Spring 2015

Family and child development education for Harrisonburg adolescents

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Family and Child Development Education for Harrisonburg Adolescents

Collaborative and Creative Honors Thesis Project

An Honors Program Project Presented to

the Faculty of the Undergraduate

College of Health and Behavioral Sciences

James Madison University

by Jennifer Corser, Julia Glauber, and Mollie Moran

Accepted by the faculty of the Department of Nursing, James Madison University, in partial fulfillment of the requirements for the Honors Program.

FACULTY COMMITTEE:          HONORS PROGRAM APPROVAL:

Project Advisor: Julie Strunk, Ph.D., R.N.          Philip Frana, Ph.D.,
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Assistant Professor, Department of Nursing

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Assistant Professor, Department of Nursing

PUBLIC PRESENTATION

This work is accepted for presentation, in part or in full, at The Honors Symposium in Madison Union Ballroom on
April 25, 2015 from 2:30-4:30 PM.
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Acknowledgements

We would like to acknowledge multiple people without whom our project would not have been possible. First, our parents who graciously funded our education at James Madison University. Additionally, the JMU Honors program and Dr. Phil Frana for their assistance and support throughout the process. Many professors from the Department of Nursing provided guidance and resources in order to make our project happen, they include: Dr. Erika Metzler Sawin, Dr. Julie Strunk, Professor Marjorie Scheikl, and Professor Gleason. We would also like to acknowledge the staff of Harrisonburg High School, who kindly welcomed us into their school. Specifically, Mrs. Kathy Amend was wonderful to work with and could not have been more helpful!

Lastly, we would like to acknowledge East Campus Library for providing a beautiful space to complete our project, as well as Greenberry’s coffee shop, where we spent many hours. Finally, we would like to acknowledge James Madison University for the past four years of education, which have empowered us to complete this project and to strive to be active and engaged individuals.

Sincerely,

Mollie, Julia, and Jennifer
Journal of Progress

Spring 2014

3/5/14, 2:16 PM- Phone Call with Mr. Tim Meyers (Harrisonburg High School (HHS) Counseling Office)

**Summary:** Told Jennifer to get in touch with Lisa Warren- Head of guidance at HHS.

3/10/14- Phone call with Ms. Lisa Warren (HHS)

**Summary:** Set up phone conference for Wednesday (3/12) at 2:30.Said we would need to meet with an administrator to talk about getting stats released, etc.

3/12/14, 2:30 PM- Phone Call with Ms. Lisa Warren (HHS)

**Summary:** Proposed possible topics and ideas for involvement (4T program, Extended Learning Time, “Lunch and Learn” time)

3/19/14, 10-10:30 AM- Face to Face meeting, HHS, with Dr. Shaver (HHS Principal)

3/31/14, 4 pm- Face to Face meeting, Burruss Hall, Dr. Erika Metzler Sawin

4/2/14, 3 pm- Face to Face meeting, HHS, Rachel Linden (HHS Counseling)

4/8/14, 4 pm- Face to Face meeting, Burruss Hall, Dr. Julie Strunk

4/9/14, 4:30 pm- Face to Face meeting, HHS, Kathy Amend (HHS)

4/15/14, 4:30 pm- Face to Face meeting, Hillcrest, Dr. Frana

**Summary:** Approved project, gave us a 3-5 day extension on project.

Summer 2014

**Roadblock!** Julia spending two months in Kenya over the Summer

**Roadblock!** Considering the circumstances of our summer plans, we decided that submitting for the IRB approval would not be feasible. We therefore decided that we would not use any
participant data and would omit the portion of our plan that included a pre and post survey for
the students to take.

**5/20/14** - Emails with Kathy Amend (HHS) about plans for summer and early Fall

**5/20/14** - Sent our proposal to Professor Strunk and Kathy Amend (HHS)

Roadblock! After working in the Neonatal Intensive Care Unit over the summer, Jennifer
decided that she would like to educate the class about a different topic: Prenatal care and healthy
pregnancies. “I saw tons of patients whose mothers were ill-informed about prenatal care and
their babies suffered tremendously. I wanted to give these students the opportunity to know what
a healthy pregnancy entails, whether they had already had a baby or not” - Jennifer Corser

I then began corresponding with Kathy Amend (HHS) about my change in topics. She ended up
being completely fine with the change and worked the presentation into her agenda for the class.

**7/14/14** - Jenn Changed topic- confirmed with Kathy Amend (HHS) via email

**8/14/14** - Email to touch base with Kathy Amend (HHS)

Continuously throughout the summer:

Individually researched topics and began composing lesson plans

Kept in touch at least bi-weekly with collaborators via conference calls and face-to-face
meetings

Kept in touch with Kathy Amend (HHS) and updated her on topic progress for feedback and
input

**Fall 2014**

**9/3/14** - Email from Kathy Amend (HHS) about schedule. *Important email*

Summary: “The class times are 9:15 to 11:00 and 11:05 to 12:35. I am thinking that the prenatal
care should go first, then Developmental Stages and then Nutrition, if that fits with your plan.”

**9/9/14** - Nursing Honors meeting with Dr. Erika Metzler-Sawin
9/23/14- Jennifer met with **Professor Scheikl** (Women’s Health Professor) to get feedback and ideas for presentation.

9/25/14- Met with **Professor Strunk** to go over plan for the Fall and her expectations for our fall submission.

