Tank Ludge</td>
</tr>
<tr>
<td>Business wastes</td>
<td>Metal scraps</td>
</tr>
<tr>
<td>Abandoned Automobiles</td>
<td>Unwanted cars</td>
</tr>
<tr>
<td>Incinerator Residue</td>
<td>Ashes</td>
</tr>
<tr>
<td>Garbage</td>
<td>Leftover food</td>
</tr>
<tr>
<td>Dead Animals</td>
<td>Dead dogs</td>
</tr>
<tr>
<td>Street Sweepings</td>
<td>Cigarette Butts</td>
</tr>
<tr>
<td>Special Waste</td>
<td>Dead Batteries</td>
</tr>
<tr>
<td>Demolition Materials</td>
<td>Construction Materials</td>
</tr>
</tbody>
</table>

Activity 13. Identify-Classify – Please refer to page 19 of the learner’s material

Refer the answers from the earlier pages. Pls. instruct the students to copy this activity on their notebook with answers already for review.

Part 2- WHAT TO PROCESS
Activity 12. **CIRCLE-RECALL** - Please refer to page 20 of the learner’s material

*Sharing of answers is really encouraged. Pair or Group Activity is welcome provided they submit a summary of their output.*

Activity 13. **TELL ME WHY?**

Let us trace back your answers in the activity:

1. What did you answer in the outermost part of the circle? Why?
2. What was your answer in the innermost part of the circle? Why?

**PART 3. WHAT TO UNDERSTAND**

Being a student, you know very well your role in the promotion of a healthy environment especially in your household, school and community. This is your chance to recall what you have done so far to eradicate community problems by completing the following statements.

Activity 14. **SENTENCE REFLECT**

1. I will promote proper disposal of refuse in our household by............
2. I will promote proper disposal of refuse in our school by............... 
3. I will promote proper disposal of refuse in our community by...........

Activity 15. **PICTURE ANALYSIS** – Please refer to page 21 of the learner’s material
PART 4. WHAT TO TRANSFER

A clean and safe environment is crucial in the attainment of a healthy community. Protecting the health of a community involves protecting the environment from health hazards. It is more costly for a community to treat rather than prevent disease. Children must be taught how pollution affects people’s lives. You can reach out to younger generations and help them to be aware of the proper disposal of waste to prevent pollution.

This can be a good activity beyond class hours. They will solicit ideas from the neighborhood on how to deliver a good lecture in front of the crowd.

Activity 16. TEACH-REACH – Please refer to page 22 of the learner’s material

➢ Embrace the strategy of Cooperative Learning. The learners can reinforce better techniques to hold this activity. Teachers will only facilitate. If possible, play the music and let them familiarize the song first.

Activity 17. SONG IRONY - Please refer to pages 22-23 of the learner’s

After the learners’ performance, let them answer the two processing questions. Emphasize more on the values they can get from the activity itself. (Example the Value of Cleanliness, Patience, Respect)

Brainstorming. Ask the learners to describe their own experiences on typhoons. Process their answers not to start an argument.
Lesson 3. Environmental Problems in the Philippines

OBJECTIVES
At the end of the lesson, the learners should be able to:

- describe the environmental problems in the Philippines
- analyze the impact of the environmental problems on people’s health

Activity 18. Memory Lane – Please refer to page 24 of the learner’s material

Remind the students to copy the concepts here. Check their notebook after copying.

In the absence of the module, the teacher will employ better strategies to sustain an active participation of the learners.

Part 1. WHAT TO KNOW

Natural Resources and Biodiversity explain why Philippines is a rich country. Putting our home into the rare list of nations which have both a hotspot and mega diversity area for over 6000 plant species and also numerous animal species inhabited this area. However, despite—or perhaps because of— their richness and massive importance to the environment and humans as well, the forests face continuing destruction and possible extinction.

This lesson will bring you awareness to the most pressing problems of environment today and their effects on people’s health.

The next activity after this is an experiment. Remind them of the things to be considered. The teacher will post on the board the materials required for the experiment.
Note: Readings on the different environmental problems, effects and laws can be found in the learner’s material on pages 25-30.

This experiment is done in groups. Check on the materials to be used. If there are no materials available, they can wipe their faces with a white handkerchief or even tissue paper and discover what happens in the white sheet.

Part 2. WHAT TO PROCESS

An experiment is given to you. You need to do this activity for you to find out if there is something to discover.

Activity 18: An Experiment: Snare that Air – Please refer to pages 30-31 of the learner’s material

This activity is preferably be done at home for one week of observation.

Activity 19. Experiment: Must Be Something in the Water - Please refer to pages 31-32 of the learner’s material

Part 3. WHAT TO UNDERSTAND

You have already identified the different environmental issues and its effects to people’s health. Now, you have to sum it up.

Activity 20. Sum it up! – Please refer to page 32 of the learner’s material

Activity 21. Data Shows..... Please refer to page 32 of the learner’s material

In the absence of the module, the teacher will find ways to reproduce this copy. Briefly explain the case study.

PART 4. WHAT TO TRANSFER
Activity 22. **PAINT ME A PICTURE**

Make a poster about the damage caused by typhoon YOLANDA in some parts of the Visayas Region.

<table>
<thead>
<tr>
<th></th>
<th>4</th>
<th>3</th>
<th>2</th>
<th>1</th>
</tr>
</thead>
<tbody>
<tr>
<td>Creativity</td>
<td></td>
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<tr>
<td>Neatness of Work</td>
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<tr>
<td>Message</td>
<td></td>
<td></td>
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<td></td>
</tr>
<tr>
<td>Interpretation</td>
<td></td>
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</tbody>
</table>

*This can also be done in groups. But, there should be agreement first. Painting is an option, you can still reinforce other means of strategies aligned to this matter.*

Activity 23. **Case Study (Group Activity)** – Please refer to pages 33-34 of the learner’s material

Now, let’s evaluate what you can do to eradicate community and environmental health through action plans and applying skills in planning for community development.

The next lesson is a big activity. It requires action planning. Somehow difficult! But the teacher will make it easier to let the learners understand. Explain substantively the framework of both community and environmental health. From there, let the learners discover the specific problem of their community which requires an utmost attention. If the students live in the same neighborhood, they can be in a Team. As your role being the facilitator of this activity, give them time to decide on what environmental concerns or community problems they like to study and make an action plan. But of course, they need to understand first, the steps of conducting an Action Plan. For more details of this activity, you can share your expertise in ways they can understand your instructions carefully. Encourage learners to ask questions. Give them the ample time to conduct their study and emphasize more on the output.

Goodluck!

**Objective:** At the end of this lesson, the learners should be able to:
• apply community development and program planning skills to create effective and culturally relevant communication strategies and interventions to promote health.

Part I. WHAT TO KNOW

As an aspiring young leader of your community, you need to evaluate the guidelines in processing your action plans. This framework will help you decide and design your action plan towards community development program.

Here is what you need to know:

In this unit, you are given the opportunity to design a program for the community development and employ planning skills. Prior to this activity, you will be oriented on the possible ways to prevent community problems. You begin with a careful examination of the existing remedial programs of your community. You’ll try to visit first the framework for Community and Environmental Health.

Note: Please refer to page 35 for the framework of community health.

Now, you begin with recalling the problems of your community. Think of it as the top priority to be given much attention. Among the programs written above, what could be the prevalent community health problem that needs to be acted upon.

Activity 24. Think …
Have you already decided what could be the problem appropriate for your action plan?
Answer: ________________________________

Processing Questions:
1. What made you choose to consider it in your action plan?
2. Is it already an eye sore to your community? Why? How?
You must also know this:

Here’s another framework to consider in action planning. If you want to focus your intervention program with Environmental Health, this is your guide. Choose one (1).

Note: Please refer to page 36 for the framework of the environmental health MUST Know!

There are different agencies working together for community health. Their programs are also anchored in sustaining community development. Activities and programs for the community must be coordinated with the following agencies mentioned below for support and cooperation.

- DepEd—Department of Education
- DND—Department of National Defense
- DPWH—Department of Public Works and Highways
- PIA—Philippine Information Agency
- PopCom—Population Commission
- DA—Department of Agriculture
- DBM—Department of Budget and Management
- PMA—Philippine Medical Association
- PNRC—Philippine National Red Cross
- DILG—Department of Interior and Local Government
- NNC—National Nutrition Council
- NEDA—National Economic and Development Authority
- PHA—Philippine Hospital Association
- DOH—Department of Health

These agencies have specific capacity to help, what the community needs is to tap and coordinate with them.

Part 2. WHAT TO PROCESS

Choose a topic from the framework above. Decide on the programs you would like to create for the effective implementation. As you can see there are a number of agencies that you can anchor programs. Please follow the correct guidelines of making an action plan. To make your action plan easier, here is your guide. Simply fill it up!
Activity 25. **My Action Plan** – Please refer to pages 37-38 of the learner’s material

Part 3. WHAT TO UNDERSTAND

List down here your own plan of actions and start planning with your strategies of handling it in an orderly manner.

Students can write their answers on a piece of paper.

PART 4. WHAT TO TRANSFER

Start your action plan now. Conduct an interview with the people that will help you realize your plan of action.

Write here your plan schedule to hold your actual data gathering.

Activity 26. **TIME FRAME**

<table>
<thead>
<tr>
<th>Time</th>
<th>Day</th>
<th>Action</th>
<th>Person Involved</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
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</tbody>
</table>
The next activity is interesting! The learners are given an opportunity to examine the programs or services of their community. The school is even part of the community. The learners will be instructed to design a checklist, written on a piece of paper. Items are not limited. They can formulate as many as they would like to.

The learners will be refreshed also with the framework discussed in the earlier topics. The first part of this activity is to conduct a canteen survey. The checklist is shown. This will serve as their basis to make their own questionnaires/checklist. Encourage them to look for a teacher-adviser of their study, for them to be guided as they go along with their quest of information that would likely be of help as they become one of the project assessors of community development in the future.

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### Sample Rubric for Evaluating the Elements of an Action Plan to Promote Health

<table>
<thead>
<tr>
<th>Element of Action Plan</th>
<th>Less Effective Rating of 1</th>
<th>Somewhat Effective Rating of 2</th>
<th>More Effective Rating of 3</th>
</tr>
</thead>
<tbody>
<tr>
<td>Who</td>
<td>Plan includes name of one support person.</td>
<td>Plan includes name of an adult or a teacher as well as the name of a peer support person.</td>
<td>Plan includes name of an adult or teacher as well as the name of a peer support person and the names of others from the community who will be involved in the action plan.</td>
</tr>
<tr>
<td>What</td>
<td>Plan includes a statement of what is to be done.</td>
<td>Plan includes a goal statement that is clear, specific, measurable, and attainable.</td>
<td>Plan includes a goal statement that is clear, specific, measurable, and attainable. Also included is a statement of purpose that features promoting health and the leadership skills required to promote health.</td>
</tr>
<tr>
<td>How</td>
<td>Plan includes a vague outline of what is to be done.</td>
<td>Plan includes some detail of what is to be done.</td>
<td>Plan includes a step-by-step outline of what is to be done, and includes a description of the leadership skills and health promotion strategies needed to work toward the goal and achieve it.</td>
</tr>
<tr>
<td>Why</td>
<td>Plan includes a vague explanation about why particular steps are in place.</td>
<td>Plan includes some detail about why some steps are in place.</td>
<td>Plan includes justification of why specific steps are planned to meet the goal. Possible barriers or obstacles are listed, along with ways they might be overcome.</td>
</tr>
<tr>
<td>When</td>
<td>Plan includes start date and end date.</td>
<td>Plan includes start date, end date, and at least the first check-in date.</td>
<td>Plan includes start and end dates as well as check-in dates and celebration dates. Details are included about dates and times for each step of the action plan.</td>
</tr>
<tr>
<td>Where</td>
<td>Plan includes no indication of where the action plan is to occur.</td>
<td>Plan includes scant details about where the action is to occur.</td>
<td>Plan includes specific indication of exactly where each step of the action plan will occur.</td>
</tr>
</tbody>
</table>
Lesson 5  PROJECT ASSESSMENT

Objective:  At the end of this lesson, you should be able to:

- make decision about buildings, businesses, services, housing areas, and other structure to include in the development of a healthy dream community

Activity 27.  Canteen Survey

Visit your school canteen. Find out if the school canteen complies with the requirements on food sanitation.

*Note: Please refer checklist on page 39 of the learner’s material*

B.  
1. Study the result of your survey.
2. How many items were complied with? Which items?
3. How many items were not complied with? Which items?
4. Write down your observations based on the survey.
5. What recommendations or suggestions can you give based on the result of your survey to improve and maintain the cleanliness and safety of the school canteen.

Suggested Activities:

1. Survey on the School’s Solid Waste Management Practice
2. Study on the Problems on the Drainage System of the Barangay
3. Promulgate Laws for Proper Waste Disposal
4. Initiate a Signature Campaign Against Illegal Mining and Coral Reef Degradation.

Link to the nearest NGO’s and GO’s for the support of this program

Finally On In A Nutshell

Your action plan will assess your involvement in protecting your environment so that our claim for safety is within reach. The safety of community is the primary concern of all the programs in the government, thus, the next lesson will bring you to discuss about Injury Prevention, Safety and First Aid.
But before your excitement leads you to a more wonderful adventure, you are still required to answer the summative test of this quarter.

Goodluck and Congratulations!

SUMMATIVE TEST

Choose your answer from the options below. Make sure to write the letter on the space provided before each number.

1. Which best describes Community health as an art and science?
   A. Maintaining, protecting and improving the health of all members of the community through organized and sustained community efforts.
   B. Maintaining and improving the health of all members of the community through organized and sustained community efforts.
   C. Protecting and improving the health of all members of the community through organized and sustained community efforts.
   D. Maintaining, protecting and improving the health of all members of the community.

2. Which does not describe a healthy community?
   A. A clean and safe environment
   B. An environment that meets everyone’s basic needs
   C. An environment that promotes social harmony and actively involves everyone
   D. An environment that is fully aware of its daily opportunities.

