

HEALTHY CHOICES LESSON PLAN
Addressing Reading, Writing, Health, Social Studies and NEW Math
TEKS, as well as ELPS and CCRS

This lesson is intended to take **two 45-minute lesson blocks**. However, for teachers with less time, consider engaging in only the DISCUSSION section as a whole class activity to prepare for the Legislative Lesson Plan (one 45-minute lesson). To deepen learning, consider including the EXTENSION activities at the end. (Total of three or four 45-minute lessons)

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Goals

Students use critical thinking skills to make healthy choices regarding drugs and alcohol.
Students improve their self-esteem and resiliency.

Objective

Students learn ways to avoid drug and alcohol use by making healthy choices. Students will be encouraged to identify their biggest concerns about drug and alcohol use, to develop ideas on ways to solve the problem, and to learn positive refusal skills.

Engage and Discover

Use the following process to introduce drug terminology, marketing methods, activate prior knowledge and experiences, and to prepare for class discussion.

- 1) Engage students by either telling a personal story regarding the detriments of drug addiction, share a visual image of a public service announcement on the topic, or consider showing one of the quick videos (from 30 seconds up to 2 minutes each) below to set context for the lesson ahead:

<http://www.youtube.com/user/drugfreetexas>

<http://www.drugfreetexas.org/drug-spotlight/>

<http://www.n2productions.com/public-service-announcements>

- 2) Have students then respond to stimulus chosen by completing a “quickwrite” answering a guiding question about the chosen stimulus. Examples: Has drug or alcohol addiction touched the life of someone you know? Have you ever had to deal with peer pressure regarding drugs or alcohol? What would you say to a kid who is being faced with one of these challenges?
- 3) Have students share their writing in a timed pair-share, about 30 seconds for each to read what they wrote to their partner. After pairs share, solicit a few volunteers to read their writing aloud.
- 4) Teacher reads aloud “*Texas School Survey of Substance Abuse Among Students*” (page 5) and reads highlights from “*Prevalence and Recency of Substance Use by Grade*” (page 6) as students annotate information that they find interesting, confusing, have questions about, or even things they already know and would like to share more about. Teachers may want to hand these out for students to reference as well.
- 5) Have students share with the group the things they noticed, highlighted, and/or questions they had by writing these “observances” on a piece of chart paper called an “anchor chart”. An example of an anchor chart is on page 10.

Discussion

Honest discussion, rather than scare tactics, is the key to preventing or delaying the use of alcohol and drugs. Misinformation promotes dangerous products. Alcohol and tobacco companies are known to create advertising messages that make their products look cool and appealing to youth despite the harmful effects. Encourage students to educate themselves from reliable, factual sources (such as www.drugfreetexas.org) and make healthy choices.

Use student “observances” on the anchor chart to begin discussion, knowing that the discussion points listed below should ultimately be included in the class discussion. Refusal skills are covered on page 7 and should be included in the discussion. The vocabulary terms on page 7 should also be used throughout the discussion to aid in understanding.

General Discussion Points

Discuss why some kids choose to use drugs and alcohol. Some possible reasons include:

- They think using drugs or alcohol makes them seem cool.
 - If so, what makes them think this? Friends, movies, TV, magazines?
 - Explore the notion of self-reliance in regard to being “cool.” Does drinking or doing drugs make you cool?
- They are looking for a way to deal with stress or depression.
 - Explore alternatives ways to deal with stress, like talking to a caring adult, exercise, time management, etc.

Can using drugs lead to lying? Stealing? Damaged health? Depression? Accidents? Without saying who, has anyone ever seen this happen?

What are their biggest concerns about drug use? If they choose to be drug- and alcohol-free, why is that?

Discussion Points About Over-the-Counter & Prescription Drugs

Discuss with students the difference between over-the-counter (OTC) drugs and prescription drugs. Give them the opportunity to define these terms in their own words.

