This focus area provides the explicit teaching of content and skills related to medicines, including over-the-counter medicines and non-medicinal alternatives, and feeling unwell for Foundation students. It focuses on:

- the things people can do to make themselves and others feel better or get well
- the health workers and other adults who help to keep us healthy
- the non-medicinal alternatives to medicine
- the many different forms of medicines
- the safe use of medicines
- identifying and responding to unsafe situations around medicines.

**Key understandings**

- There are many ways to stay healthy and happy.
- People may sometimes feel sick or unwell.
- There can be a range of symptoms when a person is feeling sick or unwell. These symptoms need to be described when seeking help from others.
- Health workers and other adults help to keep people healthy.
- Some people need to take medicines to keep them from becoming unwell such as insulin dependent diabetics and asthmatics.
- Medicines are drugs and come in many different forms.
- There are non-medicinal alternatives for some conditions such as headache and bee sting.
- There are safety procedures for the use of medicines such as not taking someone else's medicine and only taking medicine from a trusted adult.

**Key skills to practise**

- Respond to situations when others are hurt or unwell.
- Describe symptoms when feeling sick or unwell to an adult.
- Express the different feelings when feeling sick or unwell.
- Identify and respond to unsafe situations around medicine.
- Treat others thoughtfully and kindly.
- Make responsible decisions to ensure their own safety and the safety of others.
- Listen for specific things such as the details of a story and an answer to a given question.
- Listen to, remember and follow simple instructions.
- Participate in class, group and pair discussions and share experiences.
- Reflect on knowledge and understandings, attitudes and values.
- Work with a partner or in small groups using strategies such as waiting and taking turns, staying on task and sharing resources.
**General Capabilities**
The general capabilities comprise an integrated and interconnected set of knowledge, skills, behaviours and dispositions that, together with curriculum content in each learning area and the cross-curriculum priorities, will assist students to become successful learners, confident and creative individuals, and active and informed citizens.

The content and activities in this focus area provide teachers with the opportunity to explicitly teach some of the general capabilities. The table below outlines how this resource addresses these capabilities.

### Addressing the General Capabilities through Challenges and Choices

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**Key**
- ✍️ Literacy
- ☐ Numeracy
- ☐ Information and communication technology (ICT) capability
- ☐ Critical and creative thinking
- ☐ Ethical understanding
- ☐ Personal and social capability
- ☐ Intercultural understanding
What are analgesics?
An analgesic is a depressant substance that is used to relieve minor pain. Analgesics are often called pain relievers or painkillers. Analgesics slow down the activity of the brain and include:
- aspirin (such as Disprin, AsproClear, Aspirin)
- paracetamol (such as Panadol, Dymadon, Tylenol)
- combination products that contain both aspirin and codeine (such as Veganin) or paracetamol and codeine (such as Panadeine).

Prevalence of analgesic use
Analgesics are the most commonly used drugs among 12-17 year old WA students with 95% having used them at some time in their lives, with females being more likely to use than males.1

Teaching young children about non-medicinal alternatives to analgesics challenges our drug taking culture.

Death and disease
Poisonings continue to be a cause of child hospitalisation in Western Australia. Education on the safe use of medicines is therefore important for students and parents/caregivers alike.

Childhood poisonings are mainly caused by products commonly found around the home including medicines (pain relievers and sleeping tablets), household cleaning agents (caustic cleaners for drains, dishwashing machine detergent), petrochemicals (kerosene, petrol) and pesticides and weedkillers.

The majority of poisonings occur when the substance is not in its usual place and has been recently used but not monitored by an adult.

Aspirin use for children under the age of 12 years is dangerous. It can harm the stomach and intestinal tract and can cause Reye's Syndrome (a rare but potentially fatal condition). This information may not be known by many parents and caregivers.

Aspirin may cause irritation of the gastric mucous membrane and even bleeding from the stomach. Excessive use may result in ringing in the ears, giddiness, nausea and mental aberration. Regular long-term use of aspirin may cause kidney damage and anaemia and asthma attacks.