3. Primary health care is an approach launched by Department of Health, which is not part of the services given by the PHC?
   A. Provisions of free medicines
   B. Blood Pressure Screening
   C. Road Safety
   D. Inspections of Food Establishments

4. Which service is given by Maternal Health Care unit in your community?
   A. Control of Diarrheal Disease
   B. Post-Natal
   C. Tooth Extraction
   D. Provisions on Free Medicine

5. Which best describes the value acquired having a healthy environment?
   A. Less disease, less health care cost.
   B. Active community involvement
   C. More budget on health problems, increase supply of medicines
   D. More community projects in the community development
6. Which of the following problem has a leading effect on the environmental destruction?
   A. Soil Erosion   C. Illegal Mining
   B. Oil Spill     D. Deforestation

7. What environmental problem reduces the ability to support biodiversity?
   A. Soil Erosion   B. Oil Spill   C. Illegal Mining   D. Deforestation

8. What environmental problem does this picture depict?
   A. Water pollution   C. Improper waste disposal
   B. Deforestation   D. Flashfloods

9. The following statements are the effects of Climate Change, except one:
   A. Kills trees if oil reaches the roots
   B. Increased risk of drought, fire and floods
   C. More health related illness and disease
   D. Economic losses

10. Which of the following environmental problems is experienced worldwide?
    A. Oil Spill   C. Destruction of the ozone layer
    B. Deforestation   D. Flashfloods

11. Which is an old method of waste disposal through burning waste into ashes.
    A. Landfills   C. Recycling
    B. Incineration   D. Dumps

12. Which basic method of Refuse Disposal is the next step after storage?
    A. Burning   C. Collection
    B. Composting   D. Final Disposal
13. Which is a destructive change in the environment which harms health.
   A. Pollution               C. Population
   B. Climate Change              D. Incineration

14. Which program of the Department of Health promotes community health?
   A. Maternal Health   C. Child Health Care
   B. Primary Health Care D. Control of Communicable Diseases Council

15. Why do we need to ensure community health in planning a community development?
   A. To attain a luxury of life
   B. To keep the safety of the community
   C. To live in a clean, safe and comfortable home
   D. To maintain an enjoyable lifestyle

Part II. True or False. Write the word True if the statement is True, if otherwise, write the word FALSE. Write your answer on the space provided before each number.

1. A healthy community should have a diverse and innovative economy.
2. Local officials are the ones directly involve in community development to promote a healthy community.
3. Primary Health Care is the only government organization which has the primary role in the promotion of community health.
4. Reproductive Health Care Unit gives counseling on Family Planning.
5. Maternal Health Program caters Prenatal and Tooth Extraction services in the community.
6. Rubbish consists of all the things that are not in a house, shop or factory and are regularly thrown away.
7. Storage is one way of reforming or breaking down waste products back to their component for reuse.
8. Light can also be a potential type of pollution.
9. Coral Reef degradation is considered as a global environmental problem.
10. Deforestation happens when soil and rock are moved from one place to another by wind, water and gravity.
Answer Key: Multiple Choice.


True or False:

1. True  5. False
2. True   6. False
3. True   7. False
4. True   8. True

SUMMARY/SYNTHESIS/FEEDBACK

There are existing Philippine Laws that will protect our environment from external factors. To name a few: Philippine Clean Air Act, Philippine Water Act and Ecological Solid Waste Management Act. These laws are implemented to protect and our environment.

In this module, you have learned the importance of having a healthy community, thus, leading to the safety of every individual. The concept of having an ideal community helps primarily to the promotion of Environmental Health. There are dangers around if we continue to live threatening our surroundings. In fact, we have been embedded through series of natural phenomena. Damages are more obvious!

In this material, there are suggested activities that will guide a Grade 9 student to be actively participating in the programs of the government. By this, they can assess, even if in their own little way they can make a difference.

Most of the activities highlighted on this material are geared towards the awareness of every student that he/she has an individual share of responsibility.

The action plan will definitely help students to take a deeper understanding of their community by means of drawing strategic plans to improve the safety of every individual.

There are varied formative assessments designed on this module, anchored on the K to 12 curriculum, following the areas on KPUP. There are 4 major categories: What to know, What to Process, What to Understand and What to Transfer.

GLOSSARY
**Air Pollution** means any alteration of the physical, chemical and biological properties of the atmospheric air, or any discharge thereto of any liquid, gaseous or solid substances that will or is likely to create or to render the air resources of the country harmful, detrimental, or injurious to public health, safety or welfare or which will adversely affect their utilization for domestic, commercial, industrial, agricultural, recreational, or other legitimate purposes.

**Community** is defined as a sociological group in a large place sharing one environment. It therefore includes the individual and the family.

**Community Health** is defined as the art and science of maintaining, protecting and improving the health of all the members of the community through organized and sustained community efforts.

**Deforestation** is the destruction of big areas of our forests and this has been going on for many years.

**Environmental Health** comprises those aspects of human health that are determined by physical, chemical, biological, social and psychosocial factors in the surrounding environment.

**Flash Floods**—sudden flood of great volume, usually caused by a heavy rain.

**Garbage** is leftover vegetables, animal and fish material food in kitchen and establishments.

**Health** is a state of complete physical, mental, and social well-being and not merely the absence of disease or infirmity, and the ability to lead a socially and economically productive life."

**Illegal Mining** is defined as the absence of land rights, mining license, exploration or mineral transportation permit or of any document that could legitimate the on-going operations.

**Noise Pollution** is the excessive sound that causes hearing loss, stress, fatigue, irritability, tension, headaches, and high blood pressures. Noise pollution also causes accidents by preventing people to concentrate and perform.

**Primary Health Care** an approached launched by the Department of Health in promoting community health through the partnership of the community, barangay, government organizations, and non-governmental organizations.
Pollution—means any alteration of the physical, chemical and biological properties of any water, air and/or land resources of the Philippines, or any discharge thereto of any liquid, gaseous or solid wastes as will or is likely to create or to render such water, air and land resources harmful, detrimental or injurious to public health, safety or welfare or which will adversely affect their utilization for domestic, commercial, industrial, agricultural, recreational or other legitimate purposes.

Refuse—are the dump, food waste or discarded materials.

Soil Erosion—happens when soil and rock are moved from one place to another by wind, water, and gravity.

Soil Pollution--is chiefly caused by chemicals in pesticides, such as poisons that are used to kill agricultural pests like insects and herbicides that are used to get rid of weeds.

Solid Waste Management: shall refer to the discipline associated with the control of generation, storage, collection, transfer and transport, processing, and disposal of solid waste in a manner that is in accord with the best principles of public health, economics, engineering, conservation, aesthetics, and other environmental considerations and that is also responsive to public attitude.

Stable Manure includes animal from barns, stables or the likes.

Street Night soil consists of human waste, normally wrapped and thrown into sidewalks and streets. It also includes human waste from the pail system.

Waste Disposal- shall refer to the discharge, deposit, dumping, spilling, leaking, or placing, of any solid waste into or any land.

Water Pollution- means any alteration of the physical, chemical, biological, or radiological properties of a water body resulting in the impairment of its purity or quality.

Yard Cuttings are those leaves, branches, grass, and other similar materials made during cleaning of gardens and typhoon aftermaths.

RESOURCES

Books:


WEB SOURCES:


http://en.wikipedia.org/wiki/Flash_flood
http://www.cdc.gov/healthycommunitiesprogram/tools/change/downloads.htm
http://www.cdc.gov/healthycommunitiesprogram/tools/change/downloads.htm
https://www.google.com.ph/?gws_rd=cr&ei=wGJWUtI1BcaFlAXwtYGwAQ#q=rubrics+for+drawing
http://course1.winona.edu/shatfield/air/saskhealthplan.pdf
I. Defining the Learning Outcomes

<table>
<thead>
<tr>
<th>Grade Level Standard:</th>
<th>Performance Standard:</th>
</tr>
</thead>
<tbody>
<tr>
<td>The learner demonstrates understanding of community and environmental health; unintentional injury prevention, safety and first aid; prevention of substance use and abuse (Drug scenario); and prevention of substance use and abuse (Gateway drugs) to achieve wellness in life.</td>
<td>The learner takes responsibility for one’s safety by performing appropriate first aid procedures during emergency cases.</td>
</tr>
</tbody>
</table>

**Content Standard:**

The learner demonstrates understanding of the concepts and principles of safety education to prevent unintentional injuries.

**Performance Standard:**

The learner takes responsibility for one’s safety by performing appropriate first aid procedures during emergency cases.

**Learning Competencies:**

At the end of this module, the learners are expected to be able to:

1. discuss the basics of first aid (principles; roles, responsibilities and characteristics of a good first aider);
2. identify common unintentional injuries in the school setting;
3. assess emergency situations for unintentional injuries;
4. demonstrate the procedures in conducting basic life support (primary and secondary survey of the victims);
5. demonstrate proper first aid procedure for common unintentional injuries;
6. discuss the importance of dressing and bandages;
7. show the different types of dressing and bandaging;
8. demonstrate appropriate bandaging techniques for unintentional injuries;
9. demonstrate proper techniques in carrying and transporting victims of unintentional injuries;

II. Planning for Assessment

<table>
<thead>
<tr>
<th>Product/Performance</th>
<th>Assessment at the Level of Understanding</th>
<th>Assessment at the Level of Product/Performance</th>
</tr>
</thead>
</table>
| The learner takes responsibility for one’s safety by performing appropriate first aid procedures during emergency cases. | Self-Knowledge
- Realize one’s capability to be a first aider.
- Describe performance in doing primary and secondary survey of the victims, and assessing emergency situations.
| Drawing of a cartoon/comic strip that shows a person ready to help other people through his/her knowledge and skills in first aid. |
| Explanation
- Explain the importance of first aid |

**Criteria:**

- Clarity
- Completeness
- Creativity
<table>
<thead>
<tr>
<th>Explain the importance of following the proper procedures in assessing emergency situations and in doing basic life support (primary and secondary survey of the victim)</th>
<th>Performance on helping a victim through applying first aid procedures for a certain unintentional injury.</th>
</tr>
</thead>
<tbody>
<tr>
<td>Explain the importance of using sterile dressings and bandages</td>
<td>Criteria:</td>
</tr>
<tr>
<td>Perspective</td>
<td>✓ Correctness of Procedures</td>
</tr>
<tr>
<td>Offer a skill-training on first aid to the youth of the community</td>
<td>✓ Sincerity</td>
</tr>
<tr>
<td>Suggest some materials at home or in school that can be used as dressing and bandage</td>
<td>✓ Observance of Safety</td>
</tr>
<tr>
<td>Justify whether anybody could be a first aider</td>
<td></td>
</tr>
<tr>
<td>Empathy</td>
<td></td>
</tr>
<tr>
<td>Express feelings for a bonafide Red Cross member, a para-medical practitioner like a nurse, first aider, rescuer, health professional, life guards or a physician</td>
<td></td>
</tr>
<tr>
<td>Interpretation</td>
<td></td>
</tr>
<tr>
<td>Interpret an illustration of a first aider who is on the go and ready to respond to emergency situations.</td>
<td></td>
</tr>
<tr>
<td>Application</td>
<td></td>
</tr>
<tr>
<td>Perform first aid procedures for unintentional injuries</td>
<td></td>
</tr>
</tbody>
</table>
Introduction

“Prevention is better than cure.” Practicing this principle advocates safety awareness, which is essential in achieving quality of life. But our immediate environment poses dangers to everyone. Nowhere is a place safe; not even the comfort of our homes. Accidents may happen at any place, anytime to anybody. Thus, taking the right safety measures greatly helps to prevent accidents and injuries. It is therefore important to have the knowledge and skills on how to deal with them. Having knowledge and skills in safety education and injury prevention could help us, our loved ones and other people in our community during emergency situations.

This learner’s material offers a wide array of information that can start a learner on the road to safety. It focuses on the study of the common unintentional injuries that may happen at home, in school, at work and even in recreational areas and analyzes why such injuries occur. In order to prevent or reduce the risks of these serious injuries, students will learn the concepts and principles of safety education and practice the habits of observing appropriate personal safety measures at all times. They will also learn to take responsibility for their safety and that of others by performing appropriate skills and knowledge of first aid procedures.

To facilitate learning and make it more interesting and enjoyable, various learning aids and strategies are especially crafted just for the learners. These learning aids and strategies also offer a variety of ways for the learners to expand and reinforce their knowledge and skills.

Keep in mind that accidents and injuries result from an unexpected situation, an unsafe action and the environment. The learners can do a lot to prevent such injuries, like understanding the situation, being cautious about their behavior and being aware of safety hazards in their immediate environment.

The processes of developing awareness of immediate hazards and dangers, equipping learners with appropriate accident prevention skills to overcome these hazards, and keeping everyone alive are components of safety education. Safety education is important because living is more enjoyable when we are safe. Therefore, we should make safety a vital part of living.

Remind the learners that if they want to live happily, they have to live safely by:

- doing things safely
- reducing the risk of accidents
- reducing unnecessary risk taking
- developing safety consciousness at all times

Once they have internalized safety awareness in their system, learners will think and act with due regard for their safety and that of others as well.

In order to assess the prior knowledge and skills of the learners on this module, conduct the diagnostic assessment. Refer to page 4-5 of the Learner’s Material.
Answer’s Key

Test I

1. A  
2. A  
3. D  
4. B  

Test II

1. FALSE  
2. FALSE  
3. TRUE  
4. TRUE  

Table 1 Score Interpretation

<table>
<thead>
<tr>
<th>Score</th>
<th>Description</th>
<th>Interpretation</th>
</tr>
</thead>
<tbody>
<tr>
<td>20</td>
<td>Advanced</td>
<td>You have adept knowledge and skills and may independently study and perform the activities in this module.</td>
</tr>
<tr>
<td>16-19</td>
<td>Proficient</td>
<td>You have adept knowledge and skills and may study and perform the activities in this module with little guidance from the teacher.</td>
</tr>
<tr>
<td>11-15</td>
<td>Approaching Proficiency</td>
<td>You have the fundamental knowledge and skills and may study and perform the activities in this module with little guidance from the teacher.</td>
</tr>
<tr>
<td>6-10</td>
<td>Developing</td>
<td>You have the minimum knowledge and skills about safety education and still need guidance and help from the teacher.</td>
</tr>
<tr>
<td>0-5</td>
<td>Beginning</td>
<td>You are still struggling with the basic knowledge and skills about safety education and greatly need the guidance of the teacher.</td>
</tr>
</tbody>
</table>

Lesson 1 – The Basics of First Aid

The main objectives of this lesson is to let the learners

1. Explain the meaning and importance of first aid  
2. Demonstrate a sense of responsibility to help others through the knowledge and application of first aid

PART I - WHAT TO KNOW

Activity 1 – “Emergency! Emergency! What will I do?”  
(Refer to page 6 of the Learner’s Material)

The main purpose of this activity is to introduce them to the meaning of first aid and assess their prior knowledge and skills about first aid.

Process the answers of each group or of the students. You don’t need to correct the learner’s answers because the objective is to assess their prior knowledge and skills. However, instill in their minds that they will be discovering the proper immediate action to these situations as they move on to the next topic.

Here is what the learners need to know.
First aid is an immediate and temporary care given to a person who suddenly becomes ill or injured. It includes self-help and home care if medical assistance is not available or is delayed. It can mean the difference between life and death in extreme cases. However, first aiders must know the limits of the first aid they can give because improper first aid can actually do more harm than good in some instances.

**Roles of First Aid**
1. It is a bridge that fills the gap between the victim and the physician.
2. It is not intended to compete with or to take the place of the services of the physician.
3. It ends when the services of the physician begins.