- **If you are using medicine (like cough syrup) to get high, can it really hurt you or lead to addiction?** *Yes, using medicine to get high can be dangerous. Effects include sweating and fever, impaired vision, irregular heart rate and blood pressure, vomiting, diarrhea, impaired judgment, memory loss, hallucinations, and coma. It can also become addictive. Over time, you need more and more to feel the same effects.*
- **What are the consequences of using prescription drugs when they are not prescribed to you, such as Ritalin and Adderall (drugs given by doctors to people with Attention Deficit Hyperactivity Disorder, called ADHD or ADD)?** *If you don't have ADHD or ADD, these drugs affect you differently than someone who does. They temporarily speed you up, stress your body, and can become addictive. Over time, you lose your appetite, become exhausted, and weaken your heart and body. You end up needing the pills (and in higher doses) to get the same feeling. A heart attack, stroke, or seizure can result from misuse.*
- **When is it illegal or dangerous to use prescription drugs or medicine?** *Any time you take a prescription medicine that is not your own you are breaking the law. Selling or buying prescriptions from individuals is also illegal. Medicine is meant to treat a specific person for a specific health issue. Taking someone else's medicine can change your brain chemistry and damage your health. Since the medicine wasn't prescribed to you, you can't predict how your body will react.*

Discussion Points About Marijuana

- **Why is marijuana dangerous if it is becoming legal in some states? Isn't it a natural product?** *Some states are making small amounts of marijuana legal to take to help ease the pain of serious medical conditions such as cancer, or even for recreational use with adults. Drugs, in general, are physically more addictive to a young brain, and they affect younger people more seriously than they do adults. Brains continue to develop until age 25, so marijuana (specifically the chemical THC) can alter brain development. Studies have shown that smoking marijuana actually lowers IQ scores—so it does make you dumber. In addition, today's marijuana can be 60 times stronger than marijuana used in the 60s and 70s. It's much more addictive so that, over time, you'll need more of the drug (and in higher doses) just to feel "normal" or good again. Smoking marijuana can also cause cancer from smoke inhalation (not to mention the ingestion of pesticides and other chemicals used to treat it) and sterility (the inability to have children). Being under the influence of marijuana, or any drug, also negatively affects judgment. It can cause people to engage in risky behaviors that they would never do otherwise. These behaviors can lead to injury, disease or death.*

Discussion Points About Emerging Drugs or Synthetic Drugs

- **What is the newest synthetic drug you have heard people are taking?** *Some new drugs include 25CNBOMe (25-C or NBOMe-2C-C), bath salts, K2, and Spice (fake weed).*
- **Why are these substances dangerous?** *These synthetic drugs are becoming more and more accessible in head shops, convenience stores, and online. These products are illegal to consume and sold with packages that say "not for human consumption" to avoid the law. No two packages are alike in terms of ingredients or strength, so the effects are difficult to predict. Kids are ending up in the emergency room and some have died, especially when using these substances with other drugs or alcohol.*
- **What have you heard about things people are taking to get high that aren't typical drugs, such as sniffing glue or gasoline?**

Discussion Points About Underage Drinking

- **Have you ever heard of something bad happening to someone who drank alcohol? Maybe they made a bad decision, got sick, disappointed their parents, or worse?** *Discuss with students the issues around underage drinking, including how it is illegal, dangerous to growing bodies and brains, can lead to other drug use, and how it impairs the ability to make smart decisions, putting them at risk for unhealthy, risky behaviors. The latest brain research shows that it alters brain development.*

Texas School Survey of Substance Abuse Among Students

Source: Texas Department of State Health Services

Elementary School Survey Findings (Grades 4-6)

Overall use of alcohol, tobacco, inhalants, and marijuana among elementary students in grades 4-6 showed a decrease from 2010 to 2012. Both alcohol and tobacco use has reached the lowest rate since 1990. Use this as a positive rallying cry for your students to keep up the good work and to set an example for younger students to reduce use even more.

