

ALIVE & WELL

HELPING TEENS MAKE
HEALTHY CHOICES



GROWING UP 5TH GRADE

NAME:

CLASS PERIOD:



THANK YOU TO OUR SPONSORS



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My Personal Health Goal

Name:

My Goal:

In each box mark a + for every day that you did well with your personal health goal, and a - for every day you could have done better.

Week 1

<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
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Week 2

<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
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Week 3

<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
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Week 4

<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
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BE YOURSELF



Quote: Be the best you that you can be.

1. Every decision you make has _____.
2. Setting _____ helps keep you on the _____ path.
3. Goals are something I want to _____.
4. Two of my goals:
 - a. _____
 - b. _____
5. Self-Control: _____ myself do what is _____.
6. Once you get into a _____ it is very _____ to get _____ of it.
7. Things I should DODGE:
 - a. _____
 - b. _____
 - c. _____
 - d. _____
8. To dodge bad things, I must _____ think about the _____ and use _____.

STEPS TO MAKING A GOOD DECISION

Name: _____

	PROS	CONS
1. _____ YOUR GOAL		
2. GATHER _____		
MY DECISION: _____ _____		

CONSIDER THE CONSEQUENCES (POSSIBLE CONSEQUENCES):

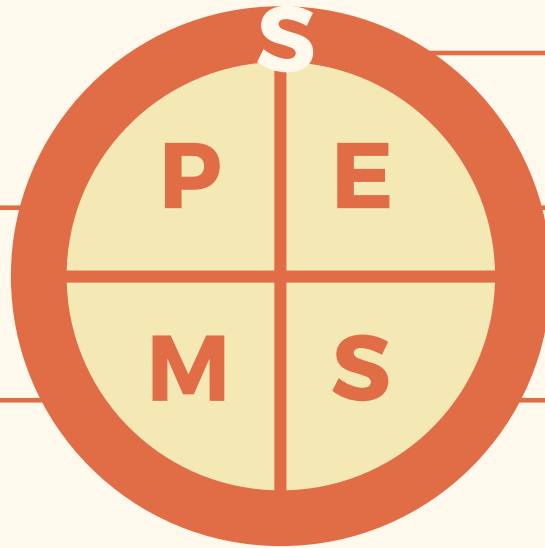
*Can you live with those consequences?

4. _____ YOUR DECISION.

5. EVALUATE YOUR _____

MATURITY

Quote: "You have to do your own growing up, no matter how tall your grandfather was." ~ Abraham Lincoln



Changes that happen during puberty:

Mentally healthy: Putting ----- messages into my mind.

Socially healthy: Not allowing others to ----- my actions.

Emotionally healthy: Using ----- even when I don't feel like it.

Spiritually healthy:

My ----- match my

-----.



HEALTHY RELATIONSHIPS

TO HAVE GOOD FRIENDS, YOU MUST BE A GOOD FRIEND

A huge part of having healthy relationships is showing

_____.

1. Respect is learned, earned, and _____.
2. I can work on being more respectful by: _____

3. If you expect respect, then be the first to _____ it.
4. You can't take _____ back after you have _____ them.
5. Friends _____.
6. Ways your brain is affected from extended technology use:
 - a. Increased _____
 - b. Limits time with _____
 - c. Affects emotional _____



FRIENDS



ARE YOU A RESPECTFUL PERSON?

TRUE

FALSE

I TREAT PEOPLE THE WAY I WANT TO BE TREATED

I TREAT PEOPLE LIKE THEY ARE VALUABLE

I AM SENSITIVE TO OTHER PEOPLE'S FEELINGS

I NEVER INSULT PEOPLE OR MAKE FUN OF THEM

I NEVER EMBARRASS PEOPLE ON PURPOSE

I AM POLITE

I LISTEN TO WHAT OTHERS HAVE TO SAY

I DON'T JUDGE PEOPLE BEFORE I GET TO KNOW THEM

WANTED: A GOOD FRIEND

In the space below, write a want ad for what you think makes a good friend. You can include things like character qualities, must haves, and "it would be nice if".

