

HealthSpeaks: Using Poetry in Development of Health Education Curriculum

Authors:

Jenelle N. Robinson, PhD, CHES

Assistant Professor of Nutrition
College of Agriculture and Food Sciences
Florida A & M University
306E S Perry Paige, Tallahassee, FL, 32303
Telephone: 850-599-3570
E-mail: jenelle.robinson@famuedu

Jevetta Stanford, EdD

Medtronic ENT
Clinical Project Manager
7643 Southpoint Drive North
Jacksonville, Florida 32216
Telephone: 904-279-0977
E-mail: jevetta.stanford@medtronic.com

Fern Jureidini Webb, PhD

Associate Professor & Research Director
College of Medicine Department of Community Health and Family Medicine
University of Florida
653 W. 8th Street, LRC 3rd Floor
Jacksonville, Florida 32209
Telephone: 904-244-7525
Email: fern.webb@jax.ufl.edu

ABSTRACT

Purpose: The purpose of this study was to evaluate adolescent satisfaction with the curriculum HealthSpeaks. HealthSpeaks was designed to use poetry to increase awareness about healthy behaviors and health conditions. Research has shown that using poetry in education and related fields promotes social connections, information retention, and awareness among adolescents. Using poetry may also assist with increasing knowledge about health behaviors and certain conditions. **Methods:** HealthSpeaks is a four-lesson curriculum that focused on healthy eating and exercising, substance abuse, mental health, and sexually transmitted infections. The curriculum was developed and implemented by a health sciences professor to focus on junior high school students participating in a community organization's summer program. Students completed an evaluation after all four lessons were complete. The evaluation form included Likert-scale responses as well as open-ended questions to assess students' satisfaction with HealthSpeaks. **Results:** A total of 17 adolescents completed HealthSpeaks as part of a summer program in Charleston, West Virginia and the subsequent evaluation. The majority of participating adolescents felt that incorporating poetry into health education lessons was an effective teaching method. **Conclusions:** HealthSpeaks, and similarly styled curricula, may be a valuable way to present health education topics. Health educators must be creative when teaching health education to adolescents. **Recommendations:** Health educators should incorporate poetry or similarly designed curricula like

HealthSpeaks, to influence adolescents' health behavior practices. Research recommendations include assessing knowledge and awareness levels pre- and post- poetry-based health education curricula. Other recommendations include exploring whether self-reflective poetry influences health behaviors more than when students read poetry relevant to health conditions written by others.

Keywords: adolescents, HealthSpeaks, poetry-based curriculum, health education

INTRODUCTION

Successful methods to engage adolescents in health education have taken a variety of forms. Lectures, games, case studies, guest speakers, and educational videos that encourage viewer discussion have been employed. These methods have been most often used to promote memory retention or to reinforce lesson materials. Creative methods and best practices must be employed to continuously engage adolescents in health education. In efforts to expand methods of content creation and delivery, the use of poetry may prove useful in encouraging knowledge and engagement in health education (Gilbert, Sawyer, & McNeill, 2009; McKenzie, Neiger, & Thackeray, 2013).

Rhythm, rhyme, poetry, songs, and short narratives have been used in education and related fields to connect to students, relay information, encourage reflection, provoke awareness, enhance emotional intelligence, improve self-esteem, inspire creativity, and as therapeutic means (Abernathy, 2017; Cantor, 2006; Kloser, 2013; Lafrenière, Cox, Belliveau, & Lea, 2013; Mayer et al., 2004; Simecek, 2015; Wellberry, 2006; Whalen, 2000).

In an era in which students are often overstimulated with an onslaught of information from a variety of technological sources, the use of poetry offers a distinct advantage as it facilitates content through communicating what may be relevant in current culture. Its relevancy can invoke attention and listening while highlighting content in an engaging way (Kane & Rule, 2004; Stovall, 2006).

PURPOSE

The purpose of this study was to evaluate adolescent satisfaction with the curriculum HealthSpeaks. HealthSpeaks was designed to use poetry to increase awareness about healthy behaviors and certain health conditions.

