St Brigid's College

Titan Education

Year 9 HPE

2024 STUDENT eWORKBOOK

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Key

You may see the following icons throughout this workbook. Here's what they mean:

S	Self-managed skills		Information and communication technology capability
I	Interpersonal skills		Intercultural understanding
M	Movement skills		Literacy
	Aboriginal and Torres Strait Islander histories and cultures		Numeracy
	Asia and Australia's engagement with Asia		Personal and social capability
	Sustainability		Civics and citizenship
	Critical and creative thinking		Difference and diversity
	Ethical understanding		Work and enterprise

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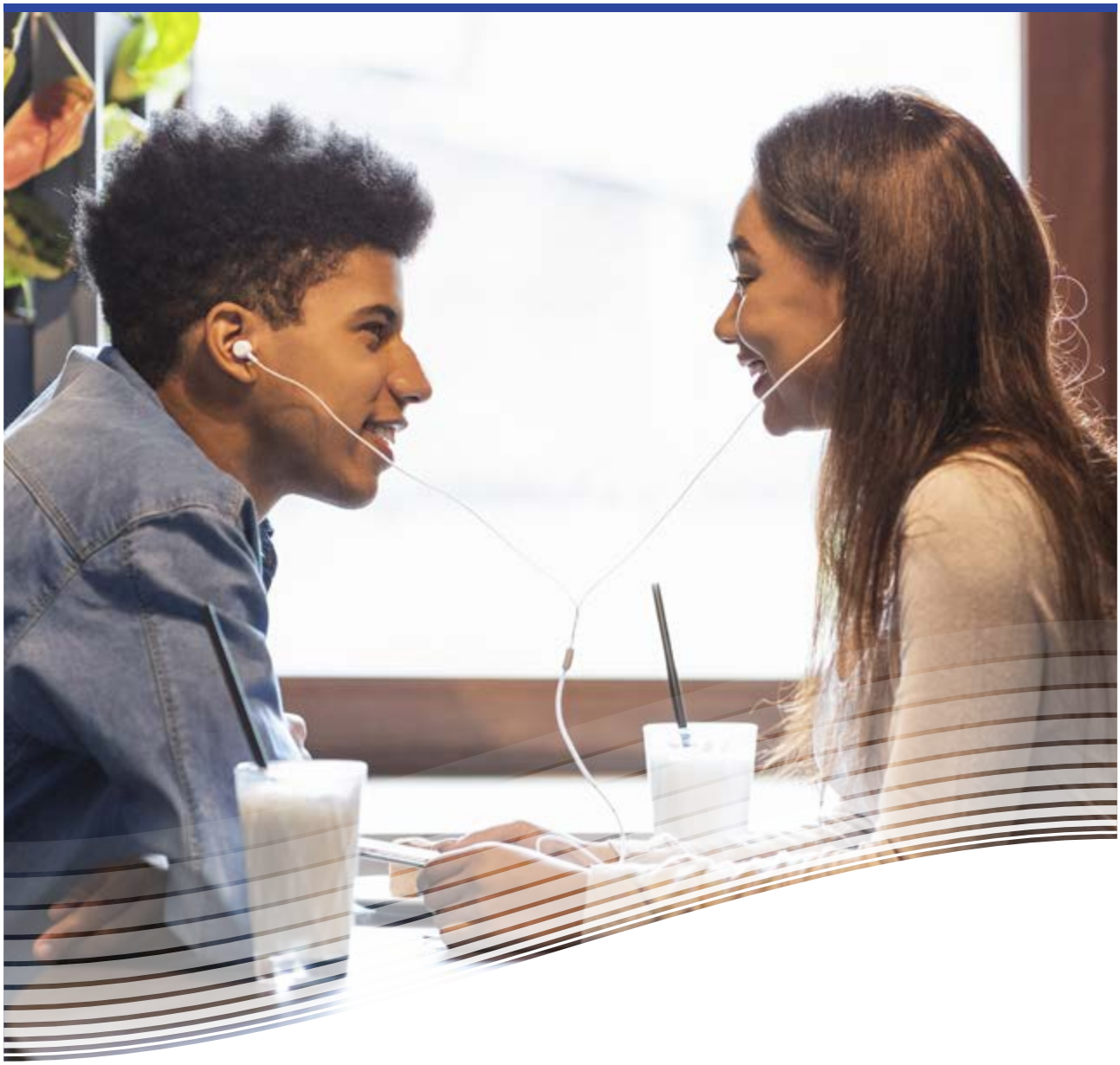

Respectful relationships

Titan Education
Customised learning

Activity

Vocabulary list

Key terms from this unit are listed in the table below. Complete the activity by:

- providing a definition for each term
- correctly using the term in a sentence.

Term	Definition	Sentence using the term
Compromise		
Negotiation		
Empathy		
Prejudice		
Harassment		
Conflict resolution		
Domestic violence		
Network		
Rapport		
Abuse		
Assertiveness		
Responsibilities		

ICT tasks

In this unit of work, you will have the opportunity to use technologies to further your health literacy. Your learning experiences will involve:

Critical inquiry

- Research the incidence of domestic violence reported in the media. Present your findings and examples in digital format.
- Research the concept of 'positive relationships' and prepare a report on what it means to you.
- Research what resources are available online for young people who are considering starting an intimate relationship. Analyse this content and whether there is any important information missing.

Collaborating

- Working with a partner research and record information on support services for victims of domestic violence. Create a PDF outlining your findings.
- Research the prevalence of domestic violence in Australia. Record statistics and trends and present using ICT software. Present and discuss your findings in small groups.

Presenting

- Create a digital information guide on discrimination to be distributed to students in your school. The guide should include definitions, statistics, consequences, laws and where to go for help.

Creating

- Create a podcast detailing what an equal and respectful relationship looks and feels like.
- Create a blog discussing common causes of conflict in relationships and assertive conflict resolution strategies.
- Create a health promotion to support other young people as they face common issues affecting young people, such as bullying, harassment or cyberbullying.
- Create a true/false quiz on the topic of refugees in Australia that will test the class's knowledge. Include answers and present the quiz on an interactive whiteboard if available.
- Create a cartoon depicting an intimate relationship where rights and responsibilities are not respected. Present to the class and pose questions for the rest of the students to answer.

Desktop publishing

- Create a collage of digital images depicting what a healthy relationship looks like.
- Create a mind map using software (such as http://bubbl.us) to represent what you consider to be the desirable qualities of a boyfriend/girlfriend.

Relationships

Relationships place people in social situations where they develop skills with decision-making, negotiation, effective communication and empathy. Healthy relationships involve support, consideration, respect and an appreciation for shared core values (the principles and standards that mean the most to you). Decisions are often made based on core values.

Sometimes making important decisions takes courage. Support from healthy relationships with peers, parents, grandparents, adults in authority or dating partners can reduce fear and anxiety. Positive support from these healthy relationships can provide a valuable influence in people's lives – it is empowering.

Empowerment can be experienced through encouragement. It is a feeling of being strengthened and able, even in challenging circumstances. Individuals should think about how they want to treat the people they care about and the ways that they can help them to feel empowered in difficult situations.

Dating relationships can influence an individual's confidence levels and self-esteem. A healthy dating relationship is one that is empowering rather than intimidating. Equality, kindness and respect are found in healthy relationships, rather than an imbalance of power and control.

Taking a caring approach in dating relationships shows core values involving compassion, consideration and kindness. Dating someone with similar core values should make an individual feel more understood. Conversely, dating someone with differing core values may lead to conflict and misunderstandings. For example, someone who values intense effort with work to achieve fast results may clash with dating a partner who places more value on leisure time (rather than someone who has the same work ethic).

More intense conflict could arise from value differences related to trust, loyalty and communication. Dating someone with similar core values can lead to far more happiness and a sense of unity.

Activity

1. Define the term ‘empowerment’ in your own words.

2. From the list below, tick the ten most important core values that you would expect a dating partner to share and demonstrate.

Core values

☐ commitment	☐ clarity	☐ persistence	☐ integrity
☐ creativity	☐ relaxation	☐ productiveness	☐ openness
☐ reliability	☐ humility	☐ optimism	☐ discretion
☐ diligence	☐ protectiveness	☐ realistic thinking	☐ responsibility
☐ health	☐ curiosity	☐ laughter	☐ teamwork
☐ honesty	☐ competency	☐ seriousness	☐ leadership
☐ imagination	☐ sincerity	☐ justice	☐ speed
☐ kindness	☐ playfulness	☐ knowledge	☐ steadiness

3. Justify why you have chosen these values.

Critical inquiry

Investigate information about healthy relationships. Develop a list of questions that people could use to analyse their relationship to determine whether it is supportive of their wellbeing. For example, "do you feel physically and emotionally safe with your partner?". Share your work with others in the class and receive/give feedback.

Relationships with parents

Relationships are complex, unique and are always changing. Throughout adolescence, many of our relationships will be challenged because this is a period where individuals are maturing and may want to spend more time with peers and less time with family, particularly parents.

Sometimes it may feel like parents do not understand their child anymore, like they just want to control them and say no to everything. This is not the case. Every parent went through this stage as well, and probably had the same arguments with their parents.

This is a time for finding an appropriate balance between what an adolescent wants and what parents think is best. During this stage, it is healthy to sit down and talk about things that could help with effective communication. Some useful strategies to employ include:

- Using 'I' statements – Using 'I' statements is an effective way for an individual to vocalise how they feel without making parents feel blamed. For example, if a teenager was to say "You never listen to me!", parents might get defensive and respond only with "Yes we do!" – so the point is lost. However, if a teenager instead says "I feel like my voice isn't heard", parents are more likely to be considerate because it is less forceful.
- Write a letter – Writing a letter gives an individual time to analyse how they feel and really say what they are thinking without being in the heat of the moment and saying things they regret. It's also worth remembering, however, that a letter is permanent and what is said in a letter can be very powerful. On consideration, after calming down, it may be worth keeping the letter for further self-reflection.
- Breathe – In the heat of the moment, thoughts can be scattered and unclear. Before saying anything, individuals should take a couple of breaths to centre themselves and gather their thoughts. This way they have more control over what they are saying.
- Listen – It is important for teenagers to listen to their parents, even if they do not agree with what is being said, because they may also feel like they haven't been understood or that their opinion isn't being valued. It's possible to show someone respect even when in a disagreement. Respectful conflict resolution can help the situation much quicker without tension.

Conflict is unavoidable at times, but it is addressed with a level head and other points of view are considered, issues can be resolved more quickly. After any conflict, it is also important to rebuild the relationship. Sometimes people say things they don't mean (parents included). Once everyone has had time to cool down and evaluate what has happened, it is then important to nurture the relationship so that no underlying tension is left simmering.

Questions

Reflect on a time you have had conflict with your parents.

1. What went wrong?

2. How did you raise your concerns?

3. Were your feelings acknowledged/listened to?

4. Did you acknowledge/listen to your parents concerns?

5. Were you happy after the conflict had ended? Why/why not?

6. Using the strategies on the previous page, discuss how the situation could have been handled differently.

Developing equal and respectful relationships

Everyone needs equal and respectful relationships.
New relationships should have ground rules and boundaries so that both people feel safe – emotionally and physically – and are able to express their thoughts, beliefs and opinions.
Power in a relationship can result from many factors.
These include:

- age
- maturation
- gender
- intelligence
- physical size
- popularity.

It is important in a healthy relationship that power is used in a positive way. Examples of power being used in a positive way include:

- parents addressing their teen child's opinion on boundaries and curfew when going out on the weekend
- mentoring a younger student with learning difficulties
- welcoming an exchange student into a peer group
- speaking up for a friend that is being bullied at school.

Activity

1. Outline why ground rules and boundaries are important in all relationships.

2. Describe the skills that are needed to be able to do this.

ICT task

For more information about developing equal and respectful relationships, watch the YouTube video at https://youtu.be/Z3kmDAkd0tQ

Diversity and inclusive relationships

Relationships are powerful influences on overall health. In Australia's diverse population, being able to form meaningful, respectful relationships with people that are different is very important. Trusting, inclusive relationships bind communities together and allow people to connect with others. Whether people have a different sexual preference, or come from a different cultural, religious or socioeconomic background, it's important everyone gets along.

Activity

1. Describe the culture with which you associate. Hint: you might describe your gender, cultural background, disability or health status, religious affiliation, if you live in an urban or rural area, socioeconomic status.

2. What opportunities are there in your life for you to connect with people from other cultures?

3. What strategies do you think would help you to reach out and connect with people who are different to you?

4. What benefits do you expect might come from establishing relationships with people from different cultures?

Rights and responsibilities in relationships

Rights refer to the freedoms individuals are entitled to. They are usually related to forms of legislation in various communities. While rights are legal entitlements, responsibilities refer to social and moral principles which individuals should, or are expected to, adhere to. They are the actions you take that demonstrate respect for other's rights.

Activity

In groups of 3–4, establish the rights and responsibilities that all individuals are entitled to in a positive relationship. Record your responses in the table below.

Rights	Responsibilities

To learn more about rights and responsibilities in relationships, watch the YouTube video at https://youtu.be/Gn7ZQ2x0cOE.

Activity

To maintain positive relationships it is important to consider the thoughts and feelings of others and respect their rights and opinions. Read the scenarios and answer the questions that follow.

Scenario 1: Your cousin has come to stay and has to share a room with you. Your room is really crowded and you are feeling frustrated.

1. You both have the right to feel safe and protected. To ensure this, what are:

a. Your responsibilities?

b. Your cousin's responsibilities?

Scenario 2: At school camp you walk into your cabin and notice a roommate wearing one of your shirts. You believe they went into your bag to get it.