**Objectives of First Aid**
1. To save lives
2. To prolong life
3. To alleviate suffering
4. To prevent further injury

**Characteristics of a Good First Aider**
1. Gentle-does not cause pain and panic
2. Observant-notices all signs
3. Resourceful-makes the best use of things at hand
4. Tactful-does not frighten the victim
5. Sympathetic-comforts and reassures the victim

**Principles of First Aid**

*(Dos in Giving First Aid)*
1. DO stay calm.
2. DO reassure and comfort the victim.
3. DO check for a medical bracelet indicating a condition, such as epilepsy or diabetes.
4. DO loosen any tight clothing.
5. DO keep the victim covered to reduce shock

*(Don’ts in Giving First Aid)*
1. DON’T give food and drink to an unconscious person.
2. DON’T move an injured person unless you need to place him/her in the recovery position.

**PART TWO - WHAT TO PROCESS**

Activity 2 – Organize Your Thoughts

Divide the class into five groups and give each group an information card. The task of each group is to present the information they are assigned through a graphical organizer.
Information Card #1
Principles of First Aid
(Dos in Giving First Aid)
1. DO stay calm.
2. DO reassure and comfort the casualty.
3. DO check for a medical bracelet indicating a condition, such as epilepsy or diabetes.
4. DO loosen any tight clothing.
5. DO keep the casualty covered to reduce shock.

Information Card #2
Principles of First Aid
(Don’ts in Giving First Aid)
1. DON’T give food and drink to an unconscious person.
2. DON’T move an injured person unless you need to place him/her in the recovery position.

Information Card #3
Objectives of First Aid
1. To save lives
2. To prolong life
3. To alleviate suffering
4. To prevent further injury

Information Card #4
Roles of First Aid
1. It is a bridge that fills the gap between the victim and the physician.
2. It is not intended to compete with or to take the place of the services of the physician.
3. It ends when the services of the physician begins.

Information Card #5
Characteristics of a Good First Aider
1. Gentle - does not cause pain
2. Observant - notices all signs
3. Resourceful - makes the best use of things at hand
4. Tactful - does not frighten the victim.
5. Sympathetic - comforts and reassures the victim

They may follow the example below.
Process questions:

1. What should we remember when giving first aid?  
   (Refer to the basics of first aid)
2. Why is it important to understand and follow the basics of first aid?  
   (Refer to the basics of first aid)
3. What is the ultimate goal in giving first aid?  
   (Refer to the basics of first aid)

Activity 3 – Figures of Speech

This activity develops the creative thinking in the learners by letting them compare the following words with anything and explaining their answers.

Example: Injury is like a thief because it comes anytime.

First aid
First aider
To save lives
Giving first aid
Staying calm
Being gentle
Being observant
A physician
Safety and prevention
Having a quality life

Process questions:
1. If injuries happen at any time, at any place, to anybody, then what should we do to prevent them?
2. If injuries happen at any time, at any place to anybody, then what should we do if they happen?
3. What are the roles of a first aider during an emergency situation?

Activity 4 – “Is He a Good First Aider?” (Refer to page 9 of the LM)

This activity develops learners’ critical thinking by letting them analyze the given situations and defend their answers constructively.

Process questions:
1. Who among them are good first aiders? Why?
   Student A, D, E because they follow the principles of giving first aid.
2. Who among them are not good first aiders? Why?
   Student B and C because they do not follow the principles of giving first aid.
3. What characteristics should a first aider possess?
   Gentle - He/she should not cause pain.
   Observant - He/she notice all signs.
   Resourceful - He/she should make the best use of things at hand.
   Tactful - He/she should not frighten the victim.
   Sympathetic - He/she should be comforting.

4. If you were a first aider, what would be your ultimate goal?
To prolong life; to alleviate suffering; to prevent further injury; to save lives.

PART THREE - WHAT TO REFLECT AND UNDERSTAND

Activity 5 – Complete Me (Refer to page 9 of the LM)

Self-Knowledge is one of the facets of understanding. In this stage, make the learner realize that he/she has the capability to be a first aider, and stimulates her/his desire to be one.

Process questions:
1. Why is first aid important?
2. Can we help others through our knowledge and skills in first aid? How?

Activity 6 – First Aider on the Go… (Refer to page 10 of LM)

Interpretation is also one of the facets of understanding. Use the activity below to develop learners’ imagination and depth in giving meaning to an illustration.

Note: The writer’s interpretation of the illustration on page 10 is that a first aider with her/his knowledge on the basics of first aid is always on the go and ready to respond to an emergency situation.

Process questions:
1. Why is having knowledge and skills in first aid important?
2. Can you help others through your knowledge and skills in first aid? How?

PART FOUR - WHAT TO TRANSFER

This is a preparatory part for the final product or performance of the learners for this quarter.

Activity 7 – Act it Out!

Divide the class into groups and let them create a 2-3 minute pantomime showing a good first aider helping in certain emergency situations at home, in school, on the road, or in office or park.
Example: A student helps an old man who has many bruises after being hit by a car.

Lesson 2 – Survey of the Scene and the Victims

Objectives: At the end of this lesson, the learners are expected to:

1. Demonstrate proper procedure in assessing emergency situations.
2. Demonstrate proper procedure in doing primary and secondary survey of the victims.

PART I - WHAT TO KNOW

Allow learners to study the chart on page 12 of the Learner’s Material. It shows the procedures in assessing emergency situations and proper action to a victim’s response.

Then tell them to list down on the table below all the words and phrases that they do not understand or are confusing to them.

Activity 8 – “Express your Queries”

<table>
<thead>
<tr>
<th>I don’t know anything about…</th>
<th>I am confused about…</th>
</tr>
</thead>
</table>

Study the situations showing emergency principles. You may invite a bonafide Red Cross member; a para-medical practitioner, like a nurse, a first aider, rescuer; health professional, life guard or a physician in your school or community to discuss and demonstrate the principles.

Here is what the learners should know…

Vital signs are measures of various physiological statistics taken in order to assess the most basic body functions. The act of taking vital signs normally entails recording body temperature, pulse rate or heart rate, blood pressure, and respiratory rate.

The American Heart Association the ABCs of cardiopulmonary resuscitation (CPR) in its 2010 American Heart Association Guidelines for Cardiopulmonary

Recommending that chest compressions be the first step for lay and professional rescuers to revive victims of sudden cardiac arrest, the association said the A-B-Cs (Airway-Breathing-Compressions) of CPR should now be changed to C-A-B (Compressions-Airway-Breathing).

"For more than 40 years, CPR training has emphasized the ABCs of CPR, which instructed people to open a victim's airway by tilting their head back, pinching the nose and breathing into the victim's mouth, and only then giving chest compressions," said Michael Sayre, M.D., co-author of the guidelines and chairman of the American Heart Association's Emergency Cardiovascular Care (ECC) Committee. "This approach was causing significant delays in starting chest compressions, which are essential for keeping oxygen-rich blood circulating through the body. Changing the sequence from A-B-C to C-A-B for adults and children allows all rescuers to begin chest compressions right away."

In previous guidelines, the association recommended looking, listening and feeling for normal breathing before starting CPR. Now, compressions should be started immediately on anyone who is unresponsive and not breathing normally. All victims of cardiac arrest need chest compressions. In the first few minutes of a cardiac arrest, victims will have oxygen remaining in their lungs and bloodstream, so starting CPR with chest compressions can pump that blood to the victim's brain and heart sooner. Research shows that rescuers who started CPR with opening the airway took 30 critical seconds longer to begin chest compressions than rescuers who began CPR with chest compressions. The change in the CPR sequence applies to adults, children and infants, but excludes newborns.

Cardiopulmonary resuscitation (CPR) is a lifesaving technique useful in many emergencies, including heart attack or near drowning, in which someone's breathing or heartbeat has stopped. The American Heart Association recommends that everyone — untrained bystanders and medical personnel alike — begin CPR with chest compressions. It's far better to do something than to do nothing at all if you're fearful that your knowledge or abilities aren't 100 percent complete. Remember, the difference between doing something and doing nothing could be someone's life.

Here's advice from the American Heart Association:

Untrained. If you're not trained in CPR, then provide hands-only CPR. That means uninterrupted chest compressions of about 100 a minute until paramedics arrive (described in more detail below). You don't need to try rescue breathing.

Trained, and ready to go. If you're well trained and confident in your ability, begin with chest compressions instead of first checking the airway and doing rescue breathing. Start CPR with 30 chest compressions before checking the airway and giving rescue breaths.
Trained, but rusty. If you've previously received CPR training but you're not confident in your abilities, then just do chest compressions at a rate of about 100 a minute. (Details described below.)

The above advice applies to adults, children and infants needing CPR, but not newborns. CPR can keep oxygenated blood flowing to the brain and other vital organs until more definitive medical treatment can restore a normal heart rhythm. When the heart stops, the lack of oxygenated blood can cause brain damage in only a few minutes. A person may die within eight to 10 minutes.

Remember to spell C-A-B
The American Heart Association uses the acronym of CAB — circulation, airway, breathing — to help people remember the order to perform the steps of CPR.

Circulation: Restore blood circulation with chest compressions
1. Put the person on his or her back on a firm surface.
2. Kneel next to the person's neck and shoulders.
3. Place the heel of one hand over the center of the person's chest, between the nipples. Place your other hand on top of the first hand. Keep your elbows straight and position your shoulders directly above your hands.
4. Use your upper body weight (not just your arms) as you push straight down on (compress) the chest at least 2 inches (approximately 5 centimeters). Push hard at a rate of about 100 compressions a minute.
5. If you haven't been trained in CPR, continue chest compressions until there are signs of movement or until emergency medical personnel take over. If you have been trained in CPR, go on to checking the airway and rescue breathing.

Airway: Clear the airway
1. If you're trained in CPR and you've performed 30 chest compressions, open the person's airway using the head-tilt, chin-lift maneuver. Put your palm on the person's forehead and gently tilt the head back. Then with the other hand, gently lift the chin forward to open the airway.
2. Check for normal breathing, taking no more than five or 10 seconds. Look for chest motion, listen for normal breath sounds, and feel for the person's breath on your cheek and ear. Gasping is not considered to be normal breathing. If the person isn't breathing normally and you are trained in CPR, begin mouth-to-mouth breathing. If you believe the person is unconscious from a heart attack and you haven't been trained in emergency procedures, skip mouth-to-mouth rescue breathing and continue chest compressions.

Breathing: Breathe for the person
1. Rescue breathing can be mouth-to-mouth breathing or mouth-to-nose breathing if the mouth is seriously injured or can't be opened.
2. With the airway open (using the head-tilt, chin-lift maneuver), pinch the nostrils shut for mouth-to-mouth breathing and cover the person's mouth with yours, making a seal.

**Difference between signs and symptoms**

Signs are details discovered by applying your senses – sight, touch, hearing and smell during the course of the examination.

Example:

bleeding, swelling, deformities

Symptoms are sensations that the victim feels or experiences and may be able to describe.

Example:

- nausea, vomiting, heat, impaired sensations

**Monitoring Vital Signs**

a. Checking Level of Response

Assess the casualty’s level of response using the AVPU code.

- A – Is the casualty **ALERT**?
  
  Does he/she open her/his eyes and respond to questions?

- V – Does the casualty respond to **VOICE**?
  
  Does he/she obey to simple command?

- P – Does he/she respond to **PAIN**
  
  Does he/she react if s/he is pinched?

- U – Is he/she **UNRESPONSIVE**?

b. Checking Pulse

Use fingers rather than thumb (it has its own pulse) and press lightly until you can feel the pulse. Record the number of beats per minute, strength (weak or strong), and rhythm (regular or irregular). The following are the major pressure points of the body. (Refer to the figure below)

- Temporal – temple or scalp
- Facial – lower face or below eyes
- Brachial pulse – inner side of upper arm
- Radial pulse – base of the thumb just below the creases of the wrist
- Carotid pulse – side of the neck, in the hollow between the windpipe and the large neck muscle
- Femoral – thigh, lower leg or foot

Note to the illustrator: Redraw and make it clearer

Normal Pulse of Adult is 60-80 beats per minute.
c. Checking Breathing

Feel the chest movement and count and record the number of breaths per minute, depth (deep or shallow), ease (easy, difficult or painful), and noise (quiet or noisy). The normal breathing rate of an adult is 12-16 breaths per minute while for young children it is 20-30 breaths.

d. Checking Temperature

To obtain body temperature, use a temperature reader (digital, mercury, forehead or ear sensor). The normal body temperature is 37°C or 98.6°F.

There are two ways to conduct physical examination when giving first aid:

1. Primary Survey

Primary survey of the victim is used when the victim is unconscious and one needs to find out and treat immediately life-threatening conditions.

   a. Check for Consciousness and Circulation
      1. Ask the victim: “Hey, hey, are you okay?” while carefully shaking the victim’s shoulder.
      2. When there is no response, even mumbles and groans, the victim is therefore unconscious and in need of immediate medical help.

   b. Open the Airway
      1. The victim’s unconsciousness may be due to obstruction in his/her airway. It may also be caused by a narrowed airway making breathing impossible.
      2. Find out if there is loss of muscular control in the throat area which allows the tongue to slip back and block the throat.
      3. Lift the chin and tilt the head of the victim (if the victim is an adult). This way you will be able to lift the tongue from the back of the throat, leaving the airway clear.

   c. Check for Breathing
      1. Put your face near the victim’s mouth and look, listen, and feel for breathing. You should observe for chest movement or sound of breathing.

2. Secondary Survey

Secondary survey is used when the victim is conscious or has revived. It aims to detect everything about the patient’s condition.

   a. History Taking

SAMPLE PAIN is the mnemonic code in order to perform the steps more easily.

   S-ymptoms (the chief complaint of the patient)
   A-llergy (find out if the victim is allergic to anything)
   M-edication (what are the medicines s/he is currently taking)
P-revious illness (that may be related to the problem)
L-last meal (only for those subject for operation)
E-events prior to what happened
P-period of pain (How long? What started it?)
A-area (Where is the pain coming from?)
I-intensity
N-ullify (What stopped it?)

b. Checking for Vital Signs

**A. Pulse rate**
Steps in checking the pulse:

- Use your fingertips in getting the pulse. Follow the following procedure:
  1. Place the finger tip over an artery where it either crosses a bone or lies close to the skin.
  2. Feel the pulsations as the pressure wave of blood causes the vessel wall to expand – that is the pulse.

- The pulse rate may be taken in different points in the body like:
  1. Brachial
  2. Carotid
  3. Wrist
  4. Temporal
  5. Subclavian
  6. Axillary
  7. Femoral

- The usual radial points are found at the wrist and carotid.

**NO-NO in Getting Pulse Rate**

- Never use your thumb; it has its own pulse.
- Do not palpate both the carotid arteries at the same time.
- Do not get the pulse in sitting position. Pulsations disappear as the victim is elevated to sitting position.
- Never put too much pressure or massage the carotid. You may disturb the heart’s electrical conduction system.