Poetry as a Pedagogical Tool

As a pedagogical tool, instructors may use poetry as a vehicle to foster relationships and help students connect to their environments beyond the classroom. (Skudrzyk, Zera, McMahon, Schmidt, Boyne, & Spannaus, 2009; Stovall, 2006; Xerri, 2014). One of the more popular genres of poetry includes “spoken word poetry,” which has been well-researched in health promotions literature (Gall & Gillett, 1980; Omatseye, 2007; Piro & Anderson, 2015; Saka, 2010; Smart & Featheringham, 2006; Tofade, Elsner, & Haines, 2013). Spoken word poetry is popular among the hip hop culture and has been used to open communication channels in sensitive areas of health in which stigma may be present (Kloser, 2013; Lansana, 2004). In addition, discussion of spoken word poetry, guided by a good facilitator, can promote critical thinking and allow for cooperative learning to occur (Gall & Gillett, 1980; Omatseye, 2007; Saka, 2010). It can also be useful in helping to engage students with health and social issues and societal values (Piro & Anderson, 2015; Smart & Featheringham, 2006; Tofade, Elsner, & Haines, 2013). Poetic messages can be crafted that promote change or improvement in areas of health and allow students to address issues that affect their immediate health (Begoray, & Banister, 2005; Byrd-Bredbenner, O'Connell, Shannon, & Eddy, 1984).

TEACHING METHOD

Creating the Poetry-Based Curriculum *HealthSpeaks*

In an effort to determine the value of poetry in health education curriculum, four poems were created based on four major topics in health education curriculum taught in most middle and high schools. Topics included healthy eating and exercising; substance abuse; mental health; and sex and sexually transmitted infections (STIs). The writer, instructor, designer, and facilitator of the lessons was a health sciences professor at a

local university who had experience in writing and performing poetry. Based on the content created in the four poems, four adjoining health education lessons were created and combined to form a curriculum entitled *HealthSpeaks* (Table 1). The purpose of the project was to design a creative health education curriculum with lessons that would each employ and explore the value of poetry in engaging students in health education. No additional materials were used in this curriculum.

HealthSpeaks was piloted with junior high students at a Boys and Girls Club Summer Program. The age range of the participants was 11 to 18. Learning objectives for lessons included: 1) Students will think about health in a new way; 2) Students will learn something new about health; 3) Students will discuss reasons for certain health behaviors; and 4) students will understand how to apply positive health behavior principles into their everyday lives. One lesson was provided each week for four weeks. Each lesson was designed to take 30-45 minutes.

The topic for lesson one was "Healthy Eating and Exercising." A poem entitled "I'm Fat" was spoken from "Obesity's" perspective. The story illustrated how a poor diet can lead to heart disease. After the poem, students were asked about significant themes or words they heard from the poem. The next question concerned their family history of certain diseases and reasons why people may get those diseases. Current dietary habits were also discussed. Lastly, students were provided four principles on how to incorporate healthy eating and exercising into their everyday lives.

The topic for lesson two was "Sex and STIs." A poem entitled "Sex, Thighs, and Lies" was spoken that told of some of the negative results of having sex and/or unprotected sex. After the poem, students were asked to name some significant things heard from the poem. They were also asked if they knew family or friends who had suffered from an STI. They were then probed to see why they believed people suffered from these diseases. Thereafter, attraction, abstinence, protection, choices, and sexual activity were discussed. Lastly, students were provided four principles on the value of sex, the body, and associated principles.

The topic for lesson three was "Mental Health." A poem entitled "Depressionville" was spoken that told about a city called "Depressionville" where all the negative consequences of depression come to past. After the poem, students were asked if they ever felt the emotions detailed in the poem as well as why some people become depressed. Statistics on teens and depression were provided along with information on suicide. Lastly, students were provided four principles on how to cope with depression.

The topic for lesson four was "Substance Abuse." A poem entitled "I Deserved Better" was spoken that told the story of how a young woman who didn't smoke or drink had to deal with friends who did, and the negative consequences that came with their behaviors. After the poem, students were asked to name significant things they remembered hearing in the poem. Students were then asked about peers that may have gotten drunk or high and what they believed were the reasons for this behavior. A discussion then ensued on how substance abuse is related to having a void in life and how students could fill a void with more productive things. Lastly, students were provided four principles to think about when they were considering alcohol or drugs.