2. How are your rights not being respected?

3. If you were a teacher at the school camp, what responsibilities would you have in this situation?

Scenario 3: Your parents have gone away for the weekend and you have been left at home with your older sister and her boyfriend. You do not like the way he looks at you and you feel uncomfortable.

4. How are your rights being violated?

5. What are your sister's responsibilities in this situation?

Scenario 4: While sitting in class, your teacher explains that you are pressed for time to finish the lesson and therefore not required to look at Aboriginal culture in a particular subject. There are no Aboriginal or Torres Strait Islander students in your class.

6. What policy is the teacher violating?

7. As the Principal of the school, what responsibilities do you think you have and how should you act upon these responsibilities?

Scenario 5: You are waiting at a bus stop and notice an individual in a wheelchair waiting alongside you. As the bus approaches, you see that it appears to be very crowded.

8. What are some potential responsibilities of individuals without a disability in this situation, both at the bus stop and on the bus?

9. What rights does the individual in the wheelchair have to get onto the bus?

Conflict resolution

Conflict is a normal, inevitable part of relationships, as everyone has different values, goals and opinions. Resolving conflict and effective communication is important in establishing and maintaining positive relationships.

Activity

1. List a range of things that could cause conflict in relationships.

2. Define the term 'conflict resolution'.

3. Describe a conflict that has affected you personally or one that you have witnessed in your peer group.

4. Explain what could be done and said by those involved in the conflict and those that support them.

Positive friendships and empathy

Positive friendships are caring and supportive. Part of being a caring friend is to be able to think about the feelings that your friend is experiencing. Having empathy means putting yourself into someone else's shoes, to be able to sense and understand their feelings. Often, empathy is a quality of friendships that can last for a long time.

Activity

Describe how empathy is shown in the images below…

Questions

List some qualities of positive friendships…

Strategies for managing emotional responses

Relationships can cause a range of emotional responses. These can be happiness, warmth, love and thrill as well as irritation, frustration and anger. Even healthy relationships can experience moments where there are negative emotions. These negative emotions may be a sign that there is conflict or an issue within the relationship that needs to be addressed. Knowing how to manage the emotions that you are feeling during times of conflict, can help to maintain healthy relations within the family, socially and online.

Activity

Explain how the following steps can help an individual manage conflict…

1. Stop

2. Calm down

3. Process

Conflict resolution

Conflict can be settled by various processes, including negotiation, mediation, agreement and resolution. Each process is dependent on the nature of the conflict. There are three outcomes of any conflict resolution process: all the parties benefit, some of the parties benefit or none of the parties benefit. Conflict can be approached in various ways, depending on a person's or group's disposition and their type of approach (i.e. assertive, cooperative, passive or aggressive).

Processes

Conflict resolution comprises a range of processes where the focus is on lessening or eradicating the sources of the conflict. The most common and effective processes are negotiation, mediation, agreement and resolution. If they are used correctly, all the individuals or parties involved in the conflict should feel they have been listened to and respected, that they have listened to and respected the other individual or party, and that a fair agreement has been reached.

Activity

Define the following terms commonly used in the conflict resolution process.

Negotiation

Agreement

Mediation

Resolution

Outcomes of conflict resolution

When a conflict arises, there are three main outcomes: 'win-win', 'win-lose' and 'lose-lose'.

- Win-win is the ideal outcome and occurs when all the parties are satisfied with the resolution of the conflict – that is, everybody wins. A win-win outcome is the result of crucial cooperation and compromise among the group members.
- Win-lose occurs when one or more of the parties is satisfied whereas one or more of them is disgruntled and/or discontent. A win-lose outcome is often unavoidable, especially when the parties are unwilling to compromise or negotiate.
- Lose-lose occurs when all the parties are dissatisfied with the outcome – that is, nobody wins.

Activity

Research the key characteristics of each conflict resolution outcome in the table below.

Outcome	Characteristics
Win-win	
Win-lose	
Lose-lose	

Revision

1. Analyse and describe how relationships can change as you get older.

2. List four qualities of respectful relationships.

3. What are the different types of abuse?

4. Choose one of the types of abuse you listed in question 3 and explain it in more detail.

5. Describe why it may be difficult for victims of domestic violence to access support services.

6. Describe the skills and attributes that are helpful in times of conflict.

7. Explain why exclusion is a type of bullying.

8. Describe three protective actions you can take if you are being cyberbullied.

Consent laws

There is a growing community awareness of the need to clarify and strengthen issues relating to sexual consent. State governments across Australia are addressing whether or not their laws sufficiently protect vulnerable people and act as a strong deterrent for offenders. NSW is the first state to pass new legislation requiring people to provide affirmative consent, while Victoria and the ACT have committed to following suit and a review is currently underway in Western Australia.

The new laws in NSW introduce a number of changes to the way sexual consent is defined and how it is established in legal proceedings. One of the key changes is the introduction of an "active and voluntary agreement" standard for sexual consent. This means that consent must be explicitly given by all parties involved and must be actively communicated throughout the sexual encounter. The laws also make it clear that a person cannot give consent if they are asleep, unconscious, or too intoxicated to give consent.

The new laws also place greater responsibility on the accused to ensure that consent has been given. Under the new laws, the accused must take reasonable steps to ensure that the other person is consenting, and they must stop if they become aware that consent has been withdrawn. The laws also provide greater protections for survivors of sexual assault, including the ability to give evidence anonymously and increased access to support services.

The introduction of these new laws has been widely praised by sexual assault survivors and advocacy groups. However, some critics have argued that the laws are too vague and that they may lead to false accusations or confusion in legal proceedings.

Overall, the reviews of consent legislation by state governments represents an important step towards ensuring greater protection and support for survivors of sexual assault. By clarifying the meaning of consent and placing greater responsibility on the accused to ensure that it has been given, new laws have the potential to shift the cultural attitudes towards sexual assault and help prevent future instances of sexual violence.

Activity

1. Define consent.

2. Explain how these words apply to sexual consent:

a. Explicit:

b. Mutual:

c. Informed:

d. Reversible:

e. Freely given:

3. What underpinned the need for state legislators to review the issue of sexual consent?

4. Analyse how consent is portrayed in media, such as movies and television shows. Discuss how these portrayals can impact a person's understanding of consent and how to differentiate between healthy and unhealthy portrayals of sexual encounters.

5. Working with a partner, discuss common misconceptions about consent, such as:

a. Consent is only necessary for penetrative sex.

b. Silence or lack of resistance implies consent.

c. Consent is a one-time agreement.

d. A person cannot be sexually assaulted if they were dressed provocatively or flirting.

e. Consent cannot be withdrawn.

f. Only women can be victims of non-consensual sex.

g. Consent is not necessary if the person is in a relationship.

h. A person can give consent if they are underage.

Case study

Ashley is a 17-year-old high school student who enjoys spending time with her friends and going to parties. One weekend, she attends a house party with a group of her friends where she consumes a lot of alcohol and becomes quite drunk. She begins to dance and flirt with a boy, who is also intoxicated. The boy takes her dancing and behaviour as a sign of willingness to engage in sexual activity.

The dancing and excessive drinking is starting to make Ashley feel ill and the boy suggests that she should have a lie down. He proceeds to take Ashley to a private room and attempts to have sex with her. Ashley is too drunk and unwell to fully understand what is happening and is unable to give her consent. The boy continues to pressure her and as she is not complaining or struggling, he assumes that she is agreeing to have sex.

The next day, Ashley wakes up feeling confused and violated. She confides in a close friend about what happened, who encourages her to seek help from a trusted adult. Ashley speaks to her school counsellor and explains what happened at the party. The counsellor listens to Ashley and validates her feelings. After gaining her trust, the counsellor provides information about resources available to victims, including medical services, legal resources, and support groups.

With the support of her family and friends, Ashley goes to the police to press charges against the boy who sexually assaulted her.

Activity

1. What strengths, knowledge and skills are necessary to protect yourself from a similar situation to Ashley's?

2. Discuss the importance of setting boundaries in sexual encounters and how to respect the boundaries of others. Consider your own boundaries and how to communicate them effectively.

3. Asking for explicit consent may have changed the outcome in this scenario. Explain your understanding of explicit consent.

4. What are the long-term effects on wellbeing for both people in this case study?

Additional notes

Additional notes

Additional notes

Student feedback report

Your feedback helps teachers monitor your learning experiences, to plan for future lessons and make them as meaningful, relevant and rewarding as possible…

1. What did you learn during this unit?

2. Were there any issues relating to this topic that were not covered that you believe should have been?

3. List three things you enjoyed the most and least about this unit.

a.

b.

c.

d.

e.

f.

4. Did you have the opportunity to discuss issues about this topic in class?

5. Did you think the workload was fair?

6. Did you find the content covered in class to be relevant to your age group?

7. How would you rate your knowledge of this topic?

Risky business

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Activity

Vocabulary list

Key terms from this unit are listed in the table below. Complete the activity by:

- providing a definition for each term
- correctly using the term in a sentence.

Term	Definition	Sentence using the term
Peer pressure		
Empower		
Risk		
Sexting		
Peers		
Stereotype		
Assertive		
Drug driving		
DRSABCD		
Speed		
Personal safety		
First aid		

ICT tasks

In this unit of work, you will have the opportunity to use technologies to further your health literacy. Your learning experiences will involve:

Critical inquiry

- Research statistics surrounding car accidents and mobile phone use. Discuss your findings with the class.
- Research three different road safety campaigns. Compare and contrast their effectiveness.

Collaborating

- Work with a partner to research the incidence and impact of sexting as reported in the media. Discuss the potential emotional, social and financial costs to the individuals involved.

Presenting

- Research the risks associated with young road users and analyse reasons why this age group is most at risk. Present using ICT software.
- Research media coverage of parties where gate-crashers have ruined the event. Propose a range of strategies to minimise the chance of this occurring at future events. Present your information using ICT software.

Creating

- Create a video discussing risks of driving for young people. Provide a list of things young people can do to avoid these risks and drive safely.
- Create a true false quiz on the topic that will test the class's knowledge of first aid and DRSABCD. Remember to include the answers. Use a quiz builder website and display on the interactive whiteboard if available.
- Create a health promotion campaign targeting one issue relatedt to sexting. Include a slogan and promotional material such as a poster or pamphlet.

Desktop publishing

- Create a collage of digital images illustrating the different risks young people are likely to participate in.

Independent learning

- Submit a research proposal for approval of your teacher. Your proposal must be original and address one aspect of road use in Australian society. Your research is to be presented to the class for peer assessment.

Personal safety

Risks and risk taking are a part of life. We can't avoid risks, but we can manage them and choose which ones to take to increase our personal safety. In situations where alcohol and drugs are involved (where people become intoxicated), choices about risks may not always be handled well. Where road use is involved, young people (as drivers, passengers, pedestrians and cyclists) may find themselves in dangerous circumstances.

Risk-taking and young people

Young people are known for taking risks. This is because adolescence is a time when individuals develop both cognitively and socially. This transformation often involves pushing boundaries, trying new things and developing a new sense of identity. The risks that young people take can be either positive risks or negative risks, and the reasons for taking these risks vary depending on the individual.

Research on risk-taking and young people indicates:

- Health risk-taking is highest during adolescence.
- Young people who participate in multiple risk-taking behaviours increase the likelihood of injury or death.
- The prevalence of risk-taking behaviour may be linked to psychological factors such as stress and depression.
- Binge drinking is associated with multiple health-risk factors such as unplanned pregnancy, unsafe sexual activity, drink driving, motor vehicle crashes, violence and antisocial behaviour.
- Young women are increasingly participating in risk-taking behaviours.
- Females are more likely to binge eat, purge themselves and be dissatisfied with their body weight and shape.
- Young people are more likely to be take risks while driving if they are habitual drinkers and/or suffering from stress.
- There is a link between health-risk behaviour and mental health problems.
- Depression is linked to an increased incidence of risk-taking behaviour such as smoking, alcohol and illicit drug use.

Activity

In the table below, explain the reasons young people engage in risk-taking behaviours.

Reason	Explanation
Personal growth	
To rebel	
To fit-in	
Education/ knowledge	
Challenge and adventure	

Gender and risk-taking

Risk-taking is linked to society's perception about being male or female. These gender stereotypes influence expectations and the risks taken by males and females.

Activity

1. Complete the following statements in relation to risk-taking.

a. Being a male/female, society expects me to:

b. Being a male/female, my family expects me to:

c. The pressures I feel to conform to society's gender stereotype include:

d. If I do not conform to the gender stereotype, I will be labelled:

e. The types of risks males are more likely to take include:

f. The types of risks females are more likely to take include:

2. Analyse the implications of gender and risk-taking for both males and females.

To learn more about risk-taking behaviours, watch the YouTube video at https://youtu.be/BUIRWbBdfMY.

Managing situations where risk is encouraged by others

It is important to develop strategies that can be used in situations where you find yourself at potential risk or being encouraged by others to engage in risk-taking behaviour.

Activity

Identify situations where you may be exposed to risk and describe strategies you may use to reduce each risk. An example has been provided.

Situation:	Attending a party out of town with a friend.
Risks:	Getting lost on the way or way home, losing your friend among the crowd, having drinks spiked, being approached by strangers, etc.
Strategies to reduce risk:	Prior to the party, research and print out specific directions (and leave a copy them with a parent or carer). After arriving, organise a meeting point in case you lose contact with your friend. Do not accept drinks from others and never leave drinks unattended.

Situation:	
Risks:	
Strategies to reduce risk:	

Situation:	
Risks:	
Strategies to reduce risk:	

Situation:	
Risks:	
Strategies to reduce risk:	

Assertiveness

Assertiveness lies in between being passive and aggressive. An assertive person has learnt the control and skills required to communicate their needs, wants, feelings, beliefs and opinions directly, honestly and with respect.