<table>
<thead>
<tr>
<th>Normal Pulse Rate</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>60-70</td>
<td>Men</td>
</tr>
<tr>
<td>70-80</td>
<td>Women</td>
</tr>
<tr>
<td>80-90</td>
<td>Children over 7 years old</td>
</tr>
<tr>
<td>80-120</td>
<td>Children over 1-7 years old</td>
</tr>
<tr>
<td>110-130</td>
<td>Infants</td>
</tr>
</tbody>
</table>
B. Temperature
Guidelines in checking temperature:
- It is with much importance that temperature be monitored as in the case of stroke and high fever.
- Body temperature is measured by using a thermometer within:
  1. Rectum (rectal)
  2. Oral (mouth)
  3. Axillary (armpit)

C. Respiration
Guidelines in checking respiration:

- Count the number of breaths per minute.
- A whistle sound or wheeze and difficulty in breathing may mean an asthma attack.
- A gurgling or snoring noise and difficulty in breathing may mean that the tongue, mucous or something else is stuck in the throat and does not let enough air to get through.

*Between 12-20 breaths per minute are normal for adults and older children; 40 breaths per minute are normal for babies.

D. Skin color
Guidelines in checking skin color:

- Skin color reflects the circulation of blood and the saturation of oxygen in the blood.
- The presence of mucous around the mouth, inner eyelids, and nail beds is a sign of poor blood circulation.
- A healthy skin is warm and pink because blood flows normally in the blood vessels.

c. Head to Toe Examination

1. Head and neck
   - Are there any lacerations or contusions in the area?
   - Is there a presence of blood in his / her hair? If yes, immediately find out where it is coming from.
   - Is there any fluid in the victim’s nose, and ears? If so, the victim has a skull fracture.
2. Eyes

- Pay close attention to the pupils.

<table>
<thead>
<tr>
<th>Pupil Appearance</th>
<th>Assessment</th>
</tr>
</thead>
<tbody>
<tr>
<td>Dilated pupil</td>
<td>State of shock</td>
</tr>
<tr>
<td>Very small pupils</td>
<td>Poison or use of prohibited drugs</td>
</tr>
<tr>
<td>Different size</td>
<td>Head injury that requires immediate attention</td>
</tr>
<tr>
<td>Small and bright</td>
<td>Pupils are reactive</td>
</tr>
<tr>
<td>No reaction</td>
<td>DEATH</td>
</tr>
</tbody>
</table>

3. Chest

- Check for cuts, bruises, penetrations, and other impairments.
- If the victim feels pain while you apply pressure onto his/ her chest, there could be a rib fracture.

4. Abdomen

- Does the victim’s abdomen hurt? Where is the pain coming from?
- Is his/ her abdomen tender?
- Did you feel any lumps? If yes, get immediate medical assistance.

5. Back

- Is there movement in the victim’s lower extremities?
- Is there sensation in these parts? If the answer is yes, do not move the victim. Immobilize him/ her.

**Top Ten things to do in case of an emergency**

1. Shout for HELP!
2. Survey the scene and assess the situation.
3. Determine if the accident warrants a visit to the nearest hospital – or simple cleansing and band aid will do.
4. If you are certified in CPR and a victim needs it, begin CPR right away.
5. Stop the bleeding, if there is any.
6. Treat any symptoms of shock.
7. Look for the medical alert tag in every victim.
8. Seek trained medical assistance.
9. Never give anything by mouth to an unconscious victim.
10. Wait for medical professionals to arrive.

*ALWAYS LOOK FOR A MEDICAL ALERT TAG IN EVERY VICTIM.*
EMERGENCY ACTION PRINCIPLES
Source: Red Cross Manual

1. Is the scene safe? If yes, proceed to the next steps. If no, do not attempt to go to the accident. Call Emergency Medical Services (EMS) instead.

2. Make sure the victim is lying on his back, if not, roll the victim.

3. Check for responsiveness by gently tapping the shoulder of the victim saying: “Hey, hey, hey are you okay?”

4. If there is no response, call for help immediately.

5. Do the primary survey of the victim.
   - Circulation: Use carotid pulse (if negative, go to Step 6)
   - Airway: check if there is blockage in the airway (if yes, take it out using your pinky finger in a scooping motion).
   - Breathing: use the maximum head-tilt-chin-lift method and look-listen-feel (if negative, perform rescue breathing).

6. While applying maximum head-tilt-chin-lift method, pinch the nose and give 2 initial full breaths to the victims.

7. Take off the clothes of the victim that can block the compression area.

8. Perform CPR to the victim.
   - Do 5 cycles of 30 compressions and 2 breaths.

9. If the victim is revived, do the secondary survey of the victim. If not, continue performing CPR while waiting for the rescue team.
   - Do the secondary survey; record all the data and submit to the rescue team.
     - Interview:
       - S: symptoms
       - A: allergy
       - M: medication
       - P: past medical history
       - L: last oral intake
       - E: events prior to the accident
   - Vital Signs: Carefully check the following vitals:
     - E: eyes - dilated - shock, constricted - stroke or drug abuse; pupils are unequal - stroke or head injuries
     - N: nose - watery - fracture or skull injury
     - B: breaths - bluish skin color - lacking oxygen (cyanosis)
     - T: temperature
     - P: blood pressure
   - Head-to-Toe Examination: Check for the following:
     - D: deformity
     - C: contusions
     - A: abrasions
     - F: fractures
     - E: ears
     - T: tenderness
     - L: lacerations
     - S: swelling
PART TWO - WHAT TO PROCESS

Activity 9 - Let’s try this! (Refer to page 19 of the LM)

This activity measures the learners’ capability to perform the procedures in assessing emergency situations and in doing primary and secondary survey of the victims.

Criteria: Correctness of the procedures and application of the basics of first aid.

Process questions:

1. Why is it important to assess the situation first before proceeding to the primary and secondary survey of the victim?
2. When should a primary survey of the victim be used?
3. When should a secondary survey of the victim be used?

Activity 10 – Share Your Heroism

This activity allows students to share a real experience where they were able to help other people in an emergency situation.

Process questions:

1. Have you experienced helping a person in an emergency situation?
2. How was it?
3. What did you do? Is it the same with what has been discussed?
4. How did you feel during and after helping the victim?

PART THREE - WHAT TO REFLECT ON AND UNDERSTAND

Activity 11 – Rate Yourself (Refer to page 20 of the LM)

This section allows the learners to rate their own performance in assessing emergency situations and in doing primary and secondary survey of the victims.

1. Why is it important to follow the proper procedures in assessing emergency situations and in doing basic life support (primary and secondary survey of the victim)?
The teacher may also encourage learners to learn independently through the Activity 12 e found on page 21 of the LM.

**PART FOUR - WHAT TO TRANSFER**

This activity integrates music and communication arts with health education. Inform students that there are a lot of studies which show that listening to music can increase or improve academic performance.

Activity 13 – Music is Good for the Health (Individual, Pair or Group Work)

Let the learners compose a 4-line jazz chant in English, Filipino or own dialect describing the importance of having first aid and safety awareness. An example is found on page 21 of the Learner’s Material.

Criteria: Relevance and Stage Performance

Lesson 3 – Dressings and Bandages

Objectives: at the end of this lesson, the learners are expected to be able to:

1. Explain the purpose of dressing and bandages
2. Demonstrate the appropriate bandaging techniques for common unintentional injuries.

**PART I - WHAT TO KNOW**

This part allows the teacher to assess if learners can identify dressings and bandages and know what they are meant for.

Activity 14 – “Bonding with Dressing and Bandages” (Refer to page 22 of the LM)

The pictures are some examples of dressings and bandages used to cover a wound, to stop bleeding and immobilize broken bones, sprains and strains.

The teacher may also use the very challenging activity on the next page to assess the learners’ ability to analyze and think deeply.
Activity 15 – Twist and Double Match (Refer to page 23 of the Learner’s Material)

Answer Key:
1. DRESSING    Aa
2. COLD COMPRESS  Bc
3. COLD PAD   Cj
4. BANDAGES  Db
5. WOUND    Jh
6. BURN     Ie
7. SPRAINS  Gd
8. STRAINS  Hi
9. FRACTURE Fg
10. DISLOCATION Ef

Here is what the learners need to know…

A dressing is a piece of sterile cloth that covers a wound to prevent infection and/or to stop bleeding.

Techniques in Applying a Dressing:

1. Wash hands and wear gloves, if possible.
2. Unwrap the dressing as close to the wound as possible. Be sure not to touch the wound.
3. Skin is not sterile. If the dressing slips over the victim’s skin while you are trying to position it, discard and use a fresh one.
4. Place dressing over the wound.
5. Use a dressing that is large enough to extend at least 1 inch beyond the edges of the wound.
6. If body tissue or organs are exposed, cover the wound with a dressing that will stick.
7. Secure the dressing with a bandage or adhesive tape.

Cold compress is used to reduce swelling and relieve pain, especially used for sprains and strains. Cold packs can be used as cold compress. Hot compresses is also used to allow normal blood circulation. Cold and hot compress are applied alternately for closed wounds or contusions.

Bandages are used to apply pressure to bleeding; for covering wounds and burns; and providing support for immobilization for broken bones, sprains and strains. There are three main types of bandages namely: triangular, ace and tubular. Triangular bandage is made from cloth and can be used as cold compress, padding, support for pressure, or support sling. Ace bandage secures dressings in place. Tubular bandage is used to support joints or hold dressings in place. Smaller tubular bandage is used for finger injuries.

Figure 1 shows the parts of a triangular bandage.

Note to the illustrator: Please redraw and make them bigger/large
Two Phases of Bandaging

A. An open phase bandaging is used for wounds on top and back of the head, chest, back, hand, and foot, and as arm sling.
B. Cravat phase bandaging is used for wounds that need extra support like wound on the eye, forehead, ear, cheek, jaw, shoulder, hip, arm, leg, elbow, knee, and palm and for a sprained ankle. The narrower the cravat is, the greater pressure it will give.

Techniques in Bandaging

1. Keep in mind the following:
   a. Always use a square knot.
   b. Keep the cloth sterile to avoid infection.
   c. Always keep the ends.
2. Bandaging technique depends upon the size and location of the wound, your first aid skills, and materials at hand.
3. Bandage firmly over bleeding and securely over the broken bone, not so tight so as not to cut off blood circulation.
4. When wrapping bandages around the body, such as knees, ankles, neck, and small of the back, uses its natural hollows to slide the bandage gently into place. Start from the part with the smaller diameter to the larger diameter.
5. Since most injuries swell, check regularly to ensure that the bandage is still comfortable and that it remains firmly secured.
6. Secure the bandage with a tape, clips or a bow or square knot. Ensure that the bandages, especially the knots, do not touch the skin.

How to do a square knot

Right over left and left over right (Figure 3)
Refer to the illustrations for proper bandaging of body parts.
Wounds

A wound is a break in the continuity of a tissue in the body. It may be closed in which there is no break or damage in the skin. It is also called hematoma or contusion. A wound may also be an open wound in which there is a break in the skin.

Kinds of Open Wounds

<table>
<thead>
<tr>
<th>Puncture</th>
<th>Abrasion</th>
<th>Incision</th>
<th>Laceration</th>
<th>Avulsion</th>
</tr>
</thead>
</table>

1. Puncture is a piercing wound caused by nails, needles and other pointed objects.
2. Abrasion is caused by rubbing or scraping the skin against a rough surface.
3. Incision is a cut caused by knife, broken glass or any sharp object.
4. Laceration is a blunt breaking or tearing of soft tissues usually resulting from mishandling tools and other accidents.
5. Avulsion is a forcible tearing or partial tearing away of tissues.

How to Manage Wounds:

A. For management of hematoma, we use the mnemonic RICE:

1. Rest the injured part
2. Ice application
3. Compression
4. Elevation

B. First Aid for Open Wounds with Severe Bleeding

1. Wear gloves and remove or cut clothing as necessary to expose wound.
2. Control bleeding by applying direct pressure.
3. Elevate the injured part above the heart except for eye injury and wounds with embedded object.
4. Cover wound with sterile dressing and bandage.
5. Care for shock.
6. Consult a physician immediately.
PART TWO - WHAT TO PROCESS

Activity 16 – Wound and Bandage (Refer to page 27 of the Learner’s Material)

This activity will challenge the learners to analyze the proper bandaging to a specific wound.

Answers:

1. An incision on a chest  K
2. An abrasion on a cheek  J
3. A puncture on a foot  C, L
4. A laceration on the arms  B, E, F
5. An avulsion on the head  C

Process questions:
1. Why should we use dressings and bandages to wounds?
2. Can we use any cloth as a dressing or bandage? Why or why not?
3. Aside from wounds, on what injuries can we use dressings and bandages?
4. Why is it necessary to use the proper techniques in applying dressings and bandages?

PART THREE - WHAT TO REFLECT AND UNDERSTAND

Activity 17 – Be Grateful and Resourceful (Refer to page 28 of the LM)

This activity teaches learners that there are materials at home, in school, and at work places that can be used as dressings and bandages. This opens their minds that in case of emergency when dressings and bandages are not available, an alternative material can be used as long as it is clean.

Process question: Why is it important to use sterile dressings and bandages?

PART FOUR - WHAT TO TRANSFER

Activity 18 – Bandaging Olympics (Refer to page 28 of the LM)

This activity allows the learners to use the knowledge and skills in applying dressing and bandage.
Lesson 4 – Carrying and Transporting an Injured Person

Objectives: At the end of the lesson, the learners are expected to be able to:

1. Identify the different ways of carrying and transporting an injured person
2. Demonstrate proper techniques in carrying and transporting an injured person

PART I - WHAT TO KNOW

Activity 19 – “How Will You Bring Me to A Safe Place?” (Refer to page 29 of the LM)

This activity arouses the critical thinking and analysis of the students. This helps the teacher assess the prior knowledge and capability of the learners on the topic.

<table>
<thead>
<tr>
<th>No. of First Aider</th>
<th>Available Materials</th>
<th>Status of Injured Person</th>
<th>Must Do</th>
<th>Kind of Transport</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>None</td>
<td>Unconscious, has no injury on arm, leg, rib, neck and back</td>
<td>(Fireman’s Carry)</td>
<td></td>
</tr>
<tr>
<td>1</td>
<td>None</td>
<td>Unconscious</td>
<td>Pass underneath a low structure</td>
<td>(Fireman’s Drag or Tied-Hands Crawl)</td>
</tr>
<tr>
<td>1</td>
<td>None</td>
<td>Unconscious</td>
<td>Transport the victim up the stairs</td>
<td>(Shoulder Drag)</td>
</tr>
<tr>
<td>1</td>
<td>Malong</td>
<td>Experiencing a very serious injury and should not be lifted</td>
<td>(Blanket Drag)</td>
<td></td>
</tr>
<tr>
<td>1</td>
<td>None</td>
<td>Unconscious, very small</td>
<td>(Lover’s Carry)</td>
<td></td>
</tr>
<tr>
<td>1</td>
<td>None</td>
<td>Unconscious, fat</td>
<td>(Pack-Strap or Piggy Back Carry)</td>
<td></td>
</tr>
<tr>
<td>2</td>
<td>Classroom chairs</td>
<td>Unconscious, no injury on neck, back or pelvis</td>
<td>Need to carry the victim down stairs</td>
<td>(Chair Carry)</td>
</tr>
<tr>
<td>2</td>
<td>None</td>
<td>Unconscious</td>
<td>(Two-Person Arm Carry)</td>
<td></td>
</tr>
<tr>
<td>3</td>
<td>None</td>
<td>Unconscious, will be carried on his back or face</td>
<td>(Hammock Carry)</td>
<td></td>
</tr>
<tr>
<td>3</td>
<td>None</td>
<td>Unconscious, first aiders will have to stay at one side of the injured person</td>
<td>(Bearer Alongside Carry)</td>
<td></td>
</tr>
</tbody>
</table>

Process questions:

1. In what emergency situations can we apply these transporting techniques?
Here is what the learners need to know…

Transporting an injured person to a safer place requires great care. A first aider must have to undergo proper training. When doing this, a first aider must consider the following factors:

a. Weight and height of the victim
b. Status of the victim (conscious or unconscious)
c. Environment (safe, floor is smooth, narrow or wide)
d. Special need considerations (injuries of the victims)

One-man Transport

Fireman’s Carry – the easiest way to transport a light and smaller victim

Piggy Back – when the victim is conscious

Pack Strap Carry – when the victim is smaller than the first aider

Shoulder Drag – used when the floor is smooth, short distance transport

Fireman’s Drag or Tied-hands Crawl – used when first aider and victim must crawl underneath a low structure or smoky room
Blanket Drag – used when the victim is seriously injured and should not be lifted.