- Lifetime **alcohol** use among this age group showed a substantial decrease from 21.5 percent in 2010 to 17.7 percent in 2012. Past-school-year use had a similar pattern of decrease from 13.7 percent to 11.2 percent.
- About 4.5 percent of elementary school students in 2012 reported they had ever used **tobacco** in their lives, and 2.5 percent reported using tobacco in the past school year. Both prevalence rates showed a continuous decrease since 1990.
- In the 2012 survey, elementary school students reported 10.0 percent of lifetime **inhalant** use and 7.1 percent of past-school-year inhalant use. Both rates were lower than two years ago.
- Elementary school students also reported a decrease in **marijuana** use from 2010 to 2012. Lifetime use of marijuana decreased from 1.9 percent to 1.7 percent over the past two years, and past-school-year use of marijuana from 1.3 percent to 1.2 percent. Majority of the decrease was from sixth graders.

Prevalence and Recency of Substance Use, by Grade: Texas Elementary Students, 1990-2012

	Ever Used 1990	Ever Used 1992	Ever Used 1994	Ever Used 1996	Ever Used 1998	Ever Used 2000	Ever Used 2002	Ever Used 2004	Ever Used 2006	Ever Used 2008	Ever Used 2010	Ever Used 2012
Tobacco	21.1%	18.8%	18.9%	17.1%	16.3%	12.5%	9.1%	8.2%	6.0%	5.4%	5.6%	4.5%
Grade 4	13.3%	10.8%	11.1%	9.3%	9.3%	6.8%	5.1%	4.6%	3.6%	3.0%	3.9%	2.8%
Grade 5	19.8%	18.3%	17.7%	16.3%	15.0%	11.4%	7.9%	7.0%	4.9%	4.8%	4.6%	4.2%
Grade 6	30.5%	27.4%	27.9%	25.8%	24.8%	19.9%	14.2%	13.1%	9.4%	8.7%	8.4%	6.7%
Alcohol	41.8%	33.4%	32.6%	30.2%	29.6%	27.5%	25.2%	25.5%	22.3%	23.1%	21.5%	17.7%
Grade 4	31.0%	25.2%	25.1%	21.7%	21.5%	19.1%	18.5%	18.3%	15.8%	16.8%	16.0%	12.7%
Grade 5	38.5%	28.6%	30.3%	28.6%	28.4%	25.8%	23.1%	23.4%	20.6%	21.6%	19.6%	16.0%
Grade 6	56.5%	46.4%	42.5%	40.3%	39.2%	38.4%	34.1%	34.8%	30.6%	31.1%	29.0%	24.4%
Inhalants	15.3%	16.4%	9.8%	9.8%	12.3%	10.7%	9.3%	10.5%	9.7%	8.9%	10.4%	10.0%
Grade 4	12.7%	14.6%	8.4%	8.7%	10.4%	9.8%	9.0%	9.6%	9.4%	8.3%	10.5%	11.1%
Grade 5	9.6%	10.5%	8.0%	8.3%	11.1%	8.8%	7.7%	8.8%	8.4%	7.7%	9.0%	8.4%
Grade 6	24.0%	24.0%	13.0%	12.4%	15.4%	13.8%	11.2%	13.1%	11.3%	10.7%	11.8%	10.4%
Marijuana	2.7%	1.7%	5.6%	4.0%	3.6%	2.8%	2.6%	2.5%	1.8%	1.7%	1.9%	1.7%
Grade 4	1.1%	0.8%	3.5%	1.7%	1.2%	0.8%	0.8%	1.0%	0.7%	0.7%	0.7%	0.8%
Grade 5	1.8%	0.9%	4.6%	2.9%	2.6%	2.1%	1.9%	1.4%	1.2%	1.1%	1.2%	1.1%
Grade 6	5.4%	3.4%	8.8%	7.3%	7.2%	5.7%	5.1%	4.9%	3.5%	3.4%	3.8%	3.2%