Activity

1. Discuss how assertiveness may be used in a potential risk situations.

2. Describe three past situations where you have displayed assertiveness.

Safety at parties

Adolescence is a time when lots of changes occur, particularly socially. During this stage, there are often a lot more parties for teenagers to attend and the nature of these parties changes dramatically from those in primary school or the early years of high school. In these situations, it is important to recognise risks and how to best handle them to promote and ensure maximum safety for all concerned.

To make decisions about the best choice for their own health, teenagers must understand how to manage their personal safety, how to respond to situations involving drug use and how to develop safe party plans.

Case study

The party

8pm: When you arrive there are already 100 people in attendance. Everyone is having a good time. There is music, food and alcohol freely available.

9pm: More people have arrived. You don't know most of the people at the party and they are mainly two or three years older than you. The drinking games have just started.

10pm: You realise there is no adult supervision at the party. A few people have had too much to drink and one person has already started vomiting.

11pm: The music is very loud. A neighbour has been over to complain about the noise. A few more people have been sick and one person is asleep in the backyard.

Midnight: There is an argument and a fight nearly breaks out when some gate crashers jump the side fence. They have left but said they would be back with their mates.

1am: Most of the people you know have left. The person you arrived with is driving home, but they have been drinking.

2am: A lot of people have now left. The remainder are still drinking steadily and some have been consuming illicit drugs. There is less talking and laughing, but the music is much louder.

3am: A window is broken. The neighbour reappears and threatens to call the police unless the party ends. Most of the alcohol has been consumed. Guests start leaving in Ubers.

4am: The last few guests are leaving. You are offered a lift home. The person says they haven't been drinking, but their eyes are blood shot and they are slurring their words.

Questions

1. What is the safest decision to make in this situation?

2. What are the possible risks to consider when making your choice to leave?

3. What are the consequences of staying at the party?

4. What actions could have been taken to ensure your safety in situations similar to this?

Planning for a safe party

Going out socially and attending parties is all part of growing up and is a great way to meet people and share great times with friends. However, partying can present certain risks and you should take care to protect yourself and others. There are a range of tips readily available that will help you stay safe, still have a good time and protect yourself and your friends.

Activity

Visit www.betterhealth.vic.gov.au/health/healthyliving/partying-safely-tips-for-teenagers and summarise the information presented under the headings below.

Partying risks

Plan ahead to party safely

Safe partying tips

Avoiding potentially violent situations

Avoiding drug overdose

Safe partying for guests at a home party

Safe partying at home

How to help a friend in need

Pre-loading

Pre-loading (sometimes referred to as pre-drinking) is a term used to describe drinking alcohol before going to the intended event or place. Young people may pre-load for a number of reasons:

- They're waiting for friends at a central place before going out
- They're drinking while getting ready (doing hair, make-up, etc.)
- To save money on buying alcohol from the venue
- To ‘pump up’ or get in the right mood before going out
- Some functions or venues don’t serve alcohol, so people drink beforehand
- It is an accepted tradition for young people in Australia.

To learn more about pre-loading, watch the video at https://youtu.be/ZJ4IAHrrMEY.

Activity

Outline reasons why pre-loading is considered dangerous.

Drink spiking

Drink spiking has become a significant issue throughout Australian communities, though incidents of drink spiking are under-reported (victims often think that people won't believe them, especially if they have taken drugs or been drinking). Drink spiking occurs when alcohol or drugs have been added to a drink without the consumer knowing or giving approval. Drink spiking is illegal and can cause serious health issues and concerns, including death.

Any type of drink can be spiked – water, soft drink, juice or alcohol. There are numerous substances being used to spike drinks, including:

- alcohol
- prescription drugs, such as muscle relaxants and hypnotics
- illicit drugs, such as ecstacy, LSD, ketamine and GHB.

The effects of drink spiking

The effects of drink spiking differ from person to person. Effects depend on a number of factors, such as the type of substance used, the amount used and a victim's weight, size and health status. Individuals whose drink has been spiked may feel:

- dizzy
- light headed
- nauseas
- drowsy
- disorientated.

Individuals may experience vomiting, memory blanks and/or they may pass out or lose consciousness.

For information on drink spiking, visit http://adf.org.au/insights/drink-spiking.

Activity

1. Brainstorm reasons why people spike drinks.

2. Develop a list of actions you should take if you think your drink has been spiked.

3. Research some basic steps you can take to minimise the chance of your drink being spiked.

Sexting

Sexting is the sending of sexual messages, photos or videos, online or using a smartphone. Once messages, photos or videos are sent, there is no way to retrieve them and they can be passed on or uploaded to the internet at the click of a button. It may be impossible to remove or control who views the material. Sexting is a modern phenomenon – most teenagers have regular access to a smartphone and/or the internet and frequently use social networking sites. Sexting scenarios include:

- exchange of images between two people in a romantic relationship
- exchange of images between two romantic partners, that are shared with people outside the relationship
- images provided to adults who are grooming young people by pretending they love them or claiming they can make them famous.

There is no such thing as safe sexting. Once a private image has been posted or sent, it can be impossible to control who views it and the impact may be lasting.

Under Australian law, it is illegal to use your phone or internet to take, keep, look at, send, or ask someone to send sexual images or videos of anyone who is under 18 years of age (or anyone who looks under the age of 18). Sexting offences are dealt with under the same laws that regulate possession and dissemination of child abuse material and child pornography. Maximum penalties that apply to people charged with these offences range from 10 to 15 years imprisonment.

To watch a video on the dangers of sexting, visit http://youtu.be/uQxJqbdXw9s.

Activity

1. Identify which of the following are examples of sexting.

	Yes	No
Sending a sexually explicit image via Snapchat.	☐	☐
Mistakenly coming across a sexually explicit website.	☐	☐
Photographing a peer in a compromising situation and sending it to a friend.	☐	☐
Taking compromising footage of a stranger and sending it via TikTok.	☐	☐
Receiving a sexually explicit image via Instagram and immediately deleting it.	☐	☐

2. List and discuss reasons why individuals become involved with sexting.

3. Consider the following scenario:
Someone has sent an explicit video of a peer to your friend.

a. Determine the potential risks and consequences of the scenario for the sender and the peer. For example, parents or siblings may accidentally come across the images (if stored on a smartphone or computer).

b. Determine the effects the scenario may have on the peer in the footage, according to the areas below.

Personal reputation	
Relationships with family and friends	
Employment prospects	
Future romantic relationships	

4. Who could you approach if you were a victim of sexting? What support services are available?

ICT task

To watch a video on the consequences of sexting, visit http://youtu.be/BOWQf81Aon8

Legal consequences

Sexting is a crime if the photo includes a person under 18. It has led to young people being charged by police with child pornography offences. Individuals need to think carefully about the consequences of taking or sending pictures of their friends on their phone, especially if they are not fully dressed and even if they agree. If the image is considered explicit, they could be charged by police for committing a criminal offence.

It may seem like harmless fun, but individuals must be careful – once photos are sent electronically, they can become part of a digital footprint that lasts forever. It could damage future career prospects or relationships. Individuals can also be charged with possessing child pornography if they go onto the internet and download explicit images showing people under 18.

When it comes to explicit imagery of someone who is underage, anyone who uploads it to the internet and anyone who prints, emails or texts such images can be charged with publishing or transmitting child pornography. Remember, adolescents can be charged even if they are the same age or younger than the person in the picture or video. People found guilty of sexual offences or child pornography can incur serious penalties and are prevented from working or volunteering with children.

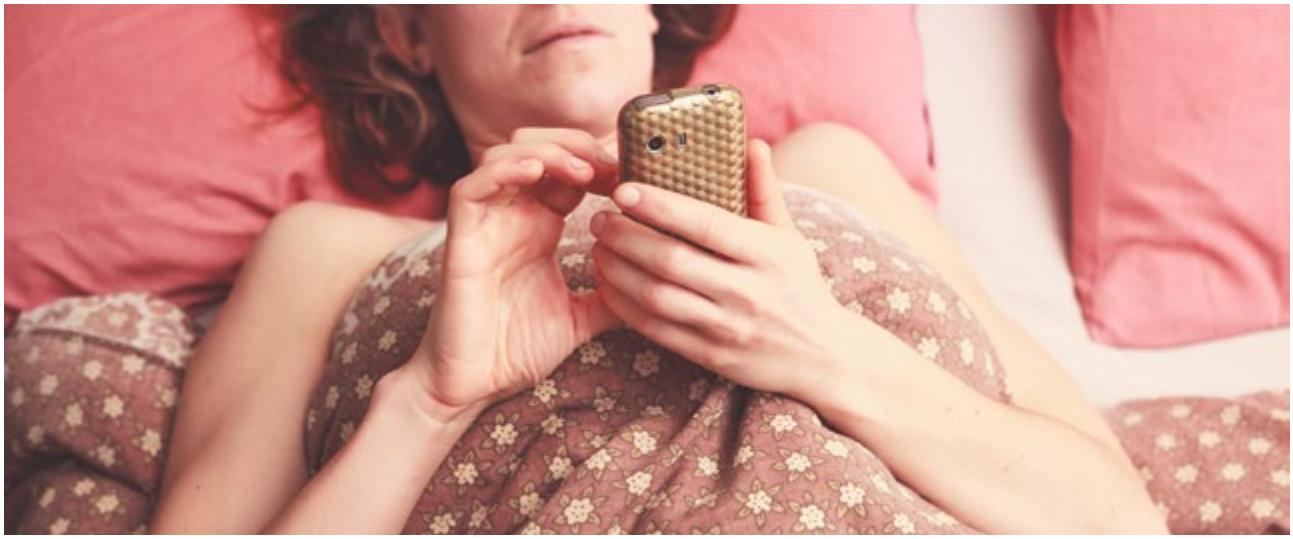
Activity

1. Discuss your views on the following statements. Justify your views.

a. "Everyone involved in sexting is responsible for their own behaviour."

b. "Everyone involved in sexting can play a role in restricting the damages of sexting."

c. "Significant pressures exist for both boys and girls to participate in sexting."



2. Discuss reasons why sexting images of teens and children under 18 is potentially illegal.

3. Suggest what individuals should do if they receive explicit material of someone they know via text, email or social media (such as Snapchat, Instagram or TikTok).

ICT task

To learn more about the risks involved with sexting, watch the video at https://youtu.be/IZwVT6WnPQY.

Other consequences

Can sexting be considered safe to do if an individual is only sending private images to someone they trust? The answer is a clear no. In fact, it is a strong never. Unfortunately, teens who experiment with taking sexually explicit photos of themselves and sending them to someone else have made themselves completely vulnerable to having their personal images shared online. Sexting can very quickly lead to potentially devastating consequences. Sexual predators lurk and cyberbullies smirk. Reputations are at stake and future relationships and career prospects can be impacted. Consider how any of these serious consequences could affect wellbeing.

Activity

1. The Australian Government has warned youth against the dangers of creating a negative digital footprint. Explain your understanding of the term 'digital footprint'.

2. Considering the following scenario. Provide a list of steps that a parent could follow if they have discovered that their daughter's distress and refusal to go to school is a consequence of sexting.

> Photos had been taken of Andrea, without her knowledge, when she had been barely clothed while changing for her PE lesson. The photos had been posted on Facebook under a false identity, with many of her peers tagged and insulting comments added. Andrea had always felt insecure and unattractive, so this was too much to take. She began feeling extremely depressed and couldn't focus on any of her studies. In fact, after being questioned by her mother about her complete lack of appetite and silence, she informed her that she couldn't bare the thought of ever returning to school again.

Case study

Sexting and digital reputation

Marina, a 16-year-old at Diva High School, had been feeling proud of the fact that she had finally improved her skin condition after a year of way too many pimples. She had been feeling attractive and confident recently, especially after starting to date one of the popular guys from the boys' school across the road. Life had never seemed so bright.

Bright, that is, until a week ago. Marina discovered that a private and flirtatious photo she had sent her new boyfriend was digitally altered in a sexually explicit way and shared with the guys in his year group. Hurt and in shock, Marina knew that if the photo had been altered and shared so easily, there was every chance it had already been posted online. Absolutely anyone would be able to view the photo if that was the case. If the situation couldn't be fixed, how would it affect her reputation online if anyone conducted a search of her name? Marina felt humiliated. She felt powerless to change the situation, but she was aware that she had to try to fix it urgently.

Choose two key concepts from the list below. Discuss how they relate to Marina's situation and suggest ways for her to deal with the problem effectively.

- Trust, betrayal and rejection
- Illegally forwarding sexually explicit images
- Future impact if the situation is not corrected
- Truth, personal responsibility and an opportunity for learning
- Authority and intervention
- Professional counselling
- Digital reputation and cyberbullying (Cybersmart Online Helpline)
- Sense of wellbeing and self-worth

TIP: You can use the comment or mark-up function of your PDF viewer to draft your ideas.

ICT task

In small groups of 3–4, create a short digital presentation for teens outlining the risks of sexting behaviour. Useful information for your presentation can be found at available at www.esafety.gov.au/educators/classroom-resources/be-deadly-online/sending-nudes-sexting.

Choose from a range of digital tools to create and display the presentation, such as mobile phone and iPad devices, or free online tools such as Prezi. Draft your ideas in the space below.

Revision

1. Analyse the implications of gender and risk-taking for males and females.

2. What is pre-loading and why is it popular among young people?

3. Outline a range of general suggestions for partying safely.

4. List the reasons people spike drinks.

Additional notes

Additional notes

Additional notes

Student feedback report

Your feedback helps teachers monitor your learning experiences, to plan for future lessons and make them as meaningful, relevant and rewarding as possible…

1. What did you learn during this unit?

2. Were there any issues relating to this topic that were not covered that you believe should have been?

3. List three things you enjoyed the most and least about this unit.

a.

b.

c.

d.

e.

f.