10/22/14- **Jennifer presented (two classes) at Harrisonburg High School**

10/30/14- Julia met with **Professor Gleason** to discuss ideas for Baby Book project

11/3/14- Julia met with **Professor Strunk** to have her review presentation

11/4/14- Julia met with **Professor Gleason** to cut out materials and make copies for Baby Book project

11/5/14- **Julia presented (two classes) at Harrisonburg High School**

11/12/14- **Mollie presented (two classes) at Harrisonburg High School**

11/15/14- Sent **Kathy Amend** (HHS) a thank you note

12/4/14- Nursing Honors meeting with **Dr. Erika Metzler-Sawin**

12/12/14- Final Fall submission (Educational materials and presentations) submitted to **Professor Strunk and Professor Metzler-Sawin**

**Spring 2014**

Throughout the semester- met to work on Essay and to finalize submission materials

4/1/15- Attended Honors Program information session re: symposium and presentation poster

4/8/15- Submitted final project including reflective/contextual essay

4/24/15- 2:30-4:30PM Presented Project
Reflective/Contextual Essay

Introduction

The American Association of Colleges of Nursing provides “Essentials” of Baccalaureate education for professional nursing practice. These essentials are competencies that we, as graduates of James Madison University, should be able to provide our patients. One essential that is emphasized in our program is Clinical Prevention and Population Health, which is defined as the ability of a nurse to promote health and prevent diseases in both an individual patient as well as at a population level (American Association of Colleges of Nursing, 2008). The best way to promote health and prevent disease is through educating our patients so that they can be advocates for their own health. However, we are taught that there are many socioeconomic, lifestyle, cultural, genetic, and environmental components to health, all of which must be taken into account in order to provide quality healthcare. When taking these components into consideration we begin to understand barriers to healthcare and certain trends that an individual or population may experience. Understanding the community that we work in is crucial to understanding the patients we come into contact with.

This desire to learn more about the community does not have to start with our profession but can start as nursing students. We decided to take a look at the Harrisonburg population in order to identify needs throughout the community. During our exploration, we learned that the pregnancy rate among 15- to 17-year-old women in Harrisonburg is double Virginia's state rate (Townsend, 2008). We decided to meet with administers and guidance counselors of Harrisonburg High School in order to gain more information regarding this startling statistic. While speaking to these individuals we learned that Harrisonburg High School views this issue
as one that cannot be addressed by teaching abstinence in their public school. They have found that because of cultural beliefs, abstinence is not an effective tool for preventing teenage pregnancy. Instead, HHS teaches their students about safe sexual practices and how to have a healthy pregnancy in the event they were to become pregnant. The high school also provides a daycare service for students with children. The goal of this program is to keep young mothers in school and to ensure that they graduate with a high school degree. We were then put into contact with Mrs. Kathy Amend, a teacher at the high school who is in charge of a course offered called “Child and Family Development”. The course follows the GRADS curriculum, which stands for Graduation, Reality, and Dual-Role Skills: Family Focus. This course is designed for “Pregnant and parenting adolescents in order to build employment skills and receive parenting and life-management skills to improve quality of life for themselves and their child” (Virginia’s CTE Resource Center). This course is not just available to pregnant students or students who already have children at HHS, but available to all students. We worked with Ms. Amend to develop lessons plans that would provide the opportunity to educate and promote health of this population, while keeping the curriculum of the course in mind. The purpose of working with these students is to spread awareness about pertinent topics which would be beneficial not only to women dealing with teenage pregnancy, but also to any student thinking of becoming a parent or healthcare professional in the future.
Jennifer’s Personal Reflection

I originally chose the topic of healthy relationships and familial support. I chose these topics because I felt that they were extremely important to successfully raising a child and the development of a family. I still feel that these topics are imperative, however, over the summer, I decided I would change my topic. I worked in the Neonatal Intensive Care Unit (NICU) at Medstar Georgetown University Hospital this summer. Throughout the summer I saw case after case of babies whose mothers had not appropriately used prenatal care. There were also some patients whose mothers had used drugs or alcohol. Seeing the effects on these children was devastating and upsetting.

I decided that I wanted to educate these students about a healthy pregnancy and as well as share some of my experiences from the summer. I did not use any specific information about any of my patients, of course, but I was able to tell them about my work with babies who were born prematurely or withdrawing from drugs. Because it is a topic I became passionate about throughout the summer, it made my presentation all the better.

I was the first to present to the class, so I was a little nervous. I also wondered how I would engage the class and try to make these topics interesting to them. I spoke to Kathy Amend (class instructor, Harrisonburg High School teacher) for some advice. She suggested that we try to incorporate as many activities and as much application-based learning as possible. The classes themselves were roughly 1.5 hours long, so I planned to incorporate two different hands-on group activities into the lesson plan. Another approach that we took during this first presentation was to be very intentional about our introductions. Since it was our first time there, we explained to them why we were in their class and how we had been planning for months with Ms. Amend for this to happen. They all seemed pretty excited to be hearing from college students. We told
them some basic information about who we were, and then also told them a fun fact about when we were in high school, such as a sport we played. They seemed to relate. We also tried to make the environment very comfortable by allowing them to ask anonymous questions by writing their questions on a piece of paper and passing them to the front (image to the left). We also allowed time at the end of the presentation for questions and a discussion about life after high school and the possibility of pursuing higher education. Many students seemed extremely interested and wanted to know about JMU and our experiences in college, such as how we chose our school or major.

You will find my exact lesson plan below as well as my PowerPoint presentation in Appendix A. The first activity I did with the group was to create an analogy. I had them get together in groups of four to plan a vacation. The goal was to get them thinking about something that requires a lot of planning in order to go smoothly. I also threw them a roadblock about three minutes into the activity and informed them of a restriction with their method of transportation. Towards the end of the activity, I added that Julia Mollie, and I were travel agents and we had the answers to ALL of the questions. I then gave them a few more minutes to finish up their plan and then present it to the class. They all had extravagant ideas and seemed to enjoy the activity. We then had a brief conversation about the importance of planning for a big event in the future, like a vacation or having a family. We talked about how there are sometimes roadblocks that occur while implementing that plan. Finally, we discussed the importance of utilizing resources, or in this case “travel agents,” in order to get questions
answered and to be the most prepared for this future event. These resources could be parents, doctors, counselors, teachers, and others. They seemed to take a lot away from the activity.

After we got them thinking about the idea of planning ahead for the future, I taught them about pregnancy and also quizzed them on basic facts about pregnancy. I was surprised at how much they already knew. I also taught them about the placenta and made an analogy to a road, with the cars/trucks as being the nutrients passing from mom to baby.

Afterwards, we discussed teratogens, where we did a matching activity. I had printed out about eight different pictures of items and then asked them to work as a team to create two groups, one group that is okay to consume during pregnancy, and one group that is not okay to consume during pregnancy. I then gave them the correct answers so that they could check their responses for accuracy.