Paracetamol overdose can produce acute and sometimes fatal liver damage and also kidney damage. A dose of fewer than 10 tablets (25g) may be fatal.

Standard precautions
When teaching students about emergencies it is important to discuss standard precautions. These are work practices required to prevent the spread of infections. It is a standard precaution to treat all blood (outside of the body) as potentially infectious.

Standard precautions include good hygiene practices such as washing and drying hands; using plastic or disposable gloves when in contact with another person's body fluids; and appropriate handling of needles, syringes and other sharp objects.

Some items such as discarded needles and syringes could potentially contain organisms responsible for the transmission of Blood Borne Viruses or BBVs (eg Hepatitis and HIV).

Students need to be taught not to touch the needles and syringes they find and immediately report the finding to an adult.

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1 Australian School Student Alcohol and Drug (ASSAD) Survey – Results from 2011, Department of Health
The standard precautions for discarded needles and syringes is for an adult to place the item into an appropriate sharps container (e.g. one that is leak, puncture and shatter proof such as a lunch box or an empty plastic cool drink bottle) and put the sealed container in a domestic rubbish bin (not the recyclable bin).

The standard precautions for needle stick injuries (a potential source of infection by HIV, Hepatitis B and C and tetanus) is to wash the infected area immediately with soap and water, apply antiseptic and a sterile waterproof dressing to the wound, and then take the infected person to a medical practitioner for assessment and treatment.

All Department of Education (WA) schools need to refer to the Regulatory Framework documents including HIV/AIDS and Hepatitis and Student Health Care Policy. AISWA and Catholic Education Office schools need to refer to their sector guidelines.

How medicine and hazardous substance education is taught is important

Sometimes analgesics will be the best form of short term treatment of pain. However students should be encouraged to use these drugs after they have tried alternatives to pain relief.

Stress that a good way to prevent pain is to maintain a balanced diet, be active every day, participate in healthy relationships, and get sufficient rest.

Students often see analgesic use as harmless because they are influenced by advertising and their parents’ and other adults’ example. Find opportunities to challenge these influences.

Stress that a trusted adult is the only person who should administer medicines and other drugs.

It is important to engage parents in drug education programs and activities as it is unrealistic to expect young children to protect themselves fully from the misuse of medicines and hazardous substances.

The available evidence-base suggests that effective drug education programs for students of this age should:

- Increase students’ knowledge, social skills, and refusal skills towards analgesics prescription and over-the-counter medicines.
- Include scenarios relevant to students’ experiences and interests.
- Contain highly interactive activities that engage students in problem solving and critical thinking.
- Provide significant coverage of content around these drugs complemented by follow up booster sessions.
- Position drug education within a broader health and wellbeing curriculum that focuses, amongst other things, on staying healthy and coping.
- Respond to cultural and social needs of the school community.
- Engage parents where possible. 

Useful websites

- School Drug Education and Road Aware
  www.sdera.wa.edu.au
- Drug and Alcohol Office
  www.dao.health.wa.gov.au
- Drug Aware
  www.drugaware.com.au
- Reach Out Australia
  au.reachout.com
- Oxygen
  www.oxygen.org.au
- Kidshelp
  www.kidshelp.com.au
- Alcohol Think Again
  www.alcoholthinkagain.com.au
- Life Education Australia
  www.lifeeducation.org.au

**ACTIVITY 1**

**Everyone feels unwell or gets sick sometimes**

**Preparation**
- *Dr Gemma* by Margaret Wild
- *Keep me company* by G. Rubinstein, 2000, Penguin, Melbourne
- A4 paper – one sheet per student
- Ball
- Family information sheet *Everyone feels unwell or gets sick sometimes* – A3 photocopy per student

- Conduct a shared reading (refer to page 167) of *Dr Gemma* or *Keep me company*. In both of these stories the authors recognise that everyone can become unwell and that it is important to be in a safe and supportive environment at these times.