**Two-man Carry**

Chair or Seat Carry – when there are two first aiders and a chair is available

**Three or More-Man Transport**

Hammock Carry – when there are three first aiders

Bearer Alongside Carry – carriers will stay on the uninjured side of the victim

Six Man Lift and Carry – when there are six first aiders

(Note to the illustrator: Copy the picture of “Bearer Alongside” and add 3 lifters on the other side of the victim)
PART TWO - WHAT TO PROCESS

Activity 20 – Pick and Carry

This activity allows the learners to perform the different kinds of transport.

Divide the class into groups with 3-4 members. One member will act as victim. Prepare strips of paper in which the different ways of carrying and transporting the victim are written. Groups will pick three and demonstrate the proper techniques.

Process questions:

1. Which among the techniques do you find the easiest and the most difficult? Why?
2. What fitness components are needed by a first aider or rescuer in transporting a victim to a safer place?
3. What are the things to consider in transporting a victim?

PART THREE - WHAT TO REFLECT AND UNDERSTAND

Activity 21 – Thinking of Others (Refer to page 33 of the LM)

This activity allows learners to widen their perspective.

An action plan is a sequence of steps that must be taken, or activities that must be performed well, for a strategy to succeed. An action plan has three major elements:

1. Specific tasks: what will be done and by whom.
2. Time horizon: when will it be done?
3. Resource allocation: what specific funds are available for specific activities?

PART FOUR - WHAT TO TRANSFER

Activity 22 – Campaign for Safety

Let the learners create a slogan that will encourage people in the community to join in the First Aid Movement.

Criteria: Relevance and Persuasiveness

Lesson 5 – First Aid for Common Unintentional Injuries
Objectives:

1. Identify common unintentional injuries in school
2. Demonstrate proper first aid procedures for common unintentional injuries

PART I - WHAT TO KNOW

Activity 23 – Creative Presentation

This activity applies differentiated instruction and touches the multiple intelligences of the students.

Divide the class into several groups according to their levels, learning styles, or interest and assign each group a specific unintentional injury. The group shall present their assigned topic in a creative way but must address the guide questions given.

1. Where does the injury commonly happen?
2. What are the factors that contributed to the occurrence of the injury?
3. What are the proper procedures in giving first aid to the injury?
4. What are the ways to prevent the injury?

Suggested Presentations:

1. Gallery Walk
2. Game Show
3. Talk Show
4. Poem
5. Role Play
6. Graphical Presentation
7. Pantomime
8. Newscasting
9. Song Composition
10. Multimedia and Other Creative Presentations

Here is what the learners need to know…
FRACTURE is a break or crack in a bone. An open fracture pierces the skin surface while in a closed fracture, the skin above is intact.

First aid:
1. Check vital signs.
2. Do not move the injured part.
3. Stop bleeding if there is any.
4. If you have to move the person, immobilize the broken part by splinting.
5. Seek medical help immediately.
DISLOCATION is a partial or complete displacement of the bones.

First Aid:
1. Call for help immediately.
2. Splint the affected part.
3. Do not try to move a dislocated part or force it back into place.
4. Apply ice on the injured part to reduce swelling.

SPRAIN is an injury to the ligaments of a bone due to accidental tearing or overstretching.

STRAIN is an injury to the muscles which is a result of improper use of the muscle.

First Aid:
1. Rest the injured part.
2. Apply ice.
3. Compress the injured part.
4. Elevate the injured part.
**HEAT EXHAUSTION** is caused by loss of salt and water due to excessively high temperature. This may lead to heatstroke and even death.

First Aid:
1. Transport a victim to a cool place.
2. Give him/her plenty of water.
3. Check for vital signs.
4. Seek medical help.

**FOOD POISONING** is caused by consuming food or drink that is contaminated with bacteria or viruses.

First Aid:
1. Help the person to lie down and rest.
2. Give him plenty of flavorless fluids to drink and a bowl to use if he vomits.
3. Call for medical help if the condition worsens.
CHOKING results when a foreign object blocks the throat.

First Aid:

1. Ask the person if he is choking.
2. Encourage him/her to cough.
3. When the person cannot speak or stops coughing, give him five back blows. Stand behind him and help him to lean forward. Support his chest with one hand, and give five sharp blows between the shoulder blades with the heel of your hand.
4. If back blows fail, try abdominal thrusts. Stand behind the person and put your arms around the upper part of his abdomen. Clench your fist with thumbs inward. Place it between navel and the bottom of breastbone. Grasp your fist with your other hand. Pull sharply inwards and upwards up to five times.
5. Check his mouth if obstruction is not cleared, repeat the back blows and abdominal thrust.
6. If obstruction still has not cleared, call for an ambulance. Continue until help arrives.

DROWNING happens when air cannot get into the lungs because of water. It can cause immediate death when taken for granted.

First Aid:

1. Lay the person down on his/her back.
2. Check breathing and open the airway.
3. Give rescue breaths and chest compression if necessary.
4. If the person is breathing, place him/her in the recovery position.
5. Treat for hypothermia by removing wet clothing and covering him/her with a dry blanket.
**HEART ATTACK** is caused by a sudden obstruction of blood supply to the part of the heart muscles.

First Aid:
1. Help the person sit or lie down with head elevated.
2. Call for medical help.
3. If the person is conscious, give him/her a full-dose aspirin tablet and advise him/her to chew it slowly.
4. Constantly monitor the vital signs. Be prepared to give rescue breaths and chest compression.

**CHEMICAL BURNS** may occur when electricity passes through the body.

First Aid:
1. Make sure that the contact with electrical source is broken.
2. Flood the sites of injury at the entry and exit points of the current with plenty of cold water.
3. Wear disposable gloves and place a sterile dressing or a bandage over the burn to protect it from airborne infection.
4. Call for medical help.
5. Reassure the victim and treat for shock.
**BURNS** are often due to domestic incidents such as touching a hot iron, friction (rope burn) or spilling boiling water on the skin.

First Aid:
1. For minor burns, flood the injured area with cold water to stop burning and relieve pain.
2. Put on gloves and cover the area with sterile non-adhesive dressing or bandage.
3. For severe burns, help the person to lie down and prevent the burnt area from coming into contact with the ground. Douse the burn with plenty of cold liquid.
4. Seek medical assistance. Do not delay medical help.
5. Wear disposable gloves and gently remove any rings, watches, belts, shoes, or smouldering clothing before the tissues begin to swell.
6. Carefully remove any burnt clothing, unless it is sticking to the skin. Cover the burnt area with non-adhesive dressing or bandage.
7. Continue to monitor vital signs.
8. Reassure casualty and treat for shock.

**HEAT STROKE** is caused by a failure of the "thermostat" in the brain to regulate body temperature. When this happens, the body becomes seriously heated.

First Aid:
1. Move the person immediately to a cool place.
2. Remove as much of his outer clothing as possible.
3. Call for medical help.
4. Wrap the person in a cold, wet sheet and keep the sheet wet until his temperature drops to 38°C or 37.5°C under the tongue or armpit, respectively.
5. If the person has returned to normal temperature, replace wet sheet with a dry one.
6. Monitor vital signs until help arrives.
7. If temperature rises, repeat the cooling process.
STROKE is a condition in which the blood supply to a part of the brain is suddenly and seriously impaired by a blood clot or ruptured blood vessel.

First Aid:
1. If the person is conscious, help him to lie down with his head and shoulders slightly raised and supported.
2. Incline his head to the affected side and place a towel on his shoulder to absorb any dribbling.
3. Call for help.
4. Loosen any tight clothing.
5. Monitor vital signs and reassure the victim.
6. If the victim is unconscious, give rescue breathing and chest compression.
7. Call for an ambulance or call for help.

PART TWO - WHAT TO PROCESS

Activity 24 – Looking Back

Let the learners look at their answer once again in the Activity –1- “Emergency! Emergency! What Will I do?”

Process questions:

1. Did you do the proper first aid for each injury?
2. Which injury were you confident in giving first aid? Why you do say so?
3. Which injury were you not confident in giving first aid? Why do you say so?
PART THREE - WHAT TO REFLECT AND UNDERSTAND

Activity 25 – First Aid Challenge

This activity assesses the skill of the learners to perform the proper procedures in giving first aid to common unintentional injuries.

Divide the class into several groups. Each group will go to 5 stations. Each station has a specific injury and they will perform its proper first aid procedure. A group cannot proceed to the next station if procedure is wrong. The group will assign a different victim for each station so that everyone will be given the chance to experience being a victim and a first aider.

The group with the shortest time to finish the challenge will get the highest score.

Process questions:

1. Did you enjoy the activity?
2. Why did you lose or win in the game?
3. What is the most important learning you have in the game?
4. What are the common unintentional injuries that may happen in school?
5. Why is it important to give correct first aid?

Activity 26 – “Can I Be?” (Refer to page 41 of the LM)

This activity allows the learners to express their perspective.

PART FOUR - WHAT TO TRANSFER

This is the time when the learners will be doing their product/performance for this quarter. Let them choose one between the two activities. (Refer to page 42 of the LM)

Activity 27 – Fully Packed (Product)

Activity 28 – “Let’s Go and Let’s Do!” (Performance)
Summative Assessment

This is an evaluative assessment which will measure the overall learning of the learner. Part A is under “knowledge” level which calls for the recall of the facts and other content of the unit lesson. Part B is in the “process” level which assesses the learner’s ability to analyze words and determine its relationship to one another and Part C is in the “understanding” level which tests if the learner has fully grasped the concepts of the unit lesson. Thus, scores of the learners shall be recorded under each level respectively.

A. Matching Type. Match the definition or description in Column A to its corresponding word in Column B.

<table>
<thead>
<tr>
<th>Column A</th>
<th>Column B</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. An immediate care given to an injured person before a physician arrives</td>
<td>a. Gentle</td>
</tr>
<tr>
<td>2. One of the objectives of first aid</td>
<td>b. Sprain</td>
</tr>
<tr>
<td>3. A characteristic of a good first aider</td>
<td>c. Wound</td>
</tr>
<tr>
<td>4. The first step in assessing an emergency situation</td>
<td>d. Dressing</td>
</tr>
<tr>
<td>5. Done for an unconscious victim</td>
<td>e. Puncture</td>
</tr>
<tr>
<td>6. A piece of sterile cloth used to cover a wound</td>
<td>f. Save life</td>
</tr>
<tr>
<td>7. Used to stop bleeding and immobilize fracture</td>
<td>g. Bandage</td>
</tr>
<tr>
<td>8. A break in the continuity of the tissue of the body</td>
<td>h. First Aid</td>
</tr>
<tr>
<td>9. A kind of open wound</td>
<td>i. Respectful</td>
</tr>
<tr>
<td>10. Used to transport an unconscious victim</td>
<td>j. Blanket Drag</td>
</tr>
<tr>
<td></td>
<td>k. Survey the scene</td>
</tr>
<tr>
<td></td>
<td>l. Primary survey of the victim</td>
</tr>
<tr>
<td></td>
<td>m. Secondary survey of the victim</td>
</tr>
</tbody>
</table>
B. THREE WORDS: ONE THEME. Underline the word that does NOT belong to the group and determine the classification/theme of the group.

_____1. prolong life  add injury   alleviate suffering  save life
_____2. gentle  observant  sympathetic  tactless
_____3. do not give food  stay calm  tighten clothing  reassure victim
_____4. interview  circulation  airway  breathing
_____5. head-to-toe examination  vital signs  call for help  interview
_____6. suicide  wound  poisoning  fracture
_____7. bandage  clean cloth  cold compress  dressing
_____8. stop bleeding  cover wound  immobilize fracture  reduce swelling
_____9. puncture  incision  laceration  dislocation
_____10. blanket drag  lover’s carry  fireman’s drag  hammock carry

C. Multiple Choice. Choose the best answer.

1. Who among the Grade 9 students are good first aiders?
   Student A who tells his brother the severity of the injury
   Student B who comforts his classmate while treating his fracture
   Student C who stays calm while treating his wound on the finger
   Student D who performs the proper procedure in giving first aid to poisoning
   A. Students A and B only
   B. Students B and C only
   C. Students A, B and C only
   D. Students B, C and D only

2. Why is it important to follow proper techniques and procedures in giving first aid?
   A. It may lead to further harm.
   B. It can replace a nurse or a doctor.
   C. It can alleviate pain and save lives.
   D. It gives initial treatment to an injured person.

3. To whom can you apply your knowledge and skills in first aid?
   A. oneself   B. family   C. community   D. all of the above

4. When do we use primary survey on the victim?
   A. When the victim is conscious
   B. When the victim is unconscious
   C. During the survey of the scene
   D. After the victim has regained his consciousness
5. To which situation can this saying “Prevention is better than cure” be applied?
   I. Person A who practices safety consciousness at all times.
   II. Person B who performs proper first aid to an injury.
   III. Person C who proceeds to primary survey of the victims upon seeing that the scene is not safe.
   IV. Person D who keeps things at home and in school in order.

6. Which is the best interpretation to the illustration?
   (Note to the illustrator: Draw a human figure with a big back pack holding a first aid kit). On the back pack, write the words: first aid basics, emergency situation principles, proper procedures, bandages, dressings)

   A. A good first aider is calm, resourceful and ready to rescue during emergencies.
   B. A good first aider equips himself with proper knowledge and skills in order to give proper first aid during emergency situations.
   C. A good first aider thinks first before acting in an emergency situation.
   D. A good first aider is proud of himself that he has more knowledge and skills than the others.