ASSESSMENT PROCEDURES AND EVALUATION RUBRIC

After all four lessons were facilitated, students were provided an evaluation form to assess their attitudes on the lessons provided (Table 2). This project was part of a summer teaching program, thus informed consent was not needed to participate. The Florida Agricultural and Mechanical University Institutional Review Board (IRB) approved the review of evaluation forms collected from this program for research and analysis. The evaluation assessed attitudes using a Likert scale of strongly disagree, disagree, agree, and strongly agree. Though the instrument did not inquire about demographics, all students were between the ages of 11 to 18, while the majority of students were African American.

RESULTS

Based on the evaluation results, 99% of participants (N=17) indicated that they agreed or strongly agreed with the statement that using

poetry and discussion in the presentation caused them to think about health in a new way. Ninety-nine percent of participants (N=17) indicated that they agreed or strongly agreed with the statement that using poetry, discussion, and the four principles in the presentation was an effective way to teach health topics. Ninety-nine percent of participants (N=17) agreed to strongly agreed with the statement that they learned something new during the four sessions. Lastly, 99% of participants (N=17) agreed to strongly agreed with the statement that using spoken word poetry would be a more appreciated way of receiving health information versus a standard lecture.

There was an open-ended question where students were asked what they learned from the four sessions. Based on those responses, themes included: not following peer pressure to do the wrong things, the undesirable consequences of substance abuse, and the consequences of a bad diet.

DISCUSSION

Using poetry proved useful in development and delivery of *HealthSpeaks* to junior high students in a summer program. In particular, students felt that poetry could be used to effectively share information on various health topics, which could result in knowledge increase and health behavior modifications. Based on the evaluations and the facilitator's observations, students seemed alert, engaged, talkative, and highly interested in the subject matter because of how it was formatted and delivered.

Though many health education curriculums incorporate music and stories with rhyme, no adolescent health education curriculum with a poetic base has been found. Notable health and nutrition education curricula used with adolescents usually include case studies, reflection, physical activities, sometimes theatre, and oftentimes hands-on activities (Corridon, Davis, Dyson, & Miller, 2012; Headrick, Ridgewell, Kauwell, & Shellnut, 2014; Horowitz, Shilts, & Townsend, 2004); but usually these activities may simply reinforce messages rather than carry the message. In addition, many low-resourced districts and after-school programs may struggle to provide funds for tangible resources that are included in these curriculums. Using poetry to create or enhance current health

education lessons may prove to be budget friendly for these districts.

Using poetry in health education lessons also encourages an interdisciplinary approach. *HealthSpeaks* could be used, or poetic pieces could be developed by the instructor, or the instructor could partner with the English and Communication teachers to develop poems that focus on health education messages. For example, poetry has been used to assist youth cope with sexual abuse (Mazza, Magaz & Scaturro, 1987), mental health (Hovland, 2016), and social justice (Fields, 2014). Earlier work by Mazza (1987) concluded that poetry can be used as an ego-supportive tool to treat youth who have been sexually abused. Hovland (2016) used Shakespeare's Sonnet 48 as part of a school assignment to explore mental health delivery in rural communities as well as friendship building. Fields (2014) found that youth expressed their concerns about health (10%), sexuality (7%) and social justice (7%) in the 50 poems analyzed. While poetry has been used to improve specific health outcomes and conditions, using poetry for the improvement of general health, or to teach positive health messages is not readily identified from the literature.

Another strategy would be to let students develop their own poetic pieces based on their ideas of health where lessons build upon students' knowledge base as well as what is exposed in their poems. McCulliss and Chamberlain (2013) describe this line of inquiry where youths express and cope with their lived experiences and circumstances through poetry as bibliotherapy. Specifically, McCulliss and Chamberlain (2013) explained that students develop poetry to address specific behavioral issues as well as physical and psychosocial conditions. Dill (2015) found that engaging youth to develop poetry that addresses their lived experiences (i.e., social and environmental living conditions) created increased insight as to how youth's view themselves and others, and provided a mechanism for youth to cope with their stressful environments. However, while educators and instructor incorporate poetic pieces into education lessons, few scholars have examined students' attitudes about this strategy.

Limitations

One of the limitations to this project was that knowledge and behavior were not assessed. As this was a pilot project, the initial goal was to assess the attitudes students had concerning incorporating poetry into health education lessons. There was also no follow-up after the sessions. In addition, though the students in the sample group were mostly African American and ages 11 to 18, no other demographics were recorded.