**Ask**

*Have you ever felt like Gemma or Marnie?*

*Have you ever been so sick that you had to stay in bed and couldn’t come to school?*

*How is the story the same or different from when you were sick?*

*Who helped Gemma or Marnie when they felt sick?*

*Who gave Gemma or Marnie medicine when they were sick?*

*Where did the adults get the medicine for Gemma or Marnie?*

*What else helped Gemma or Marnie when they were sick?*

*What do your parents (or other people in your family) do to look after you when you are sick? (Focus on non-medical remedies such as keeping warm; resting; eating healthy food and drinks.)*

- Show students how to fold a strip of A3 paper into quarters. Unfold the paper strip and write the title of the story in the first section. Create a story map (refer to page 168) by drawing an illustration for the beginning, middle and end of the story in the other three sections. Include a thought bubble with each illustration that explains how Gemma (or Marnie) were thinking or feeling at this time in the story.

Have students draw their own story map. Scribe each student’s suggestions in their story map thought bubbles.

- Teach students the lyrics and actions to the song *Miss Polly*. The tune can also be listened to at [http://www.youtube.com/watch?v=AG3EaIeU62Y](http://www.youtube.com/watch?v=AG3EaIeU62Y).

**Miss Polly**

Miss Polly had a dolly who was sick, sick, sick
(pretend to be holding and rocking a baby)

So she called for the doctor to come quick, quick, quick
(hold a phone to your ear and make the ‘come here’ motion with either your finger or hand)

The doctor came with his bag and his hat
(hold a bag and touch your hand to your head to indicate a hat)

And he knocked on the door with a rat-a-tat-tat.
(make a knocking motion)

He looked at the dolly and he shook his head
(shake your head)

He said, ‘Miss Polly put her straight to bed.’
(shake your finger at ‘Miss Polly’ as though you are reprimanding her)

He wrote on the paper for a pill, pill, pill.
(write with an imaginary pencil on your palm)

‘I’ll be back in the morning with my bill, bill, bill.’
(hold the same paper out on the words ‘bill, bill, bill’)

- Discuss what else Miss Polly might have done before calling the doctor and giving the dolly a pill. For example, putting the dolly to bed or giving the dolly a drink of water. Ask the class to suggest what they do at school when they don’t feel well.

Sit students in a circle and give one student a ball. Explain students are to suggest a reason why Miss Polly would call a doctor when they are passed the ball. For example: Miss Polly would call the doctor if the dolly broke her arm. Ask the group to decide if the suggestion given is an appropriate reason to call or visit a doctor. Continue passing the ball until all students have contributed to the discussion.

- Give each student a copy of *Everyone feels unwell or gets sick sometimes* to take home and share with their family. Remind students that the sheet is to be returned and responses will be confidential. When all sheets have been returned, cut out the coloured squares and construct a bar graph of the most common illnesses and ailments shared by students in the class. Count the squares together. Use vocabulary such as more, less, equal, the same, most or few when discussing the graph.

**Ask**

*How many children in our class have had a cold?*

*Have many children in our class have broken a bone?*

*What could we do to feel better if we have a tummy ache, cold or ear ache?*

Note the medical history of the class prior to this activity and focus on commonly shared illnesses.

*Dr Gemma* was distributed with the first edition of *Challenges and Choices* (2005).
Everyone feels unwell or gets sick sometimes

We have been learning how everyone feels unwell or gets sick at some time. Talk about the times when your child has been unwell. Remind your child the steps that were taken to care for them during this time such as rested and stayed in bed, and drank lots of water.

Some common childhood illnesses are shown on this sheet. Help your child add colour to the boxes that show an illness your child has experienced.

Please return this sheet by

as we will be using the information to build a graph of common illnesses in our class.

Cold/flu
Please colour this box BLUE.

Measles
Please colour this box with RED SPOTS.

Chicken pox
Please colour this box with YELLOW SPOTS.

Mumps
Please colour this box RED.

Upset tummy
Please colour this box BROWN.

Constipation
Please colour this box GREEN.

Broken bone
Please colour this box PURPLE.

Tonsillitis
Please colour this box PINK.

Eye infection
Please colour this box with BLUE DOTS.

Ear infection
Please colour this box with GREEN DOTS.

Head lice
Please colour this box with BLACK DOTS.

Skin rash
Please colour this box ORANGE.