Additionally, Professor Scheikl (Women’s Health Professor at JMU) suggested that I educate the class (which was all female except for one male) about preconceptional health. I educated the class about steps they could take now in order to have healthy lives and eventually a healthy pregnancy. The students liked this topic because it was something they could implement and learn from immediately.

Overall, I thought the presentation went really well. They definitely enjoyed the interactive activities and were asking questions throughout the class. They also seemed to enjoy getting to know us. It was a rewarding experience and I was very impressed with most of the students we worked with. Many of them were interested in pursuing higher education and some were also thinking about entering healthcare. Those who already had children were extremely mature and seemed to care deeply about their children. I feel like we definitely made an impact
on the class and I am happy that we got to return three times throughout the semester so that we could continue to get to know them. It was a wonderful experience overall.

Julia’s Personal Reflection

For my topic to teach I chose developmental delays and disabilities. There were a lot of reasons I chose this topic in particular. First, I have always loved working with children. I loved that I was able to incorporate how children grow and develop into a lesson. I have worked for years as a camp counselor, lifeguard, and nanny and am starting my career as a pediatric nurse next year. In high school and into college I was very involved in Best Buddies, an organization that provides one on one interaction for individuals with disabilities to connect with their neurotypical peers. It was remarkable to watch students join the organization hoping to give back or help make someone’s day a little bit better, and seeing how much they gained from the experience too. I was also heavily involved with Special Olympics and teaching a government class for students with disabilities. Too often kids with disabilities are ostracized in high school and I was hoping that by giving insight into some of these disabilities, the students of Harrisonburg High School might take a minute to step back and try to befriend someone who may be a little different than themselves.

When thinking about presenting my topic I knew I would have to gear it towards high school students if I wanted anyone to pay attention. Mollie, Jennifer, and I all realized that it was more important for the students to get a general feel for the topic and enjoy the presentations so that they would remember them, as opposed to bombarding them with hundreds of facts that they would not remember. To do this I created a basic outline for what I wanted to touch on Appendix B. I wanted to include 4 learning objectives that came from a list Ms. Amend gave us.
My objectives were to describe the parental role in overall child development, examine growth and developmental needs of children from birth to one year of age, examine growth and developmental needs of children from one to three years of age, and examine and development needs of preschool children growth. These objectives seemed a little repetitive and I knew the class would be bored if I just read off of a PowerPoint the whole time. To solve this issue I put in multiple videos, included interactive questions, and planned an activity for the last thirty minutes of class.

The activity that I planned was one that I had previously done in one of my classes. In our pediatric nursing class one of our grades for the class was to make a “baby book.” This baby book was a handmade scrapbook and informative guide about when your baby should hit certain milestones and when they should get immunizations. In our class we made them and brought them to the hospital for mothers who could not afford to buy their own scrapbooks. It was a really wonderful opportunity to give back and I wanted the students of Harrisonburg High School to have the same experience. Because of the limited time to complete the project I had the students get into groups of four to make a baby book. We then left the books with Harrisonburg High School’s 4T program for the
teenage mothers who are still in school. I believe it was a great way for the students to make sense of what they had just learned during my presentation and help someone else in the process.

Overall I believe my presentation went pretty well. While over half the class was engaged there were some students that did not pay attention. The only thing that didn’t go as well as planned was that the students were not as interested in making and decorating the baby books as I thought they would be. It was only when their teacher told them it would be for a grade that they started putting more effort into making the books look nice. Otherwise I felt as though the presentation went as smoothly as it could have gone as most students asked questions and actively participated.

One thing that I loved was that we were able to visit with the students three times and were able to make connections and talk to them on each visit. What I found really cool was how we were able to talk to these students about how great JMU has been and why college was the right decision for us. Another thing that made me happy was that after our presentation students would ask us questions about nursing and seemed genuinely interested about considering it as a college major because of what we told them about it.

I learned so much from this thesis and I can’t imagine us having done it any other way. I am so glad that we chose a creative project and it was such a great feeling knowing that these students learned something from us. I will hopefully use the public speaking skills I gained from this project to better advocate for my patients in the future. As a nurse, patient education will be so important and this project taught me ways to teach people with very different learning styles.
Mollie’s Personal Reflection

The topic that I chose to teach to the class was nutrition: infants, toddlers, and preschoolers. I chose this topic because the benefits of a healthy and balanced diet has always been a topic of interest for me. In the past, I have done substantial research on what a well-balanced diet means for an adult. While nutrition is important for an adult, adequate nutrition is crucial in the healthy growth and development of a child. Because they are developing so quickly, infant, toddler, and preschooler nutrition varies greatly. It was my hope that with this presentation I would be able to help the students in the Child and Family development course understand safe feeding practices and the differences in nutrition throughout a child’s life.

During my presentation, I planned to cover multiple learning objectives as outlined by the course. I planned to cover the basics of newborn feeding, planning meals for toddlers and preschoolers, as well as any important developmental or feeding issues they should be worried about with each age group that could affect nutrition intake. Before creating my lesson plan, I reflected on the population I was going to be dealing with and decided to take my presentation beyond just surface level material. According to Harrisonburg City Public Schools, over 60% of the students enrolled are economically disadvantaged (2015). Of the students enrolled in the class, a few of the students either had children or were currently pregnant. Given these factors, I decided that discussing community programs and resources that could provide financial assistance such as WIC and SNAP benefits could be useful. I also reflected back on my own high school experience in order to help guide me in the creation of my lesson plan. I decided to end with a discussion about the effect that the media has on high school students as well as children being raised in society today. I felt that this was an important topic to cover because I understand the pressures the media has on self-image as a high school student. I still
feel those pressures today in college. It is my hope that by bringing these issues to light, we can all become more aware of the unattainability of much of what is in the media and that everyone is beautiful in their own way.