7. Which is the correct sequence in giving first aid to severe bleeding?
   I. Apply direct pressure over the wound with fingers over a sterile dressing.
   II. Use gloves if available. Remove or cut cloth to expose the wound.
   III. Raise and support the injured part above the casualty’s heart.
   IV. Secure dressing with bandage.

8. What happens when we live a safe life?
   A. We can help others.  B. We can give first aid.
   C. We can have a happy life.  D. We can solve environmental problems.

9. Injuries happen at any time. What should we do to prevent unintentional injuries?
   A. We must reduce the risk of accidents.
   B. We must practice safety measures at all times.
   C. We must equip ourselves with proper knowledge and skills in first aid
   D. All of the above

10. Which is the correct sequence in doing emergency action principle?
    A. Survey the scene.
    B. Check for responsiveness.
    C. Do primary survey of the victim.
    D. Do secondary victim of the victim.
    A. I, II, IV, III  C. IV, III, II, I
    B. I, II, III, IV  D. I, III, II, IV
Answer Key

I.

1. h  
2. f  
3. a  
4. k  
5. l  
6. d  
7. g  
8. c  
9. e  
10. j

II. (one check for every answer)

1. Add injury - objectives of first aid
2. Tactless - characteristics of a good first aider
3. Tighten clothing - principles of first aid
4. Interview - primary survey of the victim
5. Call for help - secondary survey of the victim
6. Suicide - unintentional injuries
7. Cold compress - material to cover a wound
8. Reduce swelling - uses of bandage
9. Dislocation - types of open wound
10. Hammock carry - types of one man transport

III.

1. D  
2. C  
3. D  
4. B  
5. B  
6. B  
7. B  
8. C  
9. D  
10. C

SUMMARY/SYNTHESIS/FEEDBACK

Unintentional injuries cannot be avoided. They can happen at any time, at any place to anybody. We must therefore practice safety awareness at all times.

But when injuries happen, appropriate knowledge and skills of the proper application of first aid could greatly help in alleviating pain, preventing further injury, prolonging and even saving lives.

GLOSSARY OF TERMS
Accident - any unexpected event causing injury
Airway - the passage of air in the body
Bandage - any sterile cloth used to cover a wound, stop bleeding or immobilize bone injury
Choking - an injury in which a certain object is stuck in the throat
Circulation - the flow of blood
Cravat phase - folded triangular bandage
Direct pressure - a way of controlling bleeding in which compress or a bare hand is pressed directly on the wound
Dislocation - a condition in which bones are partially or completely pulled out from its position
Dressing - any sterile cloth used to cover a wound
Electrical burn - a burn occurring from the passage of electricity in the body
First aid - an initial treatment given to an injured person before the arrival of a medical practitioner
First aider - a person giving first aid
Fracture - a break or crack in the bone
Heart attack - a sudden obstruction of the blood supply to parts of the heart muscle
Heat stroke - failure of the thermostat in the brain
Physician - a medical doctor
Open phase - unfolded triangular bandage
Poisoning - exposure or ingestion of toxic substances
Severe bleeding - serious bleeding that can cause blood loss
Shock - a life-threatening condition characterized by rapid pulse, paleness, coldness, and sweating
Sprain - an injury to the ligaments, tendons and muscles due to overstretching, over wrenching or sudden movement
Sterile - clean, germ-free
Strain - an injury to the ligaments, tendons and muscles due to overstretching, over wrenching or sudden movement

Survey - an act of investigating or examining something

Thermostat - body temperature regulator

Transport - to move or transfer to another place

Unintentional injuries - injuries which are not expected; also known as accidents

Victim - the injured person

Vital signs - refers to the level of response, pulse, breathing and temperature of the victim

Wound - a break in the continuity of the tissue or skin

REFERENCES


Teacher’s Guide No. 3

Prevention of Substance Use and Abuse

*(Drug Scenario in the Philippines)*

Draw something about drugs in the Philippines

March 24, 2014
INTRODUCTION

This teacher’s guide is designed to help you inform your learners about the present drug scenario in the Philippines, the different classification of drugs of abuse and their harmful short term effects and long term effects on the body. You will introduce the learners to common terms encountered in drug education, as well as signs and symptoms of drug use and abuse. Finally, you will facilitate an understanding of the effects of drug addiction to self, family, community and the country. Furthermore, this teacher’s guide will aid you in providing your learners solid knowledge from which they will gain more information about prevention, intervention, and healthy alternatives to avoid substance use and abuse.

Before you start with the lessons, you will assist the learners in doing and answering the pre-assessment activities. These activities will check the learners’ prior knowledge, about drug abuse and related issues in the country. The teaching guide will have 6 lessons which will be done for 8 days. Each lesson contains the four core parts of learning namely: Knowledge, Process, Understanding and Transfer. All of the activities should be recorded either in the learners’ MAPEH notebook or activity sheet. You will culminate each lesson with a product or performance assessment to check the learner’s level of proficiency. Suggested media resources are given to share with your learners to further enhance their growing mind.

God bless, teach healthy and enjoy learning with your class!
Content Standard

The learner is to demonstrate understanding of the dangers of substance use and abuse on the individual, family and community.

Performance Standard

The learner is to share responsibility with community members through participation in community efforts to prevent and control substance use and abuse.

PRE-ASSESSMENT

Let’s play ADD (Agree, Disagree, Don’t Know)

Start the game by telling the learners to stay behind the line with their classmates. The line can be a chalk line or an adhesive tape. This game allows your learners to discuss topics about drugs that they would rather not talk about. You will facilitate in the analysis of the learners’ current values and personal beliefs about drug use and abuse. You shall encourage the learners to share new and exciting ideas about the topic.

How to facilitate the game:

1. Prepare three card boards with the following labels: Agree”, “Disagree” and “Don’t Know”.
2. Choose a venue with free space. You will post the three labels “Agree”, “Disagree” and “Don’t Know” beside each other facing the class.
3. You will read a statement to the class. The learners will decide if they agree, disagree or don’t know the answer.
4. Tell the learners to move only when they hear the command “GO!”.
5. Say “Go!” after reading each statement.
6. Instruct the learners to go to the location which suits their values, beliefs and feelings. Tell them to avoid pushing and pulling.
7. You may want to ask them about their decisions.
8. Tell them they can change their decisions.
9. You will proceed to the next statement until all statements have been read.
10. Facilitate the processing afterwards.

The following are suggested statements. You may change them as needed:

1. Drugs are not a concern in the Philippines!
2. Filipino males are more prone to drug use than females.
3. Teenagers are in danger to drug use, misuse and abuse.
4. All medicines are drugs but not all drugs are medicines!
5. Drugs change the way the brain thinks and process information.
6. There are many healthy alternatives to combat drug use and abuse.
7. Shabu is one of the commonly used and abused drugs in the Philippines.
8. Drug dependence is the state of physical and psychological dependence on drugs by a person following its continuous use and abuse.
9. Drug abuse is the continuous use of a drug or several drugs other than its purpose.
10. A drug is a substance which brings about mental, emotional, behavioral and changes to a person.

AGREE  DISAGREE  DON’T KNOW

LINE

STUDENTS  Illustration of the Game

Process the activity. Use the following explanations:
1. Drugs are not a concern in the Philippines!
   - *Drugs are still a concern in the Philippines. Although there is a decreasing number of users and distribution of drugs in the country, we still need to address the problem. Drugs affect all domains: self, family, peers or friends, school, community and the nation as a whole.*

2. Filipino males are more prone to drug use than females.
   - *According to a study conducted by the Dangerous Drugs Board (DDB) in 2008, the ratio of Filipino male users to female users is 10:1. This means that Filipino males are more prone to drug use than female.*

3. Teenagers are in danger to drug use, misuse and abuse.
   - *Teenagers are vulnerable to drug use, misuse and abuse. Several risk factors contribute to drug exposure.*

4. All medicines are drugs but not all drugs are medicines!
   - *Medicines are drugs. Medicines are drugs which help treat, ease and prevent diseases and disorders. Improper use or misuse of medicines can lead to drug abuse and addiction. Some drugs have no medicinal purposes, are habit-forming and can lead to illnesses and even death.*

5. Drugs change the way the brain thinks and process information.
   - *Drugs alter body processes, affects body systems specifically the central nervous system which includes the brain. A brain under the influence of drugs thinks different and cannot normally process information.*
6. There are many healthy alternatives to combat drug use and abuse.
   - Various healthy alternatives are just around the corner. These can range from hobbies like playing games, reading, collecting favorite things and sports like basketball, volleyball, chess and other activities which you find interesting and fun.

7. Shabu is one of the commonly used and abused drugs in the Philippines.
   - The Dangerous Drugs Board listed three commonly used and abused drugs in the Philippines and this includes shabu. The other two are marijuana and inhalants.

8. Drug dependence is the state of physical and psychological dependence on drugs by a person following its continuous use and abuse.
   - Drug dependence makes a user rely on the drug s/he is using. The drug makes the user tolerate and completely depend on the drugs. His/her body cannot perform well without them.

9. Drug abuse is the continuous use of a drug or several drugs other than its specified purpose.
   - Drug abuse is the continuous use and dependency on drugs. A drug user no longer has control over him / her and therefore uses the drugs improperly and extremely which leads to drug dependency.

10. A drug is a substance which brings about mental, emotional, behavioral and physiological changes to a person.
    - Drug affects a person mentally, emotionally, physiologically and alters his/her behavior.
**K-W-L Chart**

Tell the learners to list ideas they heard about drugs and drug scenario in the Philippines. They will write these in the $K$ (*What I Know*) column. Tell them afterwards to list things they want to know in the $W$ (*Want to Know*) column. Instruct them not to write anything in the $L$ (*What I Learned*) column yet.

The following are possible answers. Accept other answers.

<table>
<thead>
<tr>
<th>K (What I Know)</th>
<th>W (Want to Know)</th>
<th>L (What I Learned)</th>
</tr>
</thead>
<tbody>
<tr>
<td>- Drugs can kill</td>
<td>- What is the present drug scenario in our country/community?</td>
<td>No answers for this part yet. Go back to this part at the end of the unit to assess your learners.</td>
</tr>
<tr>
<td>- Drugs are dangerous</td>
<td>- What is a drug?</td>
<td></td>
</tr>
<tr>
<td>- Shabu, marijuana, and solvents are dangerous</td>
<td>- What are the different classifications of drugs?</td>
<td></td>
</tr>
<tr>
<td>- Use of drugs is against the law</td>
<td>- What are the risk and protective factors regarding drug abuse?</td>
<td></td>
</tr>
<tr>
<td>- It is wrong to bring and use drugs in school</td>
<td>- How can one prevent the use of drugs?</td>
<td></td>
</tr>
<tr>
<td></td>
<td>- How can the government help in the prevention, treatment and rehabilitation of drug abuse?</td>
<td></td>
</tr>
</tbody>
</table>
**Quiz Time!**

Assure the learners that this quiz will not be recorded and will assess only their prior knowledge about drugs of abuse and the present drug scenario in our country. This is to prepare them for the main activities in their learning material. If they are ready, they may proceed to answering the questions in their learner’s material. Ask them to write answers in their notebook or activity sheet. Below is the quiz with the answers.

**Supply the missing words**

- Commonly abused drugs in the Philippines are (1) **shabu**, (2) **marijuana** and (3) **inhalants**. *(any order)*
- Filipino (4) **teenagers/adolescents** are most likely to experiment with and abuse drugs.
- (5) **Drugs** are any substances or chemicals which when taken into the body have psychological, emotional and behavioral effects on a person.
- Cigarettes and alcohol are classified under (6) **gateway drugs** because smokers and drinkers have a tendency to use drugs of abuse.

**True or False. Write True if the statement is true and false if it is false.**

**TRUE** 7. Stimulants, depressants, hallucinogens, narcotics and inhalants are drugs of abuse.

**TRUE** 8. Teenagers who engage in drug use and abuse tend to have poor academic performance and drop out of school.

**FALSE** 9. Taking small amounts of drugs of abuse will not make a person an addict in the long run.

**TRUE** 10. There are more healthy and enjoyable things to do than taking drugs.
Lesson 1: Drug Scenario in the Philippines

Introduction
Lesson 1 introduces the learners to the present drug scenario in the Philippines. They will be provided with information about the study conducted by the Dangerous Drugs Board, the lead government agency on drugs. It plans, establishes and initiates programs and projects necessary to combat and reduce the illegal distribution, manufacture and sale of drugs of abuse. They will also be introduced to basic terms used in the study of substance use and abuse. The activities are provided to further enhance the learners’ knowledge, skills and attitudes toward the topic.

OBJECTIVES

At the end of the lesson, the learners are expected to:

• describe the drug scenario in the Philippines

• explain the concepts of drug dependence, drug use, drug misuse and drug abuse

• conduct a survey in school or in the community about its present drug scenario

• create a box of information which includes all information they have learned, gathered and processed
WHAT TO KNOW

Activity 1: Buzz Time!

Ask the learners to look at some of the headlines in the newspapers or electronic news, watch news on television or listen to radio news program about drug-related crimes in the Philippines. Facilitate a buzz session in the class about the present drug scenario in the country. Ask them what they’ve read and heard. Let them share these in class.

Activity 2: Reading Time!

Ask the learners to read activity 2.

Ask the following guide questions. Learners’ answers may vary:

1. What can you say about the report of the Dangerous Drugs Board?
2. Do you believe that the incidence of drug use in the Philippines is really decreasing? Why or why not?
3. What is the current scenario in your school? In your community?
4. What are the common terms related to drugs?

Activity 3: Key Drug Concepts

Ask the learners to fill in the necessary concepts about each key term related to drugs. Tell them to add more tags if necessary. The following are sample answers to the activity.

```
DRUG

Chemicals
Addicting
Dangerous
Marijuana
```
Activity 3: **Ways Drugs of Abuse Enter the Body**

Ask the learners to draw a silhouette of a man or woman’s figure. Label four ways drugs of abuse enter the body.

- Oral (through the mouth)
- Nasal (through the nose)
- Transdermal (through skin)
- Intravenous (through injection)
WHAT TO PROCESS

Activity 5: What is your Choice

Facilitate the activity. Read out each statement below. Ask the learners their feelings after reading each statement. Tell them to do the body gestures appropriate with their answers.

Statements:

- Smoking should be banned in public places.
- It is okay for students to use cigarettes and alcohol.
- Our law is too easy on teenagers caught using drugs.
- Advertising is causing teenagers to try alcoholic drinks.
- Strict penalties for drug use will stop people from using drugs.
- Parents should be held responsible for their children who are into drug use.