Thank you for playing a vital role in your child’s health and drug education.
Introduce Bounce-back Bear to the class. Explain that Bounce-back Bear wants to learn how to stay healthy and happy.

Have the class brainstorm (refer to page 163) a list of things that keep people healthy and happy. Responses could include: eating healthy food, drinking water, getting lots of sleep and exercise, laughing, having friends, sharing worries, doing enjoyable things and achieving goals. When a list has been completed, discuss some of the suggestions with the class.

Play the Healthy living song and encourage students to dance and move to the music.

Have students sit down and listen to the song again. Discuss the key healthy living messages that are promoted in the lyrics.

Explain that Bounce-back Bear has a bad cold with the symptoms of running nose, headache and sore throat, and is feeling hot and sleepy. Ask students to suggest ways that Bounce-back Bear could feel better. Draw student responses on the board (eg rest, hot soup, cold and flu tablets, cough mixture, nose drops, lemon drink, vitamin C tablet, Echinacea tablet).

Ask the class to decide which of the responses are medicines and circle these with a red marker. Use a different coloured marker to circle those that are not medicines.

Remind students that when feeling sick, it is always better to try non-medicinal things first. Encourage students to suggest other non-medicinal ways that could be used to relieve a headache, a bee sting, a burn or a sore throat.

• Introduce Bounce-back Bear to the class. Explain that Bounce-back Bear wants to learn how to stay healthy and happy.

Have the class brainstorm (refer to page 163) a list of things that keep people healthy and happy. Responses could include: eating healthy food, drinking water, getting lots of sleep and exercise, laughing, having friends, sharing worries, doing enjoyable things and achieving goals. When a list has been completed, discuss some of the suggestions with the class.

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ACTIVITY 2 Things to do to feel better

Preparation

• A large teddy suitable to be Bounce-back Bear or an A3 photocopy of Activity sheet Bounce-back Bear (refer to page 35)
• Healthy living song – cue the CD
• Two different colour markers
• A4 paper – one sheet per student
• Collection of toys
• Non-medicinal alternatives such as heat and cold packs, eye masks, water bottles

Ask

How did I know that Bounce-back Bear had a bad cold? (He described his symptoms and explained how he was feeling.)

How might you feel when you are sick or unwell? Why do you need to tell an adult when you are feeling unwell?

What are some positive thinking tricks you can use to make yourself feel better when you are feeling sick? (Positive thinking was introduced in Focus area 1. Examples could include: remind yourself that most illnesses don’t last forever; think about the extra love you get from your family when you are sick; think about the special treats you get when you are sick.) What can you do to help someone who is injured or sick at school? (Listen carefully to what is wrong; show you care by being thoughtful and kind; go and tell the teacher/duty teacher or another staff member.)

- Teach students the rhyme Get well tricks.

Get well tricks

Besides a pill when you are sick,
Here are some things to get well quick.
A little nap in your own bed,
Or take a walk outside to clear your head.
Listen to a story to ease your mind,
Or have a hug from someone who is warm and kind.

- Have students draw a story map (refer to page 168) showing a time when they were sick or unwell. The story map should include information about what was wrong, who they asked for help, and what they did to get better. It may help students to fold their paper into quarters and number each section.

Underneath the story map have students copy and complete the sentence – When I am sick I like to …

Scribe the sentence for students who require support.

- Place a collection of ‘sick’ teddies and toys, and non-medicinal alternatives such as cold and heat packs, water bottles, relaxing music, eye masks, in the home corner. Encourage students to role-play using non-medicinal ways to care for the teddies and toys.
ACTIVITY 3  🌻 🌼 🌼 🌼 🌼
People who help me when I’m sick

Preparation
- Activity sheet People who help me when I’m sick – two A3 photocopies cut into cards
- A large teddy suitable to be Bounce-back Bear
- Two large hoops
- Small strips of paper or cards
- A4 paper
- Adult helper

• To form pairs, distribute the cards from People who help me when I’m sick then explain that students are to find the other person in the class who has a matching card.