As I was planning my hour and thirty-minute lecture, I wanted to keep in mind that students would lose interest if I lectured for the entire class period. I wanted to break my lesson up with activities as well as opportunities to generate more discussion. I first began by going over newborn and infant nutrition, the benefits of breast feeding, as well as nutritional concerns that they should be aware of. We then transitioned into nutrition after 6 months by having the students try baby food. Mrs. Amend supplied us with three flavors of baby food as well as some rice cereal. The students got to try them and make comments about the taste and texture. Most of the students really seemed to enjoy this and it was a great way to break up the lecture so that they could be engaged for the next portion of the presentation. This activity also generated a lot of questions such as how they should feed their baby, when babies can have rice cereal, and if they can make baby food on their own. All of these questions made a great transition into our discussion about nutrition of six months-olds, toddlers, and preschoolers. Some of the students who had children gave their input about what some of their toddler’s favorite snack were and how they feed them.

We then moved on to material that was tailored more towards the high-risk group of students that we were educating. For me, this part of the presentation was the most rewarding
and I think that the students found this section the most impactful as well. I began by going over some of the financial assistance available to those who qualified. We discussed how to qualify and apply for assistance, what the assistance programs such as WIC and SNAP included, and how to use these programs. The topic generated a lot of questions from the students and even a discussion between one soon-to-be mother and a student who already had a child. The mother talked candidly about how she got assistance through the WIC program and what she was allowed to buy using the program. This discussion seemed to provide a lot of useful tips for the student due in a few months. Having support through pregnancy is extremely important, especially if you are a teenage mother. It was incredible to see students give each other advice and talk about their own experiences to ease the fears of pregnancy and raising a child. My entire lesson plan as well as PowerPoint slides can be viewed in Appendix C, figures 1 and 3.

Using the knowledge that they had gained over the course of the presentation, I had the students complete a simulation experience where they had to buy a day worth of food for their child. They were expected to meet all of the nutrition requirements for their child’s age according to the USDA My Plate guidelines. Each group also had a different budget that they were allowed to spend, simulating raising a child in a low, middle, and high-income households. Some of the groups were also granted WIC or SNAP assistance and were only allowed to use that assistance on the items specified by that program. These budgets can be seen in Appendix C, figure 2. According to the USDA, a family with a moderate to liberal spending plan for food can spend between $5-$10 per day on food for a 3 year old. They also state that on average those who are eligible for WIC or SNAP receive $3.50 per day for food (USDA, 2015). We gave them grocery store coupon booklets to decide what they were going buy using their allotted budgets and they cut them out and pasted them on a piece of paper. Throughout the activity, we walked
around and observed the students working. We sensed a lot of frustration from the groups who had either small budgets or using SNAP/WIC. The students were given 20 minutes and then we regrouped for each group to share their experiences. Most groups expressed that they found this to be a very eye-opening experience and that it made them realize how difficult it was to plan and make sure their child was getting all of the requirements they needed, especially if they were working with a small budget. This activity not only made the students think, but it made Julia, Jennifer, and I think as well. Some of these students were living on low-incomes; I knew that I had to be aware going into this activity because it could have made some of the students upset. But, I was surprised by how open these students were with each other about their own family backgrounds and a lot of healthy conversation was occurring. This activity had me reflecting on the care and education we provide in the hospital setting. We don't always know the background of every patient, but taking the extra time to learn more information is crucial in planning individualized and holistic care.

After the activity, we moved into a discussion about the effects that the media has on children as well as the experiences they have had being in high school. In today’s society we are constantly bombarded by images of sex, violence, and drugs in the media. It affects the way we
dress, act, and even talk. We talked about the pressures they feel in high school. Many of the students feel like they are pressured to meet certain standards of outward appearance and people are more focused on what is on the outside rather than the inside. We then talked about the influence the media can have on children. “Children spend an average of 7 hours and 38 minutes using entertainment media across a typical day” (Keiser Family Foundation, 2010). This statistic reveals just how prevalent influences of the media can be in their lives and how important it is for parents to monitor what their children are viewing.

Overall, I think my presentation went very well. I found it difficult to be working with this age group because a lot of the time they seemed disinterested, were looking at their phones, or were tired because the class was right before lunch. However, I thought that during the times they were engaged, they contributed their opinions and asked questions. I think that they enjoyed the hands-on activities or videos shown the most. These were definitely the times of class where they participated the most. Overall, this opportunity was a great experience to share knowledge we have learned in nursing school and a great opportunity to work with an age group that we have not gotten much experience with in nursing school. Although we are not much older than these students, they looked up to us and it was a great experience to be not only a resource for information but also role models.
Conclusion

One of the James Madison University Department of Nursing core values is collaboration. As students, we are taught to engage in inter-professional education, community service, scholarship, and participate in collaborative practice. Throughout our time in the nursing program we have learned how important collaboration will be in our future practice. This includes partnership with other specialties, but most importantly, our peers. The nursing profession would not be possible without the teamwork of nurses. The true value of teamwork begins to be recognized even in nursing school. We are each other’s support in clinical, when studying for exams, and in everyday life. As a group we are so glad that we chose to complete a creative collaborative project. It was the perfect way for us to use the knowledge we have gained at JMU to give back to the community. The JMU Nursing Program has focused heavily on hands-on learning. We chose to complete a hands-on creative project in hopes that we could do work that would immediately affect people. The Nursing Program has also stressed that patient education is one of the most important tools we will use as nurses. Providing education to the students of Harrisonburg High School helped us understand how much time and effort will go into making sure our patients have the most accurate and up to date information. It also revealed to us how gratifying it is to help someone understand a concept.

All three of us have accepted jobs at MedStar Georgetown University Hospital. We will be completing an Evidence Based Research Project with other New Graduate Nurses. We believe that this experience has greatly prepared us for this future Research Project. We are so proud of the work we have done on our thesis, and are thrilled to embark on the next stage of our careers as graduates of James Madison University.
Feedback

HARRISONBURG HIGH SCHOOL
1001 GARBERS CHURCH ROAD
HARRISONBURG, VA, 22801
PHONE 540-433-2651

To whom it may concern,

This letter is in reference to Mollie Moran, Jennifer Corser, and Julia Melville. These 3 young women from the JMU nursing program presented lessons to my Child and Family Development classes in the Family and Consumer Sciences department at Harrisonburg High School. The topics they presented were Childhood Nutrition, Pregnancy and Prenatal Development, and Developmental Stages.