WHAT TO REFLECT AND UNDERSTAND

Activity 6: Reflection Time

Tell the learners to write an essay about the present drug scenario in the Philippines. They are to include data and information including common terms they have learned in class and have gathered personally. Tell them also to include ways for the government and society to combat drug syndicates and addiction. They should limit their essay to 150-200 words.
WHAT TO TRANSFER

Activity 7: Let’s Make a Box of Information

Tell the learners that it is time to share their knowledge, skills and attitudes creatively. Tell them to create a box of information which will include:

- a map of their community
- pictures related to drug use and abuse
- information and data about drugs and drug abuse

Tell your learners to find creative ways to make a box, using either wood or cardboard. They may also use lights and sounds for a more attractive box. Use the rubric on the next page in assessing their output.
# Rubric for Box of Information

<table>
<thead>
<tr>
<th>Criteria</th>
<th>4 points</th>
<th>3 points</th>
<th>2 points</th>
<th>1 point</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Required Elements</strong></td>
<td>The material includes all required elements as well as additional information.</td>
<td>All required elements are included in the material.</td>
<td>All but one of the required elements are included in the material.</td>
<td>Several required elements are missing.</td>
</tr>
<tr>
<td><strong>Labels</strong></td>
<td>All items of importance on the material have labels that can be read from at least 3 ft. away.</td>
<td>Almost all items of importance on the material have labels that can be read from at least 3 ft. away.</td>
<td>Few items of importance on the material have labels that can be read from at least 3 ft. away.</td>
<td>Labels are too small to view or no important items were labeled.</td>
</tr>
<tr>
<td><strong>Graphics - Relevance</strong></td>
<td>All graphics are related to the topic and easy to understand. All borrowed graphics have a source citation.</td>
<td>All graphics are related to the topic and most are easy to understand. Some borrowed graphics have a source citation.</td>
<td>All graphics relate to the topic. One or two borrowed graphics have a source citation.</td>
<td>Graphics do not relate to the topic or several borrowed graphics do not have a source citation.</td>
</tr>
<tr>
<td><strong>Attractiveness</strong></td>
<td>The material is very attractive in terms of design, layout, and neatness.</td>
<td>The material is attractive in terms of design, layout, and neatness.</td>
<td>The material is acceptably attractive though it may be a bit messy.</td>
<td>The material is messy or very poorly designed. It is not attractive.</td>
</tr>
<tr>
<td><strong>Grammar</strong></td>
<td>There are no grammatical/mechanical errors in the material.</td>
<td>There are 1-2 grammatical/mechanical errors in the material.</td>
<td>There are 3-4 grammatical/mechanical errors in the material.</td>
<td>There are more than 4 grammatical/mechanical errors in the material.</td>
</tr>
</tbody>
</table>

**Total Score: /20**
Lesson 2: The Risk and Protective Factors of Using Drugs

Introduction

Lesson 2 gives the different risk and protective factors in substance use, abuse and drug dependence. Your learners will be able to discuss in depth the risk factors which contribute to drug abuse and protective factors which prevent it. Activities are prepared to help your learners analyze various situations they might encounter in real life.

OBJECTIVES

At the end of the lesson, the learners are expected to:

- discuss risk and protective factors in substance use, abuse and drug dependence
- analyze situations on the use and non-use of psychoactive substances
- state personal opinions about preventing drug use and abuse.
- write an essay about preventing drug use and abuse.

WHAT TO KNOW

Activity 8: Risk and Protective Factors

This activity will help your learners discuss the risk and protective factors regarding substance use, abuse and dependence. Give the following instructions for playing the game.
Say:

1. Bring a short bond paper cut crosswise. These will be your meta-cards. Don’t forget to bring a marker or crayons.
2. List a risk factor on one sheet. A risk factor is one that can result to using and abusing drugs. Write legibly.
3. List a protective factor on the other sheet. A protective factor is one that prevents them from using and abusing drugs. Write legibly.
4. Post the meta-cards for the risk factors on one side of the board and the meta-cards for the protective factors on the other side.
5. After you have posted your meta-cards, we are going to process your answers.

Give feedback on the learners’ answers. Ask more questions if the need arises.

The learners might have written the following factors:

<table>
<thead>
<tr>
<th>Risk Factors</th>
<th>Protective Factors</th>
</tr>
</thead>
<tbody>
<tr>
<td>Use of drugs at an early age</td>
<td>Good self-control</td>
</tr>
<tr>
<td>Risk taking behavior</td>
<td>Good reasoning skills</td>
</tr>
<tr>
<td>Lack of thought</td>
<td>Excellent social skills</td>
</tr>
<tr>
<td>Experimentation</td>
<td>Positive interaction with people</td>
</tr>
<tr>
<td>Poor social skills and interaction</td>
<td>Sense of belonging</td>
</tr>
<tr>
<td>Childhood problems</td>
<td>Good communication with people</td>
</tr>
<tr>
<td>Feelings of isolation</td>
<td>Positive family relationship</td>
</tr>
<tr>
<td>History and patterns of drug use</td>
<td>Clear and consistent family rules</td>
</tr>
<tr>
<td>Attitudes toward drug use</td>
<td>Strong family values</td>
</tr>
<tr>
<td>Poor parenting and child rearing</td>
<td>Positive expectation of child’s success in family, school and community</td>
</tr>
<tr>
<td>Inconsistent family rules</td>
<td>Reliance on family for emotional support</td>
</tr>
<tr>
<td>Poor family values</td>
<td>Association with peers and friends who do not use gateway drugs (cigarettes and alcohol)</td>
</tr>
<tr>
<td>Poor family ties</td>
<td>Preference to stay with peers and friends than with family</td>
</tr>
<tr>
<td>Association with peers and friends known to use gateway drugs (cigarettes and alcohol)</td>
<td>Poor academic performance</td>
</tr>
<tr>
<td>Preference to stay with peers and friends than with family</td>
<td>Lack of commitment to studies</td>
</tr>
<tr>
<td>Poor academic performance</td>
<td>Poor attendance in school</td>
</tr>
<tr>
<td>Lack of commitment to studies</td>
<td>Involvement in fights and conflicts</td>
</tr>
<tr>
<td>Poor attendance in school</td>
<td>Easy access to gateway drugs</td>
</tr>
<tr>
<td>Involvement in fights and conflicts</td>
<td>Poor community organization and neighborhood relationship</td>
</tr>
<tr>
<td>Poor implementation of community laws</td>
<td>Poor implementation of community laws</td>
</tr>
<tr>
<td></td>
<td>Positive attitude which combat drug use</td>
</tr>
</tbody>
</table>
- Negative norms and attitudes which favor drug use
- Strong community advocacy against drugs

Activity 9: **Reading Time!**

Ask the learners to read activity 7.

Activity 10: **You be the Judge of It!**

Ask the learners to read the editorial and answer the questions on their notebook, answer sheet or journal.

Questions:

1. What are the ideas of the editor to stop drug use, abuse and drug trafficking? Summarize these ideas.

   The learners should have included the three ideas in their answer:

   - The banning of portrayal of drug addicts and pushers in the film industry.
   - Strict laws and policies on drug trafficking and possession of drugs and paraphernalia.
   - Horrific videos of people dying from drug-related illnesses should be used by the government as advocacy materials for students to see and know the real deal about drug use and abuse.

2. Do you think the ideas of the editor will be effective? Why or why not?

   - Learners’ answers may vary. Accept answers but help process their ideas.

3. Do you have other ideas that might help stop drug use, abuse and trafficking? Write these ideas inside each box.

   - Learners’ ideas may vary. Accept all ideas but let them explain and defend their ideas.
WHAT TO PROCESS

Activity 11: Editorial Page

Encourage the learners to write their own editorial page about their personal thoughts in activity 10. Tell them to include their original editorial cartoon.

WHAT TO REFLECT ON AND UNDERSTAND

Activity 12: Role Play

Tell the class to form five groups. Let them choose a domain and role play a situation wherein they will try to prevent or avoid risk factors and strengthen protective factors. Time their performance for 3-5 minutes. Encourage them to show their hidden talent in acting.
## Rubric for Role Play

<table>
<thead>
<tr>
<th>Criteria</th>
<th>Excellent 4</th>
<th>Good 3</th>
<th>Adequate 2</th>
<th>Basic 1</th>
</tr>
</thead>
<tbody>
<tr>
<td>Works cooperatively with group</td>
<td>Always willing and focused during tasks and presentation.</td>
<td>Usually willing and focused during assigned tasks and presentation.</td>
<td>Sometimes willing and focused during assigned tasks and presentation.</td>
<td>Rarely willing and focused during assigned tasks and presentation.</td>
</tr>
<tr>
<td>Presentation and perspective</td>
<td>Convincing communication of character’s role, feelings, and motives.</td>
<td>Competent communication of character’s role, feelings, and motives.</td>
<td>Adequate communication of character’s role, feelings, and motives.</td>
<td>Limited communication of character’s role, feelings, and motives.</td>
</tr>
<tr>
<td>Use of non-verbal cues (voice, eye and body movements, props, costumes)</td>
<td>An impressive variety of non-verbal cues were used in an excellent way.</td>
<td>Good variety (3 or more) of non-verbal cues were used in a competent way.</td>
<td>An acceptable variety of non-verbal cues were used in an adequate way.</td>
<td>Limited variety of non-verbal cues were used in a developing way.</td>
</tr>
<tr>
<td>Information accuracy</td>
<td>Information appears to be always accurate.</td>
<td>Information appears to be usually accurate.</td>
<td>Information appears to be sometimes accurate.</td>
<td>Information appears to be rarely accurate.</td>
</tr>
</tbody>
</table>

**TOTAL:** /20
WHAT TO TRANSFER

Activity 13: Let’s Do an Essay

Give the learners several situations about drug use and abuse which they may encounter in real life. Tell them to choose one and write an essay about how they can prevent or avoid such a situation. Ask them to write the activity in your notebook or activity sheet. Limit their answers to 50-100 words. Use the rubric to assess output.

Rubric for Essay Writing

<table>
<thead>
<tr>
<th>Criteria</th>
<th>Advanced (5 pts.)</th>
<th>Proficient (4 pts.)</th>
<th>Approaching Proficiency (3 pts.)</th>
<th>Developing (2 pts.)</th>
<th>Beginning (1 pt.)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Content</td>
<td>Content surmount expectation. Treatment of details is advanced and in detail.</td>
<td>Content reaches expected result. Treatment of details is proficient and of good quality.</td>
<td>Content is near the expected result. Treatment of details approaches proficiency with some shallow lines.</td>
<td>Content is beyond the expected outcome. Details are in the developing phase and very shallow.</td>
<td>Content is very basic and lacks in-depth analysis.</td>
</tr>
<tr>
<td>Organization and Style</td>
<td>The structure of the essay is highly organized and shows consistency. There is variety in style which makes the essay very impressive.</td>
<td>The structure of the essay is organized and consistency is obvious. There is multiplicity in style which makes the essay impressive.</td>
<td>The structure of the essay is somewhat organized and coherent. There is somehow a multiplicity in style which makes the essay good.</td>
<td>The structure of the essay is not too organized and coherent. There is little variety in structure and subject.</td>
<td>Structure is unorganized and not coherent with the topic. There is no variety in structure and subject matter.</td>
</tr>
</tbody>
</table>
Lesson 3: Drugs of Abuse

Introduction
Lesson 3 deals with the classification of drugs of abuse. Your learners will be able to classify the drugs of abuse according to their effects on the body. Some of these drugs of abuse also have their medical purposes but are highly addictive if misused and abused. Your learners will be provided with information about the topic. Activities are provided to assist them in developing their knowledge, skills and attitudes about classifying drugs of abuse.

OBJECTIVES

At the end of the lesson, the learners are expected to:

- describe the classification of drugs of abuse
- classify drugs of abuse according to their effects on the body
- produce a table flipchart of the classification of drugs and their effects on the body
WHAT TO KNOW

Activity 14: **Body Frisking**

Let the learners do the activity. The answers are:

```
S B A S K I E T A D A L O N G A N
G E N S E N G D A N S N S P
N A D S S A V A D N \ C L
O R R P O G R A N T G N
T R A H O A N O P A R T
A S A L D E R A S B F
E L A D K N A S I N G
G A R I O R E O W Z
```

- Gateway drugs
- Depressants
- Stimulants
- Narcotics
- Hallucinogens
- Inhalants

Draw a suspicious looking person with his pocket designed as a crossword puzzle.

Activity 15: **Reading Time!**

Ask the learners to read and understand the “Classification of Drugs of Abuse”.

WHAT TO PROCESS

Activity 16: **The Drug Concept Map**

Instruct the learners to copy the concept map in their notebook or activity sheet. Tell them to add information to complete the map.

Learners’ answers may vary. The possible answers are on the next page.
WHAT TO REFLECT ON AND UNDERSTAND

**Activity 17: Relay Game**

Organize a relay game. This game can be played indoors or outdoors. Group the class into teams with six members. Each member will have a meta-card with each class of drugs written on it. You will give a statement or phrase connected with the drugs of abuse. Instruct that a member who thinks that the meta-card he/she is holding as the
one being described by the statement or phrase should run in front and stay inside the circle.

Give the following direction:

1. Form a team with six members.
2. Each member will make a meta-card. Write on each meta-card a class of drug using markers. Write legibly. There will be six meta-cards per group.
   - Meta-card 1: GATEWAY DRUGS
   - Meta-card 2: DEPRESSANTS
   - Meta-card 3: STIMULANTS
   - Meta-card 4: NARCOTICS
   - Meta-card 5: HALLUCINOGENS
   - Meta-card 6: INHALANTS
3. Position as shown in the diagram. Show the class the diagram.
4. You will read a statement or phrase: The person with the name of the drug I am referring to should run to the circle. Tell the class to wait for the signal “GO!” before running inside the drawn circle.
5. Once inside the circle, raise the meta-card you are holding up high.
6. I may inquire about your answers.
7. I will then give the correct answer and will briefly explain.
8. I will record the number of correct answers garner by the team.
9. Please return to your line upon my cue.

Figure of relay game

WHAT TO TRANSFER

Activity 18: Let’s Make a Table Flipchart

Ask your learners to make a flipchart about how drugs are classified and their effects on the body.
Say the following:
1. Make a chart of the classified drugs and how they affect the body.
2. Submit the draft before finalizing your flipchart so that I can correct information.
3. Print or write the chart on short bond papers glued on old folders.
4. Please include pictures and images related to your topic.
5. You are allowed to use other materials you are comfortable with.
6. Don’t forget to make your flipchart attractive.
7. Please submit on the agreed date. (Say when the agreed date is)

You will use the rubric on the next page to guide you in your learners’ flipcharts.