4. Did you have the opportunity to discuss issues about this topic in class?

5. Did you think the workload was fair?

6. Did you find the content covered in class to be relevant to your age group?

7. How would you rate your knowledge of this topic?

Mental health in sport

Titan Education
Customised learning

Activity

Vocabulary list

Key terms from this unit are listed in the table below. Complete the activity by:

- providing a definition for each term
- correctly using the term in a sentence.

Term	Definition	Sentence using the term
Resilience		
Stress		
Mental illness		
Psychotic disorder		
Psychologist		
Depression		
Anxiety		
Mental health		
Stressor		
Counsellor		
Stigma		
Mindfulness		

ICT tasks

In this unit of work, you will have the opportunity to use technologies to further your health literacy. Your learning experiences will involve:

Critical inquiry

- Research the prevalence of mental health issues among young people in Australia. Discuss your findings with a partner.
- Research two online campaigns targeting mental health issues and discuss some of the recommendations.
- Research two high profile celebrities who have suffered from mental health issues. Share their story with the class to illustrate how mental health issues do not discriminate.
- Research the pros and cons of a number of available treatments for mental health issues, including medical interventions, psychological interventions and complementary and lifestyle interventions.

Collaborating

- Working with a partner, create a true false quiz that will test the class's knowledge of resilience and mental health. Remember to include the answers. Use a quiz builder website and display it in a digital format.

Presenting

- Research, script and prepare a digital presentation on resilience.

Creating

- Create lyrics and music to a song about mental health (using software such as Garage Band or Audacity).
- Select two common mental health issues and create an information booklet using ICT software detailing the signs and symptoms of the illness and treatment options.
- Create a video helping people practise stress management techniques.
- Create a health promotion campaign for mental health issues with a focus on destigmatisation.

Desktop publishing

- Create a collage of digital images depicting ways to manage or get help dealing with a mental health issues.

Visual representation

- Use spreadsheets and graphs to examine statistical data concerning the prevalence of mental health issues among young people in Australia over the past twenty years. Prepare a summary of the data and discuss in small groups.

Mental health in Australia

Mental illness refers to a clinically significant disturbance in an individual's cognition, emotional regulation, or behaviour, usually associated with distress or impairment in important areas of functioning (WHO 2022).

The terms 'mental illness' and 'mental disorder' are often used interchangeably and describe a wide range of mental health and behavioural disorders which vary in duration and/or severity. The effect of mental illness on the individuals, families and/or carers concerned can be severe and its influence on society as a whole is far reaching. Social problems often associated with mental illness include poverty, unemployment or reduced productivity, and homelessness. People with mental illness may also experience isolation, discrimination and stigma.

The 2021 National Study of Mental Health and Wellbeing estimated that:

- Over two in five (43.7%) Australians aged 16–85 had experienced a mental disorder during their lifetime.
- One in five (21.4%) people who had experienced a mental disorder in their lifetime had symptoms in the 12 months before the survey interview. For these people, anxiety disorders were the most prevalent type of disorder (16.8%), followed by affective disorders (7.5%) and substance use disorders (3.3%).
- A higher proportion of females than males (44.6% compared with 42.7%) had experienced a mental disorder in their lifetime, with a higher proportion of females than males (24.6% compared with 18.0%) also experiencing symptoms in the 12 months before the survey.
- 16–24-year-olds (39.6%) were most likely to have experienced symptoms of a mental disorder in the previous 12 months, while those aged 75–85 years were the least likely (3.7%).

The National Health Survey 2020–21 estimated that:

- One in five (20.1% or 5.0 million) Australians reported that they had a mental or behavioural condition during the collection period (August 2020 to June 2021).
- Females reported a higher proportion of mental or behavioural conditions (22.8%) than males (17.3%).
- Overall, those aged 15–24 years had the highest proportion of mental or behavioural conditions (27.5%) while those aged 0–14 years had the lowest (13.0%).

Source: Au

Resilience

Resilience is an extremely valuable character trait. It is only developed through determination and difficulty. If someone is described as a resilient person, they should consider it a compliment. It means they can overcome whatever obstacles come their way. Resilience is about survival. It is about confronting and managing feelings of stress, anxiety, sorrow, despair, uncertainty or distress that arise from tragedy, trauma, loss, threats, stress, intense conflict or adversity.

Resilience involves using skills and strategies to rise up from any situation that has knocked you down. For some people, it can feel like it takes everything they have to manage the intensity of the feelings involved. This means that when a person eventually overcomes the adversity, it will be a major accomplishment that will have strengthened them.

No one chooses to experience difficult situations that seem unbearable. Perseverance is the key. Individuals may be surprised by their capacity to deal with extreme challenges. Often, when a person feels the most overwhelmed, it is the most important time to stay determined as it can lead to a breakthrough. Unfortunate situations offer valuable opportunities to develop resilience. In challenging times, self-reflection is important. Some practical skills to enhance resilience include:

- Choose a focus. Make it a positive one. Thoughts affect emotions. For example, rather than focusing on pain and suffering, focus on aspects of healing.
- Assess adversity with facts, to ease the feeling of being overwhelmed.
- Remember to be thankful for the parts of life that are going well. It can help to keep challenging situations in perspective.
- Look after wellbeing. Individuals should be kind to themselves. Taking care of themselves will increase a person's sense of calmness that will help them to work through situations with clarity.
- Find humour in hard circumstances, to reduce any fear or negativity.
- Discover how to transform pain into action with a meaningful and inspirational purpose. How can it add value to life?

Activity

1. Identify the factors that influence resilience during a challenging situation.

2. Outline the factors that promote resilient behaviours.

3. Describe the skills and behaviours displayed by resilient people.

4. When males and females are faced with challenging or stressful situations, they may use different coping mechanisms or styles. Below is a list of different coping mechanisms/styles. Decide whether males or females are more likely to display this type of mechanism/style and record it in the table below.

Coping mechanisms/styles

- use humour or jokes
- deny there is a problem
- blame themselves
- participate in sport
- work harder
- cry
- become aggressive
- worry about the situation
- ignore the issue
- abuse drugs
- seek approval from peers
- increase risk-taking
- seek spiritual help
- try to solve the problem
- become passive
- use distraction
- talk to friends about the problem
- show little emotion
- engage in wishful thinking
- manage the problem themselves

'Typically' female	'Typically' male

ICT task

Watch the YouTube clip on resilience at http://youtu.be/KF2hQ0XLf6U and summarise the information presented.

Stress

Everyone has some form of stress in their lives. Stress is the body's response to an event or situation. It can be positive (motivates a person to achieve things) or negative (inability to relax). Stress is common in daily life and may be associated with personal or family relationships, school and work.

Managing stress

Stress is an inevitable part of life – there will always be an event, situation or occurrence that a person may be worried about or may need to work extra hard to prepare for. There are a range of techniques to learn and measures people can to take to help them to relax and reduce their risk of developing depression or anxiety.

Activity

1. Everyone is different and people respond to stressful situations in different ways. Brainstorm some common stressors (causes of stress).

2. People that are over-stressed must deal with the situation or if ignored they may become quite ill. Identify the signs your body sends if you are over-stressed.

3. Whatever the cause there are some simple things you can do to reduce stress. Discuss the ways you can reduce stress.

Overcoming adversity

Many people in Australia have had to overcome adversity in their lives. This may be in the form of overcoming:

- a disability
- impoverished family life
- lack of formal education
- violence and abuse
- drug addiction
- loss of family.

The individuals that are able to face these challenges and bounce back from adversity are able to remain positive about their life and what the future holds.

Activity

Research an Aboriginal or Torres Strait Islander and a person with a disability, such as Johnathan Thurston and/or Madison de Rozario, that have had to overcome adversity. Include information on:

- who they are and what they do
- the adversity they overcame
- the difficulties they encountered in dealing with the change
- the personal characteristics, skills and qualities they possessed to overcome the adversity.

Case study

Dealing with pressure

Ahead of the 2019 premier of the AFL documentary *Collingwood: From the Inside Out*, Collingwood's star midfielder Adam Trelaor has opened up about his mental health struggles over the past few seasons.

Trelaor began playing professional football in 2012. He played for the Greater Western Sydney Giants for three years, before signing with his current club, Collingwood. Trelaor is a key midfielder for Collingwood and has been awarded both the Anzac Medal in 2018 and the Neale Daniher Trophy in 2019.

As star player in the team, most did not suspect that he would be experiencing mental health troubles. Trelaor has discussed how he wishes he felt satisfied like he used to after games, but his on-going struggle with anxiety caused him to worry excessively. He talks about his worries of what people would think of his team, of him and of his contribution. The 26-year-old is open about how this anxiety stems from the pressure to perform weekly for such a dominant club.

During the 2018 season, Trelaor acquired a hamstring injury in round 14 against Carlton. This injury ruled him out for weeks and the chances for Collingwood's premiership dwindled. However, Trelaor has since explained how this injury was in fact his saving grace as he was ready to leave the game completely due to his mental health struggles. The injury provided Treloar with relief, and the space he needed. He was provided with support from his sports psychologist, team mates and coach.

After not playing in finals for four years, Collingwood defied all odds and worked their way into the 2018 AFL Grand final. Trelaor stepped up and played in the game, which went down to the wire. Unfortunately for Collingwood, they went down by five points to West Coast Eagles. This loss was a further tipping point for Trelaor.

A year on and Trelaor has expressed how far he has come due to the support he has been provided by family, his club and the league. He has been open about his concerns about being judged as a person by the two hours he spends on the field each weekend. He has expressed the need for people to see beyond football, that these players are human beings. Trelaor is not the only AFL star to come out and admit they have struggled with mental health issues during their playing career, which follows the leagues attempts for greater mental health awareness and support for its players.

Activity

1. Discuss the pressures that Adam Trelaor was facing.

2. Examine how these pressures may have affected his ability to perform and his personal life.

3. Describe the issues male athletes face when expressing mental health issues in sports such as the AFL.

4. Research what the AFL has done to improve awareness and support for the mental health of their players.

5. Explain how these factors assist resiliency and wellbeing of players.

6. Propose what more can be done so that players like Adam Trelaor don't experience the extent of negative mental health issues.

Positive mental health

A person's mental health is extremely important for a healthy body and mind. Positive mental health involves having a good grasp of wellbeing, self-esteem and confidence. It allows someone to work to their full potential, enjoy life in a satisfying way and cope with any of life's challenges, problems or stresses. A person with good mental health will usually have:

- positive thoughts and emotions
- a sense of fulfilment
- the ability to form and maintain healthy and positive relationships
- involvement and engagement in a range of activities
- resilience
- a sense of meaning and purpose
- a balance between study, play and work
- high self-confidence and self-esteem
- the flexibility to try and learn new things.

Positive mental health is something that can be adopted if a person changes their outlook. Life can be difficult at times and create a whole range of emotions, so there are some strategies that can be adopted in order to help people let go of the things that upset them and enjoy a positive and healthy state of mind.

ICT task

Visit www.goodmorningquote.com/positive-thoughts and summarise the strategies that can help you to think positively. Choose your favourites from the '50 best positive thoughts of the day' and try to include them in your morning routine.

ICT task

Visit www.healthdirect.gov.au/tips-for-good-mental-health and record the tips for building good mental health.

Anxiety

Anxiety is:

- Not just feeling stressed
- Not just being worried
- Not something you can just 'snap out of'.

Anxiety can make it hard for someone to cope with day-to-day life. Every individual may experience varying types and degrees of the symptoms associated with anxiety.

To learn more about anxiety, watch the YouTube video at https://youtu.be/A1anXJhVamc

Activity

1. Visit the Beyond Blue website at www.beyondblue.org.au to complete the following table below to outlining the common signs and symptoms of anxiety.

Behaviour	Thoughts

Feelings	Physical

2. Research and describe the symptoms of the following anxiety disorders.

Generalised Anxiety Disorder (GAD)

Phobias

Obsessive Compulsive Disorder (OCD)

Post-Traumatic Stress Disorder (PTSD)

Panic Disorder

Depression

Depression is:

- Not a sign of personal failure or weakness
- Not something you can just 'snap out of'
- Not just laziness

Depression is a mental illness that considerably impacts day-to-day life. Every individual may experience varying degrees of the symptoms associated with depression.

Depression can be recognised by extended periods of despondency, sometimes for no specific reason. It is not the same as a passing sad mood. Support is needed for sufferers of depression, as it is a serious form of illness that can be successfully treated.

For more information depression in adolescents and young people read the information at/ www.healthdirect.gov.au/depression-in-teenagers.

Activity

1. Visit the Beyond Blue website at www.beyondblue.org.au to complete the following table below to outlining the common signs and symptoms of depression.

Behaviour	Thoughts

Feelings	Physical

What causes depression?

Factors such as genetics, family or peer conflict, physical illness, stress, drug and alcohol use, isolation or loneliness and social media have been linked with triggering depression. It is important to remember there is no single cause for depression – it is a combination of causes which lead to depression. Depression can arise without warning or cause and can be triggered by a number of events.

Activity

Discuss how the following factors may trigger depression. An example has been provided.

Factor	How it may trigger depression
Genetics	*Individuals can inherit genes that may make them vulnerable to developing depression. However, this does not mean they will suffer from depression, it just increases their risk of doing so.*
Family or peer conflict	
Physical illness	
Stress	
Isolation or loneliness	
Drug and alcohol use	
Social media	

ICT task

Watch the following videos on depression and other mental health issues affecting young people and summarise the information you've learned in the space below.