  Ask students to discuss with their partner (using the picture and word as clues) who the person on their card is and whether either student has received help from this person when they felt sick or unwell.

• Show the activity sheet on the interactive whiteboard or have students tell the class the person they discussed. Have students indicate using thumbs up, thumbs down (refer to page 169) if they have used each of the people shown on the activity sheet when they were sick or unwell.

• Explain Bounce-back Bear would like the class to help him decide who he needs to seek help from when sick or unwell. Sit students with their partner from the previous activity in a circle. Have a parent helper sit with Bounce-back Bear in the centre of the circle. Introduce the chant – Help me, help me, help me please. Tell me who I need to see.

  Have students say the chant then the parent helper should finish it off by using each of the following situations. For example, Help me, help me, help me, please. Tell me who I need to see…when I have a bad cold. The students holding cards showing people who might be appropriate to offer help in the situation used, walk to the centre of the circle and show their cards to Bounce-back Bear. There may be more than one person who can help for each situation.

  Ask the group to decide if the person would be appropriate or if not, who would be more appropriate.

  Situations
  Help me, help me, help me please. Tell me who I need to see when I:
  - can’t see the blackboard properly
  - have a toothache
  - have a bad rash
  - have a sprained ankle
  - my mum or dad needs to buy some antibiotics for me
  - feel sick at home.

  • Ask students for suggestions of other healthcare workers and people who can help someone when they are sick or unwell (eg child health care nurse, ambulance officer, counsellor, neighbour, grandparent, close family friend.) Write these suggestions on the strips of paper (or cards).

  Place two large hoops on the floor. Label one hoop ‘home’ and the other hoop ‘school and community’.

  Have students sort the activity cards and slips of paper into the appropriate hoop.

  Repeat the process using the categories ‘family’ and ‘not family’ then ‘people we know well’ and ‘people we don’t know well’.

• Visit the first aid or sick bay area and introduce the class to the school nurse or the person responsible for first aid. Brief the nurse or first aid person before the visit and provide the information to be discussed with the students, such as:
  - people in the school who can help students
  - non-medicinal responses and treatment
  - the school procedures when students are sick or hurt
  - the basic standard precautions of not touching someone else’s blood or syringes if found in the school grounds and always going to get help from a teacher or adult.

  Ask students to think of situations that may require visiting the first aid area. Role-play (refer to page 165) some of these situations with the nurse or another staff member. Encourage students to describe their symptoms, what is hurting and how they are feeling.

• Invite a health worker to visit the class eg a naturopath, doctor, nurse or pharmacist. Brief the visitor about suitable topics for discussion such as alternatives to medicines, the importance of an adult administering all medicines, common illnesses suffered by children, and ways to promote good health.

• Make a class book titled ‘People who help us’. Have students draw or paint a picture of people who can help when they are sick or feeling unwell at home and school, or in the community.
People who help me when I’m sick

Dentist  Nurse  Aboriginal and Islander Education Officer
Doctor  Mum or dad  Teacher
Podiatrist  Pharmacist  Ambulance officer
Physiotherapist  Friend  Optometrist
School gardener  Naturopath  Babysitter
School nurse  Clinic sister  Speech therapist
ACTIVITY 4

Medicines come in many different forms

Preparation
- Medicines slideshow – cue the CD-Rom
- Medicines poster
- Activity sheet Medicines – photocopy one per student
- ‘True’ and ‘False’ signs

• Show students the slideshow and discuss each picture using the following questions that focus on the types of medicine, how to store medicines and the administration of medicines. Alternatively display the Medicines poster and discuss.

Ask
What is the name of this medicine?
When might you need to use this medicine?
Do all medicines come in the same containers?
(Medicines are packaged in bottles with child resistant caps, packets, tubes, sprays and blister packs).
Are medicines only pills?
(Medicines can be in capsule, tablet, syrup, powder, drops, cream or spray form).
Where do people buy these medicines?
(eg supermarkets, delicatessens, service stations and chemists. Clarify that medicines purchased without a prescription are sometimes called ‘over-the-counter’ (OTC) medications.)
Who should give children these medicines?
(Children should only accept medicines from a trusted adult.)
Where should we keep medicines?
(eg out of reach of children, in a locked cupboard, in the fridge)

Highlight that medicines are drugs that people take or use (other than food or water) which change the way they think or feel. Explain that people usually take drugs to help them get better and that children should only take medicine from a trusted adult.