All three women were well planned and prepared. The lessons were geared for high school students and the activities were age and subject matter appropriate. The lessons were divided into lecture with visuals, hands on activities, discussion and interactive group work. Each presenter used a variety of mediums in their topic, technology, art, discussion, etc.

Besides the lessons themselves Ms. Moran, Ms. Corser, and Ms. Melville made an effort to talk with the students, answer questions and lead discussions when topics arose. They were genuinely interested in the students and were helpful in explaining the nursing program at JMU and how they made the choice to go into the medical field.

I have worked with the JMU nursing department for several years and must say that these 3 women are some of the most outstanding. Their pleasant demeanor and professional approach was a positive asset to the classroom. I look forward to a continuing relationship with JMU and nursing students.

Thank you

Respectfully submitted

Kathy B Amend

Kathy B Amend
Family and Consumer Sciences Teacher
Appendix A

Lesson Plan #1 Outline
Wednesday, October 22, 2014
Primary Instructor: Jennifer Corser

A. TITLE OF LESSON: Women’s Health - at your age and beyond!

B. CONTEXT OF LESSON: Pre-conceptional health, prenatal care, teratogens, and preterm birth are all concepts that are pertinent to women of child bearing age. By gaining information about these topics, women will be able to apply them later on in life to lead to a healthy pregnancy.

C. LEARNING OBJECTIVES and ASSESSMENT:
1. Describe the onset of pregnancy
2. Describe prenatal development
3. Investigate harmful substances and environmental chemicals on the unborn child
4. Describe personal preconceptional health criteria

<table>
<thead>
<tr>
<th>Learning Objective</th>
<th>Objective Number</th>
<th>Assessment (Formative/Summative)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Describe the onset of pregnancy</td>
<td>62</td>
<td>Students will answer basic questions in class such as, “how long is a pregnancy?” and “what are some typical signs of being pregnant?”</td>
</tr>
<tr>
<td>Describe prenatal development</td>
<td>63</td>
<td>Students will watch a video about prenatal development</td>
</tr>
<tr>
<td>Investigate harmful substances and environmental chemicals on the unborn child</td>
<td>66</td>
<td>Students will participate in a teratogens matching activity to demonstrate understanding of harmful substances</td>
</tr>
<tr>
<td>Describe personal preconceptional health criteria</td>
<td>n/a</td>
<td>Students will participate in an activity where they will plan a vacation. They will then relate the importance of planning ahead when planning for a major life event. They will make the connection to thinking about preconceptional health, including the importance of taking folic acid regularly.</td>
</tr>
</tbody>
</table>


Figure 1. Lesson Plan #1 Outline (1)
D: THE STUDENT WILL:

- Get to know us
- Have the opportunity to ask questions about college
- Introduce themselves and why they chose to take this specific course
- Participate in discussion about pregnancy and their view of a baby
- Activity #1: Plan a vacation! “We will give you 10 minutes and then one member of your group will present to the class your vacation plans!”
  - They will make the connection that planning ahead for a large vacation is similar to planning ahead for a major life event. They will then understand the necessary steps to a healthy pregnancy.
- They will understand the harmful effects of teratogens on the fetus

E. MATERIALS NEEDED:
- Cardstock paper and markers (for name tags)
- Ziplock bags with cut up pictures of the teratogen pictures for the matching activity.
- Powerpoint on a flash drive

F. OUTLINE

<table>
<thead>
<tr>
<th>Time</th>
<th>Content to Cover</th>
<th>Activity</th>
</tr>
</thead>
<tbody>
<tr>
<td>5 minutes</td>
<td>• Introduction</td>
<td>• We will ask them to please make a name card so that we can know their names. We will introduce ourselves and explain why we are here, then we will have them go around the room to introduce themselves as well.</td>
</tr>
<tr>
<td>15 minutes</td>
<td>• Plan a vacation Activity</td>
<td>• Activity #1- Students will plan a vacation. About 5 minutes in, we will throw a curveball at them, they will have to choose a new source of transportation. We will then transition into preconceptional health by emphasizing that similar to planning a vacation, they will need to plan ahead to have a healthy pregnancy. Mollie, Julie, and Jenn will also walk around and be “travel agents.”</td>
</tr>
</tbody>
</table>
This will be an analogy for utilizing resources and asking questions. We will relate this role to “life resources,” such as teachers, parents, doctors, and counselors.

| 15 minutes | Basics of pregnancy | Lecture |
| 15 minutes | The placenta | Video |
| 30 minutes | Teratogens | Pictures |

They will be given a bag with pictures in it and then instructed to make one group of pictures which you think is okay to consume/expose yourself to during pregnancy and one that you think is not okay to consume/expose yourself to during pregnancy.

We will then go through to give them the correct answers.

| 10 minutes | Neonatal Abstinence Syndrome | Lecture |
| 10 minutes | Fetal Alcohol Syndrome | |
| 15 minutes | Neonatal Intensive Care Unit | Lecture |
| 15 minutes | Preterm birth | Personal stories |

We will allow students to hand in sheets with questions written on them, so that the questions they ask remain anonymous.

G. MEETING THE NEEDS OF ALL STUDENTS:
We will establish a relationship with the students, explaining that we will be coming to their class three times throughout the semester. We will make sure we have ample time for questions so that we can address their needs and concerns.

H. WHAT COULD GO WRONG WITH THIS LESSON AND WHAT WILL YOU DO ABOUT IT?
Happy Wednesday! Please take a moment to make a name tag with the paper and markers provided so that we (your guest speakers) know your names!

Who are we?
Mollie Moran  Jenn Corser  Julie Glauber

Why are we here?
We want to get to know you, too!! Please tell us your name, your grade, and why you chose to take this class!

Today’s topic: Women’s Health— at your age and beyond!
Pre-conceptional health, prenatal care, teratogens, and preterm birth
Jennifer Corser, James Madison University

Class Objectives
1. Describe the onset of pregnancy
2. Describe prenatal development
3. Investigate harmful substances and environmental chemicals on the unborn child
4. Describe personal preconceptional health criteria

Figure 2. Jennifer’s PowerPoint Presentation
Figure 2. Jennifer’s PowerPoint Presentation
Figure 2. Jennifer’s PowerPoint Presentation
Figure 2. Jennifer’s PowerPoint Presentation
Figure 2. Jennifer’s PowerPoint Presentation

**What are Teratogens?**
A teratogen is anything that can impact the development of the fetus (baby in the mother’s womb). Usually something in the environment that the mother may be exposed to during her pregnancy.