CONCLUSION

Educators should incorporate poetry, *HealthSpeaks*, or similarly designed curriculum to increase adolescents' knowledge about health behaviors. Specifically, *HealthSpeaks* has four content poems with accompanying lessons to increase students' knowledge about healthy eating and exercising; substance abuse; mental health; and sex and sexually transmitted infections. *HealthSpeaks* provides a strategy for students to connect to health issues, discuss the relevance to their everyday lives, and gain concepts that can be applied to living healthy in all areas of health. In addition, the use of poetry allows health educators an opportunity to explore their creative side, and supplement or introduce health lessons in a format that initiates a dynamic energy in the classroom. With many school districts struggling with funding, using poetry to deliver health education messages may be a strategy that demands little budget for implementation.

RECOMMENDATIONS

Creating *HealthSpeaks* with poetry as the foundation worked well in engaging an adolescent audience. The use of *HealthSpeaks*, or poetry with health themes, may prove useful to health and physical education teachers seeking to creatively introduce core health topics, or enhance their lesson plans. Poems, or other performing artistic pieces applicable to the health education topic could be created by the teacher, or they could find this pre-created material and build discussion questions that may reinforce basic principles. Using a poetic piece as the initial foundation for a lesson may facilitate more culturally relevant conversation on health issues that students may deal with. Teachers could also engage students by having them read or even act out poems since research

shows this increases students' ability to cope with adverse life situations or health conditions.

While this research shows that students are receptive of poetry being incorporated into health education lessons and messages, there is much room for future research. For example, future research should examine whether students retain knowledge, and more importantly modify their health behaviors based on poetry-enhanced curriculum. Research could also test whether students who write their own poems about how health issues directly affect them (active/direct reflection) are more likely to learn new information or modify behavior compared to students who study poems already included in the curriculum that is written by someone else. Research should also explore how using technology or social media to deliver lessons with poetry affects students' knowledge and health behaviors.

REFERENCES

- Abernathy, J. (2017). 'Poetry Out Loud' in a School Near You. Retrieved January 18, 2017 from <http://www.thespectrum.com/story/life/2017/01/15/poetry-out-loud-school-near-you/96510170/?hootPostID=20629c06a9904e0d059c9b7b8ee8e4c3>
- Begoray, D. L., & Banister, E. (2005). Using Curriculum Design Principles to Improve Health Education for Adolescent Girls. *Health Care for Women International*, 26(4), 295-307.
- Byrd-Bredbenner, C., O'Connell, L.H., Shannon, B., & Eddy, J.M. (1984). A nutrition curriculum for health education: Its effects on students' knowledge, attitudes, and behavior. *The Journal of School Health*, 54(10), 385-388.
- Cantor, J.S. (2006). Fearless Innovation—Songwriting for Our Lives: Inspiring Learners with Arts-Based Practices That Support Creativity. *Multicultural Education*, 14(2), 57-64.
- Corridon, C., Davis, R., Dyson, K., & Miller, D. (2012). The Up for the Challenge: Lifetime Fitness, Healthy Decisions. Retrieved February 7, 2017 from http://4-hmilitarypartnerships.org/educator-staff/resources/curriculum/ufc/Up_For_The_Challenge_Review_06-07_2012_FINAL.pdf