	School Year 1990	School Year 1992	School Year 1994	School Year 1996	School Year 1998	School Year 2000	School Year 2002	School Year 2004	School Year 2006	School Year 2008	School Year 2010	School Year 2012
Tobacco	13.3%	11.5%	12.0%	10.8%	10.3%	7.3%	4.8%	4.5%	3.2%	3.0%	3.1%	2.5%
Grade 4	8.2%	6.5%	7.1%	5.5%	6.0%	3.8%	2.7%	2.5%	1.8%	1.6%	2.3%	1.7%
Grade 5	13.2%	11.9%	10.9%	9.9%	8.9%	6.7%	4.0%	3.7%	2.6%	2.7%	2.2%	2.0%
Grade 6	18.7%	16.1%	18.1%	17.0%	16.3%	11.6%	7.6%	7.2%	5.1%	4.9%	4.7%	3.8%
Alcohol	28.8%	20.5%	22.6%	20.5%	20.2%	18.9%	15.9%	16.1%	13.7%	15.3%	13.7%	11.2%
Grade 4	21.1%	14.7%	17.3%	14.5%	14.4%	13.1%	11.5%	11.6%	9.4%	11.0%	10.6%	8.0%
Grade 5	28.1%	18.0%	20.3%	19.0%	18.8%	17.5%	14.2%	14.5%	12.6%	13.7%	12.2%	9.8%
Grade 6	37.7%	28.8%	30.2%	28.1%	27.6%	26.4%	22.0%	22.2%	19.3%	21.4%	18.6%	15.7%
Inhalants	11.4%	10.9%	5.7%	7.1%	9.2%	7.8%	6.5%	7.6%	6.9%	6.5%	7.5%	7.1%
Grade 4	9.5%	10.8%	4.2%	6.3%	7.6%	7.1%	6.2%	7.0%	6.4%	5.9%	7.4%	7.9%
Grade 5	7.1%	7.1%	4.8%	6.2%	8.1%	6.3%	5.3%	6.5%	6.2%	5.6%	6.2%	5.7%
Grade 6	17.8%	14.8%	8.0%	8.8%	11.8%	10.0%	8.0%	9.4%	8.1%	7.9%	8.8%	7.8%
Marijuana	1.8%	1.0%	1.9%	2.7%	2.6%	2.1%	1.7%	1.7%	1.2%	1.2%	1.3%	1.2%
Grade 4	0.7%	0.4%	0.7%	0.9%	0.9%	0.5%	0.5%	0.6%	0.4%	0.4%	0.4%	0.5%
Grade 5	1.3%	0.6%	1.2%	1.8%	1.9%	1.7%	1.1%	1.0%	0.8%	0.7%	0.7%	0.6%
Grade 6	3.6%	2.0%	3.7%	5.4%	5.2%	4.2%	3.6%	3.5%	2.5%	2.4%	2.9%	2.4%

Source: Texas School Survey of Substance Abuse among Students (and DSHS other studies):
<http://www.dshs.state.tx.us/sa/recentresearchstudies.shtm>

Refusal Skills

Lead student discussion about whether it is stronger to say “no,” “maybe,” or “later” if someone offers them drugs.

- **Why is “no” a stronger statement than “maybe” or “later?”**

Help them come up with reasons to refuse, based on their biggest concerns about drug use. For example:

- “No thank you, underage drinking is illegal.”
- “No, smoking causes cancer.”
- “I don’t want to get addicted.”
- “My parents will be disappointed.”
- “I don’t want to get grounded.”
- “I don’t need that to have a good time.”
- “Coach will kill me, and I want to stay on top of my game.”
- “I don’t want to help aid drug wars in our country, or in other countries.”

Have students discuss ways they can refuse drugs by changing the situation rather than by saying “no.” They can:

- Change the subject: “Did you see the new movie that came out?”
- Change the person they’re talking to: “I see John over there. I need to ask him something.”
- Change their location: “I’m late. I’ve got to go and meet John.”

And by using the “I” word, they can let the person offering drugs know it’s not about them, but rather a personal choice: “I don’t want to be a smoker” or “I want to stay healthy.”

Have students come up with an exit plan they can use if they find themselves in an uncomfortable or dangerous situation. For example, they can call a parent and use a pre-arranged code phrase, such as “Did I leave my iPod at home?” which means, “Come and get me!” Let students use their imagination and have fun coming up with ideas for getting out of a bad situation.