**Activity #2**
Please make one group of pictures which you think **IS okay** to consume/expose yourself to during pregnancy AND one that you think **IS NOT okay** to consume/expose yourself to during pregnancy.

**Dilantin - NO!!!**
A medication used to treat epilepsy (seizure disorder). If taken by the mother in the first trimester, there is a 10 percent chance for a combination of birth defects known as the “Fetal Hydantoin Syndrome.”

**Varicella - NO!!!**

**Acetaminophen - OKAY!!!**

**Prenatal vitamins — OKAY!!!**
They are prescribed when a woman becomes pregnant to supplement her diet to meet the growing nutritional needs of pregnancy.
Figure 2. Jennifer’s PowerPoint Presentation
Figure 2. Jennifer’s PowerPoint Presentation
Figure 2. Jennifer’s PowerPoint Presentation
Appendix B

E. MATERIALS NEEDED:
- Materials already present provided by Ms. Arnedo prior to class
- Colored Paper
- Scissors
- Glue
- Markers
- Hole Puncher
- Materials that I will provide
- Stickers
- Printed-out pages
- Markers
- Scrapbook Paper

F. PROCEDURES:

<table>
<thead>
<tr>
<th>Time</th>
<th>Content to Cover</th>
<th>Activity</th>
</tr>
</thead>
<tbody>
<tr>
<td>5 Min</td>
<td>Introduction</td>
<td>Review briefly what I will be teaching today, and what I will be talking about today</td>
</tr>
<tr>
<td>30 Min</td>
<td>1. Make baby books for your mothers</td>
<td>Assembly</td>
</tr>
</tbody>
</table>

G. MEETING THE NEEDS OF ALL STUDENTS

In order to meet the needs of all students, I will try my best to be interactive as well as informative. I will include pictures, videos, and songs to appeal to all types of learners. As there are multiple mothers in the class, I will use a variety of activities and provide much information that pertains to the age of their children.

H. WHAT SHOULD I KNOW ABOUT MY CHILD?

This topic is not a sensitive one, but it is important to know your child's development. It may be helpful for you to remember when your child will be doing certain developmental milestones, and how they are progressing. Your child's teacher will help you to plan for your child's growth and development. Please review the activities and materials provided by Ms. Arnedo prior to class, and ask any questions you may have. If you need further assistance, please contact your child's teacher or the school's guidance counselor.

Babysitting Pages: NEXT PAGE

Congratulations!

You have a brand new baby boy! This is your Baby Book. You can use this to keep track of many things during the first few years of your child's life. You can track their weight and height and also look at age-appropriate developmental milestones. This book will also help you remember when your child should be getting immunizations, and help you see how to provide good safety precautions and dental care for your child. Ask your baby's provider if you have any other questions.

Sincerely,

3rd Grade Student

My Baby:

Name: ______________________

Pees: __________

Birth Date: __________

Weight: __________

Height: __________

My Health Care Provider Visits:

Appointment date: __________ Age: __________ Reason for visit: __________

Appointment date: __________ Age: __________ Reason for visit: __________

Appointment date: __________ Age: __________ Reason for visit: __________

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**2 months**

- Newborn to 2 months

- **Development/Behavioral:***
  - Baby looks at parents eyes, smiles, and responds to voices.
  - Place baby in back to sleep. (Helps prevent flat head syndrome [UFH]).

- **Nutrition:**
  - Breastfeeding remains ideal for first 6 months. Provides ideal nutrition and supports the best possible growth and development.
  - To prevent constipation, arrange baby’s bowel movements at least every 3-4 hours, 2-3 times. Make sure to keep hydrated.
  - Until baby is fully able to drink water without salt.

- **Baby Care:**
  - Taking care of hand. Hold infant around 1-2 weeks old.
  - Prompt feeding of breast milk.
  - Change baby’s diaper as needed. 6-10 wet diapers a day is normal.

- **Sleep:**
  - Breastfeeding: up to 2-3 months: 2-3 times a day.
  - Solid food: 2-3 times a day.

- **Specific Language:**
  - Crying is a form of communicating with you. Calm them and calm the situation.
  - Calm them and talk to them.

- **Conclusion:**
  - Always a baby to be on hand when needed.
  - Work hard to avoid spread of germs.

---

- Avoid people who are sick.
- Call your healthcare provider immediately if your baby (within 1 year) has a fever of 100.4°F or higher.
- Hold stool for your baby, applying a cream or ointment to the anus.
- Watch for "baby blues" which can happen after birth due to hormonal fluctuations.

**Immunizations:**

- Baby should receive Hepatitis B at the hospital.
- All vaccines up to 2 months should receive:
  - Bacillus Calmette-Guérin (BCG)
  - Diphtheria, pertussis, and tetanus
  - Hib (Haemophilus influenzae type b)
  - IPV (inactivated)
  - OPV (oral)

15 months

- Development/Behavioral:
  - Independent mobility
  - Growing self-determination
  - Showing desire to do things on their own
  - Displayed elevation of frustration becomes apparent in 15 months.

- Nutrition:
  - Serve nutritious foods without pressuring him to eat.
  - Should be able to drink from a cup.

- Baby Care:
  - Encourage daily routines such as brushing teeth.
  - Bathing: 3-4 times a week (as need of each baby).

- Personal Care:
  - Dress baby in clothes and wash clothes separately.
  - Break the child’s teeth with a soft toothbrush and gentle water.
  - Use a soft cloth to wipe the mouth while the baby is sleeping.