- Dill, L.J. (2015). Poetic Justice: Engaging in Participatory Narrative Analysis to Find Solace in the "Killer Corridor". *American Journal of Community Psychology*, 55(1-2), 128-35.
- Fields, A., Snapp, S., Russell, S. T., Licona, A. C., & Tilley, E. H. (2014). Youth voices and knowledges: Slam poetry speaks to social policies. *Sexuality Research & Social Policy*, 11(4), 310-321.
http://dx.doi.org/10.1007/s13178-014-0154-9
- Gall, M. D., & Gillett, M. (1980). The Discussion Method in Classroom Teaching. *Theory Into Practice*, 19(2), 98.
- Gilbert, G., Sawyer, R., & McNeill, E. (2009). Health Education: Creating Strategies for School and Community Health, 3rd Edition. Burlington, MA: Jones and Bartlett Learning.
- Headrick, L., Ridgewell, N., Kauwell, G., & Shelnut, K. (2014). Redesign of the Youth Understand MyPlate (YUM) Curriculum for use by Elementary School Teachers. *Journal of Nutrition Education and Behavior*, 46 (4), S107.
- Horowitz, M., Shilts, M.K., & Townsend, M.S. (2004). EatFit: A Goal-Oriented Intervention that Challenges Adolescents to Improve Their Eating and Fitness Choices. *Journal of Nutrition Education and Behavior*, 36, 3-44.
- Hovland, J.C. (2016). Rural Telemental Health and Adolescents: Try a Little Shakespeare. *Journal of Creativity in Mental Health*, 11(2), 187-197.
- Kane, S., & Rule, A. C. (2004). Poetry connections can enhance content area learning. *Journal of Adolescent & Adult Literacy*, 47(8), 658-669.
- Kloser, K. (2013). Positive youth development through the use of poetry therapy: The contributing effects of language arts in mental health counseling with middle school-age children. *Journal of Poetry Therapy*, 26(4), 237-253.
- Lafrenière, D., Cox, S. M., Belliveau, G., & Lea, G. W. (2013). Performing the human subject: Arts-based knowledge dissemination in health research. *Journal of Applied Arts & Health*, 3(3), 243-257.
- Lansana, Q. A. (2004). Sibling Rivalries: Literary Poetry Versus Spoken Word: Why does the divide exist and what does it mean? *Black Issues Book Review*, 6(2), 14-18.
- Mayer J.D., Salovey P., & Caruso D.R. (2004). Emotional intelligence: theories, findings, and implications. *Psychological Inquiry*, 15, 197-215.
- Mazza, N., Magaz, C., & Scaturro, J. (1987). Poetry Therapy with Abused Children. *The Arts in Psychotherapy*, 14(1), 85-92.
- McCulliss, D., & Chamberlain, D. (2013). Bibliotherapy for Youth and Adolescents – School-based Application and Research. *Journal of Poetry Therapy*, 26(1), 13-40.
- McKenzie, J., Neiger, B., & Thackeray, R. (2013). Planning, Implementing & Evaluating Health Promotion Programs: A Primer, 6th Edition. Glenview, IL: Pearson Education.
- Omatseye, B. J. (2007). The Discussion Teaching Method: An Interactive Strategy in Tertiary Learning. *Education*, 128(1), 87-94.
- Piro, J. S., & Anderson, G. (2015). Managing the paradoxes of discussion pedagogy. *Cogent Education*, 2(1), 1.
- Saka, A. (2010). Implementation of Cooperative Learning and Guided Discussion Methods in Science Teaching to Improve Professional Skills of Student Teachers. *Journal of Turkish Science Education*, 7(2), 30-51.
- Simecek, K. (2015). Beyond Narrative: Poetry, Emotion and the Perspectival View. *British Journal of Aesthetics*, 55(4), 497-513.
- Skudrzyk, B., Zera, D. A., McMahon, G., Schmidt, R., Boyne, J., & Spannaus, R. L. (2009). Learning to Relate: Interweaving Creative Approaches in Group Counseling with Adolescents. *Journal of Creativity in Mental Health*, 4(3), 249-261.
- Smart, K. L., & Featheringham, R. (2006). Developing Effective Interpersonal Communication and Discussion Skills. *Business Communication Quarterly*, 69(3), 276-283.
- Stovall, D. (2006). Urban Poetics: Poetry, Social Justice and Critical Pedagogy in Education. *Urban Review*, 38(1), 63-80.

Tofade, T., Elsner, J., & Haines, S. T. (2013). Best Practice Strategies for Effective Use of Questions as a Teaching Tool. *American Journal of Pharmaceutical Education*, 77(7), 1-9.

Wellberry, C. (2006). On the Use of Poetry in Medical Education. Retrieved January 18, 2017 from <http://files.eric.ed.gov/fulltext/EJ1094960.pdf>

Whalen, S. (2000). Expressing attitudes and emotions through poetry. *Journal of School Health*, 70(7), 301-302.

Xerri, D. (2014). Schools as "Poetry-Friendly Places": Michael Rosen on Poetry in the Curriculum. *Arts Education Policy Review*, 115(4), 151-158.