1. Depression and getting help – stories from Zak, Sara and Rania: https://youtu.be/q9o3W0Umno4

2. Hope – Learning to Live With Mental Illness: https://youtu.be/nFiGVvnt7QI

3. Invest In Your Mental Health Every Day – https://youtu.be/-GpFNe2s6SQ

Case study

Depression

Rhys

Rhys plays soccer. He loves soccer. He hopes to play for a premier league team in England one day. Rhys has always been very serious about his training. He goes running three times a week, trains twice a week and has started a resistance training program at the gym.

About six weeks ago, Rhys badly injured his right knee during a game. He tore the anterior cruciate ligament and underwent a knee reconstruction. The surgeon instructed him to take at least 12 weeks off training. Rhys was devastated.

For the first two weeks, Rhys went to training and games to support his teammates. But since then, he has not bothered. He has even stopped watching the soccer on television and sold his season pass to the home games for his favourite football league.

Rhys told his best mate Rob that he has been sleeping a lot and finding it difficult to get up in the mornings. He is worried that he will never fully recover. He has been snapping at his parents, friends and team mates and turns down invitations to parties or get-togethers.

Rhys has lost a lot of weight. He told Rob that he can't be bothered eating. He is angry and thinks it's unfair that he got injured. He works so much harder than anyone else in his team, but bad things always seem to happen to him.

Activity

1. Highlight the symptoms Rhys exhibited that may indicate he was suffering depression.

2. Describe the advice you would give to Rhys.

3. Suggest people/groups Rhys could go to for help.

ICT task

Depression in sports

1. Watch the Footy Show's story on depression in rugby league on YouTube at http://youtu.be/evmi9jFNENg and identify the inspirational messages in Preston Campbell's experience overcoming depression.

2. Watch the TED talk by Victoria Garrick called *Athletes and Mental Health: The Hidden Opponent* on YouTube at http://youtu.be/Sdk7pLpbIls and summarise the information presented.

Destigmatisation

Stigma refers to a negative perception and stereotype about a group of people. Destigmatisation refers to the practice of removing stigma associated with a group of people. Individuals can challenge stigma by making sure not to use negative language or stereotypes.

There are a range of labels given to describe people with a mental illness. Such labels do not accurately describe someone who is suffering from a mental illness and add to the misrepresentation of mental illness in society. Words like psycho and crazy trivialise the impact of mental illness and its prevalence in society.

Challenging stigma

To reduce the level of stigma, it can be useful to challenge media stereotypes. There are a range of mediums that promote negative portrayals of people with mental illness – from news articles to representations in comedy shows.

Critical inquiry

Locate and analyse an article about mental illness. Discuss whether the article (and associated images, if applicable) worsen stigma or challenge it. Look for articles in newspapers, magazines and online.

Remember your terminology: To analyse, identify and examine the components and explain the relationship between them. To analyse is a higher order task. Begin with a statement reflecting the question. Make your points and illustrate with relevant examples or information.

Use the scaffold on the next page to plan and write your response. A scaffold is a framework to help you construct a strong response.

	Points to note
	Restate the topic sentence in your opening statement. Give a brief overview of the key points and the relationship between them.
	Refer to the topic sentence at the start of each paragraph. Explain each point and provide evidence to support your view.
	Use linking words/ phrases to help your analysis flow, such as "in order to", "as a result", "therefore" or "leading to".
	Explain the relationship between your points and the topic.
	Conclude with the effect of the points raised and their relationship to the topic.

Caring for others

Individuals with friends or family members suffering with mental illness may find it difficult to show their support in fear of saying or doing the wrong thing. In many instances, they may not know their friend or family member is even suffering from a mental illness – it is common for people not to discuss it or for sufferers to hide and disguise symptoms.

Keep in mind, the ultimate goal is to help friends and loved ones. Individuals are likely to face a range of obstacles when raising and discussing the subject, however it is important to persevere in a sensitive and patient manner.

Activity

1. Describe the changes you may sense in a person's behaviour if they were suffering from anxiety or depression.

a. Anxiety

b. Depression

2. Consider the types of things you could discuss and how you could remain sensitive and patient.

3. Consider how the individual may respond to your care (consider both positive and negative responses).

Seeking help

If a person is unsure about their state of mental health but feel that they are experiencing an amount of depression, anxiety or distress, it is important to reach out for support – particularly if they are finding it difficult to cope with simple tasks. Specialist support can make a significant difference if a person seeks help early. This could come from local doctors, counsellors, mental health professionals or a local welfare team. Support from friends and family is also extremely valuable. If someone feels a preference to speak anonymously to a counsellor, numerous services are available over the phone or online.

An estimate of $6 billion is spent each year on services related to mental health, according to the Australian Institute of Health and Welfare. Some helpful services for people experiencing mental health concerns include assistance from:

- General practitioners
- Counsellors
- Hospital emergency departments
- Community care offices
- Residential care providers
- Psychiatrists
- Local mental welfare teams
- Online support providers such as:
  - http://au.reachout.com
  - http://headspace.org.au
  - www.blackdoginstitute.org.au
  - www.beyondblue.org.au
  - http://kidshelpline.com.au

Mental health problems may increase in severity if they are left untreated for an extended period of time, particularly if someone is genetically predisposed to a mental health disorder. Always seek support if you have any concerns.

Activity

1. It can be useful to prepare for a consultation with the GP. This may ease any nervousness or uncertainty the patient is feeling. Consider the type of information which a GP may need to know.

2. Research and distinguish between the following:

a. Psychologist

b. Psychiatrist

Mental health promotion

Mental health promotion refers to any action that is taken to enhance mental health and wellbeing among individuals and society. It is a sustainable approach to minimising the negative factors that reduce mental health and wellbeing, while creating conditions that promote positive mental health and wellbeing.

The promotion of mental health aims to enhance and address the variables of mental health, in particular social and economic factors such as education, employment, income and access to services. Mental health promotion also works to improve the understanding of individuals towards mental illness.

Community support resources

Having access to community support programs is paramount in ensuring all individuals feel they are not alone and can receive guidance and assistance whatever their circumstances may be.

Community support resources include various initiatives such as housing and accommodation programs, training and education, employment opportunities, support groups, funding or subsidisation, counselling and medical advice.

Activity

Research the following mental health support groups outlining the services they provide.

Support group	Services provided
Beyond Blue	
Kids Helpline	

Support group	Services provided
MindMatters	
Headspace	
SANE	
ReachOut	
Black Dog Institute	

Mental health awareness

Mental Health Week is a national event, held every October to coincide with World Mental Health Day (October 10th). The aim of Mental Health Week is to promote social and emotional wellbeing to the community, encouraging people to maximise their health potential, enhancing the coping capacity of communities, families, individuals and increasing mental health recovery.

ICT task

Summarise the information on World Mental Health Day available at https://lookafteryourmentalhealthaustralia.org.au.

Physical activity for health and wellbeing

Being active has a variety of physical, emotional and social health benefits. It can make you feel good, improve your health, and help you interact with your friends. Regular physical activity can also help reduce the risk of developing many lifestyle diseases (for example, type II diabetes, some cancers, CVD and osteoporosis) and is beneficial for psychological wellbeing.

As young people move through school, start work and become more independent, being physically active and limiting sedentary behaviour every day is not always easy, but it is possible and it is important. Australia's Physical Activity and Sedentary Behaviour Guidelines for Young People (13–17 years) are for all young people, irrespective of cultural background, gender or ability.

Physical activity guidelines for young people

- For health benefits, young people should accumulate at least 60 minutes of moderate to vigorous intensity physical activity every day.
- Young peoples' physical activity should include a variety of aerobic activities, including some vigorous intensity activity.
- On at least three days per week, young people should engage in activities that strengthen muscle and bone.
- To achieve additional health benefits, young people should engage in more activity – up to several hours per day.

Sedentary behaviour guidelines for young people

To reduce health risks, young people should minimise the time they spend being sedentary every day. To achieve this:

- Limit use of electronic media for entertainment (such as television, seated electronic games and computer use) to no more than two hours a day – lower levels are associated with reduced health risks.
- Break up long periods of sitting as often as possible.

Source: www.health.gov.au

Activity S I

1. Identify the benefits of regular physical activity for health and wellbeing.

2. Identify the lifestyle diseases for which physical inactivity is a risk.

3. Why do you think governments are interested in promoting regular physical activity?

4. What strategies are in place in the school and wider community to promote participation and enjoyment of regular physical activity?

5. Propose a range of actions to maintain regular participation in physical activity.

ICT task

In pairs, plan a recreation facility designed especially for adolescents and young people. In your plan, you must include:

- Branding (a name for the facility, the aim/purpose of the facility, motto or slogan)
- A description of the facilities available
- Financial considerations (the cost of using the facilities, how the facility will generate income)
- Personnel (staffing requirements and uniforms)
- Location
- An explanation as to how the facility will enhance enjoyment/participation

Draft your ideas in the space below.

Getting Australia active

Regular physical activity is important for optima
wellbeing. It reduces the risk of many chronic c
(such as cardiovascular disease and type 2 dia
and other disease risk factors, such as obesity
high blood pressure. Strength and resistance tr
is also important to achieve and keep good hea
as it improves muscle strength and bone densit
protecting against injury and osteoporosis.

Insufficient physical activity is a key risk factor
contributing to disease burden in Australia. Give
role it plays in chronic conditions, it is important
Australians to achieve the optimal levels of phy
activity recommended in Australia's Physical Ac
and Sedentary Behaviour Guidelines

Based on self-reported data from the 2020–21
National Health Survey:

- Almost three in 10 adults (27%) aged 18–64 c
perform at least 150 minutes of physical activi
the week prior to the survey, and a similar nur
(30%) did not perform physical activity over fiv
more days.
- One in two (50%) of those aged 65 and
over (47% of men and 52% of women) were
insufficiently active, that is they did not particip
at least 30 minutes of physical activity per day
five or more days in the week prior to the surv

Source: AIHW 2022

Activity

1. Visit www.sportaus.gov.au/nationalsportplan/home and describe the Sport 2030 National Sport Plan.

2. Evaluate a physical activity or fitness app currently available to improve health and wellbeing.

Physical activity for people with a disability

Disability is the umbrella term for any or all of an impairment of body structure or function, a limitation in activities (the tasks a person does), or a restriction in participation (the involvement of a person in life situations). In 2022, an estimated one in six Australians had disability, or about 4.4 million people. Some people living with a disability were born with it. Others have acquired a disability as they age, or through illness or injury.

Types of disability in Australia include:

- Intellectual (such as Down syndrome, autism and Asperger's syndrome)
- Physical (such as paraplegia, quadriplegia, muscular dystrophy, motor neurone disease, cerebral palsy, absence or deformities of limbs and scoliosis)
- Acquired brain injury (as a result of events such as accidents, stroke, brain tumours or degenerative neurological disease)
- Neurological (such as epilepsy, Alzheimer's disease and multiple sclerosis)
- Psychiatric (such as schizophrenia, personality disorders and psychosis)
- Deafblind (refers to dual sensory impairments associated with severe restrictions in communication, and participation in community life)
- Vision (encompasses blindness and vision impairment not corrected by glasses or contact lenses)
- Hearing (encompasses deafness, hearing impairment and hearing loss)
- Speech (encompasses speech loss, impairment and/or difficulty in being understood)

Source: www.nds.org.au/disability-types-and-descriptions

There are a number of benefits this group can experience from participating in regular physical activity:

- improved mood and overall happiness
- can improve condition (such as long-term workplace injury)
- promotes social interaction
- can prolong the onset or development of disease (such as degenerative diseases that gradually worsen, leaving an individual disabled in some way).

Activity

1. Create a fact file of two sports played at the Paralympics.

2. Watch the *We're the Superhumans* advertisement for the 2016 Paralympics on YouTube at http://youtu.be/IocLkk3aYlk. Discuss how self-talk and encouragement can be used as a motivational tool to continue participation in sport and physical activity.

Practical activity

As a class, participate in a range of modified games for people with a disability (such as events held at the Paralympics).

Cultural diversity in sport and physical activity

Sport is an integral component of the cultural make-up of Australia. Australia's national identity evolved with sporting success in local and international competitions. Famous sporting events and icons in Australia's history, such as the Ashes cricket series, Cathy Freeman and Phar Lap, have all contributed to the status of sport in present day society. In the past, sporting participation was largely associated with gender, class and ethnic background and choice was somewhat limited. Access is no longer such an issue and the variety of sporting choice reflects sports from around the world.

Australia is often described as a culturally diverse, or multicultural, country. It is home to the world's oldest continuous cultures (Aboriginal and Torres Strait Islander peoples), but has also embraced significant levels of migration throughout its more recent history.

According to the Australian Bureau of Statistics:

- 28.5% of Australian were born overseas
- Almost 50% of Australians have parents born in other countries
- Almost 20% of Australians have some form of a disability
- Over 260 languages are spoken
- Up to 11% of Australians may have a diverse sexual orientation, sex, or gender identity
- Just over half of our population are female.

Australia has a diverse multicultural population and sport participation in many of its regions reflects this diversity. Sport can be used for positive social change – it can help build more inclusive, healthier, happier and safer communities. Sporting organisations and sports clubs should continually seek to identify barriers that may preclude people from participating in their sport. More inclusive practices in sports can assist with growing the participant base and in improving community physical, social, mental, and spiritual health and wellbeing.