- Safety:
  - Check seat in a car seat.
  - How to prevent a twist for your child’s cradle and head in the event of a crash.
  - Remember to put them in your safety seat.
Figure 1. Julia’s Lesson Plan and Outline
Figure 2. Julia’s PowerPoint Presentation
4 MONTHS OLD

**Milestones:**
- Smiles spontaneously, especially at people
- Begins to babble
- Learns to obey
- When lying on stomach, pushes up to elbows

**ACT EARLY ON:**
- Doesn’t watch things as they move
- Doesn’t smile at people
- Can’t hold head steady
- Doesn’t cry or make sounds

6 MONTHS OLD

**Milestones:**
- Watches faces and begins to fear if someone is a stranger
- Responds to own name
- Show curiosity about things and tries to get things that are out of reach
- Rolls over in both directions

**ACT EARLY ON:**
- Shows no attention for surroundings
- Has difficulty getting things to mouth
- Seems very fussy, or seems very still
- Doesn’t laugh or make squealing sounds

1 YEAR OLD

**Milestones:**
- Cries when noses or ear hurt
- Plays games such as peekaboo
- Sings “ma-ma” and “da-da”
- Begins to pick things together
- Follow simple instructions, like “pick up the toy”

**ACT EARLY ON:**
- Doesn’t cry
- Can’t hold when supported
- Doesn’t reach for things when you take them
- Doesn’t say single words like “mom” or “dad”
- Loves to be given food

2 YEARS OLD

**Milestones:**
- Copies others, especially adults and other children
- Sings sentences with 2 to 4 words
- Knows how to picture book each on cut, dog, or bird
- Begins to run

**ACT EARLY ON:**
- Doesn’t use 3-word phrases (for example “dinner milk”)
- Doesn’t know what to do with someone things, like a brush, phone, left, or spoon
- Doesn’t walk steadily
- Doesn’t follow simple instructions

3 YEARS OLD

**Milestones:**
- Takes turns in games
- Understands the idea of “yours” and “his” or “her”
- Can carry on a conversation using 3 or 4 sentences
- Plays make-believe with toys, animals, and people
- Drinks a bottle

**ACT EARLY ON:**
- Falls down a lot or has trouble with stairs
- Drinks or has very unsteady speech
- Cannot make simple steps (toy boxes, simple puzzles, having handle)
- Doesn’t play pretend or make believe
- Doesn’t make eye contact

5 YEARS OLD

**Milestones:**
- Can tell what’s red and what’s blue
- Uses future tense “Grandma will be here”
- Does 10 or more things
- Can be a conscientious
- Can use the toilet on her own

**ACT EARLY ON:**
- Doesn’t show a wide range of emotions
- Shows extreme behavior (e.g., fearful, aggressive, shy, or sad)
- In easily distracted, has trouble focusing on one subject for more than 5 minutes
- Doesn’t talk about daily activities, doesn’t draw pictures

Figure 2. Julia’s PowerPoint Presentation
**Figure 2. Julia’s PowerPoint Presentation**

**IF YOU ARE CONCERNED**
Talk to your doctor or health care provider
- No question is dumb! We are here to help!
- Come prepared: Write down all of your questions and make sure you understand the doctors responses
- If the doctor says it is "wait and see" but you feel uneasy it’s ok to ask with another doctor and get a second opinion

Use a Milestones Checklist
Ask your Doctor about Developmental Screening

**SCREENING AND MONITORING**
- The American Academy of Pediatrics recommends that children be screened for general development using standardized, validated tools at ages 9, 18, and 24 or 30 months and for autism at 18 and 24 months or whenever a parent or provider has a concern. Ask your child’s doctor about your child’s developmental screening.

Getting help early!
- Make Early Childhood System
- Request a consultation

**CAUSES AND RISK FACTORS**
- External or Environmental Problems
- Maternal drug use or alcohol use
- Exposure to tobacco or drug use during pregnancy
- Birth trauma or delivery, preterm birth
- Poor nutrition
- Malnourishment, problems with growth or development
- Medical conditions
- Neurological disorders
- Genetic
- Genetic disorders

**AUTISM SPECTRUM DISORDERS**
- What is it?
- Developmental disorder caused by differences in the brain
- What causes it?
- Not known exactly what causes Autism
- Multiple causes of ASD, most still unknown
- Continuous with immune issues, 2 or more
- Signs and Symptoms
- Problems with social, emotional, and communication skills
- Repeat certain behaviors, get stuck on routine
- Have trouble relating to others or do not have interest in others
- Feel out of control
- Have trouble expressing their needs

**ADHD**
- What is it?
- Attention deficit hyperactivity disorder (ADHD) is one of the most common neurodevelopmental disorders of childhood
- What causes it?
- Unknown, likely that many factors play into ADHD
- Common in family members
- Have a hard time paying attention and daydream a lot
- Not able to listen
- Difficulty focusing on homework or play
- Hyper or fidget
- Have trouble sitting

**CEREBRAL PALSY**
- What is it?
- Group of disorders that affect a person’s ability to move and keep their balance and posture as a result of injury to parts of the brain, or as a result of a problem with development
- What causes it?
- Problem usually occurs before birth or shortly after birth
- Genetic conditions, problems with the brain due to issues in the brain, lack of oxygen, severe jaundice, and head injury
- Signs and Symptoms
- Can range widely from being a little clumsy to not being able to walk at all
- Having difficulty controlling head or arms
- Feeling with only one hand while holding the other in a fist
- Not smiling
Figure 2. Julia’s PowerPoint Presentation
Figure 2. Julia’s PowerPoint Presentation
Lesson Plan Outline

A. TITLE OF LESSON: Nutrition: Infant, Toddlers, and Preschoolers

B. CONTEXT OF LESSON: Nutrition is in an important factor in the healthy growth and development of a child. The nutritional needs of Infant, Toddlers, and Preschoolers vary greatly so it is important for potential and present parents to know what their child needs and also how to feed them safely.