Table 1: HEALTHSPEAKS Curriculum

Lesson 1- Healthy Eating and Exercising

POEM: I'm Fat

I'm fat
And even though I'm fat,
everyone knows I'm all that
and a big bag of tortilla chips
with chili cheese dip
and a fried snickers bar on a stick
Yeah, I am one bad chick
I know you know me 'cause folks love to
blow up and blast my stats, in fact
I'm nationwide baby
I ain't going nowhere
Not as long as you keep eating
all the red meats, sweets and
batter baptized treats past your limit
Yes, I am your dream and destiny
Though some like say I'm your prison sentence
But while you become consciously
comfortable with me after a while
I'm that extra burden you cuddle and cling to
with sluggish style
And though several may make a friend of me
It seems recently,
I've gained a whole lot of energetic enemies
All cause my name is obesity
Shoot
I'm really not all that courageous
not like that dude HBP, you see, he's the high pressure maker,
and the silent taker
He's the one that keeps you reaching for
that salt shaker before you've even tasted
Your food
Food laden with pig drippings,
all the trimmings,
and savory sauces that are
finger licking good
You should
Exercise...exercise some sugar with that salt
No, not the kind with a kiss,
but the kind that puts you at risk
Of being too high or too low,
with glucose levels out of control
due in part to a consistent flow of
pretty pastries, pageantry pies
and reveled red velvet cake
cute candy, beautifully baked brownies,
and vivacious vanilla cupcakes
That darling diabetes leaves you
favorably fatigued and lovingly lethargic
And though many criticize
and complain about him
meticulously messin' with insulin

They just hatin'
Cause he's proven his worth
in a bunch of delicious desserts
that really hurt you, in a good way, only a tad
Heck, if he's all you've had, that's too bad
Cause the ultimate goal is to gain your heart
That's the training and target
Cause once your heart gives in to me,
HBP and diabetes
We are excited to connect you to
the supreme lead, Big Daddy
Big Daddy is the one who causes you to throw up
and be dazzlingly dizzy
he is the one who hangs on to make your chest to give it a sentimental squeeze
and the one who makes it a courageous challenge to breathe
but most importantly,
big daddy is the one of whom death to your family and friends is extra pleased
wanna know big daddy's name
his name is heart disease.
Heart Disease is the #1 Killer of all Americans.

PROBE:

What were some significant things you heard in the poem?
Who has had family or friends who have had diabetes? High blood pressure? Obesity? Heart Disease?
Why do you believe people get these diseases?
There are several things that contribute to people getting these diseases, but the good news is that the risk associated with getting these diseases can be reduced through healthy eating and exercising. Here are four principles you need to remember concerning eating and exercising:

PRINCIPLES:

1. Eat more fruits and vegetables. 5-9 a day. This alone can significantly improve your health and reduce your chances of those diseases. Fruits and vegetables have components that help with healing your body, help against acne, and give you more energy.
2. Drink more water. 8 glasses a day is great. Water is a purifier. It also helps against acne and cleanses the body out.
3. Exercise. 3-5 days a week for 30 minutes a day. Get active. Even if it is only walking. Get moving. Exercising is a stress reliever, gives you energy, and helps you stay fit.
4. Eat less fast food. Most food that is not homecooked is higher in calories, fat, sugar and sodium which are connected to certain diseases. If you do eat fast food, make wise choices. Always make sure to include a fruit or vegetable (not fries) with the meal.

Lesson 2- Sex and STIs

POEM: Sex, Thighs, and Lies

I saw him
With magnificent muscles broad and bulging
Well defined waist with an enviable eight pack
Fabulous facial features in line
Mysterious eyes with what looked like a pot of gold in between his thighs
I thought
"dang, this brotha is fine!! Too fine!!"
And every time I got greedy glances of this beauty bearing brotha
I had to renew my mind and seek divine guidance
Cause while my flesh is attracted to him
I'm scared of what will happen if my thighs get entangled with his

Cause emotions, lust, and eyes can cause legs to open prematurely
This is how some girls get caught up with guys who have nice and nasty intentions
Cause these girls have much built up sexual tension
Allowing boys to minimize the maximum using cues from only physical senses
These girls give these boys trust
But in return get chlamydia, gonorrhea, or herpes balled up in a bust
Covered with "I'm really feeling you girl" and a soft touch
And though you thought condoms were too much and abstaining seemed like it was for ducks
You now see that soft touch turns in to itching and such
Itching and discharges
Breakouts and bumps too large
To simply be pimples
You thought it was simple
But knowledge is fundamental
Cause sex and thighs don't lie
They present the truth of what his body may temporarily hide
Until the secret you find between your thighs...