Source: www.clearinghouseforsport.gov.au

Activity

1. Outline the barriers to inclusion and participation in sport.

2. Research one of the following non-government organisations and describe how they are using sport as a catalyst for inclusiveness.
   - Creating Chances
   - Red Elephant Projects
   - Sport Matters
   - Sport Without Borders

Activity

Participate in a range sports and physical activities popular in Asia. These include:

- cricket
- baseball
- badminton
- basketball
- table tennis

Contribution of Aboriginal and Torres Strait Islander people to sport in Australia

Australian Aboriginal and Torres Strait Islander people, possessing diverse languages and customs, are one of the world's oldest continuous cultures, with a history dating back more than 50,000 years.

There is a recognised 'gap' between the health and wellbeing of Indigenous and non-Indigenous populations in Australia. Indigenous people, as a cohort, generally fall short of the expected indicators measuring the wider-population health and wellbeing of all Australians. Australian governments at all levels are committed to closing the gap of Indigenous disadvantage in areas such as:

- preserving and celebrating Indigenous culture
- child mortality
- education
- employment
- economic development
- healthy lives
- building safe and strong communities.

There is broad cross-government support and action, through a range of sport and active recreation policies, programs, and funding initiatives, to actively contribute to improving the health and wellbeing of Indigenous Australians.

Recent research identified a range of key findings, which included:

- 46.6% of Aboriginal and Torres Strait Islander children reported playing sport in the past 12 months.
- Almost 50% of young Indigenous men aged 15–19 living in AFL states (Victoria, South Australia, Western Australia, Tasmania and the Northern Territory) participate in AFL.
- AFL is the second-most popular team sport (after rugby/touch football) among Aboriginal and Torres Strait Islanders, with almost 45,000 Indigenous players – participation is slightly higher among children (8.2%) than among adults (7.3%).
- Participation in AFL increases as one moves away from the major cities – reaching more than 65% for young men aged 15–29 living in remote areas of Australia.
- Around 65,500 Indigenous Australians participated in sport, other than as a player.
- Mental health is estimated to be higher among Indigenous men and women who participate in organised sport, after controlling for an extensive range of other factors.
- Indigenous adults who played football in the previous 12 months reported higher life satisfaction than people who did not participate in sport.
- Indigenous adults who play football report more frequent social contact and are more likely feel they have support outside their immediate household.
- 56% of children who participated in football were assessed as being in excellent health compared to 48% of those who had not participated in any organised sport.
- Children who played football were 6% less likely to be assessed as having learning difficulties due to health issues.
- Boys living in remote areas playing AFL had a 20% lower truancy incidence.

Highlighting Indigenous achievements

Australian of the Year Awards

A number of elite Indigenous athletes have been recognised for their service to sport and the community through Australian of the Year award recognition. These include:

- Adam Goodes – 2014 (Australian of the Year)
- Cathy Freeman – 1998 (Australian of the Year); 1990 (Young Australian of the Year)
- Nova Peris – 1997 (Young Australian of the Year)
- Mark Ella – 1982 (Young Australian of the Year)
- Evonne Goolagong-Cawley – 1971 (Australian of the Year)
- Lionel Rose – 1968 (Australian of the Year).

NAIDOC Awards

The annual NAIDOC Awards, presented at the end of NAIDOC week, recognise the outstanding contributions made by Indigenous Australians to improve the lives of Indigenous people in their communities and beyond, to promote Indigenous issues in the wider community, and demonstrated excellence shown in their chosen field. The awards recognise both a Person of the Year and Sportsperson of the Year, as well various other categories. Basketball player Patrick Mills has won both the Sportsperson of the Year award (2006) and Person of the Year award (2017).

Source: www.clearinghouseforsport.gov.au

Activity

On the following pages, research and create a fact file on two Indigenous athletes. Include information on their sporting career and how they are trying to improve the health and wellbeing of individuals and groups in the community.

Athlete 1: _____

Athlete 2: _____

Activity

Visit www.sportaus.gov.au/yulunga and research two traditional Indigenous games. Include information on:

- background of the game
- players and playing area
- equipment
- game play and basic rules
- scoring
- teaching points.

Game 1: _____

Game 2: _____

Practical activity

As a class, participate in a range of Indigenous games.

Revision

1. Identify the factors that influence resilience during a challenging situation.

2. Outline the factors that would indicate someone is over-stressed.

3. Describe how relaxation techniques, sleeping well and keeping active can help manage stress.

4. What are the seven stages of grief?

5. Identify the different forms of adversity people may experience.

6. Describe the traits someone with positive mental health will usually exhibit.

7. What are the symptoms of generalised anxiety disorder (GAD)?

8. Describe how marijuana may affect your mental health.

Additional notes

Additional notes

Additional notes

Student feedback report

Your feedback helps teachers monitor your learning experiences, to plan for future lessons and make them as meaningful, relevant and rewarding as possible…

1. What did you learn during this unit?

2. Were there any issues relating to this topic that were not covered that you believe should have been?

3. List three things you enjoyed the most and least about this unit.

a.

b.

c.

d.

e.

f.

4. Did you have the opportunity to discuss issues about this topic in class?

5. Did you think the workload was fair?

6. Did you find the content covered in class to be relevant to your age group?

7. How would you rate your knowledge of this topic?

First aid and sports injuries

Titan Education
Customised learning

Activity

Vocabulary list

Match the term to its description.

Term	Description
Unconscious: ____	a. The loss of blood from the blood vessels.
DRSABCD: ____	b. This acronym stands for 'cardiopulmonary resuscitation'.
Recovery position: ____	c. Over exposure to heat, causing an increase in body temperature.
CPR: ____	d. A condition involving narrowing of the airways, making breathing difficult.
Bleeding: ____	e. A condition in which there is too much electrical activity in the brain, leading to a seizure (fit).
Hypothermia: ____	f. A period of recovery after an injury.
Hyperthermia: ____	g. This acronym stands for 'danger, response, send (for help), airway, breathing, CPR, defibrillator'.
Asthma: ____	h. This acronym stands for 'rest, ice, compression, elevation, referral'.
Epilepsy: ____	i. An injury to the skin and underlying tissue caused by fire, heat, extreme cold, chemicals, electricity, friction or radiation.
Rehabilitation: ____	j. Also known as the lateral position. A stable side position a casualty is placed in when.
RICER: ____	k. Unaware of the surrounding environment.
Burns: ____	l. Over exposure to cold, causing a decrease in core body temperature.

ICT tasks

In this unit of work, you will have the opportunity to use technologies to further your health literacy. Your learning experiences will involve:

Critical inquiry

- Research the issues of drowning in Australia. Some issues that you will find information about include: drownings per year, drownings statistics relating to gender and drownings associated with different types of water environments. Create graphs to illustrate the information. Provide a step-by-step procedure for first aiders dealing with potential drowning victims.
- Research three websites that provide reliable, accurate information about first aid and share with a partner. Explain why you are confident that the information contained on the website is reliable.
- Research the different levels of training available for an official first aid officer who has volunteered for the position in a junior sporting club.

Collaborating

- Work in small groups to research the different methods to apply ice in the RICER treatment regime. Take photos of each method/application and illustrate by creating a mind map, collage or poster.
- Conduct a small group survey of the types of injuries suffered by your group in the past. Document the types of treatments they received. Present your findings in one report.

Creating

- Make a video illustrating one of the following:
  - TOTAPS
  - RICER
- Design an A4 digital poster that could be distributed or displayed at a sporting venue to illustrate the symptoms of:
  - Head trauma such as concussion
  - Broken bones
  - Spinal damage
- Create content suitable for an online health promotion campaign to educate tourists about the dangers that are present in our beach environment and tips for sun safety.

TIP: You can use the comment or mark-up function of your PDF viewer to complete this activity.

Emergency care

Emergency care is the aid given to the injured or suddenly ill. A rescuer must act quickly, calmly and correctly in order to save the life of a person and prevent, if possible, the condition worsening.

Emergency care should commence immediately and be continued until medical help arrives. All emergency care treatment is based on common sense and knowledge. These factors go hand in hand in the preservation of life.

The principles of first aid include:

- Promote a safe environment – to the casualty, bystander and first-aider.
- Preserve life – This includes the life of the casualty, bystander and first-aider.
- Prevent the injury or illness from becoming worse – ensure the treatment you provide does not make the condition worse.
- Help promote recovery – this could include the use of ice packs, applying a sling or contacting emergency services.
- Provide comfort to the ill or injured – offer support, cover the patient with a blanket and reassure them.

Activity

Brainstorm what a first-aider should do in an emergency situation.

Assessment of the situation

Before treatment is undertaken a quick and careful assessment of the situation must be made. Individuals should minimise the risk of danger to themselves, the casualty and any bystanders. For example in a road accident the possible dangers may include:

- oncoming traffic
- fire
- gas leaks or fumes
- fuel leaks
- fallen power lines
- other vehicles.

Individuals should engage the help of useful bystanders to telephone for medical assistance, comfort the casualty, help obtain necessary supplies, control traffic flow and control severe bleeding.

Attempt to determine the signs and symptoms of each of the casualties:

- visible signs such as pale skin, broken bones and bleeding
- symptoms are obtained from talking to the patient and having them describe where it hurts or what the pain feels like.

Upon identifying and dealing with the situation, decide the appropriate treatment/ management. Rank the existing conditions in order of priority. If the casualty is unconscious, it is essential to examine him/her. The steps to be taken involve:

- danger (assess the situation)
- response (shout a simple command and gently squeeze the person's shoulder)
- send for help (call triple zero – 000 – for an ambulance)
- airway (ensure there is a clear airway by checking the mouth, clearing it if necessary and tilting the head to open the airway)
- breathing (if not normal, maintain head tilt and chin lift and give two breaths of rescue breathing, allow one second per breath and ensure that the chest falls after each breath)
- compressions (commence CPR)
- defibrillation (if available)
- bleeding (control it quickly)
- shock and other injuries (such as fractures or breaks).

Questions

How do you know which casualty to treat first?

Priority and management procedures

Where there is more than one casualty, a quick assessment of each should give enough information to establish a priority order for treatment. In real life situations, serious accidents rarely see only one injury to one person. A first-aider should be aware of the following:

- correct treatment of one injury might interfere with the correct treatment of another
- treat the most serious injury initially and correctly, then the second injury
- breathing and circulation are the first priorities
- unconscious but breathing casualties should be placed in the recovery position
- temporary control of breathing can be achieved by using a bystander or the conscious casualty
- the noisiest casualty is rarely the most severely injured.

Priority order

Initially, confusion nearly always exists around an emergency situation. The first-aider who arrives first on the scene will need to take control and coordinate the emergency action plan. The priority order of action is as follows:

1. DRSABCD.
2. Call for medical assistance 000 for an ambulance. If using a mobile phone and you are in an area with poor reception or network coverage, use the number 112 instead.
3. Complete a secondary assessment of the casualties – look for signs and symptoms by talking to the casualty and completing a whole of body assessment.
4. Maintain ongoing casualty care by monitoring the casualties' condition and remaining with them until medical care arrives.

Activity

For the following emergency situations, state the order in which treatment should be given. Explain why you have chosen this order.

a. A casualty is bleeding with a deep gash to their leg. _____

b. A footballer has been knocked unconscious in a head clash, but is breathing. _____

c. A bystander has seen a car accident and is screaming hysterically. _____

d. A casualty is unconscious and not breathing. _____

e. A casualty has dislocated their collar bone during a heavy fall. _____

f. A gentleman is complaining about pain in his chest area and is feeling faint. _____

g. A footballer has got up to play the ball after a tackle, but is disorientated. _____

h. A casualty has an open fracture that has pierced the skin of their forearm. _____

_____

_____

Activity

DRSABCD

The acronym of DRSABCD is widely accepted as the first aid priority order for treating any casualty. Identify what each letter stands for and outline the important points for each.

D ▶	
R ▶	
S ▶	
A ▶	
B ▶	
C ▶	
D ▶	

To learn more about DRSABCD, watch the video at https://youtu.be/yBDk_dlzvaQ.

2. Imagine that you are the first person on the scene for the following scenario. What do you need to do?

A medium sized car has accidentally hit a bicycle rider and sent her flying over the handlebars. The driver panics and veers into another car beside them. The cyclist is lying on the road with what appears to be a fracture of the right leg and is bleeding from a cut on her head. The driver of the car is screaming hysterically while the passenger in the second car is trapped against a light pole complaining of a sore neck.

a. Identify the first three steps that you would take.

- _____
- _____
- _____

b. Justify your actions for each step.

_____

_____

_____

_____

_____

_____

_____

_____

_____

c. What could you do to assist since you only have a basic understanding of first aid?

_____

_____

_____

_____

_____

_____

_____

_____

Activity — Practical

Practise the DRSABCD action plan on a manikin.

CPR

CPR (cardiopulmonary resuscitation) is a combination of rescue breathing (mouth to mouth resuscitation) and chest compressions. If someone is not breathing or circulating blood adequately, CPR can restore circulation of oxygen rich blood to the brain. Without oxygen, permanent brain damage or death can occur in less than eight minutes.

CPR is most successful when administered as quickly as possible, but you must determine if it is necessary. It should only be performed when a person is not breathing or circulating blood adequately.

If an unconscious person is not breathing after the airway has been cleared and opened, the rescuer must quickly turn the casualty onto their back and commence cardiopulmonary resuscitation. Rescue breathing is the first step.

REMEMBER: ANY CPR IS BETTER THAN NO CPR.

Remember to use the DRSABCD procedure when handling an emergency.

CPR flow chart

Step 1 **Assess the situation (Danger)**

- Is there a danger to yourself, others or the casualty?
- **Yes** ▸ carefully remove the casualty from the danger or if possible the danger from the casualty.

Step 2 **Assess the casualty (Response)**

- Speak to the casualty and gently squeeze their shoulders.
- If conscious, calm the casualty, treat any injuries and call for medical assistance if necessary.
- If unconscious, ask a bystander to call 000 for an ambulance and continue onto the next step.