Vocabulary

The following terms should be taught and discussed to ensure students understand these concepts as discussion occurs. These terms should be added to anchor charts when relevant.

Addiction is a dependence on drugs or alcohol that you are not able to control, despite the harm it causes. Addiction causes intense cravings and can lead to negative long-term consequences.

Synthetic drugs are man-made chemical drugs that are highly dangerous. They are not

made of organic substances and often vary on their content, making them unpredictable and deadly.

Street drugs are drugs sold by a drug dealer illegally (without a prescription and not for medical use).

Inhalants can be ordinary household products that are inhaled or sniffed to get high, such as paint thinners, gasoline, glues, aerosols, and felt-tip markers.

Prevalence refers to how common, or uncommon, something is used. For example, in 2012, the prevalence rate of seventh graders in Texas having ever smoked tobacco is 12%.

Prescription drugs are medicines given to a person by a doctor to treat a medical condition. It is illegal for a person to sell or share their prescription drugs with others.

Over-the-counter drugs can be bought without a doctor's prescription. They are sold at a pharmacy or other store, for example Tylenol.

Extension Activities

- 1) Have students write a letter to their parents, a sibling, or a new student who may join the class after this lesson is taught, explaining one to three substances they should never take and why.
- 2) Have student groups or pairs create a brochure, video, or poster highlighting; a particular drug and the negative consequences of using it, several substances and their consequences, or offering refusal slogans. These posters can serve as a class or school campaign to prevent substance use.
- 3) Have students use the *Prevalence of Substance Use* chart on page 6 to graph a particular drug and its decline for their grade level.

Useful Websites

The Partnership for a Drug-Free Texas

www.drugfreetexas.org

<http://www.drugfreetexas.org/resources/>

www.drugfreetexas.org/drug-spotlight/

Partnership for Drug-Free Kids

www.drugfree.org

Above the Influence

<http://abovetheinfluence.com/>

Partnership Attitude Tracking Study, 2013

www.drugfree.org/wp-content/uploads/2014/07/PATS-2013-FULL-REPORT.pdf

Texas School Survey of Substance Abuse among Students, and other recent DSHS studies:
www.dshs.state.tx.us/sa/documents/Texas-Drug-Facts-Among-Youth-2014.pdf

If you have questions or comments, please email us at info@drugfreetexas.org.

EXAMPLE ANCHOR CHART

An anchor chart is created **with** the kids while learning new information and is then left up throughout a learning unit, possibly with students adding to the chart (as seen below with sticky notes) as a visual reference for their continued work with the tasks and concepts. Clearly, this one is not specific to the lesson in this unit, but it can serve as a reference for teachers.



ACADEMIC STANDARDS MET FOR TEKS, ELPS, AND CCRS

TEKS STANDARDS

Reading

- 5.11(A-E) Reading/Comprehension of Informational Text/Expository Text. Students analyze, make inferences and draw conclusions about expository text and provide evidence from text to support their understanding
- 5.13 (A) Reading/Comprehension of Informational Text/Procedural Texts. Students understand how to glean and use information in procedural texts and documents

Writing

- 5.18 Writing/Expository and Procedural Texts. Students write expository and procedural or work-related texts to communicate ideas and information to specific audiences for specific purposes
- 5.19 Writing/Persuasive Texts. Students write persuasive texts to influence the attitudes or actions of a specific audience on specific issues. Students are expected to write persuasive essays for appropriate audiences that establish a position and include sound reasoning, detailed and relevant evidence, and consideration of alternatives.

§115.7. Health Education

(a) Introduction.

- (1) In health education, students acquire the health information and skills necessary to become healthy adults and learn about behaviors in which they should and should not participate. To achieve that goal, students will understand the following: students should first seek guidance in the area of health from their parents; personal behaviors can increase or reduce health risks throughout the lifespan; health is influenced by a variety of factors; students can recognize and utilize health information and products; and personal/interpersonal skills are needed to promote individual, family, and community health.
- (2) In addition to age-appropriate information about personal health habits, students in Grade 5 are taught about the human body and the changes that come with puberty. Students are taught how to maintain healthy body systems and prevent disease. Students also learn how technology and the media influence personal health and how to apply problem-solving skills to improve or protect their health.