PROBE:

What were some significant things you heard in the poem?

Who has had family or friends who have suffered from an STI?

Why do you believe people get these diseases?

The precursor to sex is usually attraction. That is what was detailed in the poem. You see a person and your hormones go raging, your heart speeds up, and your senses are on alert because something or someone you are attracted to has caught your attention. It is at this point that you can make an informed decision. A lot of times, people that decide to participate in sexual activity make uninformed choices.

Physical attraction alone is not a good reason to participate in sexual activity. Those who make physical attraction their priority usually end up with a long list of partners, which is often accompanied by a long list of STIs. I'm sure you have heard about certain STIs and may have even seen pictures in a health class. So you probably already know that most STIs come with painful sores, ugly bumps, burning and itching in your private parts and/or an unusual or foul smelling discharge. In addition, some STIs like Herpes and HIV have no cure. Today, my goal is not to scare you by discussing STIs, but to give you principles to think about when attraction sets in. Here are four principles you need to remember concerning sex:

PRINCIPLES:

1. Sex is intended to be symbolic. Historically, sex was used to consummate a marriage. It was symbolic of marriage. Though society's standards have changed concerning sex, its symbolism is still the same. Once you give your body to someone, your emotions get linked in with that person as well. Linking in with the wrong person may cause you to act out of character and even say and do things you might not normally do. In addition, you are giving the most private physical part of yourself to someone. Do you want just anybody to have that?
2. Sex can lead to pregnancy. Having children outside of marriage can be a difficult task. Many single teen parents either drop out of school, or have a difficult time finishing. In addition, many may have to put their dreams and life goals on hold in order to take care of their child.
3. Safe sex is no sex. Abstinence seems to be losing popularity. But the one thing that abstinence will most always protect you against is STIs and unintended pregnancies. Abstaining is a good idea for emotional reasons also. Many older women and men will tell you that they regret having sex at a young age, and that it caused all types of issues for them. No sex is the safest sex.
4. Sex is intended for those who are ready. You may feel like you are ready, but at your age, you may not be. There is a responsibility that comes with sex. There are burdens that come with sex. If you do believe you are ready for sex, protect yourself. Don't assume others (no matter what they tell you) have your best interest in mind.

Lesson 3- Mental Health

POEM: Depressionville

I just won an all-inclusive 7-day trip to
the wonderful city of
Depressionville
A place where crying functions like breathing
Where having peace only comes when I'm dreaming
Where a heart is always heavy
Where frustration is always steady
Where appearance is of no concern
Where isolation is the daily lesson I learn
Where despair becomes a task
Where sadness comes fast
Where self-pity is an all-night party
Where disappointment is never tardy
Where self-esteem is best when low
Where unhappiness is what I sow
Where discouragement is what I crave
Where my emotions make me a slave
Where rides of hope are dysfunctional
Where unfulfillment is punctual
Where sleep is my medication
Where my thoughts flourish in contamination
Where fear is the justification
That contributes to my internal deterioration
I see a sign that says:
Welcome to Depressionville

PROBE:

Anybody ever felt like this?

What were some of the significant things you heard in the poem?

What are some reasons people become depressed?

At least 2/10 teenagers experience depression. A teen suffering from depression is also at higher risk for other problems like substance and alcohol abuse, trouble at school, jobs, or in relationships, and risky sexual behavior. Furthermore, untreated depression is the number one cause of suicide, and the third leading cause of death among teenagers. Severe depression is a mental illness. If you feel like this most days, you might have an issue that requires you to seek counseling. But if these feelings just come every now and then, there are some things we can do to overcome these feelings. Here are four things you can do to help you cope with depression:

PRINCIPLES:

1. Talk to those who are close to you about what you are feeling. Many times, getting our feelings out can help us feel better. Having a shoulder to lean on, cry on, or just someone to talk to can oftentimes help us through tough situations.
2. Participate in extracurricular activities. Stay busy. When you are focused on doing productive activities, it limits the amount of time you have to think about situations that may make you depressed.
3. Journal your feelings. Journaling is one of the most rewarding things. It gives you an outlet and an opportunity to let out what you are feeling, and later on, go back and read it. Over time, it helps you to realize that the things you thought were a big deal, you are able to get over.
4. Talk to a trusted adult. If your situation seems to be very serious, talk to an adult you can trust. This may be a teacher, or your counselor. They are usually trained to help you, or trained to connect you to resources that may help you get through your situation.