Step 3 **Send for help**

- **Call triple zero (000)** for an ambulance or ask another person to make the call.

Step 4 **Open and clear the airway (Airway)**

- Place the casualty in the recovery position, open their mouth and clear the airway.

CPR flow chart

continued…

Step 5 Check for breathing (Breathing)

- Tilt the casualty's head back. Look (to see if their chest is rising), listen (to see if you can hear them breathing) and feel for breathing (on your cheek).
- If not breathing – make sure an ambulance has been called and start rescue breathing.
- If breathing – place in the recovery position and call 000 for an ambulance. Monitor the casualty.

Step 6 Give initial breaths

- Turn the casualty onto their back and give them two initial breaths. Ensure that the chest rises with each breath.
- **If breathing does not return** – start CPR.
- **If breathing returns** – place the casualty in the recovery position and monitor.

Step 7 Start CPR (CPR)

- Give 30 compressions on the lower half of the casualty's breastbone, then tilt the head back, lift the chin, open their mouth and give two breaths.
- Alternate 30 compressions with two breaths until medical help arrives.
- Infant – use two fingers for the compression.
- Young children (1–8 years old) – use one hand only for the compressions.
- Adult/child (8+) – use two hands with fingers interlocked or heel of hand on casualty's chest with other hand locking the wrist. The sternum should be compressed approximately 4–5cm.

Step 8 Apply the defibrillator (Defibrillation)

- If a defibrillator is available, apply it and follow the prompts.
- If the casualty shows signs of returning to life, place them into the recovery position. Monitor them until help arrives.

ICT task

To learn more about how to perform emergency CPR on an adult, watch the YouTube video at https://youtu.be/RMd7OB_WTeU.

Emergency services

When contacting the emergency services the first aider should make sure that they have all of the necessary information before speaking to the operator. They must keep the information brief, accurate and ensure that the message is given clearly and calmly so that they are understood by the operator.

Dial 000 and request the service required, or dial 112 if you are in a remote area and you have limited network coverage. The emergency services include:

- ambulance/ paramedics
- police
- fire brigade.

Medical referral

As soon as a first aider comes across a casualty who requires resuscitation, has suffered a serious injury/condition (such as a broken leg) or is unconscious for a period of time, they must immediately call for an ambulance.

For situations that are less serious, the first aider may allow the casualty to leave the scene and continue with their day to day routine. This should only occur if the casualty has:

- been observed for a period of time – up to 30 minutes
- a normal and calm rate of breathing
- a normal pulse rate at rest
- natural healthy colour
- no other bodily pain

If in doubt, do not let the casualty drive any type of vehicle and seek medical assistance immediately.

Activity

Outline the information that emergency services will require in a first aid situation. For example, give the exact location of the accident and the directions, if possible.

- _____
- _____
- _____
- _____
- _____
- _____
- _____
- _____
- _____
- _____
- _____
- _____
- _____
- _____
- _____
- _____

Managing conditions

When attempting to treat any injury, it is important to recognise the signs and understand the symptoms that might accompany that injury. A sign is something that you can actually see as being hurt or injured, such as severe bleeding. A symptom is something that the sick or injured person tells you, such as blurred vision, nausea or an aching muscle.

Activity

Research the signs, symptoms and management procedures of each medical condition listed below.

Unconsciousness	
Shock	
External bleeding	
Neck and spinal injuries	

For more information on treating someone suffering shock, watch the YouTube video at https://youtu.be/61urGQrmeNM.

Heart attack	
Asthma	
Epilepsy	
Diabetes	
Poisons	

For more information on treating someone suffering a diabetic emergency, watch the YouTube video at https://youtu.be/L06DNMRcy98.

Bites and stings

In Australia we have some of the world's most venomous creatures that can be found in the garden, at a park, in the bush, at the beach, or possibly within your home. Although most bites and stings may be painful, most will not result in an emergency care situation. However, as we do have some of the world's most poisonous, marine creatures, spiders and snakes we should be aware of the signs, symptoms and management techniques required to assist a person, if necessary.

Activity

Research the signs, symptoms and management procedures of each bite and sting listed below.

Snake bite	
Funnel web spider bite	
Red back spider bite	

Bee and wasp sting	
Blue ring octopus sting	
Box jelly fish sting	
Blue bottle sting	

For more information on treating bites and stings, watch the YouTube video at https://youtu.be/MbPDjtJ8n2g.

Activity

Lateral recovery position

Write the correct procedure for putting a patient into the lateral recovery position (assuming the patient is lying in their back). Describe the steps through a flow diagram. On completion, practise implementing the lateral recovery position with a partner.

Phase 1

_____

_____

_____

Phase 2

_____

_____

_____

Phase 3

_____

_____

_____

Phase 4

_____

_____

_____

Phase 5

_____

_____

_____

For more information on how to place a person in the recovery position, watch the YouTube video at https://youtu.be/GmqXqwSV3bo.

Managing injuries

The management of an injury is usually dependent upon the type of injury that has been sustained. Due to the environment that we work and/or play in, a variety of injuries may occur in different situations. As a fist aider it is important that you can identify the symptoms of a variety of injuries and then be able to administer the correct management techniques. Prior to assisting an injured person remember to make sure the environment is safe for you and the injured person and that you ask bystanders and/or the injured person about what actually happened. Call for assistance, stay calm and be positive.

For more information on how to treat fractures, watch the YouTube video at https://youtu.be/2v8vlXgGXwE. For more information on how to treat head injuries and concussion, watch the video at https://youtu.be/a4cIFZx1f2E.

Activity

Research the signs, symptoms and management procedures of each injury listed in the following table.

Fracture of limbs	

Dislocations	
Concussion	
Burns	
Cramps	

Principles of sports injury management

While there are many benefits of playing sport and being physically active, there are also inherent risks associated with injury to the body. Soft tissue injuries are a common occurrence when playing sport. Soft tissue injuries include injuries to muscle, ligaments, tendons and blood vessels. Soft tissue injuries are often painful and can result in weeks or even months of rehabilitation before the athlete is ready to resume competition.

Prevention

Sport is universally recognised as an effective way to keep in shape for most people, and a great start on the road to a healthy lifestyle. However, organised sport and activities can sometimes have adverse effects in the form of injury.

A study of Australians who were admitted to hospital after being injured in sport identified the most common sporting activities leading to injury. These included: Australian football; basketball; soccer; netball; rugby league/union and cycling. Rollerblading and skateboarding were also common injury causing culprits among children.

With research warning that children who experience sporting injuries are at a higher risk of suffering from re-injury in the long term, it's important to take some sensible precautions to avoid injury in the first place.

Following are some general rules for injury prevention no matter what sport you play. While it is impossible to prevent every injury, research suggests that injury rates could be reduced by 25% if athletes took appropriate preventative action.

Activity

The eight factors could contribute, either directly or indirectly, to the occurrence of sporting injuries. The sportsperson has some degree of control over all of these factors in relation to his or her participation in sporting events. For each contributing factor, suggest ways of preventing the injury from occurring.

1. Body contact

2. Facilities

3. Sporting equipment

4. Weather

5. Warm up/cool down

6. Technique

7. Diet

8. Fitness

How does warming-up help reduce the risk of injury?

Most athletes perform some type of regular warm-up and cool down during training and competition. A warm-up will increase the blood flow to the working muscle which results in decreased muscle stiffness, less risk of injury and improved performance. Additional benefits of warming up include physiological and psychological preparation.

Why warm-up?

Warm-ups help improve muscle flexibility and raise body temperature. Warm-ups should aim to:

- prepare our muscles for the stretching phase
- take at least five to ten minutes
- increase the amount of blood flow to the working muscles
- raise a light sweat.

How can you warm-up?

A warm-up could be as simple as a light jog, a short game, or a lead in activity. Quite often the warm-up uses the same skills required in the sport you are going to play. The warm-up activity must:

- raise the body's temperature to the point of a light sweat
- stretch the major muscle groups that will be involved in the sport
- involve movement of the whole body
- include some sort of sport-specific routines which involve the actual movements that you would use in a game.

Activity

Recommend ways to effectively perform a warm-up. For example, stretch gently and slowly, keep breathing.

Activity

Practical

In pairs, select a sport and plan a 10–15 minute warm-up session. Your plan must include:

- low intensity activities
- stretching
- sport specific activities.

Next lesson, your teacher will select certain pairs to conduct their sessions for the class.

Incident

Sports injuries are commonly caused by overuse, direct impact, or the application of force that is greater than the body part can structurally withstand. There are two kinds of sports injuries: acute and chronic. An injury that occurs suddenly, such as a sprained ankle caused by an awkward landing, is known as an acute injury. Chronic injuries are caused by repeated overuse of muscle groups or joints. Poor technique and structural abnormalities can also contribute to the development of chronic injuries.

Activity

For the following common sense requirements, describe how the incidence of sporting injuries could be decreased.

Common sense requirement	How it may decrease sporting injuries
Ensuring the participants are fit enough to take part	*For example, athletes that have not trained correctly will not have the cardiorespiratory capacity, strength, skill, agility and energy levels to compete in their chosen sport.*
Use the correct technique	
Be involved in a thorough warm-up	
Use protective and safety gear as required	
Play by the rules and regulations of the sport	
Recognise an unsafe environment	
Stop when you are injured or in pain	
Compete against other of a similar ability and/or age	

Activity

The causes of sports injuries can be grouped into three main areas: human factors, environmental factors and equipment. Provide a brief definition and examples for each.

Human factors

Environmental factors

Equipment

Acute phase

The acute phase of any injury is said to be the first 48 hours and it is characterised by some or all of the following:

- immediate pain
- tenderness
- swelling
- inflammation
- deformity
- loss of normal function of the injured area.

With all sports injuries, it is important to have a set procedure to follow. The following STOP procedure allows the coach or sports trainer to assess the severity of the injury and determine whether the player should continue or not.

Activity

The acronym STOP is widely used for assessing the nature of the incident and prioritising an action plan. Outline the important points for each component of the acronym.

S	Stop	
T	Talk	
O	Observe	
P	Prevent	

Assessing injuries with TOTAPS

Injury management involves identifying an injury, treating it and then returning to the sport. It's extremely important that sports players are adequately rehabilitated before returning to sport. If they are not, the injury can become much worse. For serious sports injuries, always get help first. For all other sports injuries, remember TOTAPS to assess.

Activity

Provide a description for each component of the TOTAPS acronym.

T	Talk	
O	Observe	
T	Touch	
A	Active movement	
P	Passive movement	
S	Skills test	

After using the TOTAPS assessment you should be able to make a more informed decision as to whether the player can continue to play or should leave the field/court. If the player experiences any pain during the assessment they should not be permitted to continue playing as it may worsen the injury.

For more information on TOTAPS, watch the video at https://youtu.be/q9KUN4y_Qrg.

TIP: You can use the comment or mark-up function of your PDF viewer to complete this activity.

Activity

Develop a flow chart diagram for the TOTAPS assessment of an injury.

Referral

Medical assessments be should be sought as soon as possible to ascertain the full extent of any injury, and to commence rehabilitation. It must be noted that in the first 48–72 hours after an injury there are certain actions that need to be avoided. These include:

- the application of heat (spas, saunas and hot liniments)
- drinking alcohol
- physical activity
- massage.

All of these actions will increase blood flow and therefore promote swelling at the injured site.

Rehabilitation

Rehabilitation after an injury can take some time depending on the type and severity of the injury, as well as the degree of fitness and activity level of the athlete. Usually, the fitter and more active the person the quicker they will recover. A qualified sports physician or physiotherapist should supervise the process in consultation with the injured athletes coach.

The aim of a rehabilitation program is to:

- minimise and reduce swelling
- hasten healing
- restore optimal function of the injured area
- restore flexibility

Cloze passage activity

Select from the word bank below to complete the passage.

Word bank

cured	ligaments	six	twelve
course	original	six weeks	twelve weeks
eliminated	out dated	strengthening	vital
flexibility	physiotherapists	treatments	
functional	rehabilitation	tendons	

Exercise is a _____ part of the rehabilitation process for most sporting injuries. The idea that an athlete is completely _____ once the _____ on the therapist's couch are over is simply _____ . Instead, when athletes visit _____, in conjunction with receiving a _____ of treatment, they will be set specific _____ and _____ exercises. Exercises are included in _____ programs to ensure the injury site returns to a fully _____ state and/or to ensure that the _____ cause of the injury is _____ .

Muscle tissue can take up to about _____ to recover, while _____ and _____ can take upward of _____. Bones and joints require _____ to _____ weeks to heal while more serious injuries, for example, the cruciate ligaments in the knee, can take up to twelve months or longer to recover.

Activity

1. Design a rehabilitation program for one of the following injuries: a hamstring tear, shoulder dislocation, or an ankle sprain. The rehabilitation program should include:
   - an explanation of the process and benefits of progressive mobilisation, including specific exercises and advice
   - different types of stretches, outlining the benefits
   - conditioning exercises for the injured area, with reasons why conditioning is so important
   - an exercise program for total body fitness.

2. Identify rehabilitation health professionals (including contact details and the services they provide) in your local area.

3. Describe the importance of a full rehabilitation to the prevention of further injury.

Case study

Rehabilitation

Nancy has sprained her ankle while playing soccer.

While suddenly stepping to the left off her right foot, she inverted her ankle and over-stretched the ligaments. There was sudden pain, followed by significant swelling and loss of function.

Nancy did the right thing – she immediately stopped playing and used the RICER acronym to deal with the situation.

The doctor took x-rays to rule out any fracture and diagnosed a sprain of the anterior fibula ligament.