C. LEARNING OBJECTIVES and ASSESSMENT:

<table>
<thead>
<tr>
<th>Learning Objective</th>
<th>Objective Number</th>
<th>Assessment (Formative/Summative)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Evaluate newborn feeding options and support systems</td>
<td>71</td>
<td>Students will be given a budget and they will have to plan a days worth of food for their child making sure they meet all of the nutritional requirements</td>
</tr>
<tr>
<td>Plan meals for infants, toddlers, and preschoolers</td>
<td>87</td>
<td>Students will demonstrate their knowledge of WC and SNAP benefits by planning a days worth of food for their child following guidelines set in place by these programs</td>
</tr>
<tr>
<td>Analyze community programs and resources that offer health care or financial assistance</td>
<td>78</td>
<td></td>
</tr>
<tr>
<td>Appraise public assistance agencies or support programs and the services they offer</td>
<td>116</td>
<td>Discuss thoughts and feelings about how the media affects them in their daily lives</td>
</tr>
<tr>
<td>Research the effects of media on children</td>
<td>90</td>
<td></td>
</tr>
</tbody>
</table>

D. THE STUDENT WILL:

- Have the opportunity to try baby food
- Using a given budget, student will use a grocery store coupon booklet to plan a days worth of food for their 2 year-old child.
  - Guidelines:
    - They must stay within their budget
    - Meet the nutritional requirements for their child as outlined by My Plate
• Stay within the requirements if you are given WIC or SNAP benefits
• Cut out food choices and paste them onto the white computer paper provided

E. MATERIALS NEEDED:
Materials already present provided by Ms. Amend prior to class
• Computer Paper
• Scissors
• Glue
• Baby food
• Plates and spoons
Materials that I will provide
• Martins coupon booklet
• Scenario cards
• WIC information packet

F. OUTLINE

<table>
<thead>
<tr>
<th>Time</th>
<th>Content to Cover</th>
<th>Activity</th>
</tr>
</thead>
<tbody>
<tr>
<td>5 minutes</td>
<td>• Introduction</td>
<td>• Discuss with students that this will be our last time during the semester that we will be coming to talk to them</td>
</tr>
<tr>
<td>15 minutes</td>
<td>• Newborn and Infant nutrition</td>
<td>• Lecture</td>
</tr>
<tr>
<td></td>
<td>• Benefits of breast feeding</td>
<td></td>
</tr>
<tr>
<td></td>
<td>• Nutritional safety</td>
<td></td>
</tr>
<tr>
<td>15 minutes</td>
<td>• Transitioning to solid foods</td>
<td>• Lecture</td>
</tr>
<tr>
<td></td>
<td>• Safety and guidelines</td>
<td>• Students will try baby food</td>
</tr>
<tr>
<td>30 minutes</td>
<td>• Toddler and Preschooler nutritional</td>
<td>• Lecture</td>
</tr>
<tr>
<td></td>
<td>requirements</td>
<td>• Students will be given a budget and will use a grocery store coupon</td>
</tr>
<tr>
<td></td>
<td>• Community programs that provide</td>
<td>booklet to plan a days worth of food for their 2 year-old child</td>
</tr>
<tr>
<td></td>
<td>financial assistance for nutrition: WIC</td>
<td></td>
</tr>
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<td></td>
<td>and SNAP</td>
<td></td>
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<tr>
<td></td>
<td>• USDA MyPlate</td>
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<tr>
<td>15 minutes</td>
<td>• The effects of the media on children</td>
<td>• Open discussion on the ways the media influences every day life</td>
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<tr>
<td></td>
<td></td>
<td>• Watch Dove video that talks about self image</td>
</tr>
<tr>
<td></td>
<td></td>
<td>• Discussion of Toddlers and Tiaras, watch video</td>
</tr>
</tbody>
</table>
Figure 1. Mollie’s Lesson Outline and Outline

| 5 minutes | • Closing | • Say goodbye and leave time for any remaining questions |

G. MEETING THE NEEDS OF ALL STUDENTS:
This will be our final visit with the Child Development class this semester so it will be important to properly terminate our time with them. We want to leave the students with final remarks that go beyond the content we have taught them. These students are in a critical point in their life so we feel we can provide them with a lot of advice about college, life after high school, etc. It has been our goal this semester to create an open environment and relationship with these students.

H. WHAT COULD GO WRONG WITH THIS LESSON AND WHAT WILL YOU DO ABOUT IT?
We will be discussing some potentially sensitive topics towards the end of the class when discussing the media and it’s effects. Throughout the entire class time my goal is to create a supportive and respectful environment. However, there is a possibility that a student may get emotional or there could be disagreements in the room. In the event of these reactions I would reiterate to the class about the sensitivity of these topics and facilitate healthy debates.
| You have $3.50 a day to spend using your WIC benefits | You have $5 a day to spend on food for your child |
| **Reminder: make sure the foods you choose are on the accepted foods list for the state of Virginia** |
| You have $6 a day to spend on food for your child | You have $10 a day to spend on food for your child |
| You have $3.50 a day to spend using your SNAP benefits | **Reminder: SNAP benefits can be used on any food items, non food items are not included** |

Figure 2. Activity Group Handout
Figure 3. Mollie’s PowerPoint Presentation
Figure 3. Mollie’s PowerPoint Presentation

Baby food time!

After 6 months
- Iron supplements:
  - Lean red meat, fortified infant cereal, dried fruit, and tofu
  - Can start eating soy foods!
  - Baby rice cereal first
  - Feed in a high chair
  - Use a spoon

Introduce single ingredient foods
- Give same food for 2 to 3 days
- Around 8 months they can start having strained fruit, vegetables, and meats
- Give juice in a cup not a bottle

Infant nutrition safety
- Never microwave formula
- Never prop a bottle or let them sleep with a bottle
- Do not give cow’s milk before 1 year old

Infant nutrition safety (cont.)
- No honey or corn syrup before 1 year
- Always cut up food into small pieces

Toddlers and Preschoolers
- Can have regular milk
- 2 years and older should have 2 dairy servings per day
- Watch out for allergies
- Use cup and utensils
Figure 3. Mollie’s PowerPoint Presentation
Activity!
You are going to the grocery store to buy a day's worth of food for your 3 year old son.
- Look through the Martins ads and cut out the food you plan to buy.
- Things to keep in mind:
  - You must stick to your budget.
  - You must fulfill your child's MyPlate requirements.
  - If your family qualifies for benefits, you can only buy the approved items.

Effects of the media

Media and Children
“Children spend an average of 7 hours and 38 minutes using entertainment media across a typical day (over 53 hours/week).”
(Kaiser Family Foundation)
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Additional Images were found publicly using google images.
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reality-and-dual-role-skills-family-focus-description