This discussion could also be conducted using a collection of empty medicine packages. Make sure that names are deleted from any prescription medicines.

• Distribute the Medicines sheet. Write on the board – Medicines are drugs. They change the way we think and feel. Read the sentences to the class. Ask students to copy the sentence in the label of the bottle.

• Display a sign labelled ‘true’ (or a tick) and another labelled ‘false’ (or a cross) at each end of the room. Explain that students must listen to a statement then ‘vote’ by moving to the sign they think is the correct answer.

Statement
- Some medicines can hurt young children. (True)
- Medicines are drugs. (True)
- A drug is something that you take or use and it changes the way you think or feel. (True)
- It’s okay to take medicines from your friend. (False)
- Only an adult you trust should give you medicine. (True)

The first edition of Challenges and Choices included the Medicines poster.
Medicines
FOCUS AREA 2: Drug Education

Display the piece of fruit, comb, toothbrush, asthma puffer, book and empty antibiotics packet. Introduce the concept of 'ownership' and 'sharing' by asking students the following questions.

**Ask**
- Is it okay to share all of these things? Why or why not?
- What do you own that you don’t like to share?
- How do you feel when someone makes you share something and you don’t want to share?
- Why shouldn’t we share medicines? (Using another person’s medicine may result in adverse side effects, accidental poisoning and unnecessary treatment costs).
- Who gives you medicine when you are sick? (Students need to understand that only a trusted adult should administer medicine.)

Sit students with a partner then distribute a copy of Medicine cards to each pair. Ask students to cut out the cards and play the following games.

**Concentration**
Shuffle the cards and lay them all face down. One student starts the game by turning over two cards. If the cards match the student must describe the type of medicine eg a tablet, a spray. The student then keeps the pair of cards and has another turn. This continues until a matching pair is not turned over. The cards should be turned face down again and the next person starts their turn.

**Barrier game** (refer to page 163)
Students divide the pairs of cards. The first player selects one of their cards and places it behind a barrier and describes it to their partner. The partner listens and decides which card is being described before placing it on the table. The barrier is removed to check if the cards match. Students swap roles until all the pairs have been used.

- Talk about situations when students were unwell and needed to use a medicine to get better.

Have students choose a medicine card that that they have used when sick or unwell and paste the card onto a sheet of paper. Students can draw themselves using this medicine and write under their drawing – I never share my medicine. Keep the activity sheet cards in the home corner and encourage students to play the games or use in a ‘doctor surgery’. 

**ACTIVITY 5**
Only take your own medicine

**Preparation**
- Activity sheet Medicine cards – one photocopy per student
- Piece of fruit, comb, toothbrush, asthma puffer, book, empty antibiotics packet

- Display the piece of fruit, comb, toothbrush, asthma puffer, book and empty antibiotics packet. Introduce the concept of 'ownership' and 'sharing' by asking students the following questions.
Medicine cards

- vitamins
- antiseptic cream
- headache tablets
- antibiotics tablets
- asthma puffer
- cold sore cream
- throat lozenges
- cough mixture
**ACTIVITY 6**

**Only an adult gives me medicine**

**Preparation**
- *Dr Gemma* by Margaret Wild
- *Activity sheet Only an adult gives me medicine* – photocopy one per student
- *Family information sheet Kids and medicines* – photocopy one per student

- Conduct a **shared reading** (refer to page 167) of *Dr Gemma* if Activity 1 was not completed.

Read pages 12 to 15 of the story again and use the following questions that focus on trusted adults administering medicines to children.