Activity

Help Nancy plan the rehabilitation of her ankle by recording, in order, what might be required for rehabilitation. Remember that the aim is to restore all components of pre-injury and minimise the probability of re-injury. The key is correct treatment and appropriate graded exercises.

Types of sports injuries

A large number of Australians participate in some form of sporting activity for exercise, for relaxation, to compete or to earn a living. As a consequence, they may suffer a large number of sports-related injuries. Injuries may be classified according to their cause or in relation to the specific tissue damage.

Activity

Define the following types of injuries and provide two examples for each injury.

Hard tissue

Definition **Examples**

Soft tissue

Definition **Examples**

Overuse

Definition **Examples**

Heat injuries

Definition **Examples**

Activity

1. Distinguish between hard and soft tissue injuries.

2. Explain the nature of overuse injuries.

3. Research five sports and list the common injuries for each sport. Identify the risk factors for each injury and strategies to reduce the incidence of these injuries occurring.

4. Explain how an athlete can avoid heat injury when exercising in summer.

TIP: You can use the comment or mark-up function of your PDF viewer to complete the activity.

Managing sports injuries

The management of sports injuries is dependent on the type and severity of the injury. A doctor should be consulted if pain persists for more than two to three days. Injuries may be worse than first assessed and delays in proper treatment can affect recovery.

Slings

Slings are used to immobilise an injury by providing support and protection from further injury. The three main types are arm slings, elevation slings and collar and cuff slings. These need to be applied from the injured side of the casualty, so that the sports trainer/ first aider can provide extra support when necessary.

Activity

Recommend a range of items which could be used as a sling if no triangular bandage is available.

Alternatives to a sling

Arm slings

Arm slings are used to support an injured forearm and/or wrist.

1. Place an open triangular bandage between the chest and injured arm, with one end of the base length over the uninjured shoulder and the other end pointing towards the ground – point of bandage is near the elbow.
2. Bring the injured forearm slightly above the horizontal position.
3. Tie the lower end of the bandage to the upper end in the hollow above the collarbone on the injured side.
4. Carefully arrange the bandage so that the fingers are showing.
5. Bring the point of the bandage to the front of the injured elbow and secure with a safety pin.
6. Check the circulation by applying gentle pressure to a fingernail (normal colour should return immediately to the nail when you stop pressing it).

Elevation sling

Elevation sling is used to support the elbow and prevents the arm from pulling on an injured shoulder or collarbone.

1. Place the casualty's arm naturally by the side with elbow bent and forearm across the chest – fingers pointing towards the opposite shoulder.
2. Drape the open triangular bandage over the forearm, with the point past the elbow and one end over the uninjured shoulder.
3. Support the arm; tuck the base (long side) of the bandage under the hand and forearm and around the elbow.
4. Bring the lower end up diagonally across the casualty's back to meet the other end at the shoulder.
5. Gently adjust the height of the sling.
6. Tie the ends as close to the fingers as possible.
7. Tuck the point firmly in between the forearm and bandage to support the elbow.
8. When you are sure that the sling is firm, secure the fold with a safety pin.
9. Check circulation.

Collar and cuff sling

Collar and cuff sling is useful for a fracture of the upper arm or an injured hand.

1. Make a clove hitch, using a narrow bandage. To make a clove hitch, make two loops, place your hands under the loops and bring them together, slide the loops over the casualty's arm and position them at wrist, tie the ends around neck
2. Put two loops over the wrist of the injured arm.
3. Gently elevate the injured arm against the casualty's chest.
4. Tie the bandages ends together around the neck, positioning the knot in the hollow of the collarbone.

For more information on how to make a sling, watch the video at https://youtu.be/PwfBGkBXkFA.

Activity — **Practical**

Select a partner and practise the correct procedures for each of the above mentioned slings.

TIP: You can use the comment or mark-up function of your PDF viewer to complete Question 2.

Bandaging

A bandage is any material used to wrap or cover a wound. Bandages are used to:

- keep dressings in place
- control bleeding
- protect a wound from dirt and infection
- give support and relief from pain
- restrict movement
- minimise any swelling
- immobilise fractures – usually with splints.

The two major types of bandages used are triangular and roller. In some situations where a commercial bandage is not available, it may be necessary for the person administering first aid to improvise.

Activity

1. Recommend a range of items which could be used as a bandage if no commercial bandage is available.

- _____
- _____
- _____
- _____
- _____
- _____
- _____
- _____
- _____
- _____

2. Identify key points that should be taken into consideration when applying bandages to an injured area.

Key points for applying bandages

Triangular bandages

Triangular bandages can be used to secure a dressing or padding at the knee or elbow when a roller bandage is not available.

1. Fold a narrow hem across the base of the bandage.
2. Place the centre of the base on the leg below the kneecap with the point towards the top of the leg.
3. Take the bandage ends around the leg, cross it over at the back and bring to the front.
4. Tie above the kneecap.
5. Fold the rest of the bandage down and secure it with some tape, or alternatively, just tuck it in.

Roller bandages

Roller bandages can be elastic or non-elastic. They are made from long strips of material – cotton, gauze, elastic or synthetic and come in varying widths. They can be used to wrap around body parts of the body that are fairly straight, such as the wrist or fingers.

1. Place the tail end of the bandage below the wound, keeping the roll of the bandage uppermost.
2. Make one full turn over the limb or trunk to hold the tail in place.
3. Bandage along the limb or trunk in a spiral fashion, each turn of the bandage covering two-thirds of the one before.
4. Fasten the end with adhesive tape or use a clip or just tuck it in.
5. Check circulation and adjust the bandage if necessary.

Activity **Practical**

In pairs, practise bandaging an injured wrist and forearm following the procedures mentioned above for a roller bandage. For more information on how to apply a bandage, watch the YouTube video at https://youtu.be/fKzdiuseEIw.

TIP: You can use the comment or mark-up function of your PDF viewer to complete this activity.

Taping

The risk of injury can be prevented or reduced by effective taping. It is a very effective protective measure in contact sports or sports that require twisting and turning.
Taping may be used:

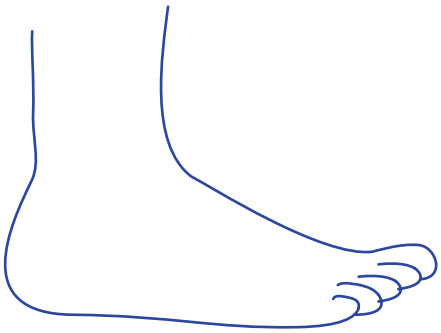
- to prevent injury
- to isolate an injury (that is, to immobilise and support a joint or bone injury)
- for immediate treatment of an injury, such as compression bandages to assist in the control of bleeding and swelling following trauma.

Activity

Read the information presented for each step and then draw the correct taping procedure on the blank ankle diagram.

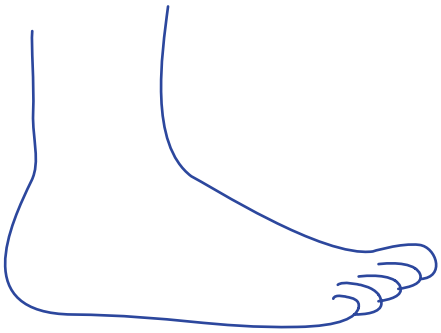
Step 1 Anchor strips

Clean and dry the ankle area. At this point you may wish to apply an under-wrap, an adhesive spray, or shave the ankle area. Start the tape at the shin on the front of the leg. Continue the tape across the back of the leg, following the normal contour of the leg. Overlap the tape at the front of the leg. It is best to apply two anchors.



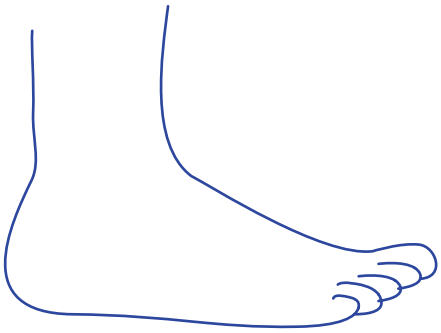
Step 2 Stirrup strips

Start the first stirrup on the inside of the lower leg on the already applied anchor strips. Lay the tape down along the inside of the leg to cover the back half of the ankle bone. Continue the tape under the heel and then apply pressure on the tape upwards on the lateral side towards the anchor strip. Apply a second stirrup which should overlap by about half of the previous stirrup. Apply further stirrups depending on the severity of the injury.



Step 3 Further anchor strips

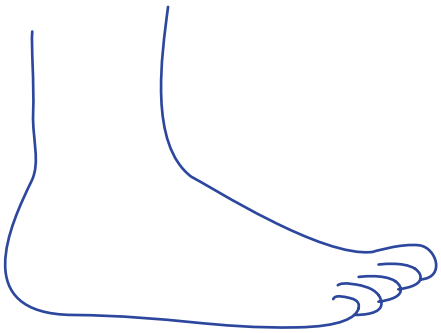
Apply two further anchor strips as in step 1.



TIP: You can use the comment or mark-up function of your PDF viewer to complete this activity.

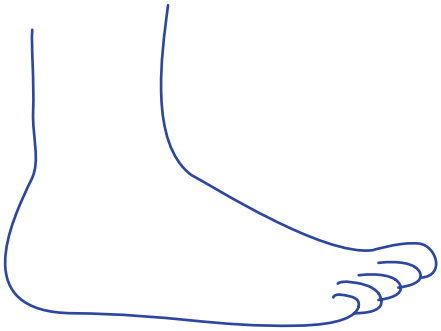
Step 4 Figure of six taping

Start on the inside of the lower leg and lay tape down across the inside ankle bone to the sole, then under the heel to the outside of the foot. Tape is now applied from the outside border of the foot, upwards and across the top of the foot to finish on the inside. The tape finishes on the lower part of the original tape's starting point.



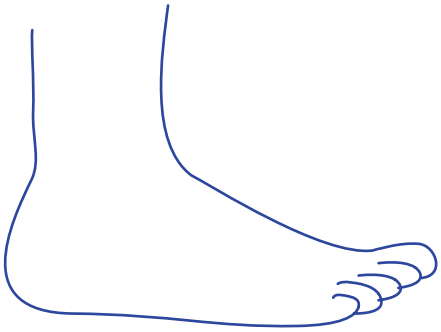
Step 5 Further anchor strips

Apply two further anchor strips as in step 1 and step 3.



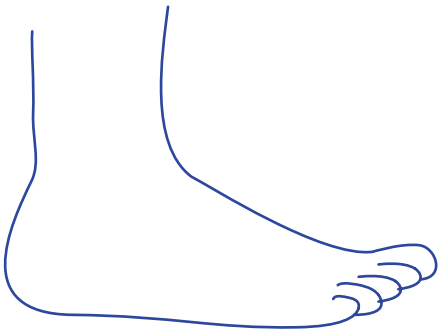
Step 6 Heel locks

Start the tape on the inside border of the foot. Lay the tape across the front of the ankle and down to the sole underneath the lateral bone. Pass the tape under the heel, backwards across the inside of the heel and coming around the back of the heel and passing back across the front of the foot. Finish the tape on the same side that it started. For added stability do a second heel lock but this time start on the outside border of the foot.



Step 7 Closing down

Start the tape on the lateral side of the leg and wind spirally down the leg progressively overlapping one half of the tape until the level of the ankle. For additional support you could apply two 'figures of eight' around the ankle – one starting from the outside and the other starting from the inside. Complete with one layer around the arch of the foot.



Activity Practical

Select a partner and practise the correct taping procedures for an injured ankle. Use the following grid to evaluate your partner's taping of your ankle.

	Poor (0)	Needs work (1)	Satisfactory (2)	Good (3)	Very good (4)	Excellent (5)
Locks applied properly	☐	☐	☐	☐	☐	☐
Tape applied correctly (correct direction, correct order, smooth)	☐	☐	☐	☐	☐	☐
Appropriate tape pressure	☐	☐	☐	☐	☐	☐
Tape overlaps half – no gaps	☐	☐	☐	☐	☐	☐

TOTAL (score out of 20): _____ / 20

Notes

For more information on how to strap an ankle, watch the YouTube video at https://youtu.be/cyw8JoMlpLQ.

RICER

Soft tissue injuries such as bruises and sprains often cause bleeding and swelling inside your body around the injured area. By putting ice or a cold compress on the injured area you can reduce the bleeding and swelling. Bandaging and elevating the body part will reduce any swelling even more. By doing this you will recover from an injury more quickly. After you have prevented further injury it is time to apply the RICER method. Sports medicine professionals have identified this method as the best way to reduce bleeding and swelling.

Ice must never be placed on the skin as it can cause an 'ice burn' due to the extreme cold. It is best to place the ice in a moistened towel which can be moulded to the injured part.

Activity

Describe how each stage of the RICER regime can assist in treating and minimising the damage of a soft tissue injury.

R	Rest	
I	Ice	
C	Compression	
E	Elevation	
R	Referral	

Activity

Practical

Apply the RICER procedure to a range of soft tissue injuries. For more information on the RICER procedure, watch the YouTube video at https://youtu.be/pOXmvt85fuc.

Additional notes

Additional notes

Additional notes

Student feedback report

Your feedback helps teachers monitor your learning experiences, to plan for future lessons and make them as meaningful, relevant and rewarding as possible…

1. What did you learn during this unit?

2. Were there any issues relating to this topic that were not covered that you believe should have been?

3. List three things you enjoyed the most and least about this unit.

a.

b.

c.

d.

e.

f.

4. Did you have the opportunity to discuss issues about this topic in class?

5. Did you think the workload was fair?

6. Did you find the content covered in class to be relevant to your age group?

7. How would you rate your knowledge of this topic?