(b) Knowledge and skills.

- (F) analyze the components of a personal health maintenance plan for individuals and families such as stress management and personal safety.
- (3) Health information. The student knows how to utilize health information. The student is expected to:

- (A) describe methods of accessing health information; and
 - (B) demonstrate ways to communicate health information such as posters, videos, and brochures.
- (5) Health behaviors. The student comprehends behaviors that reduce health risks throughout the life span. The student is expected to:
- (A) describe the use and abuse of prescription and non-prescription medications such as over-the-counter;
 - (B) compare and contrast the effects of medications and street drugs;
 - (C) analyze the short-term and long-term harmful effects of alcohol, tobacco, and other substances on the functions of the body systems such as physical, mental, social, and legal consequences;
 - (D) identify and describe alternatives to drug and substance use;
 - (E) demonstrate strategies for preventing and responding to deliberate and accidental injuries;
 - (F) explain strategies for avoiding violence, gangs, weapons and drugs;
 - (G) describe response procedures for emergency situations;
 - (H) describe the value of seeking advice from parents and educational personnel about unsafe behaviors; and
 - (I) explain the impact of neglect and abuse.
- (6) Influencing factors. The student understands how relationships influence individual and family health including the skills necessary for building and maintaining relationships. The student is expected to:
- (A) distinguish between healthy and harmful influences of friends and others;
 - (B) describe the characteristics of healthy and unhealthy friendships;
 - (C) identify ways to enhance personal communication skills;
 - (D) analyze respectful ways to communicate with family, adults, and peers;
 - (E) demonstrate ways of communicating with individuals who communicate in unique ways such as having a speech defect and not speaking English;
 - (F) apply and practice strategies for self-control; and
 - (G) describe strategies for stress management.
- (7) Influencing factors. The student comprehends ways in which media and technology influence individual and community health. The student is expected to:
- (A) research the effect of media on health-promoting behaviors; and
 - (B) identify the use of health-related technology in the school such as audiometry and the Internet.
- (9) Personal/interpersonal skills. The student demonstrates critical-thinking, decision-making, goal-setting and problem-solving skills for making healthy decisions. The student is expected to:

- (A) describe health-related situations that require parent/adult assistance such as a discussion of the health-related consequences of high-risk health behaviors or going to a doctor;
- (B) assess the role of assertiveness, refusal skills, and peer pressure on decision making and problem solving;
- (C) utilize critical thinking in decision making and problem solving;
- (D) describe benefits in setting and implementing short and long-term goals;
- (E) explain the necessity of perseverance to achieve goals; and
- (F) explain the importance of parent/trusted adult guidance in goal setting.

§113.16. Social Studies

- (b)(24) Social studies skills. The student applies critical-thinking skills to organize and use information acquired from a variety of valid sources, including electronic technology. The student is expected to:
- (A) differentiate between, locate, and use valid primary and secondary sources such as computer software; interviews; biographies; oral, print, and visual material; documents; and artifacts to acquire information about the United States;
 - (B) analyze information by sequencing, categorizing, identifying cause-and-effect relationships, comparing, contrasting, finding the main idea, summarizing, making generalizations and predictions, and drawing inferences and conclusions;
 - (C) organize and interpret information in outlines, reports, databases, and visuals, including graphs, charts, timelines, and maps;
 - (D) identify different points of view about an issue, topic, or current event; and
 - (E) identify the historical context of an event.