RESPECT

Quote for the day: Those who _____ the crowd usually get _____ in it.

1. Self-esteem: My _____ of myself.

2. Things I can fill my life with:

3. Peer pressure can _____ you or _____ you.

4. Seven Steps to _____ a bully:

1. Don't _____ yourself.

2. Talk to a _____ adult.

3. Act _____.

4. Make _____ friends.

5. Avoid _____ situations.

6. Rebuild your _____.

7. Do not resort to _____.

5. Abuse: No one has the _____ to touch you in the underwear zone without your _____.

6. List some ways you can show affection without touching?

7. Modesty: Keeping the _____ parts of my body _____ covered.

MEDIA & TECHNOLOGY

"BE YOURSELF, EVERYONE ELSE IS TAKEN"

SOME TYPES OF MEDIA:



TV



VIDEO GAMES



MUSIC



SOCIAL MEDIA

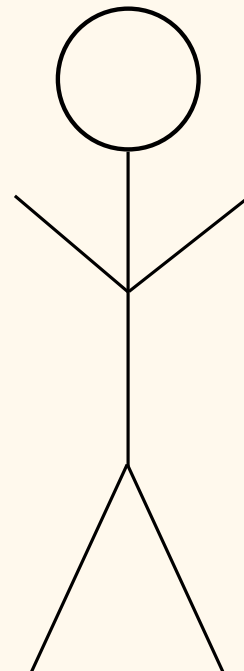
1. Garbage _____, garbage
_____.

2. A mature person uses discernment: The ability to choose what is _____ and avoid what is _____.

3. Technology and media guidelines:

- a. _____
- b. _____
- c. _____
- d. _____

MEDIA KID:



I NEED HELP!

A secret struggle can tear a person apart. Be sure to talk to a trusted adult, your school counselor, or one of the organizations listed below.

For more helpful websites, visit aliveandwellteens.com or 211.org.

COUNSELING



**CROSSWINDS
(FAMILY COACHING
AND COUNSELING)**
Crosswindseyouth.org
855.927.7963



**RENOVATE COUNSELING
SERVICES**
renovatecounseling.org
260.307.5030

UNPLANNED PREGNANCY



BARB HARTSELL
Pregnancy Counselor
Bethany Services
bhartsell@bethany.org
260.820.3404



THE HOPE CLINIC
Berne or Decatur
B: 260.589.3561
D: 260.728.4191
24/7 Help Line:
1.800.395.HELP



HELPING HANDS
Pregnancy Resource
Bluffton, IN
helpinghandscpc.org
260.824.4263



A HOPE CENTER
Fort Wayne
ahopecenter.org
24/7 Help Line:
260.422.3544

ABUSE



**NATIONAL DOMESTIC
VIOLENCE/ABUSE
HOTLINE**

TEXT: loveis to 22522
1.800.799.SAFE
1.866.331.9474

NAME: _____

TECHNOLOGY REVIEW



THINK OF THE SHOWS YOU WATCH, GAMES YOU PLAY, AND MUSIC YOU LISTEN TO WHILE YOU ANSWER THE FOLLOWING QUESTIONS:

How many hours per day do you usually spend on a device outside of school work? _____

Do you think this is a good use of your time? _____

If not, then what could you do that would be a better use of time?

What types of messages do you think the shows you watch, games you play, or music you listen to could be communicating to you?

Are these messages that will help you achieve your desired future? _____

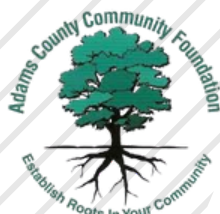
If no, are there different games you could play, shows you could watch, or music you could listen to that would help you achieve your dreams? What are they?