Lesson 4- Substance Abuse

POEM: I Deserved Better

I've never been drunk
I've never gotten high
And really was never tempted to try
The real reason why?
Cause I deserved better
You see I was the one
who had a 20-ounce bottle of highly caffeinated coca-cola to get me crazy drunk
While everybody else was getting 80 proof dumb drunk
I was the one that watched them persistently pressure her to drink more liquor
and boldly slipped her
into my conveniently located car
then strapped her in a seatbelt
yeah, I remember how mad I felt
I remember how I felt when friends got high
And no matter how hard I tried to make them stop
The best teacher for them was a cussin cop
Hugging handcuffs and flashing lights
made a few reckless people go right
And while many others succumbed to the peer pressure
I decided I deserved better
So while they were inhaling deadly drug vapors
I was up late working on high scoring papers
While they were sneaking their gin and juice
I was figuring out ways to give my college application a boost
While they were illegally making their bodies decay
I was eating healthy, working out, and getting myself in shape
You see I decided I wanted every brain cell that could to live
Each lung I had to continue to give...me
Fresh oxygen
I wanted a liver that hadn't been attacked
And all my mental faculties in tact
I believed I deserved this
No one or anything would rob me of this
Not fickle friends
Not trying to fit in
Not fine boys or men
Not acquaintances or kin
Not rum or gin
And not X pills, cocaine, weed, or even cigarette smokin'
Cause I knew I deserved better
I deserved to pass every test I studied for
I deserved to graduate with honors galore
Get in a career where I could soar
And you know what, I got all of this and more
All because I made a decision to follow the vision
Of what I deserved

PROBE:

1. What were some significant things you heard in this poem?
2. Have you ever been around or seen folks that have gotten high or drunk? What characteristics do they possess?
3. Why do people think they have to get drunk or high?

Many people who participate in these type of behaviors are trying to fill a void. They usually know all of the issues that come with drugs and alcohol, but to fill the void of loneliness, they would rather be cool and do what others are doing. To fill the void that pain has caused, they medicate with drugs and alcohol. These types of behaviors can do major damage to your body, and can even cause death. People who start with these habits, usually continue in them and it starts to affect their grades, their jobs, and their personal lives. They lose control, and in the process, lose everything they have worked for. Many end up in prison because of what these behaviors lead to. If you have already participated in this type of lifestyle, it is not too late for you. You can make a decision. Every day presents new decisions that can change your life for the better or for the worse. Remember this: You deserve better. Say it: I deserve better. So instead of filling your voids with unproductive things, I want to give you four things to think about and do:

PRINCIPLES

1. Think about why you are drinking or smoking. What is your reason? Though reasons differ and can be from trying to be cool, to trying to offset pain, drinking and smoking do not produce great effects in the body. These substances alter your ability to make wise decisions.
2. Think about the people your choices will affect. How will the people that love you feel if they find out that you are participating in this behavior? Would you want your little cousins or sisters and brothers doing it? If something happens to you and you go to jail, someone has to bail you out, or if you go to the hospital, someone has to foot the bill. If you drive drunk, you could kill someone else.
3. Realize what you are doing to your body. Do you want brain cells dying? Do you want your liver to turn brown? Guys, do you want to decrease your sperm cell count or to shrink your testicles?
4. Choose something else positive to fill the void (give, volunteer, do something special for someone else). Work on things for your future: entrepreneur endeavors, academics, sports, etc.

Table 2: HealthSpeaks Evaluation

Instructions: Each item below is a statement concerning this program. Place an “X” in the box that best describes your level of agreement with each statement. Please make sure that you place “X” in only one box per item. There are no right or wrong answers.

Statement	Strongly Disagree	Disagree	Agree	Strongly Agree
The spoken word poetry presented at the beginning of the sessions caused me to think about health in a new way.				
Using the spoken word poetry, discussion questions, along with the four principles was an effective way to teach health topics.				
I learned something new during the four sessions presented.				
I believe I would learn more about health if it was presented using spoken word poetry versus a teacher lecturing about health.				
What did you learn from these sessions:				