§111.7. Math, Adopted 2012:

- (b)(1) Mathematical process standards. The student uses mathematical processes to acquire and demonstrate mathematical understanding. The student is expected to:
- (A) apply mathematics to problems arising in everyday life, society, and the workplace;
 - (B) use a problem-solving model that incorporates analyzing given information, formulating a plan or strategy, determining a solution, justifying the solution, and evaluating the problem-solving process and the reasonableness of the solution;
 - (C) select tools, including real objects, manipulatives, paper and pencil, and technology as appropriate, and techniques, including mental math, estimation, and number sense as appropriate, to solve problems;

- (D) communicate mathematical ideas, reasoning, and their implications using multiple representations, including symbols, diagrams, graphs, and language as appropriate;
- (E) create and use representations to organize, record, and communicate mathematical ideas;
- (F) analyze mathematical relationships to connect and communicate mathematical ideas; and
- (G) display, explain, and justify mathematical ideas and arguments using precise mathematical language in written or oral communication.

ELPS (English Language Proficiency Standards)

Learning Strategies

- §74.4.c.1. (E) internalize new basic and academic language by using and reusing it in meaningful ways in speaking and writing activities that build concept and language attainment;

Listening

- §74.4.c.2. (C) learn new language structures, expressions, and basic and academic vocabulary heard during classroom instruction and interactions;
- §74.4.c.2. (G) understand the general meaning, main points, and important details of spoken language ranging from situations in which topics, language, and contexts are familiar to unfamiliar;
- §74.4.c.2 (I) demonstrate listening comprehension of increasingly complex spoken English by following directions, retelling or summarizing spoken messages, responding to questions and requests, collaborating with peers, and taking notes commensurate with content and grade-level needs.

Speaking

- §74.4.c.3(E) share information in cooperative learning interactions;
- §74.4.c.3 (G) express opinions, ideas, and feelings ranging from communicating single words and short phrases to participating in extended discussions on a variety of social and grade-appropriate academic topics;

Reading

- §74.4.c.4(F) use visual and contextual support and support from peers and teachers to read grade-appropriate content area text, enhance and confirm understanding, and develop vocabulary, grasp of language structures, and background knowledge needed to comprehend increasingly challenging language;
- §74.4.c.4 (G) demonstrate comprehension of increasingly complex English by participating in shared reading, retelling or summarizing material, responding to questions, and taking notes commensurate with content area and grade level needs;

Writing

§74.4.c.5 (F) write using a variety of grade-appropriate sentence lengths, patterns, and connecting words to combine phrases, clauses, and sentences in increasingly accurate ways as more English is acquired;

§74.4.c.5 (G) narrate, describe, and explain with increasing specificity and detail to fulfill content area writing needs as more English is acquired.

CCRS (College and Career Readiness Standards)

I . Writing

- A. Compose a variety of texts that demonstrate clear focus, the logical development of ideas in well-organized paragraphs, and the use of appropriate language that advances the author’s purpose.
 - 1. Determine effective approaches, forms, and rhetorical techniques that demonstrate understanding of the writer’s purpose and audience.

II . Reading

- A. Locate explicit textual information, draw complex inferences, and analyze and evaluate the information within and across texts of varying lengths.
 - 1. Use effective reading strategies to determine a written work’s purpose and intended audience.
 - 9. Identify and analyze the audience, purpose, and message of an informational or persuasive text.
- B. Understand new vocabulary and concepts and use them accurately in reading, speaking, and writing.
 - 1. Identify new words and concepts acquired through study of their relationships to other words and concepts.

III . Speaking

- A. Understand the elements of communication both in informal group discussions and formal presentations (e.g., accuracy, relevance, rhetorical features, organization of information).
 - 1. Understand how style and content of spoken language varies in different contexts and influences the listener’s understanding.
 - 2. Adjust presentation (delivery, vocabulary, length) to particular audiences and purposes.
- B. Develop effective speaking styles for both group and one-on-one situations.
 - 1. Participate actively and effectively in one-on-one oral communication situations.
 - 2. Participate actively and effectively in group discussions.
 - 3. Plan and deliver focused and coherent presentations that convey clear and distinct perspectives and demonstrate solid reasoning.

IV . Listening

- A. Apply listening skills as an individual and as a member of a group in a variety of settings (e.g., lectures, discussions, conversations, team projects, presentations, interviews).
1. Analyze and evaluate the effectiveness of a public presentation.
 2. Interpret a speaker's message; identify the position taken and the evidence in support of that position.