**Rubric on Table Flipchart Making**

<table>
<thead>
<tr>
<th>Criteria</th>
<th>Advance (5 pts.)</th>
<th>Proficient (4 pts.)</th>
<th>Approaching Proficiency (3 pts.)</th>
<th>Developing (2 pts.)</th>
<th>Beginning (1 pts.)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Accuracy of content</td>
<td>All information is true and correct.</td>
<td>Almost all information is true and correct.</td>
<td>Much of the information is true and correct.</td>
<td>Not much of the information is true and correct.</td>
<td>Information is not true and correct.</td>
</tr>
<tr>
<td>Visual attractiveness</td>
<td>Format and lay-out are exceptionally attractive.</td>
<td>Format and lay-out are attractive.</td>
<td>Format and lay-out are organized.</td>
<td>Format and lay-out lacks organization.</td>
<td>Format and lay-out are disorganized.</td>
</tr>
<tr>
<td>Graphics and pictures</td>
<td>Graphics and pictures go well with the content and information.</td>
<td>Graphics and pictures are good but are too many that they dominate the material.</td>
<td>Graphics and pictures are good but are too few that texts dominate the material.</td>
<td>Graphics and pictures do not go well with the text making the material disorganized.</td>
<td>No graphics and pictures are used in the making of the material.</td>
</tr>
<tr>
<td>Grammar and spelling</td>
<td>No grammatical errors and/or misspelled words.</td>
<td>1-3 grammatical errors and/or misspelled words.</td>
<td>4-6 grammatical errors and/or misspelled words.</td>
<td>7-9 grammatical errors and/or misspelled words.</td>
<td>10 or more grammatical errors and/or misspelled words.</td>
</tr>
</tbody>
</table>

Total score: / 20
Lesson 4: Myths, Misconceptions, Signs and Symptoms of Drug Abuse

Introduction
Lesson 4 analyzes the different myths and misconceptions about substance use and abuse. Your learners will learn to describe the signs and symptoms of drug use and abuse among Filipino teenagers. Activities are provided to further enhance their current knowledge, skills and attitudes on the said topics.

OBJECTIVES

At the end of lesson the learners are expected to:

- analyze myths and misconceptions about substance use and abuse
- describe signs and symptoms of possible substance use and abuse among adolescents
- conduct an interview about myths, misconceptions, signs and symptoms of substance use and abuse
- create an advocacy brochure about the truth of drug use and abuse and the signs and symptoms of drug use and abuse

WHAT TO KNOW

Activity 16: Reading Time!
Ask the learners to read activity 16.
Ask the following guide questions. Accept their answers but don’t forget to process these.

1. What do you know about drugs and drug abuse?
2. How can you tell if someone is a drug user?

**Activity 19: Interview**

Tell the learners to group themselves into five groups. They will conduct interviews of three persons. They can be professionals, students or somebody from their community. Tell them to construct/write out interview questions focused on the following:

1. Myths and Misconception of Drug Use and Abuse
2. Signs and Symptoms of Drug Use and Abuse

They should get the profile/personal details of the person they are interviewing. Ask them to record their interviews. Process the outcome of the interviews.

**WHAT TO PROCESS**

**Activity 20: Table of Signs**

Show the class a table showing the signs and symptoms of drug abuse. Ask them to study the information and make their own table entitled “Signs and Symptoms of Drug Use and Abuse”

<table>
<thead>
<tr>
<th>Physical Changes</th>
<th>Mental Changes</th>
<th>Emotional Changes</th>
<th>Social Changes</th>
<th>Moral-spiritual Changes</th>
</tr>
</thead>
<tbody>
<tr>
<td>- lousy appearance</td>
<td>- Declining interest in</td>
<td>- Easily gets irritated</td>
<td>- does not want to be with</td>
<td>- no longer attends church</td>
</tr>
<tr>
<td>- wears sunglass even</td>
<td>studies and work</td>
<td>and hotheaded</td>
<td>other people</td>
<td>services</td>
</tr>
<tr>
<td>in appropriate times</td>
<td>- Negative outlook in</td>
<td>- depression and loneliness</td>
<td>- frequent socialization with</td>
<td>- no longer concerns self</td>
</tr>
<tr>
<td>- easily gets</td>
<td>life</td>
<td>- extreme mood swings</td>
<td>known</td>
<td>with morality</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>tired</td>
<td>poor judgment</td>
<td>drug users</td>
<td></td>
<td></td>
</tr>
<tr>
<td>-------</td>
<td>---------------</td>
<td>------------</td>
<td></td>
<td></td>
</tr>
<tr>
<td>- reddish eyes</td>
<td>- loss of inhibition</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>- drastic weight loss</td>
<td>- loss of concentration</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>- complaints of headaches &amp; stomach pains</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>- convulsions</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>- attacks of cough and runny nose</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>- brown stains on fingertips</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>- foul breath</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>- body odor</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>- poor body coordination &amp; balance</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>- loss of interest in sports and other physical activities</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

### Activity 21: Acrostic Poem

Instruct the learners to make an acrostic poem about breaking the myths and misconception about drugs. Tell them to use the letters of the words “SAY NO TO DRUGS” as the first letter of each stanza. Below is an example of an acrostic poem.

```
Say no to drug use, abuse and addiction,
Alternative ways are many, fun and enjoyable,
Young generations heed my call and aspirations,

Never should you try and experiment with dangerous substances,
Oh! Take care of yourself and your loved ones,

Tobacco, alcohol, marijuana and shabu,
Only will destroy your body, dreams and life,

Destruction is inevitable if you take drugs and other dangerous substances,
Read health books to know its harmful effects,
Understand the implications of taking and using drugs,
Go and say no to drugs,
Seek help from responsible individuals and agencies.
```
WHAT TO REFLECT AND UNDERSTAND

Activity 22: News Casting

Instruct the learners to group themselves into small groups. Tell them to plan their live news casting about myths, misconceptions and signs of drug use and abuse. Explain that some members can be field reporters or ordinary people who get to be interviewed. The class will share their insights on the report. Process the activity.

WHAT TO TRANSFER

Activity 23: Advocacy Brochure

Ask your learners to create an advocacy brochure about the truth of drug use and abuse and their signs and symptoms. Tell them to campaign against drug use and abuse. You will review and approve the advocacy brochure. Don’t forget to remind them to produce ten copies of their advocacy brochure and distribute it to their friends. Tell them to let their friends sign on a piece of paper as proof of receipt. Schedule when the original brochure will be submitted to you with the receipt form. Use the rubric on the next page to assess your learners’ output.
## Rubric for Advocacy Brochure Making

<table>
<thead>
<tr>
<th>Criteria</th>
<th>Advance (5)</th>
<th>Proficient (4)</th>
<th>Approaching Proficiency (3)</th>
<th>Developing (2)</th>
<th>Beginning (1)</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Accuracy of content</strong></td>
<td>All information is true and correct.</td>
<td>Almost all information is true and correct.</td>
<td>Much of the information is true and correct.</td>
<td>Not much of the information is true and correct.</td>
<td>Information is not true and correct.</td>
</tr>
<tr>
<td><strong>Visual attractiveness</strong></td>
<td>Format and lay-out are very attractive.</td>
<td>Format and lay-out are attractive.</td>
<td>Format and lay-out are organized.</td>
<td>Format and lay-out lack organization.</td>
<td>Format and lay-out are disorganized.</td>
</tr>
<tr>
<td><strong>Graphics and pictures</strong></td>
<td>Graphics and pictures go well with the content and information.</td>
<td>Graphics and pictures are good but are too many that they dominate the material.</td>
<td>Graphics and pictures are good but are too few.</td>
<td>Graphics and pictures do not go well with the text making the material disorganized.</td>
<td>No graphics and pictures are used in the making of the material.</td>
</tr>
<tr>
<td><strong>Grammar and spelling</strong></td>
<td>No grammatical errors and/or misspelled words.</td>
<td>1-3 grammatical errors and/or misspelled words.</td>
<td>4-6 grammatical errors and/or misspelled words.</td>
<td>7-9 grammatical errors and/or misspelled words.</td>
<td>10 or more grammatical errors and/or misspelled words.</td>
</tr>
<tr>
<td><strong>Writing organization</strong></td>
<td>All parts of the material have a beginning, middle and an end.</td>
<td>Almost all parts of the material have a beginning, middle and an end.</td>
<td>Most parts of the material have a beginning, middle and an end.</td>
<td>Only a small part of the material has a beginning, middle and an end.</td>
<td>Writing is unorganized which makes it hard to express the message.</td>
</tr>
</tbody>
</table>

**Total score:** 25/25
Lesson 5: Short Term and Long Term Effects of Substance Use and Abuse

Introduction
Lessons 5 and 6 discuss the harmful short term and long term effects of substance use and abuse on the body. The learners will be asked to discuss the harmful effects of substance use and abuse on the different domains of life namely: self, family, school and community. Various activities will help them reflect on and what they have learned and help them develop their resistance to drugs. They will also develop decision-making skills in the process.

OBJECTIVES

At the end of this learning material, the learners are expected to:

- discuss the harmful short-term and long-term effects of substance use and abuse on the body
- discuss the harmful short-term and long-term effects of substance use and abuse on the following domains:
  - Self
  - Family
  - School
  - Community
- discuss the relationship between drug use and the incidence of HIV-AIDS
- explain the health, socio-cultural, psychological, legal and economic dimensions of substance use and abuse

WHAT TO KNOW

Activity 22: Reading Time!
Instruct the learners to read and understand activity 22.
WHAT TO PROCESS

Activity 23: Dear Diary

Motivate the learners to write a letter addressed to their selves. They should tell about the dangerous short-term and long-term effects of drugs to oneself, family, school, community and the nation as a whole. Tell them to have their English teacher check their grammar. You should check the content. Plan when the letter will be submitted to you.

Activity 24: Drugs as a Burden to the World

Instruct the learners to think of a creative way of showing how drugs are a burden to the health, socio-cultural, psychological, legal and economic dimensions. Tell them that they may write a poem, a song, draw a cartoon, poster, etc. Ask them to share their creative works in the class.

WHAT TO REFLECT AND UNDERSTAND

Activity 25: Dear Sir/Madam

Prompt the learners to make a recommendation letter addressed to their mayor or barangay captain about the dangers brought by drug abuse in the community. They should cite possible evidences of drug abuse like the presence of “hamog boys”, “rugby boys”, etc. Plan when the letter will be submitted for evaluation.
WHAT TO TRANSFER

Activity 26: Advocacy Video

Instruct the class to form five groups. They should create an advocacy video about drug abuse and its effects on the body. They can use video camera recorders, tablets or their cellphone camera. Their videos will be reviewed by three teachers including you during the film viewing.

Lesson 6: Prevention and Control of Substance Use and Abuse

Introduction

Lesson 6 deals with different strategies in the prevention and control of substance use and abuse. These strategies include application of decision-making skills and the use of resistance skills in different situations related to substance use and abuse. Decision-making and resistance skills will help your learners enhance their knowledge, skills and attitude in facing and overcoming real-life situations. You will facilitate and guide the learners in the practice of these skills in class. You will also motivate the learners to suggest healthy alternatives to prevent the use of drugs of abuse.

OBJECTIVES

At the end of the lesson, the learners are expected to:

- discuss strategies in the prevention and control of substance use and abuse
• apply decision-making and resistance skills in situations related to substance use and abuse
• describe healthful alternatives to substance use and abuse

WHAT TO KNOW

Activity 27: Reading Time!
Instruct the learners to read activity 27.

WHAT TO PROCESS

Activity 28: Play List
Tell the learners to list several alternative ways to prevent and control drug use and abuse. Let them bring pieces of paper on which to write down specific programs and activities which can prevent and control drug use and abuse.

Activity 29: What Will you Do?
Instruct the learners to apply decision-making and resistance skills to the following situations. Tell them to role-play these situations. Let the class analyze and critique the learners’ decisions and resistance skills used in the play.
WHAT TO REFLECT AND UNDERSTAND

Activity 30: Armor Shield

Motivate the learners to create their very own armor shield against drug use, abuse and dependence. Tell them to be very creative. Their armor shield will look like an emblem. Ask them to present their shield in class; then submit it to you for assessment.

WHAT TO TRANSFER

Activity 31: Let’s Make a Game

Ask your learners to create a board or card game about prevention and control of substance use and abuse. The game should be unique and should focus on educating players about the importance of substance use and abuse prevention and control. The board game should include elements of temptation to use drugs, resistance skills and decision-making skills in resisting drug use. Encourage them to utilize indigenous materials to minimize expenses. Use the rubric on the next page to assess their output.
<table>
<thead>
<tr>
<th>Criteria</th>
<th>Visual Appearance</th>
<th>Relevance with the topic</th>
<th>User-friendly and grammar use</th>
</tr>
</thead>
<tbody>
<tr>
<td>Advanced (5 pts.)</td>
<td>The game looks very attractive to play. Most elements and principles of design are included.</td>
<td>The game is relevant to the topic. Additional healthy information is included in the game.</td>
<td>The game is very easy to play. Direction for use is provided. Grammar is correct and all words are spelled correctly.</td>
</tr>
<tr>
<td>Proficient (4 pts.)</td>
<td>The game is attractive to play. Several elements and principles of design are included.</td>
<td>The game is relevant to the topic. There are few additional healthy information included.</td>
<td>The game is easy to play. Direction for use is provided. Grammar is correct with 1-2 misspelled words.</td>
</tr>
<tr>
<td>Approaching Proficiency (3 pts.)</td>
<td>The game is good to play. Few elements and principles of design were included.</td>
<td>The game developed is quite relevant with the topic. There are no efforts to add new healthy information.</td>
<td>The game is quite easy to play. Direction is provided with minimal grammatical errors and 3-4 misspelled words.</td>
</tr>
<tr>
<td>Developing (2 pts.)</td>
<td>The game lacks the attractiveness to lure players to play the game. Elements and principles of design are not properly utilized.</td>
<td>The game is still in the developing stage. Some topics are not in line with the expected concepts.</td>
<td>The game is somewhat hard to follow. Direction is provided but hard to follow because of many grammatical errors. There are 5-10 misspelled words.</td>
</tr>
<tr>
<td>Beginning (1 pt.)</td>
<td>The game is not attractive. Players are not lured to play the game. There are no elements and principles of design incorporated in the game.</td>
<td>The game is not in line with the topic. There is no learning in playing the game.</td>
<td>The game cannot be played because of unclear direction. There are many grammatical errors and more than 10 misspelled words.</td>
</tr>
</tbody>
</table>

Total Score: 15 points
GENERALIZATION

The present drug scenario in the Philippines is changing. Illegal manufacturing and trafficking of drugs of abuse are activities that are prosecuted by the government. Local and international drug syndicates are hunted down and apprehended.

Drugs by nature are good. They are used to treat illnesses, help calm down patients with mental disorders or relieve pain and suffering. The illicit use of drugs is the result of greediness in men creating chaos and disorder in society. In the Philippines, the most commonly used drugs are shabu, marijuana and inhalants or solvents.

Drugs of abuse are classified according to their effects on the body. Drugs are classified as: includes gateway drugs, depressants, stimulants, hallucinogens, narcotics and inhalants. Some people have myths and misconceptions regarding drug use.

Various risks of drug use have been discovered by medical science. These risks are called effects. Effects are either short-term effects or long-term effects. One of the effects of drugs particularly drugs that are injected into the blood stream is the risk of HIV-AIDS contamination. HIV-AIDS in the Philippines is continuously growing, posing a threat to every Filipino, his/her family, and the community. Generally, effects of drug use affect the following domains: self, family, school and community.

With the continuous presence of drugs in our society, the government along with non-governmental organizations and private institutions find alternative ways to prevent and control the spread of drug addiction and dependence in the country. These healthy alternatives are effective strategies to educate, advocate and promote a drug-free community.