PARENT SIGNATURE: _____

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BULLYING/TEASING INTERVIEW

Name: _____

Trusted Adult's Name: _____

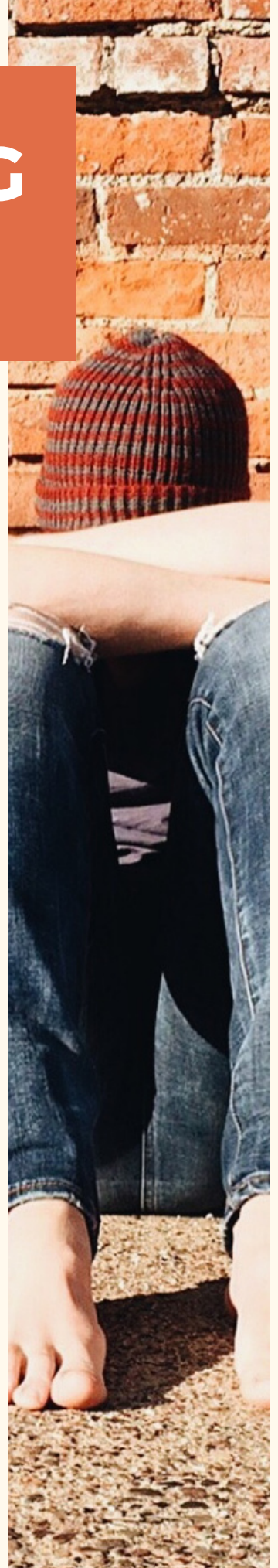
Tell me about a time when you were bullied or teased:

How did that make you feel? _____

What did you do about it? _____

Did the bullying/teasing stop? How/when? _____

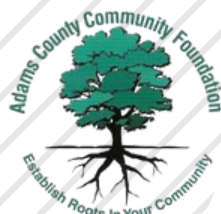
Parent Signature: _____



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NAME: _____

QUALITIES OF A GOOD FRIEND



Sometimes we choose friends for the wrong reasons. This assignment is meant to help you take a step back to think about what really matters to you.

1. What character qualities do you think make a person a good friend?

2. From the list you made above, write down every quality that your best friend possesses.

If you do not have a best friend then pick the person you hang out with the most.

3. From the list on question 1, write down every quality that you believe you possess.

4. Do your current friend's character qualities match with your answer to question 1?

Yes

No

Sometimes

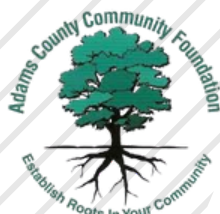
If yes, you should thank them for being such a good friend. If no or sometimes, maybe it is time to reevaluate your friendship

Parent Signature: _____

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MY PERSONAL HEALTH GOAL

Due Session 3

NAME:

MY GOAL IS:

STEPS TO REACH MY GOAL:

BARRIERS THAT COULD KEEP ME FROM REACHING MY GOAL:

PERSONAL CHOICES I WILL HAVE TO MAKE:

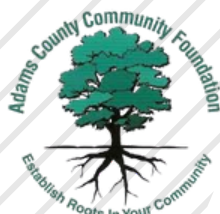
MY PERSONAL ACCOUNTABILITY:

PARENT SIGNATURE: _____

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A DAY IN THE LIFE



List at least 10 decisions that you have made in the last 24 hours:

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

Who or what had the biggest influence over your decision making?

How have your parents/family influenced your decisions?

How would your decisions be different if you were raised by a different family?

What could that teach us about how to treat other people when we don't agree with them?

Are you capable of thinking for yourself, or are you stuck with making the same decisions of those around you? _____

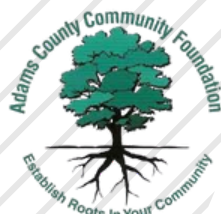
Who is responsible for your life? _____

Are there decisions you have made that seem insignificant? Are they REALLY insignificant?

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