**Ask**
- *How was Gemma feeling when she felt sick?*
- *What is a prescription?* (Explain that it is a direction written by a doctor to the pharmacist for the preparation and use of a medicine.)
- *Where did Gemma’s mum take the prescription?*
- *Who gave Gemma her medicine at home? Why?*
- *Who else could have given Gemma her medicine? (e.g. another trusted adult and not a sibling or stranger)*
- *Should Gemma give medicine to herself?* (No, because adults understand the instructions about the safe use of medicine.)
- *Should anyone else take Gemma’s medicine?*
- *Who gives medicine to you when you are sick or unwell?*

- Have students draw or paint a picture of themselves and the people they know who can give them medicines when they are sick or unwell (either at home or at school).

Write on the board – *When I’m sick …… gives me medicine*. Students can copy the sentence and write the name of the person in their picture who is administering the medicine. The drawing could be created using a computer program.

Make a class book of the drawings and send home with each student to share with their family.

- Sing the song *This is the way we take our medicine* and reinforce the message of only taking medicine from a trusted adult and when non-medicinal alternatives have been tried.

**This is the way we take our medicine**

(Sung to the tune of *Here we go round the mulberry bush*)

When we’re sick we take our medicine, take our medicine, take our medicine.

When we’re sick we take our medicine, to help us get better and healthy.

We only take medicine from our mum, from our dad, from our nan,

We only take medicine from our teacher or someone we know and we trust.

- Send a copy of *Kids and medicines* home with each student to share with their family. Leave extra copies in the school foyer or pick up areas for other parents to access.

Ask students to bring a photo of someone who gives them medicine when they are sick or unwell. Display the photos under the heading ‘Health helpers’.
Kids and medicines

Each year many children need medical care because of poisoning. Most of these poisonings happen in and around the home and are usually from medicines including paracetamol, a common household product.

Here are some tips that can help you talk to your child about the safe use of medicines.

• Tell your child why the medicine needs to be taken.

• Show your child the packet or bottle and read aloud the instructions for use.

• Show your child how to find the expiry date of the medication.

• Tell your child the correct dose and let them watch as you count out the tablets or measure out the liquid.

• Explain why it is important to store medicines out of their reach and the reach of younger siblings.

• Talk about other trusted adults who can give your child medicine.

• Talk about other natural ways (if appropriate) of preventing the problem from recurring eg sleep, water, rest.

• Never refer to medicines as lollies and return all medicines to a storage place out of reach of children, and immediately after they have been used.

• Never give your children under 12 years of age aspirin at any time, unless prescribed by a doctor.

Have a look through your medicine cabinet. Throw the ‘out of date’ and unwanted medicines away. Make sure that all medicines are stored in their original containers and are not loose.

Call the Poisons Information Centre on 13 11 26 if you are concerned about accidental overdose.

Thank you for playing a vital role in your child’s health and drug education.
ACTIVITY 7 🌟stellar🌟
Practising helping self and others when unwell

**Preparation**
- Two puppets
- Adult helper

- Conduct a puppet role-play (refer to page 165) to demonstrate how students can seek help from someone else when they are sick or unwell.

Select one of the scenarios provided. Using one puppet, model some appropriate responses that the character in the scenario could use to get help. Responses should focus on clearly explaining symptoms and remaining calm.

Have the adult helper use the other puppet to model what a caring student could do if they found the character described in the scenario. Responses from the caring student should focus on listening carefully; being thoughtful and kind; not touching others' blood; and seeking help from an adult.

**Scenarios**
- Jenny has fallen off the play equipment and hurt her ankle.
- Kim has cut her hand.
- Benny has a headache in the playground.
- Ava is having an asthma attack.
- Jason has been stung by a bee in the sandpit.

After role-playing one of the scenarios, process the activity by asking the following questions.

**Ask**
- What did the puppet say and do to let the other puppet know that something was wrong? (eg described their feelings; described the body parts that were in pain; remained calm and spoke in a calm voice not a crying voice)
- What did the caring puppet do to help the puppet who was unwell? (The puppet listened carefully to what was wrong; was thoughtful and kind; showed concern and care; found a duty teacher or another staff member to help the student.)
- Why is it important for you to be able to tell someone else how you are feeling when you are unwell or sick? (If the person knows the symptoms they can decide what needs to be done to help.)
- What are some positive thinking tricks you can use to make yourself feel better when you are feeling sick or unwell at school? (Use positive thoughts such as I won't feel like this for ever. Everyone gets sick or hurts themselves at some time and this is just normal. I'm getting lots of extra care while I'm sick.)

- Ask for student volunteers to role-play the unwell character or the caring student for the remaining scenarios.

- Develop vocabulary related to body parts and ache and pain descriptions. Also discuss words that can be used to describe feelings when sick or hurt.

Students can make finger puppets by cutting out a small face from a magazine and sticking it to their finger with double-sided tape.
ACTIVITY 8  📌  📌  📌  📌  📌
Practising making decisions around medicines

Preparation
❖ Strategy sheet Decision-making model – A3 photocopy one per group
❖ A large teddy suitable to be Bounce-back Bear and a smaller teddy

- Have Bounce-back Bear tell the class that he is feeling sick but do not provide any further details. Encourage students to question Bounce-back Bear to find out why he is sick. Use the situation that Bounce-back Bear has taken some cough medicine, without an adult present, and has swallowed too much.

Ask the class to decide what was dangerous about Bounce-back Bear taking the cough medicine on his own and without adult supervision.

Re-enact the beginning of the above situation where Bounce-back Bear considers taking the medicine himself and add a sister or brother teddy to the scenario. Demonstrate the sibling teddy using assertive verbal and non-verbal communication skills to influence Bounce-back Bear’s decision ie not to touch the medicine.

Ask
What did Bounce-back Bear’s sister/brother do that stopped him from taking the medicine?
Why was this very brave or courageous?
How would Bounce-back Bear’s sister/brother have been feeling before he/she made such a brave decision?
How do you think Bounce-back Bear’s sister/brother may have felt after he/she had stopped him from taking the medicine?
Can you think of a time when you had to do the right thing or the brave thing and it was very hard?
How is ‘telling to get someone help’ different from ‘telling to get someone into trouble’?
What rule should Bounce-back Bear have remembered to keep him safe around medicine? (Only an adult should give medicine to children.)

- Use the same Bounce-back Bear situation and work through the decision-making model (refer to page 164) with the group. Point out that students need to think about how they might feel when choosing the best option in a decision as our feelings often affect our actions and words.

In small groups and with a parent helper or buddy, have students use the decision-making model to determine what they would say and do in one of these scenarios.

Scenarios
❖ You’re at the school sports day and after your race you’re feeling very puffed. Your friend offers you his asthma puffer to use. What should you do?
❖ You notice that your friend has some medicine in their bag. Your friend says the medicine is antibiotics. You know the rule is to give any medicine you bring to school to your teacher and then your teacher will give you the medicine. What should you do?
❖ You’re playing at your friend’s house and a baby sitter is looking after you both. You tell your friend you have a headache. She gets a chair and climbs up to the medicine cabinet and gets out some of her mum’s headache tablets and says you should take one. What should you do?
Activity 9: Sharing knowledge and skills around medicine

Preparation
- Activity sheet When I am sick – photocopy one per student

- Conduct a circle talk (refer to page 164) to engage students in the drug education content covered in this focus area.

Ask
What can you do to stay healthy and happy?
How could you tell a teacher on duty that you feel sick in the tummy and think you might vomit?
Who are some people in our community who look after us when we are sick or unwell?
Who looks after you when you are sick at home?
Who looks after you when you are sick at school?
What are some things you could do instead of taking medicine if you had a headache?
Why should you only take your own medicine?
Why should you only take medicine from an adult like your mum or dad or a teacher?

- Distribute copies of When I am sick to the class. Write some examples of the words that need to be inserted in the sentences eg mum, dad, grandma, own, adult and teacher on the board. Read these words with the class then explain that students are to choose the words to write in the sentences on their sheet. This may need to be modelled before the students try the activity on their own or with assistance.

Have students draw a picture to illustrate each sentence.

- Send the sheet home for students to share and discuss with their family.
When I am sick

I tell ______________ when I am feeling sick.

________________ looks after me when I am sick.

I only take my ____________ medicine.

________________ always gives me my medicine.